COMPARATIVE STUDY ON BIO-PSYCHO SOCIAL EFFECTS AND COPING STRATEGIES AMOUNG YOUNG ADULTS BASED ON THE THEORY OF SOCIAL CLOCK

Dissertation submitted to

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Submitted by

BHAVAPRIYA PV

Reg. No. 200011034670

Under the guidance of

DR. SHEENA RAJAN PHILP



Bharata Mata School of Social Work Thrikkakara, Kochi-21
(Affiliated to Mahatma Gandhi University, Kottayam)

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Certificate

This is to certify that this dissertation titled "COMPARATIVE STUDY ON BIO-PSYCHO SOCIAL EFFECTS AND COPING STRATEGIES AMOUNG YOUNG ADULTS BASED ON THE THEORY OF SOCIAL CLOCK" is a record of genuine and original work done by BHAVAPRIYA P V (200011034670) of IVth semester Masters of Social Work course of this college under my guidance and supervision and it is hereby approved for submission.

Dr. Sheena Rajan Philip Dr. Sheena Rajan Philip

Research Guide Head of the Department

Assistant Professor Bharata Mata School of Social Work

Bharata Mata School of Social Work Thrikkakara

Thrikkkara

Dr. Johnson K. M

Principle

Bharata Mata College

Thrikkakara



ESTD	1965Submitted	to Viva-voc	e Examination	on
External	l Examiner			

Master of Social Work

Declaration

I Sandra Noble hereby declare that the research work titles "Lived Experiences of

young adult who grew up in broken family" submitted to the M G University,

Kottayam is a record of original work done by me under the guidance of DR.

SHEENA RAJAN PHILIP Faculty, Bharata Mata School of Social work,

Thrikkakara, and this research work is submitted in partial fulfilment of the

requirements for the award of the degree of Master of Social Work Specializing in

Medical and psychiatry.

I hereby declare that the results embedded in this research have not been submitted to

any other University or Institute for the award of any degree or diploma, to the best of

my knowledge and belief.

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Bhava Priya P V

ABSTRACT

Social Clock Theory is one of the prominent problems that the young adults are facing today. The theory of social clock is an idea that explores the timeline of an individual determined by the society that imposes different pressure and creates profuse bio- psycho social effects on individuals regarding the occurrence of various life events.

The society often tends to question others especially young adults regarding various life events and create certain stress or pressure on them. This includes questioning regarding the occurrence of certain events like graduation, employment, marriage, having kids or social status etc. These stresses by the society can affect the bio- psycho social well-being of an individual terribly. Hence this problem should be addressed and analysed. Also it is very much essential to find out the coping strategies that can be adopted to overcome the problems of social clock.

The present research is a Comparative study on Bio-Psycho Social Effects and Coping Strategies among young adults based on the theory of Social Clock. The researcher used descriptive Quantitative Research and survey method in which questionnaire was the tool used to collect the data. The data was collected from the young adult between the age of 18-32 who is belonging to Kerala, either living inside or outside Kerala. 50 Respondents were Residents and 50 were Non Residents and thus creates the total of 100 respondents.

The study found out there is a significant difference between age in social clock framework and the desired age among the Residents and Non Residents of Kerala. Also, found out various bio-psycho social effects and coping strategies

adopted between the Residents and Non Residents of Kerala based on Social Clock Theory.

Key Words: Social Clock Theory, Bio- Psycho Social Effect, Coping Strategies, Young Adults

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CHAPTER I INTRODUCTION

Social Clock Definition

The social clock is a cultural timeline of a person's major social turning points. People feel compelled to complete them because of the pressures they experience. Taking the necessity of work, marriage, or even having children as an example. At a certain age, people are under pressure to meet these social milestones since failing to do so makes them feel inadequate in their various societies. People's life decisions are impacted by the social clock because they feel pressure to fit into the cultural norms and social expectations of their society. There are both conscious and unconscious norms and timelines that make up the social clock.

Students feeling pressure to graduate at a particular age is an example of how the social clock operates. A student could feel alone if they don't graduate at that age. Because they feel out of place among the others who have graduated, the student avoids connecting with them. Though it may not be spoken about, this social pressure nevertheless exists and has an impact on some people.

Impact of Social Clock

Although the biological clock is well-known, the social clock also has an effect on each of us. A schedule for social milestones that is culturally defined is known as the social clock. Consider your first job, marriage, childbirth, college graduation, home purchase, retirement, etc.

What is the effect of this? According to the research, those who follow the social clock have less of an adverse effect than those who do not. Confidence and self-esteem are boosted by keeping up with societal norms. (It's all "success" based, by the way, and it's not true self-worth.)

At what age do you "think" you should get married? The state with the lowest marriage age is Utah, where I reside. I consistently hear from people who feel "too old" and single about the pressure and shame they endure.

What happens if you miss the social cues? This culturally imposed expectation frequently causes shame, guilt, comparison, despair, anxiety, and feelings of failure.

Because social clocks vary across generations and countries, this also contributes to generational alienation. We are injured by the shoulds.

The social clock isn't accurate; it is, in fact, a product of culture and is subject to change. NEVER let a comparison decide your worth or value.

Resilience and optimism, which I'll discuss later, are essential elements of longevity and good health. Practice reflecting on, accepting with awareness, and honestly assessing YOUR PERSONAL life goals. Don't let society's standards define you as inferior. Some things, like job applications or working toward graduation, are under our control. However, it does not ensure the arbitrary age cutoffs. The arbitrary age cutoffs may not, however, correspond with our unique set of circumstances.

In so many ways, privilege and socioeconomic standing are issues of the social clock!

A house to buy? financial self-reliance? having a baby (which costs a lot of us tens of thousands of dollars on top of reproductive technologies and even getting access based on body size).

The social spectrum is very limited. Predictability and control appeal to humans. In line the social clock does not define you; it is not a measure of your worth.

Origin of the Social Clock

The social clock was developed by social psychologist Bernice Neugarten to help explain ageing. Neugarten discovered while studying that life's events followed predictable patterns. She pointed out that various communities have a social clock that specifies how things ought to proceed. A person may experience social pressure and stress if things do not happen for them within a certain time frame because they did not live up to their family's or society's expectations.

The need to fit in is a fundamental aspect of being human. Humans have always lived in groups to share resources and assure safety, and being rejected by a community could endanger their survival.

In order to prevent being left out, our brains have developed to have the capacity to compare with other group members. It's possible that the drive to belong is what led people to wonder if they are doing the right thing or if they are good. Social milestones are sometimes reached sooner than anticipated, and for those who haven't, it's a psychological setback. The people who have kept up with the social clock are therefore accepted and involved in society, while those who have not run the risk of falling behind in crucial communal activities. Different values and cultural distinctions, however, are the main causes of the social clock. The discussion of these elements follows.

The Social Clock is Changing

Globalization is altering the social clock, bringing individuals from all over the world together and fusing many traditions. The social clock is altering as a result of the fast-

paced lifestyle brought on by living in a globalised environment. For instance, some people are delaying marriage till later in life while others never even think about it. Many communities are under pressure to work and advance their careers, which makes the social clock less useful. People have also grown more accepting and tolerant of those who don't follow the social clock's timetables in several societies.

Different Values

Principles are what a person stands for. They portray a person's attitudes and actions. The social clock is influenced by these varying values throughout society. They are significant to them and aid in shaping human behaviour. A value like independence, for instance, develops at various stages in society. A child could choose to leave his parents' care at a very young age. That may be the person's viewpoint, and he may enjoy being independent. However, when another individual witness this behaviour, he begins to feel compelled to leave his parent's care. The pressure is what propels him down the path to escape this value, which may not be in the observer.

How does the social clock affect life choices?

People's decisions are influenced by the social clock because they have a tendency to do what is anticipated in their cultural timeline. People are under societal pressure to follow the socially prescribed timelines for important milestones like marriage and childbearing.

The Social Clock Theory

When a particular age came around, ladies who were still single were derogatorily referred to as old maids. The social clock hypothesis discusses how society views

people as they develop and change. In response to contemporary developments, once rigid norms of conduct have loosened up.

Identification of Social Clock

The social clock theory explains how significant life changes are anticipated to occur at a specific point in a person's lifetime. The social clock timetable is determined by societal expectations of when these changes should take place. This clock offers a tool to gauge a person's development within his or her specific age range. Within the context of society, people who have completed the required responsibilities by a particular age are regarded as being well-adjusted, whilst those who are ahead of or behind schedule are seen as either leading the pack or falling behind.

Developmental Maturity

Developmental theories, which focus on how people evolve and change from childhood through old age, are where the idea of the social clock originates. According to the clock theory, a society's norm for achievement or advancement is shaped by an outside indicator. Reaching milestones on schedule demonstrates competence in one's mental and emotional development, whereas those who fall behind are seen as less capable by society.

Landmark Events

According to the social clock idea, a person's lifetime's significant turning points serve as gauges of her social status. High school graduation, landing one's first job, getting hitched, bearing children, purchasing a home, and retiring are all significant occasions. What types of historical occurrences are used as markers depends on the type of society a person lives in. The American tradition of expecting young adults to

enrol in college following high school is an illustration of this idea. In rural Latin American society, this same adult would be expected to either start their own family or find employment.

Effects

Both people who maintain pace with society's timelines and those who fall behind have certain effects. People who keep up with social trends might anticipate a certain amount of engagement and acceptance in society. As a result, a person has gained a certain level of expertise as well as the capacity to comprehend himself and other people better. Those who fall behind or decide to ignore the clock entirely run the risk of being rejected based on how well they fit into society's predetermined norms.

Changes

Social clock timeframes for significant events have gotten more lenient in the past 40 years as gender roles in society have altered. Due to the fact that many women choose to delay having children until after establishing a job, timelines for women in terms of having children have changed. Since both men and women are expected to complete education and establish themselves in the workforce, marriage timelines have also gotten more lenient. Modern lifestyles have forced a shift in how important education and job are prioritised. As a result, many significant events now occur at different times.

