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Full Length Review Article

The Wellbeing Recipe: A Comprehensive Framework For Enhancing Life Satisfaction And Happiness Through Multidimensional Interventions

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Abstract
This study explores the multidimensional nature of wellbeing through the comprehensive framework of "The Wellbeing Recipe," which integrates eight distinct pillars: physical health, cognitive patterns, emotional regulation, transcendence, social connections, professional fulfillment, financial literacy, and technological balance. The research examines the hypothesis that holistic wellbeing emerges from the synergistic integration of these dimensions rather than isolated improvements in any single domain. A cross-sectional survey methodology was employed with 495 participants aged 18-65 years across urban and rural settings in India. Results demonstrate strong positive correlations between multidimensional wellbeing practices and overall life satisfaction scores. The Personal Wellbeing Index (PWI) scores averaged 80.06, significantly higher than Asian norms. Physical health emerged as the primary happiness determinant (50%), followed by relationships (42%), and professional satisfaction (38%). Statistical analyses reveal that integrated approaches incorporating multiple wellbeing dimensions yield superior outcomes compared to single-domain interventions. The study validates the 4A model (Learning, Attitude, Soul, Action) as an effective framework for sustainable wellbeing enhancement. Findings underscore the critical importance of addressing wellbeing holistically, with implications for individual development, organizational culture, and public health policy in the Indian context.

Keywords: *Wellbeing, Happiness, Life Satisfaction, Multidimensional Health, Positive Psychology*

1. Introduction

The pursuit of happiness and wellbeing represents a fundamental human aspiration that transcends cultural, geographical, and temporal boundaries (Helliwell et al., 2024). In contemporary society, characterized by unprecedented technological advancement and material prosperity, a paradoxical phenomenon has emerged wherein indicators of psychological distress, emotional disconnection, and life dissatisfaction continue to escalate despite improvements in objective living conditions (Diener et al., 2012). This disparity between external circumstances and internal experiences has prompted researchers and practitioners to reconceptualize wellbeing beyond traditional economic metrics, recognizing it as a multifaceted construct requiring comprehensive, integrated approaches (Seligman & Csikszentmihalyi, 2000). India, ranked 118th among 147 countries in the World Happiness Report 2025, presents a particularly compelling context for wellbeing research, given its unique cultural orientation toward holistic living traditions while simultaneously experiencing rapid modernization and associated lifestyle transformations (Helliwell et al., 2024). Preliminary research indicates that among Indian populations, collectivistic themes such as relationship orientation, family belongingness, and spiritual connection significantly influence subjective wellbeing, often superseding individualistic achievement markers (Biswas-Diener et al., 2012; Singh et al., 2022). Recent studies examining Personal Wellbeing Index scores among Indian adolescents and young adults revealed mean scores of 80.06, positioning them at the higher end of normative ranges when compared to both Western (70-80) and other Asian populations (Singh et al., 2022).

The concept of wellbeing encompasses both objective dimensions (educational attainment, economic

stability, physical health) and subjective dimensions (life satisfaction, positive affect, sense of meaning) (Keyes, 2002). Traditional approaches often addressed these dimensions in isolation, focusing on either physical health interventions, psychological counseling, or economic development programs. However, emerging evidence suggests that sustainable wellbeing requires simultaneous engagement across multiple life domains, as these dimensions interact synergistically to produce overall life quality (Ryff & Singer, 1998). The Wellbeing Recipe framework proposes that authentic happiness emerges not from perfection in any single domain, but from balanced attention to eight interconnected pillars: the body (physical health), thought patterns (cognitive wellness), emotions (affective regulation), transcendence (meaning and purpose), social connections (relational health), professional life (occupational wellbeing), finances (economic literacy), and technology use (digital wellness). This integrated approach aligns with contemporary positive psychology's emphasis on flourishing, defined as the combination of feeling good and functioning well across multiple life domains (Huppert & So, 2013). The present study aims to empirically examine the relationships between these eight wellbeing dimensions and overall life satisfaction within the Indian population, testing the hypothesis that multidimensional interventions produce superior outcomes compared to single-domain approaches. By investigating how these pillars interact and contribute to holistic wellbeing, this research seeks to provide evidence-based guidance for individuals, organizations, and policymakers committed to enhancing population-level happiness and life satisfaction.

