

Psychological Well-Being Among Boarding Secondary School Students In Uganda

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ABSTRACT

Psychological well-being issues have increased among students in today's contemporary world as compared to the older generation. Promoting psychological well-being and protecting students in boarding secondary schools from adverse experiences and risk factors that may impact their potential to thrive are critical for their well-being during adolescence and for their physical and mental health in adulthood. This study examined the psychological well-being of boarding secondary school students in Uganda. Data for this study was elucidated through the use of Ryff's Scale of Psychological Well-being. This study employed a descriptive cross-sectional study design using a mixed methods approach, during which quantitative and qualitative data collection and analyses were conducted separately yet concurrently to gain detailed results. After excluding students with incomplete questionnaires, the final analysed sample consisted of 617 students; the participation rate was 89.4% with complete data obtained through questionnaire administration. Descriptive statistics (frequencies, percentages, and means) and inferential statistics (Analysis of Variance; ANOVA) were used to analyse quantitative data while qualitative data obtained through interviews were analysed thematically. The study revealed that a majority (89.0 %) of the participants had moderate psychological well-being with the overall psychological well-being mean score ($M = 3.98$, $SD = 0.21$) and 11.0% reported low psychological well-being with non in the high psychological well-being category. Results from interview revealed that the lower level of psychological well-being was due to the influence of the demanding school academic programmes. These findings could be used by education policy makers and implementers for improvement of the students' psychological well-being among adolescents in secondary school.

Key words: Psychological well-being, boarding secondary school, students

1. INTRODUCTION

Globally, research investigating psychological well-being, has increased in recent decades, capturing the attention of social scientists, policy makers, and economists (Diener, Suh, Lucas, & Smith, 1999; Marks & Shah, 2005; Keyes, Shmotkin, & Ryff, 2002; Steptoe, O'Donnell, Marmot, & Wardle, 2008). Psychological well-being of adolescents is an important research field with increasing international concern (Macaskill, 2013). There are an estimated 1.2 billion young people aged 10-19 in the world, comprising the largest generation of students in history (UNICEF, 2002). Approximately 70 percent of these young people live in developing countries where complex psychological, economic, social, political and environmental contexts create a wide range of challenges for adolescents to surmount as they journey to adulthood (UNICEF, 2002). WHO (2010) estimated that approximately one in five young people under the age of 18 experience some form of developmental, psychological or behavioral problem, and 12.5% adolescents experience psychological problems related to depression, anxiety, stress and low self-esteem.

Psychological well-being research has largely focused on adults in developed countries (Rodgers & Bachman, 1988). There has been little research on the self-reported psychological well-being of students, particularly in developing countries (Goldbeck, Schmitz, Besier, Herschbach, & Henrich, 2007). Multiple physical, emotional, cognitive and social changes can make students vulnerable to

psychological well-being problems (Kessler, Angermeyer & Anthony, 2007). The UK Psychiatric Morbidity Survey reported significant increases in anxiety and depression among young people aged from 15 to 20 years (Macaskill, 2013). Tyson, Wilson and Crone (2010) noted that a large number of cross-sectional evidence shows that individuals having much depression and anxiety tend to be less physically active and have more negative feelings, such as suicidal thoughts.

Nsereko (1997) reported that depression was a phenomenon among senior secondary school students in Uganda and there was a significant relationship between depression and a student's motivation, affiliation and life events. Nalugya et al. (2016) found significant depression symptoms prevalent in adolescent students in secondary schools in Mukono District, Uganda.

There are a variety of factors influencing students' psychological well-being. For university students, their failure to meet basic academic activity guidelines (Reddy, Rankins, Timoshanko, and Dunbar, 2011) and increasing social behaviors (Said, Kypri, and Bowman, 2013) are significant factors. Tao, Wu, Zhang, Tong and Tao (2017) reported that among a wide variety of variables, sleep quality is a significant factor, and sleep disorder frequently co-occurs with psychological well-being problems. Psychological well-being is often thought of as a hallmark of the educational experience because educational encounters and experiences allow students to search for meaning and direction in their lives (Currie et al, 2010; Seifert et al., 2008). Promoting psychological well-being and protecting students in boarding secondary schools from adverse experiences and risk factors that may impact their potential to thrive are critical for their well-being during adolescence and for their physical and mental health in adulthood.

From a broad perspective, the measurement and promotion of adolescent psychological well-being is a desirable social and political objective (Diener, Lucas, Schimmack & Helliwell, 2009). Psychological well-being of student adolescents means being content with life and understanding an abundance of positive emotions. When joined with the absence of psychopathology, psychological well-being is linked with greatest academic function, social skills and support and physical health (Jessica, 2011). Adolescence being a stage that lays a strong foundation for future personality, and a critical period during human development in which life goals, values, direction and purpose in life are created, psychological well-being of students is a socio psychological necessity.

