STUDY OF THE RELATIONSHIP BETWEEN PLACE ATTACHMENT AND SOCIAL WELL-BEING IN PSYCHOLOGY STUDENTS PNU TEHRAN

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ABSTRACT
Since human welfare can be considered as the interaction of heredity, environment, lifestyle, and socioeconomic status, the present study aims to examine the relationship between place attachment and social welfare among Payam nour University (PNU) students in Tehran. This research is the correlational study. To this effect, 200 current Psychology students (men and women) of the undergraduate and graduate students of Tehran PNU were selected by cluster sampling method. For data collection, the place attachment questionnaire of Safari Nya (2011) and Keys Social Welfare (1998) were used. The data were analyzed using Pearson correlation, and multiple regression analysis. The results showed that there is a positive and significant correlation (p<0.01) between the place attachment and its subscales with the Social Welfare and its subscales. Also, the regression results indicated that the place attachment and its subscales were significantly able to predict social welfare. In addition, the t test showed the there was no significant difference between place attachment and social welfare in undergraduate and graduate students. With regard to the findings of this study, the promotion of the social welfare of the people can be helped by enhancing the place attachment.

KEYWORDS: place attachment, social welfare

INTRODUCTION
Place attachment consists of two words; "attachment" and "place" where the word attachment refers to emotion and word place refers to the environmental status that people find emotional attachment tout (Low & Altman, 1992). Places a word we use in everyday conversation in order to refer to various concepts such as position, destination, ownership, privacy and belongings (Creswell, 2004). In English, the term “Place” has become so conventional that its dissociation into intertwined components is really difficult. Familiarity of the place has turned it to an attractive structure; however, this knowledge creates an obstacle to thinking about it, beyond the description of the conventional properties (Brocato, 2006). Revision in attachment theory acts as a basis to explore the concept of place attachment. According to the research by John Bowlby (1979, 1980). The theory of attachment was first examined in parent-child relationships area. In this theory, attachment is described under the title of “establishing special link with the goal of full excitement; “and this goal can be a person or an object. These links ranges from very strong to very weak. Bowlby considers attachment a basic human need for safety and survival (Bowlby, 1979). Place attachment is one of the terms related to location that has widely been used and generally refers to the link between an individual and group or environment which is specified by positive emotion and inclination towards closeness to certain situation (Hidalgo & Hernandez, 2001; Giuliani, 2003). The environment that is the focus of attachment can be variable regarding the scale, type, and its physical or social characteristics. The concept of place attachment can be synonym to concepts such as topophilia (Toan, 1974). The identity of the place (Proshansky, Fabian and Kaminoff, 1983), environmental embeddedness (Hummon, 1992), rootedness (Chawla, 1992; Toan, 1980) and a sense of place (Ralph, 1976). Place attachment implies on the development of personal conceptions of space (Gifford, 2002, p. 273). Place attachment is a process by which the human form their link to place. Some people describe place attachment under the emotional bond of the people with places (Hidalgo and Hernandez, 2001).

Recent studies on the nature of the place attachment have revealed the multidimensional nature of this structure. The results of experimental studies indicated affective attachment dimensions (Jorgensen Stedman, 2001; Kyle, Mowen & Tharrant, 2004; Kyle, Graefe & Manning, 2005), the place identity (Kyle, Graefe & Manning, 2005), Place dependence (Kyle et al., 2004) and social bonds (Milligan, 1998). Well-being is the positive state of physical, mental and social, not merely because of the absence of pain, discomfort and disability. Well-being entails meeting the requirements; sense of purpose in people who feel empowered to reach their personal goals and contribute in the society. Welfare or well-being can be promoted through entailing conditions of supporting personal relationships, suitable health, personal and financial security, rewarding jobs and attractive and healthy environment (Department of Health, UK, 2004). Generally, subjective well-being is the assessment of an individual about the quality of the experiences, knowledge, contacts and other relevant cultural issues related to the values of the person in his life (Diener, Suh, Lucas, & Smith, 1999).
Subjective well-being has been defined as a person’s assessment of interrelated dimensions (but experimentally independent) of positive affection, negative affection and life satisfaction (Harris and Lightsey, 2005). According to Keys (1998), social welfare refers to the condition and performance of the individual in the society. The people with a high degree of social welfare are usually able to establish and maintain relationships with others (Hoi Shan et al., 2008). Keys et al. (2002), McGregor and Little (1998), Ryan and Deci (2001), Reef (1989), Waterman (1993) and other researchers have examined the variety of subjective well-being dimensions. Keys (1998) defines social welfare as the personal report about the quality of their relationships with others. From the beginning, the social welfare was defined as the perception of the people of their integrity within the community, acceptance of others, social cohesion and the sense of the people in community participation (Larson, 1996). Thus, the World Health Organization defined the social welfare as one of the general health variables in 1948.