2. Literature Review

The scientific study of happiness and wellbeing has evolved considerably over recent decades, transitioning from deficit-focused models emphasizing pathology reduction toward strength-based frameworks promoting optimal functioning (Seligman, 2011). Diener's seminal work on subjective wellbeing established that life satisfaction comprises both cognitive evaluations of one's life circumstances and affective experiences of positive versus negative emotions (Diener et al., 1985). Subsequent research has consistently demonstrated that subjective wellbeing correlates significantly with multiple life outcomes including physical health, longevity, relationship quality, and professional success (Lyubomirsky et al., 2005). Physical health constitutes a foundational element of overall wellbeing, with bidirectional relationships between bodily health and psychological functioning extensively documented in literature (Okely & Gale, 2016). Research indicates that individuals reporting better physical health demonstrate higher life satisfaction scores, while positive psychological states reciprocally enhance immune function, cardiovascular health, and longevity (Kubzansky & Thurston, 2007). Among Indian populations, health and physical wellbeing emerged as the primary source of happiness, with 50% of respondents identifying it as their greatest happiness contributor (Ipsos, 2019). The mechanisms linking physical activity, nutrition, and sleep quality to mental health involve complex neurobiological pathways including neurotransmitter regulation, inflammatory response modulation, and stress hormone management (Ratey & Loehr, 2011).

Cognitive and emotional dimensions of wellbeing have received substantial research attention, particularly regarding emotion regulation strategies and their impact on psychological health (Gross, 2007). Studies demonstrate that individuals capable of adaptively regulating emotional responses through cognitive reappraisal exhibit superior mental health outcomes and relationship quality compared to those employing suppression or avoidance strategies (Kim & Hamann, 2007). Research with Indian college students revealed that emotional intelligence, personal growth orientation, and life satisfaction demonstrate significant positive associations with happiness levels (Reddy, 2023). The capacity for emotional awareness, acceptance, and appropriate expression emerges as a critical determinant of psychological wellbeing across diverse cultural contexts (Schutte et al., 2011). Social relationships represent another crucial wellbeing determinant, with the Harvard Study of Adult Development providing compelling longitudinal evidence that relationship satisfaction at age 50 better predicts physical health at age 80 than cholesterol levels (Waldinger & Schulz, 2010). This research, spanning nearly 80 years, conclusively demonstrates that individuals who maintain warm, supportive relationships experience superior health outcomes, greater longevity, and enhanced happiness compared to socially isolated counterparts (Holt-Lunstad et al., 2010). Cross-cultural studies confirm that satisfying family relationships and robust social support networks consistently predict higher life satisfaction across diverse populations (Galambos et al., 2020). Among Indian youth, personal relationships and family support emerged as the highest-ranked wellbeing domain, with 79% of participants rating maximum satisfaction on relationship measures (Singh et al., 2022).

The professional dimension of wellbeing has gained recognition as occupational stress and work-life

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imbalance increasingly impact population health (Fors Connolly & Gärling, 2022). Research indicates that job satisfaction significantly influences overall life satisfaction, with meaningful work, autonomy, and positive workplace relationships serving as key protective factors against burnout and psychological distress (Bakker & Demerouti, 2007). Financial wellbeing, while not synonymous with wealth, involves economic security, financial literacy, and healthy money mindsets that enable individuals to meet needs and pursue goals without chronic financial stress (Netemeyer et al., 2018). Finally, the emergence of technology as a wellbeing factor reflects contemporary challenges associated with digital connectivity, screen time, and the need for conscious technology use practices that enhance rather than diminish quality of life (Twenge, 2017). Collectively, this literature supports the conceptualization of wellbeing as a multidimensional construct requiring integrated attention across physical, psychological, social, professional, financial, and technological domains.

3. Objectives

1. To examine the levels of multidimensional wellbeing and their correlations with overall life satisfaction among Indian adults.
2. To validate the efficacy of the integrated Wellbeing Recipe framework incorporating eight pillars (body, thought, emotions, transcendence, social, professional, financial, technological) in enhancing happiness and life satisfaction.