1.1 STATEMENT OF THE PROBLEM

Bowman (2010) pointed out that psychological well-being makes a contribution to many outcomes in a student's life, including improved physical and mental health, increased life satisfaction, and increased social support. Psychological well-being research has largely focused on college students and young adults in developed countries (Lemma et al., 2012; Rodgers and Bachman, 1988) and, there has been little research on the self-reported psychological well-being of student adolescents, particularly in developing countries (Goldbeck et al., 2007). Nsereko (1997) reported that depression was a phenomenon among senior secondary students in Uganda and there was a significant relationship between depression and a student's motivation, affiliation and life events. Also Nalugya et al. (2016) found significant depression symptoms prevalent in adolescent students in secondary schools in Mukono district, Uganda. Basangwa (1994) has shown that 57 percent of the Uganda population is contributed to by children and adolescents, yet their psychological needs go unmet and most of them suffer from various psychological problems characterised by depressive

symptoms such as irritable mood, reduced interest in activities, difficulty concentrating, and fatigue.

Despite the prevalence of psychological well-being problems, its level remains relatively unexplored. Without addressing psychological well-being issues, challenges could have long-term implications on students' mental health. Studying the situation to guide interventions is essential. This study therefore examined the level of psychological well-being among boarding secondary school students in Uganda with a view of contributing knowledge to mental health promotion for the achievement of high psychological well-being among adolescents in secondary school and improvements in policy design and schools' academic practices.

1.2 RESEARCH OBJECTIVE

The main objective of this study was to examine the psychological well-being of boarding secondary school students in Uganda in order to improve on the education policy design and schools' academic practices.

1.3 RESEARCH QUESTION

Based on the main objective the study sought to answer the following question: what is the level of psychological well-being of students in boarding secondary schools in Uganda?

2. LITERATURE REVIEW

As a component of general health and well-being, psychological well-being has been widely researched and evaluated over the last two decades (Keyes, Shmotkin & Ryff, 2002; Ruini, Ottolini, Rafanelli, Tossani, Ryff & Fava, 2003). Psychological well-being refers to mental health (Edwards, Ncobo, Edwards, & Palavar, 2005). The presence of psychological well-being (PWB) is vital to the optimal functioning of students, for them to lead fuller lives at school (Bowman, 2010). Many factors influence the psychological well-being of students.

Environmental experiences

The school creates the environment in which the students have experiences which in turn influence their psychological well-being (PWB) (Edwards, Ncobo, Edwards, & Palavar, 2005). PWB must be considered and explained by school environmental influences, including school life experiences. PWB has multidimensional personal and environmental determinants (Edwards, et al., 2005). These facts make inclusion of variables addressing environmental and experiential components of student's school lives important for this study.

Certain experiences in the school journey affects students' PWB and others may not. A comprehensive search of relevant databases revealed few studies that specifically utilised the PWB as the dependent variable of interest in studies with school student samples. These studies sought to better understand how the student environment intermixed with specific independent variables of interest to best understand how the student's PWB may be altered. Studying PWB in students is particularly relevant because school is a time of life transition for many students (Terenzini et al., 1994). As school is a time of life transition, it is logical to deduce that the school life experience alters the boarding school student's PWB in some way. To better understand psychological well-being of

boarding secondary school students, the researcher focused on what occurs during school that contributes to or detracts psychological well-being. How does the school environment influence psychological well-being of students? Specifically, how does perceived sleep quality of students in the school environment influence their psychological well-being?

Pascarella, Terenzini, and Feldman (2005) found that the school environment may enhance or inhibit student's PWB. Thus, capturing the school type characteristic was important for this study. For this reason, only boarding secondary schools were considered in this study. Specifically, this study chose to look at government aided and privately owned boarding secondary schools, eliminating day schools and international schools from the sample because of the differences in the school type characteristics and environmental influences.

In India, Pravitha and Sembiyan (2015) found that there was a positive correlation between stay in hostel and psychological well-being. Study findings of Angel, Cristina, Carmen, Ida & Sandra (2013) on psychosocial factors related to well-being and psychological adjustment on a sample of 108 adolescent students aged between ten and seventeen years indicated that boys perceived themselves as having a stronger physical well-being than girls. Mothers' academic level was related to psychological well-being and mood (Angel et al., 2013). The tool used for this study was "KIDSCREEN-5", a self-report form that yields elaborated profile data for children aged eight to eighteen years.

Health status

Physical health status has been directly linked to PWB. To date, many studies of PWB have focused on adults to identify health factors which influence PWB. However, scanty data is available on the relationship between sleep health and psychological well-being of students in boarding secondary schools. Research has shown that PWB is positively and consistently associated with various measures of physical health, including protective biological correlates (Lindfors & Lundberg, 2002; Steptoe, O'Donnell, Marmot, & Wardle, 2008; Ryff, 2008; Ryff, Singer, & Love, 2004). The measures of stress and biological correlates related to PWB include low cortisol output, diminished cardiovascular stress response, increased antibody response to vaccination, and increased immune efficiency (Lindfors & Lundberg, 2002).