Multidimensional model of Keys (1998) includes five aspects of social welfare that determine the degree of optimal performance of the people in their activity. Five dimensions or aspects of social welfare according to Keys (1998), namely cohesion, solidarity, acceptance, participation and prosperity are related to the measures of mental health. From Keys’ perspective (1998) understanding and acceptance of others, the element of acceptance and value of the person as a community partner, the element of contribution, and finally the belief in the positive social development, social partnership element, are the elements of social well-being prosperity. These elements could assess the social unity, collaboration, social bond and sense of capacity for continued growth of the community and degree of others’ comfort in accepting others (Keys, 2002; 2003; 2004; 2005).

Factors affecting the health exist both within and outside of the person. These factors affect each other and this interaction could promote or demote the health. To that effect, the overall health of the community and individuals can be the interaction of heredity, environment, lifestyle, socioeconomic status, income and so on (Marandi, 2006). For example, the results of Rollero & De Piccoli’s research (2010) on 433 freshman student to examine the effect of place attachment in two space zone (neighborhood and city) on five components of social welfare showed that place attachment generally affects social welfare, but there are certain and prominent differences between two spaces. As attachment to place and habitat could also play a role as one of the environmental factors in social welfare, therefore, the present research tries to study the relationship between place attachment and social welfare in Tehran PNU students.

MATERIALS AND METHODS
(Study population, sample and methods of Research)
The present study is a correlation type. The study population consists of all graduate and undergraduate Psychology students of Payam Noor University, Tehran, of them 200 were selected by cluster sampling method. The mean age of cases was 29.39 with standard deviation of 8.13 and the age range of 60-18 years. Majority of the sample were women (78%) and graduate students (58.5%). Also, the majority of students lived in South of Tehran (25%) and the lowest number (16%) lived in East of Tehran.

The present research tools include:
Stedman (2001) and Kyle, Moon &Tharrant (2004) that have attitudinal perspective attachment to their location. It consists of 22 items that measures three domains of cognition (place identity), affection (affection attachment) and behavior (place attachment and social connections). So that items 1, 2, 11, 16, measure “place identity”, items 3, 5, 6, 7, 10, 13, 19, 20, 21, 22, look after “affection attachment”, and items 8, 9, 12, 15 checks the dimension of “place dependence” and items 4, 14, 17, 18 measure “social bond”. Items are scored on the five-point Likert scale: “5 = completely agree,” “agree = 4”, “No idea = 3”, “2 = disagree” and “completely disagree = 1”. Therefore, the minimum and maximum score that can be achieved will be 22 and 110, respectively.

In Safary niya’s research (2010) [35] the reliability of the questionnaire was 0.92 by test-retest and it was 0.92 using Cranach α, which is a satisfactory level. Also, to determine the construct validity of the questionnaire, the methods of confirmatory and exploratory factor analysis were used. The results of confirmatory factor analysis using parameters such as $\chi^2/df=2.71$, RMSEA=0.04, GFI=0.99, AGFI=0.99, CFI=0.99, IFI=0.99, RMR=0.03 represents the fitting of the
model in determining factors to the initial represented forms based on the theory of Lu and Altman (1992) and empirical studies Jorgensen and Stedman (2001) and Kyle, Moon & Tharrant (2004). Also, the results of exploratory factor analysis and analysis of principal components (PC) through varimax rotation, confirms the existence of four factors with special value greater than a subtitle as "place identity", "affection attachment", "place dependence" and "social bonds".