Social Clock Theory in Detail

In the 1960s, social psychologist Bernice Neugarten defined the social clock hypothesis as common expectations of behaviour that is suitable for a given age. Society tells its members when it's "proper" for them to begin their first job, get married, have a child, buy a home, and retire. Examples of social clock behaviour could be almost anything that people perform regularly throughout their lives.

According to Laura Berk in "Developing Through the Lifespan," adhering to or deviating from the social clock might be a significant factor in adult personality change. For instance, research on women born in the 1930s looked at personality changes connected to three different social clock groups as they entered adulthood:

- A "feminine" clock based on getting married and starting a family in your early to mid-20s.
- A "male" clock predicated on beginning a high-status career and moving up the ladder by your late 20s.
- Women who didn't adhere to either of the two prior timers.

The "feminine" clock was followed by more responsible, restrained, tolerant, and compassionate women. But as their lives went on, they got worse and felt more exposed. The "masculine" clock was followed by increasingly powerful, sociable, independent, and intelligent women. By the time they turned 30, the women who hadn't gotten married or begun a career experienced emotions of incompetence, self-doubt, and loneliness.

Age norms are what "the social clock" is based on, according to Chandra Mehrotra in "Aging and Diversity." People are encouraged by their cultures to act in ways that are appropriate for their age, as determined by the social norms of that society. Norms can also be significantly influenced by social class. For instance, working-class Americans frequently marry before middle-class, upper-middle-class, and upper-class

people in the United States. The likelihood of divorce, the number of children, and marital satisfaction are all influenced by the age of marriage.

Young Adults

In every nation, young people are a valuable source of human resources. The concept of young people, however, is somewhat ambiguous, and words like young, adolescents, adults, and young adults are frequently used interchangeably. The World Health Organization (WHO) defines "adolescence" as the age range of 10 to 19 years, "youth" as those between the ages of 15 and 24, and these two age ranges combined as "young people" covering the range of 10 to 24 years1. Adults are people who are between the ages of 20 and 64. Early adolescence (11–14 years), middle adolescence (15–17 years), and late adolescence are other divisions of adolescence (18-21 yr) 3. People between the ages of 20 and 24 are sometimes known as young adults. 4. According to India's National Youth Policy (2003), the youth population is those in the age group of 15-35 yr5.

Young adulthood is a critical developmental period

Young adulthood, like infancy and adolescence, is a developmentally separate stage of life that can logically be seen as a crucial window of development with a significant impact on long-term trajectories. At the same time that they are expected to take on more duties and responsibilities, people are also facing tremendous challenges. Young adults' ability to successfully navigate these roads can put them on a path that will profoundly influence the future trajectories of their adult life. Early risks can accumulate or be mitigated, early developmental and social trajectories can

be reinforced or reversed, fresh experiences can act as turning points, sources of stagnation or thriving, and unfinished developmental tasks can cause serious future setbacks.

Young adulthood is a moment of potential and danger for development. The maturation process does not end abruptly when a young person turns 18. Strengths and vulnerabilities are still developing as the brain ages. Young adults are still highly attentive to opportunities for education and training as well as rewards for innovation and service. Failures and mistakes can be corrected, and prompt preventive measures can lower risks and lessen the effects of injuries or disorders.

Erikson's stages of development

Erikson shared Sigmund Freud's belief that personality changes throughout time.

Erikson's theory, however, addressed the effects of social experience throughout the entire lifespan, in contrast to Freud's conception of psychosexual phases. Erikson was interested in the function that social ties and interaction had in the maturation and growth of people.

The epigenetic concept served as the foundation for Erikson's theories. According to this theory, humans develop in a series of steps that take place over time and within the framework of a broader community.

Conflict During Each Stage

According to Erikson's theory, each stage builds on the ones that came before it and prepares the way for the phases of growth that follow. Erikson thought that at each stage, humans go through a conflict that marks a turning point in their growth. 2 These conflicts, in Erikson's opinion, are primarily caused by either attaining or

failing to attain a particular psychological trait. Both the possibility for failure and the possibilities for personal progress are great at this moment.

People leave the stage with psychological strengths that will benefit them for the rest of their lives if they are able to resolve the issue.

They might not acquire the critical abilities required for a strong sense of self if they are unable to resolve these conflicts successfully.

Young Adulthood

Young Adulthood, defined by Erik Erikson as being between the ages of 19 and 40, does experience a tension between intimacy and isolation. Therefore, the stage is referred to as Intimacy vs. Isolation. Relationships are a significant occurrence at this time, and love is the result.

Stage 6: Intimacy vs. Isolation

Young adults must develop close, enduring relationships with others. Success produces strong relationships, whilst failure produces isolation and loneliness. This era includes the early adult years when people are figuring out their personal relationships. Erikson thought it was essential for humans to form committed, deep relationships with other people. Those that are successful at this stage will establish bonds that are solid and long-lasting.

Building On Earlier Stages

Keep in mind that each stage builds on the abilities acquired in earlier steps. Erikson thought that establishing close relationships required a strong sense of personal

identity. According to studies, those who have a low sense of self are more prone to struggle with emotional loneliness, depression, and uncommitted relationships.

The virtue of love is the result of the successful completion of this stage. It is characterised by the capacity to establish enduring, meaningful connections with other individuals.

Why Do Adults Follow a Social Clock?

The need to fit in can be used to understand why people might adhere to a social clock. Adults who adhere to the social clock may relate to others easily, which helps them better comprehend their place in society.

Mehrotra made note of the fact that while culture influences behaviour, it does not determine it. A social clock, like other social norms that members of society follow, can assist people in determining when particular life events are appropriate. Different social classes, genders, religions, and even professions might have different cultural norms.

Here are two studies that show how social clock norms vary between cultures.

- Turkish young adults' perspective of the social clock for marriage and children was studied in a study published in the Journal of Adult Development (autonomy, competence, and relatedness). When it came to life satisfaction and despair, people who felt they were successfully completing their responsibilities on time had better results overall.
- The opinions of Australian university students regarding the timing of transitional events were studied in two research published in the International

Journal of Aging & Human Development. The students' ages ranged from 17 to 50, and the occasions covered both career transitions and family changes (marriage, motherhood, and grandparenthood) (leaving school, retirement). The findings diverged significantly from early studies on age norms carried out in the United States three decades earlier. For instance, just a minority of Australian individuals thought there were set upper age limits for university studies. Compare that to Mehrotra's observation regarding important research done in the 1970s and 1980s, which, for example, found that a prospective student who applied to medical school at the age of 50 may encounter significant opposition to admission.

Every society has timelines that affect its members. However, norms are constantly changing, and a variety of factors can influence any given norm and a person's willingness to follow it. In a norm from their social class, gender, religion, career, or another area, a person might find an identity. Or that person can reject cultural and generational influences on important life decisions, like getting married or choosing a major career.

Well-Being

Being happy, healthy, socially engaged, and having a purpose are just a few of the many good aspects of well-being that almost everyone seeks.

There are numerous abilities you can develop to improve your well-being. However, improving your well-being is not always simple: Finding out which aspects of well-being are most significant for you and working out how to precisely develop well-being skills typically necessitate extra assistance.

How Long Does It Take to Improve Well-Being?

Often, when people begin to systematically use scientific techniques to improve their health or emotional well-being, they begin to feel better quickly. In the studies I've done and read, most people have shown significant improvements within five weeks.

But you have to stick to it. If you feel better after five weeks, you can't stop there.

Why? Well, you probably already know that if you stop eating healthy and start eating junk food again, you'll be back to the very beginning. Turns out the same is true for different types of health. If you want to maintain the perks you've earned, you'll need to continue to engage in health enhancement methods to maintain your skills. It's therefore helpful to have strategies and tools to help you stay on track with your long-term goals - for example, a health and well-being plan or a health-promoting activity that you can continue with. continued use throughout life.

Where Does Well-Being Come From?

Your ideas, deeds, and experiences—most of which you have control over—are what lead to your sense of well-being. For instance, we often experience more emotional well-being when we think positively. We typically experience greater social well-being when we pursue meaningful relationships. Additionally, we frequently have decreased workplace well-being when we leave our jobs or simply despise them. These instances begin to demonstrate the breadth of well-being and the variety of well-being that exist.

Let's dissect well-being into its various sorts because it is such a varied feeling.

Major Types of Well-Being

Emotional Well-Being: the capacity to use relaxation and stress-management techniques, be tenacious, increase self-love, and produce positive emotions.

Physical Well-Being: the capacity to enhance bodily performance through healthy lifestyle choices and regular exercise.

Public Well-Being: the capacity for interpersonal interaction, the creation of deep bonds with people, and the upkeep of a network of friends and family.

Occupational Well-Being: the capacity to pursue your passions, principles, and life goals in order to find fulfilment, happiness, and professional enrichment.

Well-Being of society: the capacity to actively participate in an environment, culture, and community that are prospering.

You must ensure that all of these sorts are operating to some level if you want to improve your general well-being.

The state of being physically or biologically healthy.

We need to understand what a good diet and exercise regimen look like in order to build our physical well-being and put into practise practical solutions in our daily lives. In addition to making us feel better, enhancing our physical well-being can also help avoid numerous diseases, repair our stomachs, enhance our emotional well-being, and reduce the number of health issues we have to face throughout our lives.

You can improve your physical well-being by doing the following things:

- Food for Health
- Cleaning Up Your Body

- Making up for Nutritional Deficits
- Getting Rid of Plastic in Your Home

Sadly, it is possible to consume nutritious foods and still be unhealthy. We may unintentionally overlook crucial foods or nutrients. Alternatively, we can overdo it with the poisons in processed foods and plastic. As a result, we might need to eat more food, cleanse our bodies, or take other steps to stop these toxins from re-entering our systems. This is why it's crucial to gain knowledge about health in order to make the appropriate modifications that result in long-term health and well-being.