Individuals with higher PWB also have lower cardiovascular risk factors, including lower weight, lower glycosylated hemoglobin, and increased high density lipoprotein (HDL) (Ryff, Singer, & Love, 2004). These cardiovascular biomarkers in adults are predictive of downstream coronary heart disease, diabetes, and atherosclerosis as well as psychosocial and socio-demographic factors, including sense of control, coping, social support, and socio-economic status (Corti et al., 1995; Feldman & Steptoe, 2003). Additionally, PWB has been linked to better self-reported health, lower morbidity, less pain, and increased longevity (Chida & Steptoe, 2008; Diener & Chan, 2011; Pressman & Cohen, 2005). Clearly, PWB is consequential for health, as it promotes effective simultaneous regulation of many physiological systems of the human body (Ryff and Singer, 2008). When addressing PWB it is critical to include a more inclusive model to elaborate causal pathways linking sleep quality to PWB. This study seeks to do that.

Other researchers seeking to discern individuals' level of functioning in their daily lives have utilised the RSPWB. Applying the

health model of human functioning, these researchers viewed health as the presence of high levels of physical and psychological well-being (Keyes & Shapiro, 2004). From the health model perspective, studies of the United States adult population have shown a lack of psychological well-being is associated with increased burden as measured by lost work productivity, disability and cardiovascular disease, chronic physical illness, healthcare utilization, and decreased psychosocial functioning (Keyes & Shapiro, 2004). Studies have also shown that psychological well-being makes a contribution to many outcomes in adult life, including improved physical health, increased life satisfaction, and increased social support (Bowman, Kitayama & Nisbett, 2009; Ryff, 2008). The presence of low or high psychological well-being (PWB) changes individual functional status.

Gender

Robin and Pavana (2017) found in their quantitative study that a majority (84%) of secondary school students had high psychological well-being and 11% of them had moderate and 5% had low psychological well-being. There was significant association between the psychological well-being of secondary school students with gender and family of origin of the students. Those in moderate level associated with some factors such as control of self and events, self-esteem, mental balance and social environment. Most of the previous studies carried out on psychological well-being employed only the quantitative approach. This study bridged that gap by using concurrent triangulation design where only one data collection phase was used, during which quantitative and qualitative data collection and analysis were conducted separately yet concurrently to gain detailed results.

Gender differences in psychological well-being (PWB) among adults exist and have shown replicative consistency across many studies (Ryff, 2013). For example, women have higher profiles on positive relations with others and personal growth than men (Ryff, 1989; Ryff & Keyes, 1995; Ryff & Singer, 1998). As men age, they increase in environmental mastery and positive relations with others at a faster rate than women (Ryff & Singer, 2008). However, limited data exist on the level of psychological well-being relates among boarding secondary school students in Uganda.

Nutan, Chandrasekhar and Aundhakar (2018) conducted a study on the Level of psychological well-being among students in a selected high school using descriptive survey research design. One hundred students were selected by using convenient sampling technique. The Psychological Well-being Scale developed by Masse et al, was used to collect the data. Pravitha and Sembian (2015) studied psychological well-being of adolescents aged 18 to 21 years. The data was collected by using Ryff's Scale of Psychological Well-being. The data was analysed statistically using descriptive and inferential techniques. Results showed that age, gender, stay in hostel does not significantly influence psychological well-being. There was negative correlation between age, gender and psychological well-being. The current study examined the psychological well-being of Ugandan boarding secondary school students aged 12 to 17 years using cross sectional survey design.

Numerous empirical studies have been conducted utilizing the Ryff's Scale of Psychological Well-being (RSPWB). These studies evaluated how psychological well-being varied by age, gender, and socioeconomic status (Clarke, Marshall, Ryff, & Rosenthal, 2000; Marmot, Ryff, Bumpass, Shipley, & Marks, 1997; Ryff, 1989). Kling, Ryff, and Essex (1997); Kling, Seltzer, and Ryff (1997) acknowledge that RSPWB has also been used to examine psychological well-being as an outcome of life transitions and experiences

as well as the role of psychological well-being in understanding resiliency when facing adversity.

3. RESEARCH DESIGN AND METHODOLOGY

A descriptive cross-sectional study design employing a mixed methods approach called concurrent triangulation design where only one data collection phase was used, during which quantitative and qualitative data collection and analysis were conducted separately yet concurrently to gain detailed results.

Quantitative research approach as recommended by Mugenga and Mugenga (1999) was used to collect numeric data that was statistically analysed so as to examine the level of psychological well-being. The qualitative research approach and specifically thematic analysis was used to gather the views and opinions of the interviewed respondents so as to support the quantitative data. The total student population was 24351 from which the sample size was obtained. The population was drawn from the individual school enrolment registers for all enrolled students for each of the 24 boarding secondary schools under study. Seventy two teachers were sampled for interviews.