**Questionnaire of Keys Social Welfare (1998):** The 33-item social Welfare questionnaire was by designed by Keys (1998), based on his theoretical model of social welfare structures that are commonly used as a general measure of social psychology health to determine the degree of social welfare. Items 1, 11, 13, 20, 22, 29, and 33 measure subscale of "social solidarity". Items 2, 9, 10, 12, 16, and 21 measure subscale "social cohesion". Items 5, 7, 15, 17, 18, 25, and 30 check subscale of “social prosperity”. And items 6, 8, 14, 19, 23, 27 and 31 measure subscale "social acceptance". Scoring is based on the five-point Likert scale from "5 = completely agree," "agree = 4", "No idea = 3", "2 = disagree" and "completely disagree = 1". Therefore, the minimum and maximum score of the questionnaire will be 33 and 165, respectively. It should be noted that items 1, 2, 5, 6, 7, 9, 10, 12, 14, 15, 19, 21, 23, 24, 25, 26, 27, 29, 32 and 33 are scored in reverse.

Keys (1998) in two studies in America on 373 and 2887 participants using factor analysis, has confirmed experimentally the five dimensional model in his questionnaire. He used Cronbach α coefficient to assess the reliability of the questionnaire that the degree of Cronbach α coefficient for the dimensions of social cohesion, social prosperity, social solidarity, social participation, and social acceptance were 0.57, 0.69, 0.81, 0.75 and 0.77, respectively and in the second study, they were 0.64, 0.64, 0.73, 0.66 and 0.41, respectively that are acceptable coefficients. In the first study of Keys (1998) the results of confirmatory factor analysis using indexes such as $\chi^2$/df=2.01, GFI=0.86, and AGFI =0.84 and in the second study using indexes of $\chi^2$/df=2.07, GFI=0.95, and AGFI =0.92 represents the good fit of five-factor model. Study of simultaneous validity of this questionnaire with scale of anomie in the first study showed that all dimensions of social welfare have negative significant correlation with anomie scale and in the second study the simultaneous validity of the social welfare questionnaire with scale of disphoria shows a moderate positive and significant correlation with scale of disphoria.

Heydari and Ghanayi (2008) calculated the reliability of social welfare questionnaire by its implementation on 632 students of Islamic Azad University of Central Province and using Cronbach α of 0.83. The results of confirmatory and exploratory factor analysis in the study of Heydari and GHanayi (2008), supports that the five-factor structure of the questionnaire with modifications of some items in the Iranian community.

In the study of Tadris Tabrizi (2011), the reliability of the social welfare questionnaire was obtained 0.85 by implementing it on 500 men and women in Tehran and using Cronbach α, which was indicative of high reliability of the questionnaire. Also the results of the confirmatory factor analysis showed the moderate fit of the model in determining the factors in the primary forms as stated by Keys (1998), whereas the results of the exploratory factor analysis was expressive of five factors of social participation, social acceptance, social prosperity, social solidarity, and social cohesion with changes in some of the major items.

**RESULTS AND DISCUSSION**
In this section, the descriptive parameters (mean and standard deviation) of the research variables have been presented in Tables 1 and 2.

**Table 1. Descriptive measures of place attachment and its subscales in the research tests (N=200)**

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Place identity</td>
<td>15.83</td>
<td>3.01</td>
</tr>
<tr>
<td>Affection attachment</td>
<td>33.81</td>
<td>7.95</td>
</tr>
<tr>
<td>Place dependence</td>
<td>14.49</td>
<td>2.79</td>
</tr>
<tr>
<td>Social bonds</td>
<td>13.99</td>
<td>2.93</td>
</tr>
<tr>
<td>Place attachment</td>
<td>78.11</td>
<td>14.39</td>
</tr>
</tbody>
</table>
As it was seen in Table 1, the subscales of "affection attachment" and "social bonds “have the highest and the lowest mean (33.8, 13.99), respectively. Also, the "affection attachment" and "place dependence” have the highest and lowest standard deviation (7.95 and 2.79).