Psychological or Emotional Well-Being

We need to acquire emotional abilities, such as positivity, emotion management, and mindfulness, in order to achieve emotional well-being. We frequently need to develop a number of these talents to manage the wide range of situations we come across in our daily lives. When we have developed these emotional resilience skills, we are better able to manage stress, our emotions when faced with difficulties, and our ability to bounce back from setbacks. As a result, we can live a little bit more fully, be happier, and accomplish our objectives a little bit more successfully.

According to research, the following abilities support emotional well-being:

- Positivity Skills
- Mindfulness Techniques
- Positive Mental Attitude
- Resilience Techniques

Social Well-Being

We must improve our social skills, such as gratitude, generosity, and communication if we want to foster social well-being. Our ability to engage positively with others is facilitated by our social skills, which reduce our feelings of isolation, resentment, and disconnection. We feel more deeply linked to others when we have improved our social well-being.

According to research, the following abilities help people be more socially well-off:

- Positivity in Gratitude (for example with a gratitude journal)
- Creating Meaningful Social Links
- Taking control of your interaction with technology

It's crucial to understand that one of the finest ways to develop emotional well-being is through social well-being development. We also typically feel better, have more positive emotions, and are better able to handle difficulties when we feel socially connected. This is why strengthening our social well-being is so important.

Occupational Well-Being. We need to develop the abilities that enable us to pursue what is truly important to us if we want to improve our workplace well-being. This can involve developing professional abilities that enable us to achieve our goals and make things happen, but it can also involve doing things like upholding a healthy work-life balance and living out our values. These abilities enable us to work more enjoyable and successfully, maintaining our concentration and drive. Our work, and therefore each day, feels more important when we have improved workplace well-being.

Some of the essential abilities you need for job well-being are listed below:

- Keeping the Work-Life Balance
- Identifying Your Goals

Building workplace well-being has a tremendous impact on our overall well-being since we spend so much time there.

What characterizes adolescents and youth?

Youth, considered to be the most important stage of life, is a time of significant physical, physiological, psychological, and behavioural changes as well as shifting social interaction and relationship patterns. In order to lessen the likelihood of health issues in later years and to lay the framework for healthy and productive adulthood, youth is a window of opportunity. During puberty, a wide range of biological changes takes place, including a gain in height and weight, the end of skeletal growth and an increase in skeletal mass, sexual maturation, and modifications to body composition. The order in which these events occur during puberty varies from adolescence to adolescence but is typically impacted by the age of onset, gender, duration, and individual differences. Young people and those around them are put under a lot of stress as a result of these changes, which influences and affects how they interact with adults and their peers. In addition, it is a time of impulsivity and fragility, impacted by peer groups and the media, which influences how people think and behave and is marked by the development of new emotional, cognitive, and social skills.

Problems faced by Young Adults

The biggest problem facing young Brits today, according to a list of issues, is a lack of career prospects.

The Central YMCA, a health and education charity, polled 1,600 young people between the ages of 16 and 25 in order to develop the list.

The charity asked them to evaluate the types of problems they currently face; the majority of those polled thought that their inability to find a fulfilling role in society, whether through the traditional educational system or a satisfying job, constituted their biggest obstacle.

Here are the complete top 10:

- 1. Insufficient job opportunities
- 2. Failure to prosper in the educational system
- 3. Body image problems
- 4. Family difficulties
- 5. Abuse of drugs
- 6. Materialistic pressures
- 7. The scarcity of decent housing
- 8. Harmful stereotypes
- 9. The strains of always-on social networking
- 10. Violence

Check out the AllAboutSchoolLeavers jobs board for openings on apprenticeship schemes, school leaver programmes, and sponsored degrees for young people who worry that there aren't enough employment opportunities available or that they won't

be able to afford college (and won't be able to find a good job in the future). All of these paid programmes have a high potential for full-time employment upon completion.

Biological Problems of Young Adults

Youth health is extremely important. The majority of young people are assumed to be in good health, but according to the WHO, 2.6 million young people between the ages of 10 and 24 are estimated to die every year and a much higher number of young people experience illnesses or "behaviours" that prevent them from reaching their full potential. The illnesses or behaviours that were started in a person's youth are responsible for about two-thirds of premature deaths and one-third of the total disease burden in adults (eg. tobacco use, physical inactivity, high-risk sexual behaviours, injury and violence, and others). Their current health state and risk of contracting certain chronic diseases in later years are determined by the behavioural patterns they form during this developmental era. A considerable decrease in the mortality and morbidity of infectious diseases, maternal disorders, and newborn abnormalities since 1990 as a result of coordinated and integrated initiatives which caused attention to turn to young people's health, safety, and survival. Understanding the population's health issues, the factors that influence their health, the treatments and proactive strategies that may be used to safeguard their health, and the development and implementation of policies and programmes are all vital.

The current review focuses on the health-related behaviours and issues that young people in India between the ages of 10 and 30 face. In addition, the assessment looks

at specific governmental measures and interventions and points out problems that must be solved in order to ensure the health and safety of young people in India.

Psychological Problems of Young Adults

Young adults in hospital wards are relatively uncommon in an ageing society because only 12% of young adults report having a chronic illness or disability. But among younger people, mental health issues are still common. The two issues that young adults have the most trouble with are mental health and obesity, according to a recent study. Early intervention in psychosis teams, for example, has been demonstrated to operate better than traditional care models and to be more cost-effective. These teams are created expressly to meet the requirements of younger adults. Younger patients in the medical wards may arouse powerful feelings in the personnel, who frequently feel protective and may emotionally sympathise with the young patient's suffering. General practitioners must recognise typical signs of mental illness in young people, such as depression, willful self-harm, eating disorders, and substance abuse, in order to provide holistic therapy for these patients. For young people, health promotion is crucial in addition to illness treatment.

Social Issues and Problems of Young Adults

Large-scale social problems can have a negative impact on how well a society runs. Just like adults, teenagers can experience social issues. Because of how quickly their bodies are changing and how their brains are still developing, they may even be more vulnerable to these difficulties. Social troubles and what we could consider "teenage problems" can have an impact on one's emotional and physical well-being. The main social issues that young adults deal with include depression, bullying, drug and

alcohol abuse, obesity, academic difficulties, peer pressure, social media use, and onscreen violence. In addition, they deal with social isolation and economic problems.

Coping

Coping is frequently described as constantly shifting cognitive and behavioural efforts to manage specific external and/or internal demands that are judged as exhausting or beyond the resources of the person given the current popularity of transactional views. Coping involves many different processes. The fact that people are equipped to identify and respond to environmental needs in ways that support life is a reflection of evolution. Physiological, psychological, and social factors all play a significant role in coping. Emotions, motivation, attention, volition, cognition, and communication are just a few examples of psychological qualities that are structured in ways that make it possible for them to support coping. As an illustration, emotions organize and indicate interactions that have adaptive importance. Coping is influenced by a wide range of social and cultural factors. For instance, attachment bonds offer refuge and safety when things are bad.

Both normative and individual differences are present in coping. Humans typically have the ability to cope in an adapted manner. In fact, it's likely that stress is required for the kinds of ongoing positive interactions that promote growth. Human reactivity to stress, however, can also be a vulnerability because too much stress can overwhelm and harm people. Additionally, there are significant disparities in the distribution of physiological, psychological, social, and cultural coping mechanisms among individuals and social groups.

Last but not least, coping is a process that develops over time. Real-time coping necessitates a series of in-the-moment interactions throughout each given stressful

transaction. Coping also occurs throughout episodic time; meeting demands entails a drawn-out string of precise real-time interactions. White stated that adaptation "described not improperly in military metaphors, calls for delay, strategic retreat, gathering of troops, abandoning of untenable positions, finding fresh intelligence, and deploying new weaponry" (White, 1974, p. 50). Additionally, coping strategies and the personal and societal resources used to support them undergo drastic transformations and qualitative adjustments over the course of a person's lifetime.

Coping Strategies

Coping strategies are behavioural and cognitive techniques used to deal with stressful situations, environments, and demands. The invention of Robert Folkman and Susan Lazarus' Ways of Coping scale was a significant advancement in the field of coping research. This measure was developed to evaluate how much someone employs one of two common coping mechanisms. Problem-focused coping focuses on finding solutions to problems or taking steps to alter the stressor. The goal of emotion-focused coping, in contrast, is to lessen or control the emotional suffering brought on by the situation. Wishful thinking, separation, avoidance, and positive reappraisal are a few emotion-focused coping techniques. There is no one universally recognised approach for older persons to handle stress, and the efficacy of any one coping strategy varies depending on the circumstance. Additionally, most emergencies call for both forms of coping.

When positive action can be taken, problem-focused techniques are often used, but emotion-focused coping is employed when people believe that the situation cannot be changed and must be endured. In general, problem-focused coping techniques are thought to be superior to emotion-focused ones for handling emergencies. People that

employ active coping mechanisms frequently have positive self-perceptions, a proactive attitude toward life's stresses, and a strong sense of independence. Self-blame, avoidance, and even the use of drugs or alcohol fall under the category of emotion-focused coping strategies, which are less effective than active coping methods like looking for social support. Problem-focused coping, however, is not always successful for older persons when a loss is unavoidable. Instead, emotion-focused techniques like a positive re-evaluation of a persistent disease or circumstance are linked to improved mental health.

How to cope with being/feeling 'Off the Clock'.

- First of all, be aware that you are not alone; many individuals also deal with the clock.
- Being "off the clock" is not the same as failing. The phrase "the right or wrong moment" is a myth. It may be the appropriate time for you to fall in love at 70, have your first relationship at 30, or enrol in school as a grandma.
- Try not to compare yourself to others as much. Try concentrating on your own objectives instead.
- Never base judgments on timing. Timing-based decisions frequently turn out to be the right ones in a later stage of life (getting married and having children can result in a divorce or other difficulties).
- Being punctual doesn't guarantee happiness. Many people who work on-time face personal challenges.
- Limit your time spent on social media or take a break.