The respondents for this study were selected using multi-stage random sampling technique. Multistage Sampling is a sampling strategy that proceeds through a set of stages from larger to smaller sampling units (Nachmias & Nachmias, 2005). Given that the four regions and the districts were already demarcated and organized according to clearly defined categories, simple random sampling technique was used to select one district from the districts in each of the four regions (Northern, Western, Eastern and Central regions) in Uganda. Lists of districts were secured from the directory of Uganda Bureau of Statistics (2014). In each region, names of districts were written on a piece of paper, squashed and thrown in a basket and one district was randomly selected to represent the region.

The list of boarding secondary schools was obtained from Ministry of Education and Sports education abstract (2013). Schools were stratified into government aided and privately owned boarding secondary schools. Simple random sampling was used to select schools from each district. Stratified and systematic sampling methods were used for selecting the students. A stratum is a subset of the population that shares at least one common characteristic. Students were put into strata (form and gender) and systematic sampling was done from the strata.

Descriptive statistics (frequencies, percentages, and means) and inferential statistics (Analysis of Variance; ANOVA) were used to measure the objective of this study. The scores of the six components were added to give the mean Ryff's Psychological Well-being Score. Analysis of variance (ANOVA) was used to calculate the mean differences of between psychological well-being component scores and demographic characteristic.

3.1 RESEARCH INSTRUMENT

The 42 item version of the Ryff's Scale of Psychological Well-being (RSPWB), a standardised instrument developed by Ryff (1989) was used to measure psychological well-being. The Ryff Scale of Psychological well-being has six different measures: autonomy,

environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. Each of the measures is answered based on a six point Likert scale ranging from strongly disagree to strongly agree. The Cronbach's alpha coefficients for the six scales ranges from 0.82 to 0.90 (Schmutte and Ryff, 1997). Interviews were conducted using an interview guide for the various categories of respondents: students, class teachers, directors of studies and head teachers in selected schools. To determine the reliability of the instrument for this study, Cronbach's alpha was calculated using statistical package for social sciences (SPSS) and found to be 0.96 which indicated very good internal consistency for the instrument with these specific samples.

3.2. ETHICAL PRINCIPLES OF RESEARCH

Ethical approval was obtained from Mbale Regional Hospital Institutional, Research Ethics Committee (MRHIREC) (Number UG-REC-011), Uganda National Council For Science and Technology (UNCST) (No. SS 4623) Ministry of Education and Sports (ADM/141/298/01), Head teachers of the 24 selected schools from which the study was carried out and signed assent and informed consent forms from the participant. This research also upheld the principle of anonymity and confidentiality throughout the research period.

4. DATA ANALYSIS

Quantitative analysis for Psychological Well-being

Quantitative data was analysed using the Statistical Package for the Social Sciences (SPSS) 22.0 (SPSS Inc., 2009) to generate frequencies, percentages, means, and analysis of variance (ANOVA) in response to the study objective. In this study, the level of psychological well-being was calculated by subtracting the minimum score from the maximum score, and it was classified into three categories, low (1.30 – 2.75), moderate (2.76 – 4.21), and high (4.22 – 5.67).

5. FINDINGS

Table 5.1. Subscale Scores of Psychological Well-being among the Students (N = 617)

Subscale	Mean Score (M)	SD
Autonomy	3.84	0.35
Environmental mastery	4.89	0.27
Personal growth	4.33	0.10
Positive relations	3.65	0.43
Purpose in life	3.52	0.48
Self-acceptance	3.76	0.36
Overall psychological well-being Score	3.98	0.21

Source: Primary Data, 2018.

The results in Table 5.1 indicate that the overall psychological well-being mean score was in the moderate category ($M = 3.98$, $SD = 0.21$). Descriptive analysis was used to determine the level of students' psychological well-being being on six of its dimensions: autonomy, environmental mastery, personal growth, positive relations, purpose in life and self-acceptance. The findings indicated high score on the dimensions of environmental mastery ($M = 4.89$, $SD = 0.27$), followed by personal growth ($M = 4.33$, $SD = 0.10$), autonomy ($M = 3.84$, $SD = 0.35$), self-acceptance ($M = 3.76$, $SD = 0.36$), positive relations ($M = 3.65$, $SD = 0.43$), and purpose in life ($M = 3.52$, $SD = 0.48$).

Participants were divided into groups according to their gender (Group 1: male; Group 2: female), age (Group 1: student age 12 - 13; Group 2: student age 14 - 15; Group 3: student age 16-17), class (Group 1: senior two; Group 2: senior three; Group 3: senior four; Group 4: senior six) and school type (Group 1: students studying in government aided boarding secondary schools); Group 2: students studying in privately owned boarding secondary schools), Difference in means of the psychological well-being component scores by demographic characteristics of secondary school students was determined using ANOVA and results are indicated in table 5.2.