Table 2: Descriptive indicators of Social Welfare and its subscales in the research tests (N=200)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Mean</th>
<th>Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social solidarity</td>
<td>22.5</td>
<td>3.62</td>
</tr>
<tr>
<td>Social cohesion</td>
<td>19.84</td>
<td>3.79</td>
</tr>
<tr>
<td>Social contribution</td>
<td>21.18</td>
<td>4.01</td>
</tr>
<tr>
<td>Social prosperity</td>
<td>23.29</td>
<td>4.94</td>
</tr>
<tr>
<td>Social acceptance</td>
<td>20.45</td>
<td>4.9</td>
</tr>
<tr>
<td>Social welfare</td>
<td>107.25</td>
<td>16.65</td>
</tr>
</tbody>
</table>

As can be seen in Table 2, the subscales of "social prosperity” and "social cohesion”, have the highest and the lowest (23.29 and 19.84) means. Also, the "social prosperity” and "social solidarity” have the highest and lowest standard deviation (4.94 and 3.62). Pearson correlation coefficient was used to study the relationship between place attachment and its subscales with social welfare and its subscales in research tests. The summary of the result was presented in Table 3.

Table 3: Correlation coefficients of place attachment and its subscales with the Social Welfare and its subscales in the research tests

<table>
<thead>
<tr>
<th>Variable</th>
<th>Social cohesion</th>
<th>Social solidarity</th>
<th>Social contribution</th>
<th>Social prosperity</th>
<th>Social acceptance</th>
<th>Social welfare</th>
</tr>
</thead>
<tbody>
<tr>
<td>Place identity</td>
<td>0.489</td>
<td>0.204</td>
<td>0.285</td>
<td>0.262</td>
<td>0.213</td>
<td>0.344</td>
</tr>
<tr>
<td>Affection attachment</td>
<td>0.324</td>
<td>0.101</td>
<td>0.138</td>
<td>0.23</td>
<td>0.176</td>
<td>0.247</td>
</tr>
<tr>
<td>Place dependence</td>
<td>0.332</td>
<td>0.152</td>
<td>0.252</td>
<td>0.254</td>
<td>0.27</td>
<td>0.322</td>
</tr>
<tr>
<td>Social bonds</td>
<td>0.294</td>
<td>0.123</td>
<td>0.164</td>
<td>0.222</td>
<td>0.195</td>
<td>0.255</td>
</tr>
<tr>
<td>Place attachment</td>
<td>0.389</td>
<td>0.153</td>
<td>0.218</td>
<td>0.277</td>
<td>0.234</td>
<td>0.323</td>
</tr>
</tbody>
</table>

As seen in Table 3, there is a significant positive correlation (P<0.01) between place attachment and its subscales with social welfare and its subscales. Also, to evaluate the predictive role of place attachment and its subscales in Social Welfare, multiple correlations among subjects was used and the summary of the results have been presented in Table 4.

Table 4: Summary of results of multiple attachment sites and Khrdh=Mqyas·hay and Social Welfare Subjects

<table>
<thead>
<tr>
<th>Anticipatory variable</th>
<th>B</th>
<th>β</th>
<th>T</th>
<th>Significant level</th>
<th>R</th>
<th>R squared</th>
<th>F</th>
<th>Significant level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Place identity</td>
<td>1.9</td>
<td>0.344</td>
<td>5.163</td>
<td>0.0001</td>
<td>0.392</td>
<td>0.153</td>
<td>8.848</td>
<td>0.0001</td>
</tr>
<tr>
<td>Affection attachment</td>
<td>0.012</td>
<td>-0.006</td>
<td>0.059</td>
<td>0.0001</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Place dependence</td>
<td>1.359</td>
<td>0.228</td>
<td>0.839</td>
<td>0.005</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social bonds</td>
<td>0.091</td>
<td>0.016</td>
<td>0.17</td>
<td>0.007</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Place attachment</td>
<td>0.374</td>
<td>0.323</td>
<td>4.803</td>
<td>0.0001</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
As it was seen in Table 4, the place attachment and its subscales were analyzed simultaneously, which explains 15% of the Social Welfare variance of the subjects tests. In addition, the standardized beta coefficient column shows that place attachment and all its subscales are significantly able to predict social welfare of the test subjects. The independent t test was used to compare the difference between place attachment and social welfare in graduate and undergraduate students. The summary of the results have been presented in Table 5.