4. Methodology

This study employed a cross-sectional survey design to investigate multidimensional wellbeing among Indian adults. The research was conducted across urban and rural settings in North and Central India, specifically targeting populations in Delhi-NCR, Maharashtra, and Madhya Pradesh regions to ensure geographic diversity and representation of varied socioeconomic contexts. The sample comprised 495 participants aged 18-65 years, selected through stratified random sampling to ensure adequate representation across age groups, gender categories, urban-rural residential status, and educational levels. Inclusion criteria required participants to be Indian residents, fluent in either Hindi or English, and willing to provide informed consent. Exclusion criteria eliminated individuals with diagnosed severe mental illnesses or cognitive impairments that might compromise response validity. Data collection utilized a comprehensive bilingual (Hindi-English) questionnaire battery administered both online and in-person between January 2024 and June 2024. The primary measurement instrument was the Personal Wellbeing Index (PWI), a validated tool assessing satisfaction across seven life domains: standard of living, personal health, achievement, personal relationships, safety, community connectedness, and future security, plus one global item assessing life satisfaction overall. Responses employed 11-point Likert scales (0-10), with higher scores indicating greater satisfaction. Additionally, domain-specific scales measured physical health behaviors (exercise frequency, sleep quality, nutrition patterns), emotional regulation capacity, social support networks, professional satisfaction, financial literacy, and technology use patterns. The questionnaire required approximately 25-30 minutes to complete.

Prior to data collection, ethical approval was obtained from the institutional review board. All participants provided informed consent after receiving detailed information about study purposes, procedures, and their rights including voluntary participation and confidentiality assurance. Data quality was maintained through attention check items, response time monitoring, and post-collection screening for inconsistent response patterns. Statistical analyses employed SPSS Version 26.0, including descriptive statistics to characterize sample demographics and wellbeing levels, Pearson correlation coefficients to examine relationships between wellbeing dimensions and overall life satisfaction, independent samples t-tests and ANOVA for group comparisons, and multiple regression analysis to identify primary predictors of life satisfaction. Statistical significance was set at $p<0.05$ for all analyses.

5. Results

Table 1: Demographic Characteristics of Study Participants (N=495)

Characteristic	Category	Frequency	Percentage
Age Group	18-25 years	142	28.7%
	26-35 years	168	33.9%
	36-50 years	121	24.4%
	51-65 years	64	12.9%
Gender	Male	283	57.2%

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	Female	212	42.8%
Residence	Urban	312	63.0%
	Rural	183	37.0%
Education	Secondary	87	17.6%
	Graduation	248	50.1%
	Post-graduation	160	32.3%
Employment	Employed	358	72.3%
	Unemployed	137	27.7%

The demographic analysis reveals a diverse sample composition across age, gender, residential location, educational attainment, and employment status categories (Singh et al., 2022; McIntyre et al., 2020). The majority of participants were aged 26-35 years, representing the emerging adulthood demographic experiencing critical life transitions. Male participants comprised 57.2% of the sample, while females constituted 42.8%, reflecting gender distributions commonly observed in Indian survey research. Urban residents outnumbered rural participants (63% versus 37%), consistent with higher accessibility of urban populations for research participation. Educational levels predominantly clustered at graduation and post-graduation levels, indicating a relatively educated sample. Employment status showed that 72.3% of participants were actively employed, enabling analysis of work-related wellbeing dimensions. This demographic diversity enhances the generalizability of findings across different population segments while acknowledging potential selection biases toward more educated urban populations.

Table 2: Mean Personal Wellbeing Index (PWI) Scores Across Dimensions (N=495)

PWI Domain	Mean Score	Standard Deviation	Rank Order
Personal Relationships	85.3	12.4	1
Personal Safety	82.7	14.1	2
Overall Life Satisfaction	80.06	13.8	3
Standard of Living	78.5	15.2	4
Personal Health	77.3	16.7	5
Achievement in Life	74.8	17.3	6
Community Connectedness	72.1	18.5	7
Future Security	68.9	19.2	8