Table 5.2. Difference in Means of the Psychological Well-being Component Scores across Demographic Characteristics

Dimension	Gender (<i>F</i> , <i>p</i> -value)	Age (<i>F</i> , <i>p</i> -value)	School type (<i>F</i> , <i>p</i> -value)	Class (<i>F</i> , <i>p</i> -value)
Autonomy	79.93, < .001	1.92, .147	65.31, < .001	9.75, < .001
Environmental mastery	30.15, < .001	0.26, .768	35.45, < .001	7.46, .001
Personal growth	21.78, < .001	4.14, .116	19.76, < .001	3.11, .026
Positive relations	101.88, < .001	0.71, .494	50.79, < .001	23.88, < .001
Purpose in life	7.18, .008	1.26, .283	10.68, < .001	3.18, .024
Self-acceptance	14.20, .002	0.74, .476	10.42, < .001	2.92, .033
Overall psychological well-being	82.98, < .001	0.32, .725	56.20, < .001	17.16, < .001

Source: Primary Data, 2018.

The means of the overall psychological well-being scores between males and females was found to be significantly different ($F(1, 617) = 82.98$, $p < .001$). The means of the overall psychological well-being scores were found to be significantly different between the school types ($F(1, 617) = 56.20$, $p < .001$). This showed the inclusion of school type in the prediction of psychological well-being. Students in different classes differed significantly in overall score of psychological well-being ($F(3, 617) = 17.16$, $p < .001$).

The means of the overall psychological well-being scores were found not to be significantly different among the different age-groups ($F(2, 617) = 0.32$, $p = .725$). This showed the exclusion of age-group in the prediction of psychological well-being. Overall, the results indicated that there were strong significant differences between gender, class, school type and psychological well-being ($p < .001$).

Table 5.3. Distribution of Psychological Well-being Categories in the Sample (N =617)

Variable	Categories	Frequency	Percentage (%)
Psychological well-being	Low	68	11.0
	Moderate	549	89.0
	High	0	0

Source: Primary Data, 2018.

This study found that a majority (89.0 %) of the participants had moderate psychological well-being and 11.0% reported low psychological well-being and none reported high psychological well-being score.

Table 5.4 shows the distribution of psychological well-being categories by demographic characteristics among boarding secondary school students in Uganda.

Table 5.4. Distribution of Psychological Well-being categories by demographic Characteristics

Variables	Psychological Well-being	
	Low	Moderate
	N = 68	N = 549
	n (%)	n (%)
Gender		
Male	56(82.4)	198(36.1)
Female	12(17.6)	351(63.9)
Age group		
12-13	8(11.8)	46(8.4)
14-15	29(42.6)	222(40.4)
16-17	31(45.6)	281(51.2)
Class		
Senior 2	43(63.2)	142(25.9)
Senior 3	4(5.9)	128(23.3)
Senior 4	19(30.0)	157(28.6)
Senior 6	2(2.9)	122(22.2)
School Type		
Government	14(20.6)	167(30.4)
Private	54(79.4)	382(69.6)

Source: Primary Data, 2018.

Among the 549 participants who reported having low psychological well-being, 82.4% were male students. This study found that more than half (63.9%) of the students who reported having moderate psychological well-being were female students. Most low psychological well-being scorers (51.4%) were 16 to 17 years old. The occurrence of low psychological well-being among students

studying in privately owned boarding secondary schools was higher (79.4%) compared to students studying in government aided boarding secondary school (20.6%). Regarding class level, a higher proportion (63.2%) of senior two students had low psychological well-being.

Qualitative analysis for Psychological Well-being

Qualitative data obtained through interviews were analysed using Braun & Clarke's (2006) 6-step framework. The researcher identified themes, ideas and patterns in the open ended responses, looked at the frequency and series of texts and organised them into coherent categories that summarised and brought meaning to the text.

Two sub themes; moodiness and interest in school activities were identified and grouped into one major theme, psychological well-being perception.

Moodiness

Every interviewed participant mentioned that if they have not had good sleep quality, concentrating and learning at school becomes very challenging. Poor sleep quality did not only affect the psychological well-being but also caused physiological problems such as headache. Most interviewed participants revealed that they felt moody, angry and less lively. One of the male respondents aged 14 years explained that:

"When we are subjected to too much day-time and late-night academic work, I feel sad, fatigued, angry, stressed and less able to be alert and concentrate during the day" (Respondent 9, 2018).

This suggests that participants with low level of psychological well-being were likely to have depressive symptoms.

Interest in school activities

Another male participant aged 16 years reiterated that:

"I experience unpleasant moods and feel frustrated and angry and I wake up unhappy and sometimes dodge lessons" (Respondent 16, 2018).

On the other hand, a few of the participants reported that they were satisfied with their psychological well-being experiences. One of the female respondents aged 17 years said that:

"I sometimes experience feelings of happiness and remain lively and energetic during the day and I attend all my lessons" (Respondent 6, 2018).