 Develop your social network. Face-to-face interactions with friends can reduce time-management issues and the probability that one will mistakenly believe that others are happier (Chou and Edge, 2012).

Migration

Some people relocate to join family, pursue educational chances, or find employment or economic opportunities. Others relocate in order to flee hostilities, persecution, terrorism, or human rights abuses. Others relocate in reaction to the unfavourable consequences of environmental variables like natural catastrophes or climate change.

More people than ever before are living outside of their nation of birth nowadays. The IOM World Migration Report 2020 estimates that there were about 272 million migrants worldwide as of June 2019, an increase of 51 million from 2010. Labor migrants made up over two thirds. 3.5% of the world's population was made up of immigrants in 2019. This compared to 2.8 per cent in 2000 and 2.3 per cent in 1980.

While many people travel voluntarily, many more do so because they must. At the end of 2019, 79.5 million people were forcibly displaced globally, according to UNHCR. 26 million of them (including 20.4 million under the UNHCR's mandate and 5.6 million under UNRWA's for Palestine) were refugees. There were 45.7 million internal migrants, 4.2 million asylum seekers, and 3.6 million Venezuelans who had to flee their country.

This is in contrast to 2.8% in 2000 and 2.3% in 1980.

Migrant

The International Organization for Migration (IOM) defines a migrant as any person who is moving or has moved across an international border or within a State away from his or her habitual place of residence, regardless of the following factors: (1) the person's legal status; (2) whether the movement is voluntary or involuntary; (3) what the causes of the movement are; and (4) the length of the stay.

Migration of People from Kerala

According to a NoRKA-Roots programme, students from Kerala have travelled to up to 54 nations, including the Isle of Man, a sovereign British Crown dependency located in the Irish Sea between England and Ireland. The initiative was started in 2020 to create a centralised platform for all students who pursue higher education overseas.

The bulk of students have not yet registered with the organisation, according to NoRKA Roots CEO K. Harikrishnan Namboothiri, therefore the registration numbers simply show a trend. Given that the number of Indian students studying abroad has increased four times over the past 14 years, India is actually the second-largest student exporter in the world behind China. Five lakh Indian students are reportedly studying overseas, and a significant portion of them come from Kerala.

According to our estimation, over 30% of students who choose to pursue higher education currently choose a foreign nation. Since student exodus from the State has many social, emotional, and economic ramifications, including brain drain and reverse remittance, this needs an immediate policy-level response, according to Mr. Namboothiri.

International Migration from Kerala

Kerala is arguably one of the states in the nation with the highest rate of international migration. In fact, Kerala accounts for roughly 19% of the inbound remittances arriving to India, according to the Reserve Bank of India's Inward Remittance Surveys. The biggest recipient of remittances in the world is India, while Kerala is the biggest recipient state inside India. These remittances have been very beneficial to us in smoothing out our spending and have helped our economy flourish in a variety of ways. It is widely acknowledged that non-resident Keralites made a significant contribution to the growth of our state, particularly those who reside in the Middle East.

They provide a significant contribution to a variety of industries, including retail, tourism, health care, and education. Additionally, their international presence has led to an increase in Kerala's exports of both commodities and services. It is accurate to say that our economy has become more globalised as a result of people moving from our state to other parts of the world. There are issues that non-resident Keralites face as well. The world economy's recession, the Gulf region's growing indigenization, and the increase in automation in manufacturing and services are all significant challenges for both the current migrants and the rate of future migration from our state. Despite the significance of this issue, the absence of sufficient high-quality research and actual empirical data hinders our ability to make effective policy decisions about international migration. The lack of sufficient high-quality research and actual empirical data hinders our ability to make effective policy decisions about international migration, notwithstanding the significance of the subject.

Social clock and Migration

Migration and the social clock are strongly related. Kerala's young people frequently leave their home state in order to escape the impacts of the social clock on them. Some people actually fear the social clock and the questioning of society. Through migration, they actually find a solution or relief. Since they are separated from their parents, friends, family, neighbours, and the so-called society, no one can criticise their behaviour or desires. People are free to live as they like. As a result, more and more people are choosing to spend less time at home.

CHAPTER II REVIEW OF LITERATURE

INTRODUCTION

Review literature is an essential part of the study which creates a basic foundation for the research. Various articles, journals and publications have been referred for reviewing the literature for this study. These cover baseic concepts of this research work like social clock theory and its bio-psycho social effects and coping strategies.

Mackay (2015) In order to fully establish what the social clock is this present research project will examine other theories based on aspects of the social clock such as age, life development and time. In the introduction Neugarten and Helson's theories of the social clock were given in order to provide an understanding of the rationale behind this research project. As the introduction explains, Neugarten and Helson's theories believe that a person receives positive or negative phenomena based on the timing in which the event occurs (Weiner, 2003, p.473). The social clock according to Helson is portrayed as a barometer for social acceptance. This idea relates to the definition of the social clock provided by Santrock (2003). In this definition the social clock is referred to as a 'timetable according to which individuals are expected to accomplish life's tasks' (Santrock, 2013, G.8).

Rosenfield and Stark (1987)

The second study this literature review will discuss is Rosenfield and Starks study (1987). This study is reviewed firstly as it helps to illustrate aspects of what this research project aims to do. Rosenfield and Stark's study What's the Right Time? aimed to find the individuals conceptions of the best age to experience or accomplish major life events (Santrock, 2013, p.516). According to Psychology Today (1987) this study was conducted via questionnaire given to participants in the 1950's and again in the 1970's. The result of this study is comparable to the work this research project

aims to carry out. The results of this study will provide evidence as to how the social clock has changed over time. This present research project will be able to add the year 2015 to the table below (see appendix 1) in which shows Rosenfield and Stark's results (Rosenfield and Stark, 1987)

Bernice Neugarten (1976) suggested that human beings use a 'social clock' to define the cultural norms and expected social behaviors throughout the lifespan. Differing from biological clocks that have a neural origin, social clocks are largely determined by the culture in which we live. Neugarten proposed that we internalize our culture's social clock and use it to compare with our peers in order to determine our position in the 'expected life cycle' (Greene, 2003).

Social media can act as a glaring reminder of your position on the social clock. Easy accessibility to social media also increases the likelihood that you will encounter others who: have done more than you, possess more than you, make more money than you, are having a better vacation than you, have already started families before you.

Buxmann and Krasnova (2013) In a recent study, demonstrated that over 33% of Facebook users reported feeling unhappy during their usage and that envying Facebook friends was cited as the major reason for their unhappiness. Another study by Chou and Edge (2012) found that the more hours spent on Facebook is positively correlated with believing that others are happier than you. These comparisons may reinforce the negatives feelings of being 'off the clock.'

According to Levinson and other academics, the fact that Levinson only used male participants for his study shows the times of male patriarchy (Roberts & Newton,

1987). In Roberts and Newton's journal Levinsonian Studies of Women's Adult Development Levinson's theory is used to study adult women's development. This journal explains Levinson's theory and stages in greater detail and suggests that women actually progress through Levinson's stages of development at almost the exact same time as men, compared to by the male participants interviewed in Levinson's original study. The only difference seemingly is that women's 'dreams' are more complex than men's, as women have a wider variety of dreams, in which include future relationships, family, motherhood and attachments as well as a career. This article suggests men and women follow similar patterns in regards to chronological age. This article also give light to the fact that Levinson's theory is unique in that it is not a theory of timing of events but a theory of the timing of tasks. Each task must be completed at each stage, providing a link between Levinson's theory, this research project and to the concept of the social clock.

The Impact of Earlier Parental Support and Developmental Task Progression. Due to this present research project covering significant major life events this literature review has the potential to research several other activities such marriage, divorce, moving out of the family home, having children or retiring etc. The social clock, theories and stages of lifespan development, change and time were discussed in this literature review. The above journal title 'Leaving-Home Patterns in emerging adults' focuses on leaving home, but in regards to this present research project all similar titles would be relevant. Different relevant studies could be named 'marriage patterns in emerging adults' or 'career patterns in Emerging Adults' (Seiffge-Krenke, 2009). The scope for this research project and literature review is extremely extensive. The above study 'Leaving Home Patterns in Emerging Adults' puts a new slant on the concept of the Social Clock. The research covered so far identifies only the individual

in regards to how the social clock is influenced. This journal article identifies others whom could be involved. This study examines levels of parental support for emerging adults leaving-home.

Campbell, Converse, & Rodgers, (1976); Westbrook & Viney, 1983 Present study sought to improve upon previous research in several respects. First, our analyses included controls for a variety of factors that might be confounded either with the event timing variable or with respondents' reports of psychological distress. The specific controls are described in the methods section, but two controls warrant discussion here-age and other life stresses. Age has frequently been found to be related to psychological functioning, with older adults reporting fewer symptoms of psychological distress and greater life satisfaction.

Funch & Marshall, (1984) Present study examined the impact of experiencing on-time or off-time events within 6 months of their occurrence. This time framework has proven useful in other studies of stressful life events and additionally minimizes the problem of biased recall that arises when longer recall periods are used. The literature regarding the kinds of life events to which the social clock hypothesis applies by explicitly distinguishing desirable from undesirable events. In its purest form, the social clock hypothesis applies only to the acquisition of social roles (e.g., spouse, worker, parent, grandparent) and other life transitions that are considered socially desirable; socially prescribed timetables for undesirable life events make little sense.