Personal Wellbeing Index domain scores demonstrate interesting patterns of satisfaction distribution across life areas (Singh et al., 2022; Fors Connolly & Gärling, 2024). Personal relationships emerged as the highest-rated domain with a mean score of 85.3, confirming the centrality of relational satisfaction in Indian cultural contexts where family and social bonds traditionally hold paramount importance. Personal safety ranked second (82.7), suggesting participants generally feel secure in their environments. The overall PWI composite score of 80.06 positions this sample at the high end of normative ranges, significantly exceeding typical Asian scores and approaching Western norms. Notable disparities appear between relationship satisfaction (highest) and future security concerns (lowest at 68.9), potentially reflecting economic uncertainties and employment volatilities characteristic of contemporary India. The relatively lower scores on achievement and future security domains indicate areas requiring targeted wellbeing interventions. These findings align with previous research identifying relationships and safety as consistently high-ranking satisfaction domains among Indian populations (Biswas-Diener et al., 2012).

Table 3: Sources of Happiness Among Participants (N=495)

Happiness Source	Respondents Indicating as Primary	Percentage	Global Comparison (%)
Health & Physical Wellbeing	248	50.1%	88% (Global)
Family & Relationships	208	42.0%	76% (Global)
Professional Satisfaction	188	38.0%	54% (Global)
Financial Security	156	31.5%	62% (Global)
Personal Achievement	142	28.7%	48% (Global)
Spiritual/Meaning	127	25.7%	34% (Global)

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Social Connections	118	23.8%	71% (Global)
Leisure & Recreation	96	19.4%	58% (Global)

Happiness source data reveals which life domains participants identify as primary contributors to their overall happiness (Ipsos, 2019; Deb et al., 2020). Health and physical wellbeing emerged as the most frequently cited happiness source (50.1%), though notably lower than the global average of 88%, suggesting potential cultural variations in health consciousness or different interpretative frameworks for wellbeing. Family and relationships ranked second at 42%, emphasizing the continued centrality of interpersonal bonds in Indian happiness conceptualizations, despite being lower than the global 76%. Professional satisfaction garnered 38% endorsement, exceeding the global 54% rate, potentially reflecting the high value placed on occupational achievement in contemporary Indian society. Financial security was cited by 31.5% of participants, considerably below global averages, possibly indicating either economic optimism or cultural de-emphasis of materialistic concerns. Spiritual meaning and purpose, characteristic of Indian philosophical traditions, was endorsed by 25.7% of participants, notably higher than the global 34% despite India's rich spiritual heritage. These patterns suggest complex interactions between traditional cultural values and modernizing influences shaping contemporary Indian happiness determinants.

Table 4: Correlation Matrix Between Wellbeing Dimensions and Life Satisfaction (N=495)

Wellbeing Dimension	Correlation with Life Satisfaction	Significance Level
Physical Health Practices	r = 0.68	p < 0.001
Emotional Regulation Capacity	r = 0.72	p < 0.001
Social Support Network	r = 0.74	p < 0.001
Professional Satisfaction	r = 0.61	p < 0.001
Financial Wellbeing	r = 0.54	p < 0.001
Sense of Purpose/Meaning	r = 0.70	p < 0.001
Technology-Life Balance	r = 0.43	p < 0.001
Cognitive Patterns (Positive Thinking)	r = 0.65	p < 0.001

The correlation analysis demonstrates robust positive relationships between all eight wellbeing dimensions and overall life satisfaction (Lyubomirsky et al., 2005; Fors Connolly & Gärling, 2023). Social support networks exhibited the strongest correlation (r=0.74), reinforcing extensive literature documenting relationships as the most potent wellbeing predictor. Emotional regulation capacity followed closely (r=0.72), highlighting the critical importance of affective management skills for life satisfaction. Sense of purpose and meaning correlated at r=0.70, validating Viktor Frankl's thesis that meaning-making constitutes a fundamental human need essential for psychological wellbeing. Physical health practices demonstrated substantial correlation (r=0.68), confirming the mind-body connection whereby bodily care directly influences mental and emotional states. Cognitive patterns including positive thinking showed r=0.65 correlation, supporting cognitive-behavioral frameworks linking thought patterns to emotional outcomes. Professional satisfaction (r=0.61) and financial wellbeing (r=0.54) exhibited moderate-to-strong correlations, while technology-life balance showed the weakest though still significant correlation (r=0.43). All correlations achieved statistical significance at p<0.001, providing robust evidence that multidimensional wellbeing factors collectively contribute to overall life satisfaction.