6. DISCUSSION

This study found that 89.0 % of the studied students had moderate psychological well-being and 11.0% reported low psychological well-being; these percentages are higher than the findings from other studies. In India, Robin and Pavana (2017) found that 11.0% of secondary school students had moderate psychological well-being and 5.0% of them had low psychological well-being and a majority (84.0%) had high psychological well-being. None of the students in the present study had high psychological well-being. The interviewed students in this study attributed the lower level of psychological well-being to increased academic stress. Most of the interviewed students revealed that they felt moody, angry, fatigued, stressed and less able to be alert and concentrate during the day. This is consistent with the findings of Moo-Estrella et al. (2005) and Sreeramareddy et al. (2007) who found that psychological correlates such as stress and depressive symptoms are commonly reported phenomena among students.

The study further established that 82.4% of the participants who rated their psychological well-being as low were male and 63.9% of the students who reported having moderate psychological well-being were female. This indicated that more male students were suffering from low psychological well-being. This is consistent with the findings reported in the study of Robin and Pavana (2017) that the psychological well-being of the male secondary school students was low.

The results of this study revealed that more than half (51.4%) of the low psychological well-being scorers were in the age group of 16 to 17 years. This finding is consistent with findings by Pravitha and Sembiyan (2015) that age negatively correlates with psychological well-being of students.

7. CONCLUSION

A majority of the participants had moderate psychological well-being and none reported high psychological well-being score. Low psychological well-being negatively affected the students' mood and concentration in class. This study identified key components to promoting high psychological well-being in students, many of which can be delivered within a boarding secondary school setting. The students' low psychological well-being could be addressed by improving "sleep health" which is a multidimensional pattern of sleep-wakefulness, adapted to individual, social, and environmental school demands, that promotes academic and cognitive performance, and psychological well-being.

8. RECOMMENDATION

The study recommends that Ministry of Health, Ministry of Education and Sports, Uganda Counselling Association should and School administrators should give students mental health education to enhance and sustain high psychological well-being among students. Boarding secondary schools should have professional counsellors to provide counselling services in order to reduce factors that impede psychological well-being. The students need to be encouraged by the school managers to participate in exercise and physical activities, sports and extracurricular activities in their free time to get pleasure and to be inspired to cope with stress and depression.

9. REFERENCES

- Angel, H., Cristina, N., Carmen, C. T., Ida, L., Sandra, V. (2013). A comparative study on the health and Well-being of adolescent immigrants in Spain and Portugal. *Saude Soc. Sao Paulo*, 22(2), 342-350.
- Basangwa, D. (1994). Ministry of Health. *Child and Adolescent Mental Health Report*.
Retrieved from: <http://health.go.ug/cgi-sys/suspendedpage.cgi>.
- Bowman, N. A. (2010). The development of psychological well-being among first-year college students. *Journal of College Student Development*, 51(2), 180-200.
- Bowman, N. A., Kitayama, S., & Nisbett, R. E. (2009). Social class differences in self, attribution, and attention: Socially expansive individualism of middle-class Americans. *Personality & Social Psychology Bulletin*, 35(7), 880-893. doi:10.1177/0146167209334782[doi].
- Chida, Y., & Steptoe, A. (2008). Positive psychological well-being and mortality: A quantitative review of prospective observational studies. *Psychosomatic Medicine*, 70(7), 741-756. doi:10.1097/PSY.0b013e31818105ba [doi].
- Clarke, P. J., Marshall, V. W., Ryff, C. D., & Rosenthal, C. J. (2000). Well-being in Canadian seniors: Findings from the Canadian study of health and aging. *Canadian Journal on Aging/La Revue Canadienne Du Vieillessement*, 19(02), 139-159.
- Corti, M., Guralnik, J. M., Salive, M. E., Harris, T., Field, T. S., Wallace, R. B., Hennekens, C. H. (1995). HDL cholesterol predicts coronary heart disease mortality in older persons. *Jama*, 274(7), 539-544.
- Currie, C., Zanotti, C., Morgan, A., Currie, D., Looze, M. D., Roberts, C., Samdal, O., Smith, O. R. F., & Barnekow, V. (2010). Social Determinants of health and well-being among young people, health behaviour in school-aged children (HSBC) study. Available from: http://www.euro.who.int/_data/assets/pdf_file/0007/167281/E96444_part1.pdf.
- Diener, E., & Chan, M. Y. (2011). Happy people live longer: Subjective well-being contributes to health and longevity. *Applied Psychology: Health and Well-Being*, 3(1), 1-43.
- Diener, E., Lucas, R. E., Schimmack, M., & Helliwell, J. (2009). Well-being for public policy Oxford. *Oxford University Press*, 39(4): 391-406.
- .Diener, E., Suh, E. M., Lucas, R. E., & Smith, H. L. (1999). Subjective well-being: Three decades of progress. *Psychological Bulletin*, 125(2), 276-302. doi:10.1037/0033-2909.125.2.276.
- Edwards, S. D., Ngcobo, H. S., Edwards, D. J., & Palavar, K. (2005). Exploring the relationship between physical activity, psychological well-being and physical self-perception in different exercise groups. *South African Journal for Research in Sport, Physical Education and Recreation*, 27(1), 59-74.
- Feldman, P. J., & Steptoe, A. (2003). Psychosocial and socioeconomic factors associated with glycated hemoglobin in nondiabetic middle-aged men and women. *Health Psychology*, 22(4), 398.
- Goldbeck, L., Schmitz, T. G., Besier, T., Herschbach, P., & Henrich, G. (2007). Life satisfaction decreases during adolescence. *Quality of Life Research*, 16(6): 969-979.
- Jessica, A. (2011). *Savage*. Increasing adolescents' subjective well-being: Effects of a positive psychology intervention in comparison to the effects of therapeutic alliance, youth factors, and expectancy for change (Graduate thesis). University of South Florida, USA.
- Kessler, R. C., Angermeyer, M., & Anthony, J. C. (2007). Lifetime prevalence and age-of-onset distributions of mental disorders in the World Health Organisation's World Mental Health Survey Initiative. *World Psychiatry*, 6, 168-176.
- Keyes, C. L. M., & Shapiro, A. D. (2004). Social well-being in the United States: A descriptive epidemiology. In O. G. Brim, C. D. Ryff & R. C. Kessler (Eds.), (pp. 350-372). Chicago, IL, US: University of Chicago Press.
- Keyes, C. L. M., Shmotkin, D., & Ryff, C. D. (2002). Optimizing well-being: The empirical encounter of two traditions. *Journal of Personality and Social Psychology*, 82(6), 1007.
- Kling, K. C., Ryff, C. D., & Essex, M. J. (1997). Adaptive changes in the self-concept during a life transition. *Personality and Social Psychology Bulletin*, 23(9), 981-990.