Levinson's theory (1978) and Erikson's eight psychological stages of development were also discussed. 175 participants took part in a qualitative study via method of questionnaire. The questionnaire related to the past study 'What's the Right

Time? (Rosenfield and Stark, 1987) and contained a satisfaction with life scale. The questionnair allowed the participants data to be compared in order to see if he/she was 'on or off time'. The findings of this study supported the theory of the social clock. This research project aimed to test this theory as well as the theory of the social clock. This study aimed to discover the contemporary age norms and to see if a relationship could be found between satisfaction with life and theory of the social clock. A literature review was carried out in which found various aspects of the social clock, time, trends and aging.

Vaillant's theory (1977) that adult development consists in the increasing effectiveness of ego processes would lead to somewhat similar predictions: From the college years to those of midlife, people learn to rely less on primitive defenses and more on effective, sophisticated defenses. In Haan's language (1977), this would mean a decrease in defending and an increase in coping.

Capps (2014) initially presents Erikson's life cycle model. It is stated that Erikson's thesis was initially introduced in the chapter titled "Eight Ages of Man" in Childhood and Society (1950). Erikson was actually making a literary reference to William Shakespeare's play "As You Like It" Capps argues that the term was not chosen because it predates today's gender inclusive linguistic rules (Capps, 2004, pg.3). In his play, Shakespeare lists seven stages. Erikson and his wife Joan Erikson realised that Shakespeare had omitted the third stage, "Initiative versus Guilt." Erikson initially believed he had outsmarted Shakespeare, but he later realised he was also lacking a stage, so he added the seventh stage, Generativity vs Stagnation, to his theory (Capps, 2004, pg. 3).

Neugarten (1968) has called internalized concepts that regulate progression through the age related events of the adult years the "social clock." This study suggests that major life events such as marriage and migration were well structured by the social and political milieu existing at the turn of the century. Given the dates of birth for the 410 men and 415 women who settled in an area of north central Kansas before 1911, dates of and ages at marriage, dates of and ages at migration to Kansas, years of death (and, therefore, ages at death), and the numbers and sex of children may be predicted with reasonable accuracy. These biographical variables are highly intercorrelated.

CHAPTER III RESEARCH METHODOLOGY

INTRODUCTION

This chapter deals with the methodology part of the research. It discusses various aspects of the research. It deals with the statement of the problems behind the research and points out the significance of the study. The research objectives, both general and specific are mentioned here. The different concepts which are used in the research are defined both theoretically and operationally. The researcher also states the universe of the study, sampling procedure and sample size. The exclusion and inclusion criteria of the sample of the universe is clearly defined the tool used for data collection, data analysis and interpretation, chapterization are mentioned in this chapter. The chapter also mention about the challenges faced by the researcher and the limitations of the study.

The current research is a Comparative study of Bio-Psycho Social Effects and Coping Strategies among young adults based on Social Clock Theory. For that, the researcher used descriptive Quantitative Research and survey method in which questionnaire was used to collect the data. The data was collected from the young adult between the age of 18-32 who is belonging to Kerala, either living inside or outside Kerala. 50 Respondents were Residents and 50n were Non Residents among which 25 are Non Resident Keralites living within India and 25 are NRI, Non Resident Indian and thus creates a total of 100 respondents.

TITLE

The project title is "A Comparative Study on Bio-Psycho Social Effects and Coping Strategies among Young Adults based on the theory of Social Clock"

STATEMENT OF THE PROBLEM

Young adults are facing numerous problems and it is increasing by day-by day. One among the important problems is the one connected with Social Clock Theory. The theory of the social clock explores the time frame within which a culture or social structure expects certain life landmarks to be achieved. This social pressure has been around as long as people have lived in societies. Your grandmother likely felt the need to get married before a certain age or she'd be considered an old maid. These examples illustrate a concept called the social clock, or a timetable determined by a culture or social structure, that specifies a proper time for certain events, like marriage, graduation, employment or social status.

The society often tend to question others especially young adults regarding various life events and create certain stress or pressure in them. These stresses by the society can affect the bio- psycho social well being of an individual terribly. Hence this problem should be addressed and analysed. Also it is very much essential to find out the coping strategies that can be adopted to overcome the problem of social clock.

SIGNIFICANCE OF THE STUDY

Early adulthood especially the age of 18-32 is a very productive age in the life span of an individual. It is the period when they mould their life. So at that age, it is very crucial if they are affected by various stresses and problems put forward by the society and eventually turns them not to function various roles effectively. It deeply affects their bio-psycho social well being. One of the most significant problem the young adults are facing is the problem related to social clock. Society imposes them

to be stressed to follow these societal expectation. So it should be analyzed and studied how these problem of social clock is effecting young adults differently also how they are managing this. Hence, exploring the coping strategies to these problems is very relevant since it is affecting many young adults. This dissertation will further help people to understand the relevance of coping strategies to overcome the problem of social clock.

Also a huge research gap was found in the study since there are only few studies related to Social clock and it effects among young adults. So conducting a research study on the topic will help people to address the issue and solve the problem to a certain extend.

AIM OF THE STUDY

The aim of the study is to understand the bio - psycho social effects and coping strategies among young adults of both Residents and Non Resident Keralites based on the theory of social clock and to find out the solution to address those issues.

GENERAL OBJECTIVES

Comparative study of Bio-Psycho Social Effects and Coping Strategies among young adults based on Social Clock Theory.

SPECEFIC OBJECTIVES

- > To know the difference between age in social clock framework and the desired age among the Residents and Non Residents of Kerala.
- > To understand the biological effects between the Residents and non Residents of Kerala based on Social Clock Theory.

- > To understand the psychological effects between the Residents and Non Residents of Kerala based on Social Clock Theory.
- ➤ To understand the social effects between the Residents and Non Residents of Kerala based on Social Clock Theory.
- ➤ To know about the coping strategies adopted by the Young adults based on social clock theory.

DEFINITION OF CONCEPTS

SOCIAL CLOCK THEORY

THEORETICAL DEFINITION

Bernice Neugarten (1976) suggested that human beings use a 'social clock' to define the cultural norms and expected social behaviors throughout the lifespan. Differing from biological clocks that have a neural origin, social clocks are largely determined by the culture in which we live. Neugarten proposed that we internalize our culture's social clock and use it to compare with our peers in order to determine our position in the 'expected life cycle' (Greene, 2003).

OPERATIONAL DEFINITION

The social clock theory is an idea that explores the timeline of an individual determined by the society that imposes different pressure and creates various biopsycho social effects to the individual regarding the occurrence of the events.

YOUNG ADUTS

THEORETICAL DEFINITION

According to Wiktionary, A person who has achieved sexual maturity but whose character and personality are still developing as they gain experience

OPERATIONAL DEFINITION

Young Adults are anyone who belong to the age group of 18-32 years of age after the period of adolescence.

BIO-PSYCHO SOCIAL EFFECTS

THEORETICAL DEFINITION

The bio-psychosocial approach systematically considers biological, psychological, and social factors and their complex interactions in understanding various problems.

OPERATIONAL DEFINITION

Any problem that is caused by or has an effect on the biological, psychological and social well being of any individual.

COPING STRATEGIES

THEORETICAL DEFINITION

An action, a series of actions, or a thought process used in meeting a stressful or unpleasant situation or in modifying one's reaction to such a situation. Coping strategies typically involve a conscious and direct approach to problems, in contrast to defense mechanisms. (APA Dictionary of Psychology)

OPERATIONAL DEFINITION

Actions or methods used by an individual to cope up or fight or overcome any difficult situation or stress that is affected based on the Social Clock Theory.

RESEARCH DESIGN

The study aims to use a Descriptive Quantitative Research Design for the purpose of analyzing the research problem. Descriptive research method describes the characteristics of the population or phenomenon studied. This method would also help in understanding the populations' opinion or attitude towards a phenomenon. The descriptive research design could modify data to the existing knowledge or create new knowledge.

UNIVERSE

The universe of the study are young adults of Kerala which includes both people who are the Residents and Non Residents of Kerala.

SAMPLING POPULATION

Sampling population comprises of young adults between the age of 18-32 years who are living in and out of Kerala.

SAMPLE

The sample size of the study includes,

➤ A total of 100 Young Adults of Kerala of which 50 are residents of Kerala and 50 are Non Residents of Kerala. In Non Residents, 25 are Non residents living

outside Kerala and within various states India and 25 are who are living outside India living in various countries.

SAMPLING METHOD

The sampling method used in this study is the Non- probability sampling. Under this, Convenient Sampling is selected for the purpose of study in collecting the data from the population of the study.

INCLUSION & EXCLUSION CRITERIA

INCLUSION CRITERIA

- A young adult between the age of 18-32 years.
- A young adult belonging to Kerala which includes Keralities both living in and out of Kerala.

EXCLUSION CRITERIA

- A young adult of Kerala who are below 18 years and above 32 years.
- A young Adult living in Kerala which are not Keralites.

METHOD AND TOOL OF DATA COLLECTION

The researcher used Survey Method to collect the data and Questionnaire was the tool used.

SOURCE OF DATA COLLECTION

The two main sources of data in research are people and paper which are primary and secondary sources of data respectively. The responses given by the participants for the

questions put forward to them through the questionnaire constitutes the major source of data and is called primary source of data. The data collected from other sources like documents, articles etc are called secondary source of data. The researcher used both the primary and secondary source of data.

PRIMARY DATA

Primary data were collected using a Questionnaire via Online in Google Forms among 100 young adults of Kerala between the age of 18-32 years.

SECONDARY DATA

The secondary data were collected from Internet, Articles, Journals and books for getting relevant information of the study. All the above sources are important in gathering information relevant for the study. All of the sources are cited as per format in the bibliography part of the present research study.