Table 5: Impact of Integrated Wellbeing Practices on Life Satisfaction (N=495)

Number of Wellbeing Dimensions Actively Practiced	N	Mean Life Satisfaction Score	Std. Deviation
1-2 dimensions	78	62.4	14.2
3-4 dimensions	156	73.8	12.6
5-6 dimensions	184	82.1	10.4
7-8 dimensions	77	91.3	8.7

This table examines the cumulative impact of engaging multiple wellbeing dimensions simultaneously versus focusing on limited domains (Huppert & So, 2013; Seligman, 2011). Results demonstrate a clear dose-response relationship whereby participants actively practicing more

wellbeing dimensions report significantly higher life satisfaction scores. Those engaging only 1-2 dimensions averaged 62.4 satisfaction points, while participants practicing 7-8 dimensions achieved mean scores of 91.3, representing a 46% improvement. Standard deviations decreased as dimension count increased, suggesting that multidimensional approaches produce more consistent positive outcomes with less variability. ANOVA analysis confirmed statistically significant differences between all groups ($F=89.4$, $p<0.001$), with post-hoc tests showing each successive category significantly outperforming the previous. These findings provide strong empirical support for the integrated Wellbeing Recipe framework, demonstrating that holistic approaches addressing multiple life domains synergistically produce superior wellbeing outcomes compared to isolated single-domain interventions. The practical implication suggests that wellbeing enhancement strategies should prioritize comprehensive lifestyle integration rather than narrow focus areas, though even modest engagement with 3-4 dimensions yields meaningful improvements over minimal practice.

Table 6: Predictors of Life Satisfaction - Multiple Regression Analysis (N=495)

Predictor Variable	Standardized Beta (β)	t-value	Significance	Variance Explained (R^2)
Social Support Network	0.34	8.72	$p < 0.001$	
Emotional Regulation	0.28	7.14	$p < 0.001$	
Sense of Purpose	0.24	6.35	$p < 0.001$	
Physical Health	0.18	4.86	$p < 0.001$	
Cognitive Patterns	0.16	4.21	$p < 0.001$	
Professional Satisfaction	0.14	3.68	$p < 0.001$	
Financial Wellbeing	0.11	2.94	$p < 0.01$	
Technology Balance	0.08	2.17	$p < 0.05$	
Model Summary				$R^2 = 0.71$

Multiple regression analysis identified the unique contribution of each wellbeing dimension when controlling for all other variables (Fors Connolly & Gärling, 2022; Galambos et al., 2020). Social support networks emerged as the strongest independent predictor ($\beta=0.34$), explaining the most unique variance in life satisfaction scores. Emotional regulation capacity ranked second ($\beta=0.28$), followed by sense of purpose ($\beta=0.24$), demonstrating these three factors as the most powerful individual contributors. Physical health, cognitive patterns, professional satisfaction, financial wellbeing, and technology balance each contributed significant though progressively smaller unique variance. The overall regression model explained 71% of life satisfaction variance ($R^2=0.71$), indicating exceptional predictive power and model fit ($F=118.6$, $p<0.001$). This high R^2 value demonstrates that the eight wellbeing dimensions collectively account for nearly three-quarters of individual differences in life satisfaction, validating the comprehensive framework while acknowledging that approximately 29% of variance stems from other factors not measured. The rank ordering of predictors aligns with extensive wellbeing literature emphasizing relationships, emotional health, and meaning as central to human flourishing, while confirming that each dimension contributes meaningfully to the overall model.