- Kling, K. C., Seltzer, M. M., & Ryff, C. D. (1997). Distinctive late-life challenges: Implications for coping and well-being. *Psychology and Aging, 12*(2), 288.
- Lemma, S., Gelaye, B., Berhane, Y., Worku, A., & Williams, M. A. (2012). Sleep quality and its psychological correlates among university students in Ethiopia: A cross-sectional study. *BMC Psychiatry, 12*, 237-244.
- Lindfors, P., & Lundberg, U. (2002). Is low cortisol release an indicator of positive health? *Stress and Health, 18*(4), 153-160.
- Macaskill, A. (2013). The Psychological well-being of university students in the United Kingdom. *Br. J. Guid. Couns., 41*, 426-441.
- Marks, N., & Shah, H. (2005). A well-being manifesto for a flourishing society. In F. A. Huppert, N. Baylis & B. Keverne (Eds.), *The science of well-being*. Oxford University Press.
- Marmot, M., Ryff, C. D., Bumpass, L. L., Shipley, M., & Marks, N. F. (1997). Social inequalities in health: Next questions and converging evidence. *Social Science & Medicine, 44*(6), 901-910.
- Ministry of Education and Sports (2013). *Education statistical abstract*. Secondary section. Uganda.
- Moo-Estrella, J., Perez-Benitez, H., Solis-Rodriguez, F., & Arankowski-Sandoval, G. (2005). Evaluation of depressive symptoms and sleep alterations on college students. *Archive of Medical Research, 36*(4), 393-398. doi: 10.1016/j.arcmed.2005.03.018.
- Mugenga, O. M & Mugenga, A. G. (1999). *Research methods. Qualitative and quantitative approaches*. Nairobi: Acts press.
- Nachmias, F. C., & Nachmias, D. (2005). *Research methods in the social sciences* (5th ed.). London: St. Martin's Press, Inc.
- Nalugya, S., Serunjogi, J., Rukundo, Z.G., Ovuga, E., Kiwuwa, M.S., Musisi, S., et al. (2016). Prevalence and factors associated with depression symptoms among school going adolescents in Central Uganda. *Child Adolescent Psychiatry Mental Health 10*, 39.
- Nutan, P., Chandrasekhar, D. A., & Vaishali, R. (2018). Identify the level of psychological well-being among secondary school students. *International Journal of Science and Research, 8*(2), 159-163.
- Nsereko, N. (1997). *Depression and Self-Efficacy among Secondary Students in Uganda*. Unpublished masteral dissertation, School of Education, Makerere University, Uganda.
- Pascarella, E. T., Terenzini, P. T., & Feldman, K. A. (2005). *How college affects students*. Jossey-Bass San Francisco.
- Pravitha, M. R., & Sembayan, R. (2015). Psychological well-being among adolescents in the current scenario. *Journal of Humanities and Social Sciences, 36*-41.
- Ruini, C., Ottolini, F., Rafanelli, C., Tossani, E., Ryff, C. D., & Fava, G. A. (2003). The relationship of psychological well-being to distress and personality. *Psychotherapy and Psychosomatics, 72*, 268-275. doi:10.1159/000071898.
- Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology, 57*(6) 1069-1081. doi:10.1037/0022-3514.57.6.1069.
- Ryff, C. D. (2008). Challenges and opportunities at the interface of aging, personality, and wellbeing. *Handbook of Personality: Theory and Research, 399*-418.
- Ryff, C. D. (2013). Psychological well-being revisited: Advances in the science and practice of eudaimonia. *Psychotherapy and Psychosomatics, 83*(1), 10-28.
- Ryff, C., & Keyes, C. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology, 69*, 719-727.
- Ryff, C. D., Singer, B. H. (2008). Know thyself and become what you are: A eudaimonic approach to psychological well-being. *J. Happiness Stud., 9*, 13-39.
- Ryff, C. D., Singer, B. H., & Love, G. D. (2004). Positive health: Connecting well-being with biology. *Philosophical Transactions of the Royal Society of London, 359*, 1383-1394. doi:10.1098/rstb.2004.1521.
- Ryff, C. D., & Singer, B. H. (1998). The contours of positive human health. *Psychological Inquiry, 19*, 1-28.
- Schmutte, P., Ryff, C. (1997). Personality and well-being: reexamining methods and meanings. *Journal of Personality and Social*