PILOT STUDY & PRE- TEST

The Researcher conducted Pilot Study by taking interviews with 6 Young Adults of Kerala between the age of 18-32 in which 2 belongs to Resident Keralities ie, people living inside Kerala and 2 belongs to Non Resident Keralites which includes people living outside Kerala and but within India and 2 belong to Non Resident Indians (NRI). Pretest was conducted by the researcher among the same 6 people and survey method was used to collect the data and questionnaire was used to collect data from them. From the data collected, trainee could analyse and interpret and find out the area for improvement and thus trainee modified the questionnaire for the actual data collection.

DATA ANALYSIS AND INTERPRETATION

Data is analyzed using Statistical Package for the Social Sciences (SPSS) package in which inferential statistics helped to make predictions or interpretations from the data. The collected data are analysed and the results are pictorially represented using piechart, bar diagram and tables.

LIMITATIONS

There were various limitations faced by the researcher. Firstly, the studies or articles related to the topic were very few. Since the lack of research study on the topic, that the researcher could not get much details or previous history and background of the problems related to Social Clock Theory. Secondly, during data collection, the researcher found out that majority of the respondents were unaware about the concept of Social Clock Theory. So it took some time to explain and gave awareness about the topic to the respondents. Lastly, half of the respondents were Keralities living outside Kerala which includes both people living within India and outside India in various countries. So data collection was a difficult task or one of the main limitation that the researcher felt that was due to time variation between the countries.

CHAPERTISATION

Chapter I - Introduction

Chapter II - Review of Literature

Chapter III - Research Methodology

Chapter IV - Analysis and Interpretation

Chapter V - Findings, Suggestions, Implications for Professional Social Work

Practice,

Conclusion

CHAPTER IV ANALYSIS AND INTERPRETATION

INTRODUCTION

The research is about the Comparative Study of Bio-Psycho Social Effects among Young Adults based on the theory of Social Clock. The population comprises of young adults of Kerala between the age of 18-32 years who are living in and out of Kerala and the sample included 50 Residents of Kerala and 25 Non Resident Keralites ie people living outside Kerala but within India and 25 Non Resident Indians, ie, Keralities living outside India in various countries, thus a total of 100 young adults of Kerala. IBM Statistical Package for Social Sciences (SPSS) Statistics software version 25.0 is used for a better understanding of the data collected.

I. SOCIO DEMOGRAPHIC STATUS OF THE RESPONDENTS

The Socio Demographic Data status provides the researcher with basic details of the respondents which includes eight things such as Place of Residence, Age, Gender, Educational Qualification, Working Status, Religion, Marital Status and Socio-Economic Status.

1. RESIDENTIAL STATUS

Table 4.1Residential Status wise Distribution of Respondents

SL No.	Residential Status	Frequency	%
1	Non Resident Keralites	25	25%
2	NRI	25	25%
3	Resident	50	50%
Grand 1	Cotal	100	

The Table 4.1 shows that 50% of the total respondents are young adults who are the residents of Kerala, living inside that makes 50 in number and 25% of the total respondents are Non Resident Keralities who are living outside Kerala but within India and that makes 25 in number. Last 25% of the total respondents are Non Resident Indian(NRI) ie, Keralities living outside India and that makes 25 in number. Since it is a comparative study between the Residents of Kerala and Non Residents, the researcher took equal number of respondents from the Residents of Kerala (50) and Non Resident Keralities (which includes both Non Resident Keralites and NRI), (50) and thus makes a total of 100 respondents.

2. AGE

Table 4.2Age Wise Distribution of Respondents

		Residentia	Residential Status						
SI	Age	Non					%		
Num	Category	Resident				Grand	/0		
		Keralites	%	Resident	%	Total			
1	18-25	37	74%	42	84%	79	79%		
2	26-32	13	26%	8	16%	21	21%		
Grand [*]	Total	50	50 50 100						

The table 4.2 shows of the age of the respondents. Age is very much essential for the study since the research is about the comparative study of the young adults of Kerala living in and out of Kerala based on Social Clock Theory. From the table, it can be understood that, 37% of the total Non Resident Keralities, ie 37 in number belongs to the age category of 18-25 and 13% of the total Non Resident Keralities, ie 13 in number belongs to the age category of 26-32 and thus creates a total of 50 Non Resident Keralities.

Also, 84% of the total Resident Keralities, ie 42 in number belongs to the age category of 18-25 and 16% of the total Resident Keralities, ie 8 in number belongs to the age category of 26-32 and thus creates a total of 50 Resident Keralities.

Therefore it can be understood that 79% of the total respondents that is 79 in number belongs to the age category of 18-25 and 21% of the total respondents, 21 in number belongs to the age category of 26-32.

3. GENDER

Table 4.3Gender Wise Distribution of Respondents

		Residential Status						
SI	Gender	Non					%	
Num		Resident				Grand		
		Keralites	%	Resident	%	Total		
1	Male	31	62%	37	74%	68	68%	
2	Female	19	38%	13	26%	32	32%	
Grand ¹	Total	50		50		100		

The table 4.3 shows of the gender of the respondents. From the table, it can be understood that, 62% of the total Non Resident Keralities, ie 31 in number are Males and 38% of the total Non Resident Keralities, ie 19 in number are Females thus creates a total of 50 Non Resident Keralities. Also, 74% of the total Resident Keralities, ie 37 in number are Males and 26% of the total Resident Keralities, ie 13 in number are Females. and thus creates a total of 50 Resident Keralities.

Therefore it can be understood that 79% of the total respondents that is 79 in number belongs to the age category of 18-25 and 21% of the total respondents, 21 in number belongs to the age category of 26-32.

4. EDUCATIONAL QUALIFICATION

Table 4.4Education Wise Distribution of Respondents

SI		Residential Status					
Num	Qualification	Non Resident				Grand	%
, realin		Keralites	%	Resident	%	Total	
1	HSE	1	2%	3	6%	4	4%
2	Others	2	4%	2	4%	4	4%
3	PG	25	50%	29	58%	54	54%
4	UG	22	44%	16	32%	38	38%
Grand	Total	50		50		100	

The table 4.4 shows of the Education of the respondents. From the table, it can be understood that, 2% of the total Non Resident Keralities, ie 1 in number have HSE level of Education, 4% of the total Non Resident Keralities, ie 2 in number have Other level of Education which can be Diploma or other courses, 50% of the total Non Resident Keralities, ie 25 in number have PG level of Education and 44% of the total Non Resident Keralities, ie 22 in number have UG Level of Education.

Also, 6 % of the total Resident Keralities, ie 3 in number have HSE level of Education, 4% of the total Resident Keralities, ie 2 in number have Other level of Education which can be Diploma or other courses, 58% of the total Non Resident Keralities, ie 29 in number have PG level of Education and 32% of the total Non Resident Keralities, ie 16 in number have UG Level of Education.

Therefore it can be understood that, in general, 4% of the total respondents that is 4 in number have HSE level of Education, 4% of the total Respondents, ie 4 in number have Other level of Education which can be Diploma or other courses, 54% of the total Respondents, ie 54 in number have PG level of Education and 38% of the total Respondents, ie 54 in number have UG Level of Education.

5. OCCUPATION STATUS

 Table 4.5

 Occupation Wise Distribution of Respondents

			Non Resident			
Occupation	Resident	%	Keralites	%	Grand Total	%
Daily Wages	1	2%	0	0%	1	1%
Others	3	6%	3	6%	6	6%
Private	18	36%	18	36%	36	36%
Student	28	56%	29	58%	57	57%
Grand Total	50		50		100	

The table 4.5 shows of the Occupation of the respondents. From the table, it can be understood that, 1% of the total Resident Keralities, ie 1 in number are doing Daily Wages, 6% of the total Resident Keralities, ie 3 in number are doing Other Jobs, 36% of the total Resident Keralities, ie 18 in number are working in Private Sector and 56% of the total Resident Keralities, ie 28 in number are students.

There is no people doing daily wages Jobs among Non Resident Keralities.6 % of the total Resident Keralities, ie 3 in number are doing Other Jobs, 36% of the total Resident Keralities, ie 18 in number are working in Private Sector and 58% of the total Resident Keralities, ie 29 in number are students.

Therefore it can be understood that, in general, 1% of the total Respondents, ie 1 in number are doing Daily Wages, 6% of the total Repondents, ie 6 in number are doing Other Jobs, 36% of the total Resident Keralities, ie 36 in number are working in Private Sector and 57% of the total Resident Keralities, ie 57 in number are students.

6. RELIGION

 Table 4.6

 Religion Wise Distribution of Respondents

		Residential Status					
SI Num	Religion	Non Resident Keralites	%	Resident	%	Grand Total	%
1	Christian	18	36%	24	48%	42	42%
2	Hindu	26	52%	23	46%	49	49%
3	Muslim	4	8%	3	6%	7	7%
4	Others	2	4%	0	0%	2	2%
Grand Total 50		50		50		100	

The table 4.6 shows of the Religion of the respondents. From the table, it can be understood that, 36% of the total Non Resident Keralities, ie 18 in number belongs to Christian Religion, 52% of the total Non Resident Keralities, ie 26 in number belongs to Hindu Religion, 8% of the total Non Resident Keralities, ie 4 in number belongs to Muslim Religion and 4% of the total Non Resident Keralities, ie 2 in number Belongs to Other Religion.

Also, 48 % of the total Resident Keralities, ie 24 in number belongs to Christian Religion, 46% of the total Resident Keralities, ie 23 in number belongs to Hindu Religion, 6% of the total Resident Keralities, ie 6 in number belongs to Muslim Religion and no peole belongs to Other Religion.

Therefore it can be understood that, in general, 42% of the total Respondents, ie 42 in number belongs to Christian Religion, 49% of the total Respondents, ie 49 in number belongs to Hindu Religion, 7% of the total Respondents, ie 7 in number belongs to Muslim Religion and 2% of the total Respondents, ie 2 in number belongs to Other Religion.