7. Discussion

The present study provides robust empirical validation for the multidimensional Wellbeing Recipe framework, demonstrating that holistic approaches integrating physical, psychological, social, professional, financial, and technological dimensions yield substantially superior wellbeing outcomes compared to single-domain interventions. The finding that participants actively practicing 7-8 wellbeing dimensions achieved 46% higher life satisfaction scores than those engaging only 1-2 dimensions offers compelling evidence for integrated lifestyle approaches. This dose-response relationship suggests synergistic interactions between wellbeing domains, wherein improvements in one area facilitate enhancement in others, creating positive feedback loops that amplify overall benefits. These findings extend previous research by Huppert and So (2013) and Seligman (2011) by quantifying the incremental benefits of multidimensional wellbeing practices within an Indian cultural context. The Personal Wellbeing Index scores averaging 80.06 significantly exceed typical Asian norms (64.4 in China, 65.9 in Hong Kong, 75.7 in Thailand), positioning the Indian sample closer to Western normative ranges (Singh et al., 2022). This finding contradicts previous research suggesting Asian populations consistently report lower subjective wellbeing, potentially reflecting methodological factors such as the educated urban

sample characteristics, or substantive factors such as India's unique cultural traditions emphasizing life philosophy, family bonds, and spiritual resilience as protective wellbeing factors. The highest satisfaction ratings for personal relationships (85.3) and lowest for future security (68.9) reveal important cultural patterns and intervention targets. The relationship primacy aligns with collectivistic value orientations characteristic of Indian society, where family and social connections traditionally supersede individualistic achievement as life satisfaction determinants (Biswas-Diener et al., 2012). Conversely, the future security concerns likely reflect economic volatilities, employment uncertainties, and rapid societal transformations generating anxiety about long-term prospects, particularly among younger generations experiencing unprecedented career and social pressures.

Correlation and regression analyses identified social support networks, emotional regulation capacity, and sense of purpose as the three most powerful life satisfaction predictors, collectively explaining substantial outcome variance. These findings corroborate the Harvard Study of Adult Development's seminal conclusion that relationship quality at midlife predicts physical and mental health decades later more accurately than biological or economic indicators (Waldinger & Schulz, 2010). The strong emotional regulation correlation (r=0.72) supports cognitive-behavioral frameworks linking adaptive emotion management to psychological wellbeing, while suggesting that emotional literacy training represents a highly efficient wellbeing intervention with broad transfer effects across life domains (Gross, 2007). The robust purpose-satisfaction relationship (r=0.70) validates existential psychology's emphasis on meaning-making as central to human flourishing, consistent with Frankl's logotherapy principles that individuals can withstand considerable hardship when anchored by transcendent purpose (Frankl, 2006). The relatively modest correlation between technology-life balance and overall satisfaction (r=0.43), though statistically significant, warrants careful interpretation. This finding may reflect that the sample, consisting predominantly of educated urban adults likely possessing digital literacy and agency in technology use, experiences less technology-related wellbeing impairment than populations lacking such resources. Alternatively, the lower correlation might indicate that technology effects on wellbeing operate indirectly through disrupting other domains (sleep quality, relationship time, physical activity) rather than exerting strong direct effects. Future research should examine technology's mediating and moderating roles across different demographic groups, particularly adolescents whose developmental trajectories may be more susceptible to digital environment influences (Twenge, 2017).

The practical implications of these findings for individual wellbeing enhancement, organizational culture development, and public health policy are substantial. At the individual level, results support prioritizing relationship cultivation, emotional intelligence development, and purpose clarification as high-impact wellbeing strategies, while simultaneously attending to physical health, cognitive patterns, professional satisfaction, financial literacy, and technology mindfulness to achieve comprehensive flourishing. For organizations, findings suggest that workplace wellness programs targeting singular dimensions (e.g., gym memberships or stress management workshops) likely produce limited benefits unless integrated into comprehensive cultures addressing psychological safety, meaningful work, healthy relationships, and work-life integration. Policymakers should consider multidimensional wellbeing frameworks when designing population health initiatives, recognizing that sustainable improvements require coordinated interventions across healthcare, education, economic, social, and community systems rather than isolated programmatic efforts. Study limitations include the cross-sectional design precluding causal inferences, selection biases toward educated urban populations potentially limiting generalizability to rural and lower-literacy populations, and reliance on self-report measures vulnerable to social desirability and recall biases. Future research should employ longitudinal designs tracking wellbeing trajectories over time, experimental interventions testing specific components of the Wellbeing Recipe framework, and diverse sampling strategies ensuring representation across socioeconomic strata, geographic regions, and cultural communities throughout India.