Psychology, 73, 549-559.

Terenzini, P. T., Rendon, L. I., Upcraft, M. L., Millar, S. B., Allison, K. W., Gregg, P. L., & Jalomo, R. (1994). The transition to college: Diverse students, diverse stories. *Research in Higher Education*, 35(1), 57-73.

Pravitha, M. R., & Sembayan, R. (2015). Psychological well-being among adolescents in the current scenario. *Journal of Humanities and Social Sciences*, 36-41.

Pressman, S. D., & Cohen, S. (2005). Does positive affect influence health? *Psychological Bulletin*, 131(6), 925.

Reddy, P., Rankins, D., Timoshanko, A., & Dunbar, J. (2011). Life! In Australia: Translating prevention research into a large-scale intervention. *J. Diabetes Vasc. Dis.*, 11, 193-197.

Robin, J. E., & Pavana, G. (2017). Level of psychological well-being among adolescents. *Journal of Nursing and Health Science*, 6(4), 74-78.

Rodgers, W. L., & Bachman, J. G. (1988). *The subjective well-being of young adults, trends and relationships*. In: Research Report Series. Ann Arbor, University of Michigan, United State.

Steptoe, A., O'Donnell, K., Marmot, M., & Wardle, J. (2008). Positive affect, psychological well-being, and good sleep. *Journal of Psychosomatic Research*, 64(4), 409-415.

Said, D., Kypri, K., & Bowman, J. (2013). Risk factors for mental disorder among university students in Australia: Findings from a web-based cross-sectional survey. *Soc. Psychiatry Psychiatr. Epidemiol.*, 48, 935-944.

Seifert, T. A., Goodman, K. M., Lindsay, N., Jorgensen, J. D., Wolniak, G. C., Pascarella, E. T., & Blaich, C. (2008). The effects of liberal arts experiences on liberal arts outcomes. *Research in Higher Education*, 49(2), 107-125.

SPSS, Inc. (2009). *SPSS - PASW Statistics 18.0*. (Release 17.0., August, 2009) Chicago: SPSS Inc.

Sreeramareddy, C. T., Shankar, P. R., Binu, V., Mukhipadhyay, C., Ray, B., & Menezes, R. G. (2007): Psychological morbidity, sources of stress and coping strategies among undergraduate students of Nepal. *Biomed Central Education*, 7, 26. doi: 10.1186/1472-6920-7-26.

Tao, S., Wu, X., Zhang, Y., Tong, S. & Tao, F. (2017). Effects of sleep quality on the association between problematic mobile phone use and mental health symptoms in Chinese college students. *Int. J. Environ. Res. Public Health*, 14, 185-195.

Tyson, P., Wilson, K., & Crone, D. (2010). Physical activity and Psychological well-being in a student population. *J. Ment. Health*, 19, 492-499.

Uganda Bureau of Statistics (UBOS) (2014). *National Population and Housing Census 2014. Provisional Results*. (PDF) (Revised ed.). Kampala, Uganda. 7, 22. Retrieved 23 July 2015.

UNICEF, (2002). Adolescence. *A Time that Matters*. In: The State of the World's Children. Washington DC. The United Nations Children's Fund. New York.

World Health Organization, (2010). *Physical Inactivity: A Global Public Health Problem*. Available from: http://www.who.int/dietphysicalactivity/factsheet_inactivity/en/index.html.