7. MARITAL STATUS

Table 4.7Marital Status Wise Distribution of Respondents

		Residential Status							
SI Num	Martial Status	Non Resident					%		
		Keralites	%	Resident	%	Grand Total			
1	Married	10	20%	4	8%	14	14%		
2	Single	40	80%	46	92%	86	86%		
Grand To	tal	50		50		100			

The table 4.7 shows of the Marital Status of the respondents. From the table, it can be understood that, 20% of the total Non Resident Keralities, ie 10 in number are married and 80% of the total Non Resident Keralities, ie 40 in number are Single.

Also, 8 % of the total Resident Keralities, ie 4 in number are Married and, 92% of the total Resident Keralities, ie 46 in number are Single.

Therefore it can be understood that, in general, 14% of the total Respondents, ie 14 in number are Married and 86% of the total Respondents, ie 86 in number are Single.

8. SOCIO ECONOMIC STATUS

 Table 4.8

 Socio Economic Status Wise Distribution of Respondents

	Socio	Residential S					
SI Num	Economic Status	Non Resident Keralites	%	Resident	%	Grand Total	%
1	Lower	2	4%	3	6%	5	5%
2	Middle	43	86%	47	94%	90	90%
3	Upper	5	10%	0	0%	5	5%
Grand To	tal	50		50		100	

The table 4.8 shows of the Socio Economic Status of the respondents. From the table, it can be understood that, 4% of the total Non Resident Keralities, ie 2 in number belongs to Lower Class, 86% of the total Non Resident Keralities, ie 43 in number belongs to Middle Class and 10% of the total Non Resident Keralities, ie 5 in number belongs to Upper Class.

Also, 6 % of the total Resident Keralities, ie 3 in number belongs to Lower Class, 94% of the total Resident Keralities, ie 47 in number belongs to Middle Class and there is no people belongs to Upper Class.

Therefore it can be understood that, in general, 5% of the total Respondents, ie 5 in number belongs to Lower Class, 90% of the total Respondents, ie 90 in number

belongs to Middle Class and 5% of the total Non Resident Keralites, ie 5 in number belongs to Upper Class.

II. WHAT IS THE RIGHT TIME?

Table 4.9

What is the Right Time in Social Clock Framework and Right Time according to your Desire.

What is the right time									
	Residential				Non Residential				
Items	Age in So	cial Clock	Desire	ed Age	Age in So	cial Clock	Desire	ed Age	
	Mean	STD Dev	Mean	STD Dev	Mean	STD Dev	Mean	STD Dev	
What is the best age for a man to marry in?	25.52	2.70	29.84	2.59	25.46	1.84	30.08	2.49	
What is the best age for a woman to marry?	22.34	2.40	28.38	2.16	22.34	2.40	28.38	2.16	
What is the best age to have children?	26.62	3.25	30.56	3.29	25.84	3.13	30.74	2.68	
When should most people become grandparents?	51.36	8.00	58.56	11.32	50.56	6.70	58.16	5.32	
What is the best age for most people to finish school and go to work?	22.02	2.36	24.24	2.27	21.82	2.32	24.48	2.43	
When should most men be settled on a career?	25.52	2.79	28.34	3.00	25.74	2.23	28.86	3.16	
When should most men hold their top jobs?	29.78	4.39	33.44	5.74	29.76	4.12	34.52	5.09	
When should most people be ready to retire?	56.36	5.78	61.9	5.78	55.74	4.65	60.3	7.26	
When does a man have the most responsibilities?	31.38	5.74	36.38	6.33	29.96	4.08	34.9	5.64	
When does a man accomplish the most?	32.92	9.89	40.96	8.75	31.48	5.36	39.06	5.70	
When is the prime of life for a man?	29.62	10.22	35.4	9.53	27.94	4.96	35.36	6.06	
When should a woman be settled on a career?	25.26	3.12	28.4	4.51	25.12	2.65	28.78	3.34	
When is the prime of life for a woman?	25.88	6.14	31.4	5.51	26.08	7.65	32.6	7.59	
When does a woman have the most responsibilities?	27.8	4.20	33.26	5.29	27	5.46	32.34	4.91	
When does a woman accomplish the most?	29.2	5.81	35.94	6.82	28.04	4.16	35.28	6.43	

The table 4.9 shows of the responses to the question What is the Right Time in Social Clock Framework and the Right Time according to your Desire.

By the questions from the Study of Rosefield "What is the Right Time", the researcher asked the respondents what is the right time in Social Clock Framework as well as Right Time according to your Desire. From the 15 questions asked to both

Residents and Non Resident Keralites, researcher found significant difference between the age in Social clock framework as well their desire age in each 15 events for both Residents and Non Residents.

From the table, it can be understood that 15 questions are asked to both Residents and Non Resident Keralites and we could observe that there is significant change between the Social Clock Age and the desired age for both Residents and Non Residents in various events.

For Example: For Residents, according to the response from 50 Resident Keralites, the best age for a man to marry in social clock framework is 25.52 years but their desired age is 29.84 years.

Meanwhile, for Non Residents, according to the response from 50 Non Resident Keralites, the best age for a man to Marry in social clock framework is 25.46 years but their desired age is 30.38 years.

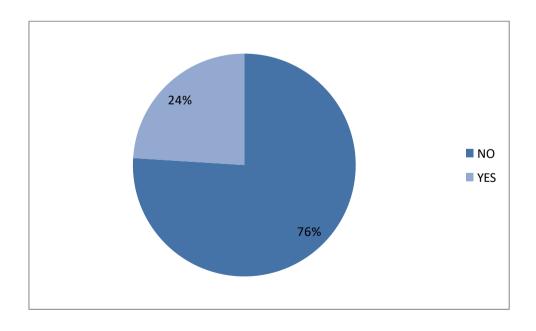
III SOCIAL CLOCK

Table 4.10

Have you heard of or Are you familiar with the theory of Social Clock?

	you heard Social Clock	TOTAL				
	Resident		Non Reside	nt		
	Frequency	%	Frequency	Percent	Frequency	Percent
NO	37	74%	39	78%	76	76%
YES	13	26%	11	22%	24	24%
Total	50	100	100			

FIGURE 4.10



The table 4.10 shows of response of the question of Have you heard of or Are you familiar with the theory of Social Clock. From the table, it can be understood that, 74% of the total Resident Keralities, ie 37 in number said 'NO' which indicates they are not heard or familiar with the theory of Social Clock and 13% of the total Resident Keralities, ie 13 in number said 'YES' which indicates that they are heard or familiar with the theory of Social Clock.

Also, 78% of the total Non Resident Keralities, ie 39 in number said 'NO' which indicates they are not heard or familiar with the theory of Social Clock and 11% of the total Non Resident Keralities, ie 11 in number said 'YES' which indicates that they are heard or familiar with the theory of Social Clock and thus creates a total of 50 Resident Keralities.

From Figure 4.10 and table 4.10 it can be understood that 76% of the total Respondents, ie 76 in number said 'NO' which indicates they are not heard or familiar with the theory of Social Clock and 24% of the total Respondents, ie 24 in number said 'YES' which indicates that they are heard or familiar with the theory of Social Clock and thus creates a total of 100 Respondents.

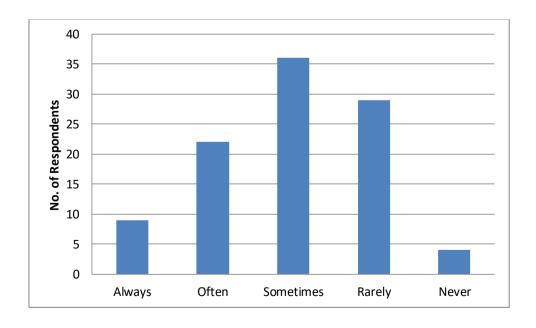
II.SOCIAL CLOCK

Table 4.11

Have you been a victim to Social Clock Theory?

Have yo							
	Resident		Non Reside	ent			
Level	Frequency	%	Frequency	Percent	Frequency	Percent	
Always	4	8.0	5	10.0	9	9%	
Often	14	28.0	8	16.0	22	22%	
Sometimes	17	34.0	19	38.0	36	36%	
Rarely	13	26.0	16	32.0	29	29%	
Never	2	4.0	2	4.0	4	4%	
Total	50	100.0	50	100.0	100.0	100%	

Figure 4.11



The table 4.11 shows the response of the question of Have you been a victim to Social Clock Theory. From the table, it can be understood that, majority,34% of the Residents, that is 17 in number are sometimes have been a victim to social clock Theory and only 4%,2 in number are never been a victim to Social Clock Theory. Also, 38% of the Non Residents, that is 19 in number are sometimes have been a victim to social clock Theory and only 4%,2 in number are never been a victim to Social Clock Theory.

From Figure 4.11 and Table 4.11, it can be understood that 36% of the total Respondents, ie 36 are sometimes have been a victim to social clock Theory and only 4% of the total respondents,2 in number are never been a victim to Social Clock Theory.

II.SOCIAL CLOCK

Table 4.12

Under what Environment/ by whom you have suffered from this (being questioned regarding Social Clock)

Under What Envi	ironment/ by wh	om you hav	e suffered from this? (being questione	d regarding		
Social Clock)							
Residents	Frequency	Percent	Non Residents	Frequency	Percent		
Parents	30	60%	Parents	28	56%		
Neighbours	27	54%	Neighbours	30	60%		
Relatives	37	74%	Relatives	31	62%		
Friends	25	50%	Friends	27	54%		

The table 4.12 shows the response of the question Under what Environment/ by whom you have suffered from this (being questioned regarding Social Clock). From the table, it can be understood that, a majority of ,74% of the Residents, that is 37 in number out of 50, are suffering from the questioning of Relatives in respect with social clock. 60% of the Residents, that is 30 in number out of 50, are suffering from the questioning of parents in respect with social clock, and 54% of the total Resident Keralities, ie 27 in number out of 50 are suffering from the questioning of parents in respect with social clock, and a minority of 50%, ie 25 in number out of 50 are suffering from the questioning of friends in respect with social clock framework.