7. Conclusion

This research provides compelling evidence that sustainable wellbeing and authentic happiness emerge from the synergistic integration of multiple life dimensions rather than isolated improvements in any single domain. The Wellbeing Recipe framework, encompassing physical health, cognitive patterns, emotional regulation, transcendence, social connections, professional fulfillment, financial literacy, and technological balance, offers a scientifically validated roadmap for individuals seeking to enhance life satisfaction. The finding that participants actively engaging with seven to eight wellbeing dimensions achieved 46% higher life

satisfaction than those focusing on only one to two dimensions powerfully demonstrates the multiplicative benefits of holistic approaches. Among Indian populations specifically, personal relationships emerged as the most potent wellbeing predictor, followed closely by emotional regulation capacity and sense of purpose, suggesting that culturally-informed interventions should prioritize these domains while maintaining attention to physical, professional, financial, and technological wellness.

The exceptionally high model fit (R^2=0.71) indicates that the eight wellbeing dimensions collectively explain nearly three-quarters of individual differences in life satisfaction, providing robust support for the comprehensive framework. However, the remaining unexplained variance reminds us that wellbeing constitutes a complex, multifactorial phenomenon influenced by factors beyond those measured in this study, including genetics, early life experiences, personality traits, and environmental circumstances. Future investigations should continue refining our understanding of wellbeing determinants while translating research findings into accessible, practical interventions supporting individuals, organizations, and communities in cultivating flourishing lives characterized by meaning, connection, vitality, and sustainable happiness.

References

1 Bakker, A. B., & Demerouti, E. (2007). The job demands-resources model: State of the art. *Journal of Managerial Psychology, 22*(3), 309-328. https://doi.org/10.1108/02683940710733115

2 Biswas-Diener, R., Tay, L., & Diener, E. (2012). Happiness in India. In H. Selin & G. Davey (Eds.), *Happiness across cultures* (pp. 13-26). Springer. https://doi.org/10.1007/978-94-007-2700-7_2

3 Deb, S., Thomas, S., Bose, A., & Aswati, T. (2020). Happiness, meaning, and satisfaction in life as perceived by Indian university students and their association with spirituality. *Journal of Religion and Health, 59*, 2469-2485. https://doi.org/10.1007/s10943-019-00806-w

4 Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The Satisfaction with Life Scale. *Journal of Personality Assessment, 49*(1), 71-75. https://doi.org/10.1207/s15327752jpa4901_13

5 Diener, E., Fujita, F., Tay, L., & Biswas-Diener, R. (2012). Purpose, mood, and pleasure in predicting satisfaction judgments. *Social Indicators Research, 105*, 333-341. https://doi.org/10.1007/s11205-011-9787-8

6 Fors Connolly, F., & Gärling, T. (2022). Mediators of differences between employed and unemployed in life satisfaction and emotional well-being. *Journal of Happiness Studies, 23*, 1637-1651. https://doi.org/10.1007/s10902-021-00466-2

7 Fors Connolly, F., & Gärling, T. (2023). The relationships between life satisfaction, emotional well-being and income in European countries differing in wealth. *International Journal of Psychology, 58*, 594-604. https://doi.org/10.1002/ijop.12935

8 Fors Connolly, F., & Gärling, T. (2024). What distinguishes life satisfaction from emotional wellbeing? *Frontiers in Psychology, 15*, 1434373. https://doi.org/10.3389/fpsyg.2024.1434373

9 Frankl, V. E. (2006). *Man's search for meaning.* Beacon Press. (Original work published 1946)

10 Galambos, N. L., Krahn, H. J., Johnson, M. D., & Lachman, M. E. (2020). The U shape of happiness across the life course: Expanding the discussion. *Perspectives on Psychological Science, 15*, 898-912. https://doi.org/10.1177/1745691620902428

11 Gross, J. J. (2007). *Handbook of emotion regulation.* Guilford Press.

12 Helliwell, J. F., Layard, R., Sachs, J. D., De Neve, J.-E., Aknin, L. B., & Wang, S. (Eds.). (2024). *World Happiness Report 2024.* Sustainable Development Solutions Network. https://worldhappiness.report/ed/2024/

13 Holt-Lunstad, J., Smith, T. B., & Layton, J. B. (2010). Social relationships and mortality risk: A meta-analytic review. *PLoS Medicine, 7*(7), e1000316. https://doi.org/10.1371/journal.pmed.1000316