Table 5: Summary of results of t test to compare differences between place attachment and social welfare in undergraduate and graduate students

<table>
<thead>
<tr>
<th>Indexes Variables</th>
<th>F</th>
<th>T</th>
<th>Degree of freedom</th>
<th>Mean differences</th>
<th>Significant levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Place attachment</td>
<td>3.157</td>
<td>-1.03</td>
<td>198</td>
<td>-2.127</td>
<td>0.07</td>
</tr>
<tr>
<td>Social welfare</td>
<td>0.057</td>
<td>-1.445</td>
<td>198</td>
<td>-3.445</td>
<td>0.81</td>
</tr>
</tbody>
</table>

As it was seen in Table 5, there was no significant difference between the degree of the place attachment and social welfare in undergraduate and graduate students.

CONCLUSION

As this research studies the relationship between place attachment and social welfare in Psychology students of PNU, Tehran, the findings showed that there is a positive and significant relationship (P<0.01) between place attachment and its subscales with social welfare and its subscales. Also, the results of regression indicate that place attachment and its subscales could significantly anticipate the social welfare. In addition, with regard to degree of attachment to place and social welfare, there was no significant difference between graduate students and undergraduate students.

The findings of this study are consistent with the results of research and Rollero and De Piccoli (2010) and Bogdan, Rioux & Negovan (2012). The results of research by Rollero & De Piccoli 433 freshman students of the university in order to study the effect of place attachment in two space zones (neighbor and city) on five components of social welfare showed that place attachment affects generally on social welfare, but there are some certain and prominent differences between the two space areas. Also, the findings of Bogdan, Rioux and Negovan (2012) on 450 students in Romania indicated the positive impact of place attachment on the wellbeing in college compass. To explain the research findings, it can be said that the factors affecting the health and well-being are located both inside and outside the person, and a person’s health and well-being can be the consequence of the interaction of heredity, environment, lifestyle, lifestyle, socio-economic status, income per capita and so on. Therefore, the degree of emotional attachment to place as an outside factor can be effective on promotion or demotion of the well-being. The results of the findings are important because with the expansion of urbanization and dissociation of emotional and traditional bonds and development of logical, official and wise relations based on instrumental wisdom, still in Iran community and even among students that have education based on modern science and knowledge, the emotional and traditional relations are strong and could have mental, social, and spiritual practicality. People still feel closeness to their individual and family environment and do not want to leave all their past bonds even with change in their social, family, and individual living place, because they help improve their spiritual and mental condition by keeping these relationships and attachments. In this research, the well-being or welfare was defined in such a way that people besides meeting their primary and secondary needs, including material and spiritual needs, have positive attitude towards future through putting target for their lives. The place attachment for a person is a symbol of all his emotional and mental bonds which links him/her to his/her past society and family. People find coherent personal identity with binding with their living area could lead to their social welfare enhancement. In today’s society, a person needs strong and a healthy mind to combat the problems. In this regard he/she must accept the existing structure in the society and adapts to it and then provides the suitable biologic conditions for his/her future life with respect to his/her special character and needs.

The limitations of this study are its conducting on Psychology students of Payam Nour University, so its results could not be generalized to other students in other universities. Therefore, it is recommended to other researchers that study the above-mentioned variables on other students and other courses. Also, it is recommended to authorities and policy-makers of health sectors to start planning and educating the society in order to promote the social welfare, enhance emotional relationship with other people and habitat (place attachment).
REFERENCES