14 Huppert, F. A., & So, T. T. C. (2013). Flourishing across Europe: Application of a new conceptual framework for defining well-being. *Social Indicators Research, 110*, 837-861. https://doi.org/10.1007/s11205-011-9966-7

15 Ipsos. (2019). *Global happiness study 2019.* Ipsos. https://www.ipsos.com/en/global-happiness-study-2019

16 Keyes, C. L. M. (2002). The mental health continuum: From languishing to flourishing in life. *Journal of Health and Social Behavior, 43*(2), 207-222. https://doi.org/10.2307/3090197
17 Kim, S. H., & Hamann, S. (2007). Neural correlates of positive and negative emotion regulation. *Journal of Cognitive Neuroscience, 19*(5), 776-798. https://doi.org/10.1162/jocn.2007.19.5.776
18 Kubzansky, L. D., & Thurston, R. C. (2007). Emotional vitality and incident coronary heart disease: Benefits of healthy psychological functioning. *Archives of General Psychiatry, 64*, 1393-1401. https://doi.org/10.1001/archpsyc.64.12.1393
19 Lyubomirsky, S., King, L., & Diener, E. (2005). The benefits of frequent positive affect: Does happiness lead to success? *Psychological Bulletin, 131*(6), 803-855. https://doi.org/10.1037/0033-2909.131.6.803
20 McIntyre, E., Saliba, A., & McKenzie, K. (2020). Subjective wellbeing in the Indian general population: A validation study of the personal wellbeing index. *Quality of Life Research, 29*(4), 1073-1081. https://doi.org/10.1007/s11136-019-02372-2
21 Netemeyer, R. G., Warmath, D., Fernandes, D., & Lynch, J. G. (2018). How am I doing? Perceived financial well-being, its potential antecedents, and its relation to overall well-being. *Journal of Consumer Research, 45*(1), 68-89. https://doi.org/10.1093/jcr/ucx109
22 Okely, J. A., & Gale, C. R. (2016). Well-being and chronic disease incidence: The English Longitudinal Study of Ageing. *Psychosomatic Medicine, 78*(3), 335-344. https://doi.org/10.1097/PSY.0000000000000279
23 Ratey, J. J., & Loehr, J. E. (2011). The positive impact of physical activity on cognition during adulthood: A review of underlying mechanisms, evidence and recommendations. *Reviews in the Neurosciences, 22*(2), 171-185. https://doi.org/10.1515/RNS.2011.017
24 Reddy, N. Y. (2023). Perceived wellbeing, happiness, and related challenges among Indian college students. *Psychological Studies, 68*, 131-142. https://doi.org/10.1007/s12646-022-00705-3
25 Ryff, C. D., & Singer, B. (1998). The contours of positive human health. *Psychological Inquiry, 9*(1), 1-28. https://doi.org/10.1207/s15327965pli0901_1
26 Schutte, N. S., Malouff, J. M., Thorsteinsson, E. B., Bhullar, N., & Rooke, S. E. (2011). Emotional intelligence mediates the relationship between mindfulness and subjective well-being. *Personality and Individual Differences, 50*(7), 1116-1119. https://doi.org/10.1016/j.paid.2011.01.037
27 Seligman, M. E. P. (2011). *Flourish: A visionary new understanding of happiness and well-being.* Free Press.
28 Seligman, M. E. P., & Csikszentmihalyi, M. (2000). Positive psychology: An introduction. *American Psychologist, 55*(1), 5-14. https://doi.org/10.1037/0003-066X.55.1.5
29 Singh, K., Kumar, M., & Bandyopadhyay, S. (2022). Personal wellbeing among adolescents and youth in India. *Frontiers in Psychology, 13*, 914152. https://doi.org/10.3389/fpsyg.2022.914152
30 Twenge, J. M. (2017). *iGen: Why today's super-connected kids are growing up less rebellious, more tolerant, less happy—and completely unprepared for adulthood.* Atria Books.
31 Waldinger, R. J., & Schulz, M. S. (2010). What's love got to do with it? Social functioning, perceived health, and daily happiness in married octogenarians. *Psychology and Aging, 25*(2), 422-431. https://doi.org/10.1037/a0019087