Also, a majority of 62% of the total Non Resident Keralities, ie 31 in number out of 50 are suffering from the questioning of Relatives in respect with social clock and 60% of the Residents, that is 30 in number out of 50, are suffering from the questioning of neighbours in respect with social clock and of 56% of the total non Resident Keralities, ie 27 in number out of 50 are suffering from the questioning of parents in respect with social clock, and a minority of 54%, ie 27 in number out of 50 are suffering from the questioning of friends in respect with social clock framework.

Therefore it can be understood that both Residents and Non Residents suffer from the questioning of parents, relatives, neighbours are friends almost similarly. But Residents are affected more if we check in detail.

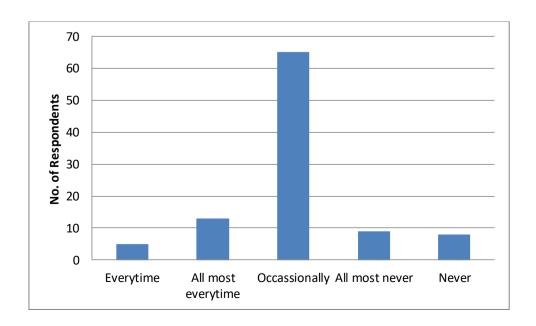
II.SOCIAL CLOCK

Table 4.13

Does this Experience affect you?

Does this e	Total					
	Resident		Non Reside	ent		
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Everytime	3	6.0	2	4.0	5	5%
All most everytime	9	18.0	4	8.0	13	13%
Occassionally	30	60.0	35	70.0	65	65%
All most never	3	6.0	6	12.0	9	9%
Never	5	10.0	3 6.0 8			8%
Total	50	100.0	50	100.0	100.0	100%

Figure 4.13



Bharata Mata College, Thrikkakara

The table 4.13 shows the response of the question of Does this Experience affect you? From the table, it can be understood that, majority,60% of the Residents, that is 30 in number are affected occassionally with the experience of Social Clock and only 10%,5 in number are not affected by the experience of Social Clock. But a minority of 6% are affected almost everytime and similar 6% are all most never affected.

Also, 70% of the Non Residents, that is 35 in number are affected occasionally with the experience of Social Clock and only 6%,3 in number are not affected by the experience of Social Clock. But a minority of 4% are affected almost everytime.

Therefore from figure 4.13, it can be understood that 65% of the total Respondents, are affected occasionally with the theory of Social Clock and 8% are not affected by the experience of Social Clock. But a minority of 5% are affected almost everytime.

II.SOCIAL CLOCK

Table 4.14

How does Social Clock Affect You?

How Does Social Clock Affect you							
	Non Resider	nt	Resident				
	Frequency	%	Frequency	Percent			
Socially	16	32%	19	38%			
Psychologically	16	32%	19	38%			
Biologically	7	14%	15	30%			

The table 4.14 shows of response of the question How does Social Clock Affect You? From the table, it can be understood that, 32% of the total Non Resident Keralities, ie 16 in number out of 50 are Socially Affected. and similar proportion of 32% of the total Non Resident Keralities, ie 16 in number out of 50 are Psychologically affected. Next, 14% of the total Non Resident Keralities, ie 7 in number out of 50 are Biologically affected.

Also, 38% of the total Resident Keralities, ie 19 in number out of 50 are Socially Affected. and similar proportion of 38% of the total Resident Keralities, ie 19 in number out of 50 are Psychologically affected. Next, 30% of the total Resident Keralities, ie 15 in number out of 50 are Biologically affected.

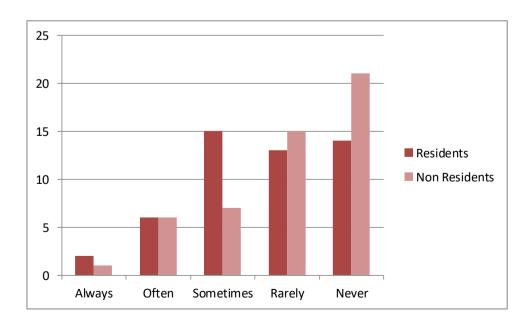
Therefore it can be understood that Residents are more affected biologically, psychologically and socially compared to Non Resident Keralites.

Table 4.15

Do you feel some kind of dizziness or weakness while hearing/thinking about Social Clock.

Do you weakness clock?	Total					
	Resident		Non Reside	ent		
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Always	2	4.0	1	2.0	3	3%
Often	6	12.0	6	12.0	12	12%
Sometimes	15	30.0	7	14.0	22	22%
Rarely	13	26.0	15	30.0	28	28%
Never	14	35	35%			
Total	50	100.0	50	100.0	100.0	100%

Figure 4.15



The table 4.15 and Figure 4.15 shows the response of the question of Do you feel some kind of dizziness or weakness while hearing/ thinking about Social Clock. From the table, it can be understood that, majority,30% of the Residents, that is 15 in number are sometimes having feeling of some kind of dizziness or weakness while hearing/ thinking about Social Clock and similar proportion of 28% ,14 in number are sometimes having some kind of dizziness or weakness while hearing/ thinking about Social Clock. But a minority of 2% always have this feeling.

Also, a majority of 42% of the Non Residents, that is 21 in number are not having the feeling of dizziness while hearing/ thinking about social clock and only a minority of 2%, 1 in number are always having this feeling.

Therefore it can be understood that a majority of 35% of the total Respondents, are never having the feeling having feeling of some kind of dizziness or weakness while hearing/ thinking about Social Clock. Only a minority of 3% always have this feeling.

Table 4.16

Do you feel head ache while hearing about Social Clock?

Do you f	Total					
	Resident		Non Reside	ent		
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Always	2	4.0	2	4.0	4	4%
Often	7	14.0	4	8.0	11	11%
Sometimes	19	38.0	12	24.0	31	31%
Rarely	13	26.0	13	26.0	26	26%
Never	9 18.0 19 38.0				28	28%
Total	50	100.0	50	100.0	100.0	100%

The table 4.16 shows the response of the question of Do you feel head ache while hearing about Social Clock. From the table, it can be understood that, majority,38% of the Residents, are sometimes feeling headache while hearing about Social Clock and 18% are not feeling headache while hearing. But a minority of 4% always have this feeling.

Also, a majority of 38% of the Non Residents, are not having headache while hearing about social clock and only 4% are always having the feeling of headache.

Therefore it can be understood that a majority of 31% of the total Respondents, are sometimes having the feeling of headache while hearing about social clock and only 4% are not having headache while hearing about social clock.

Table 4.17

Do you feel like having panic attacks while thinking about Social Clock?

Do you t	Total							
	Resident		Non Reside	ent				
Level	Frequency	%	Frequency	Percent	Frequency	Percent		
Always	2	4.0	0	0.0	2	2%		
Often	5	10.0	2	4.0	7	7%		
Sometimes	8	16.0	8	16.0	16	16%		
Rarely	16	32.0	9	18.0	25	25%		
Never	19	38.0	31	62.0	.0 50 50%			
Total	50	100.0	50	100.0	100.0	100%		

The table 4.17 shows the response of the question of Do you feel like having panic attacks while thinking about Social Clock. From the table, it can be understood that, majority,38% of the Residents, are never having panic attacks while thinking about social clock but similar proportion of 32% are having this feeling. But a minority of 4% are always having this feeling.

Also, a majority of 62% of the Non Residents, are not having panic attacks while thinking about Social Clock and a minority of 4% are often having this feeling. But the most important thing is to be noticed that nobody is always having this feeling.

Therefore it can be understood that a majority of 50% of the total Respondents, are never having the feeling of panic attacks while thinking about social clock but 25% are rarely having this feeling and a minority of 2% are always having this feeling.

Table 4.18

Do you loss/ gain body weight when having stress related to social clock?

Do you le	Total						
	Resident		Non Reside	ent			
Level	Frequency	%	Frequency	Percent	Frequency	Percent	
Always	2	4.0	0	0.0	2	2%	
Often	7	14.0	3	6.0	10	10%	
Sometimes	19	38.0	11	22.0	30	30%	
Rarely	13	26.0	13	26.0	26	26%	
Never	9	18.0	23	46.0	32	32%	
Total	50	100.0	50	100.0	100%		

The table 4.18 shows the response of the question Do you loss/ gain body weight when having stress related to social clock. From the table, it can be understood that, majority,38% of the Residents, sometimes loss/ gain body weight when having stress related to Social Clock and 18% never loss / gain body weight. But a minority of 4%, always loss/ gain body weight.

Also, a majority of 46% of the Non Residents, do not loss/ gain weight while having stress related to social clock and a minority of 6% are often loss/ gain body weight.

But the most important thing is to be noticed that nobody is always loss/ gain weight.

Therefore it can be understood that a majority of 32% of the total Respondents, never loss/ gain body weight while having stress related to social clock but a similar proportion of 30% sometimes loss/ gain body weight. Only a minority of 2% always loss/ gain body weight while having stress related to social clock.

V.PSYCHOLOGICAL EFFECTS

Table 4.19

Do you spend most of the time thinking how to accomplish social clock?

Do you s to accom	Total					
	Resident		Non Reside	ent		
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Always	2	4.0	0	0.0	2	2%
Often	7	14.0	7	14.0	14	14%
Sometimes	19	38.0	10	20.0	29	29%
Rarely	13	26.0	17	34.0	30	30%
Never	9	18.0	25	25%		
Total	50	100.0	50	100.0	100.0	100%

The table 4.19, shows the response of the question Do you spend most of the time thinking how to accomplish social clock. From the table, it can be understood that, majority,38% of the Residents, sometimes spend most of the time thinking how to accomplish social clock and 18% never spend time on this. But a minority of 4%, always spend time on thinking how to accomplish social clock.

Also, a majority of 34% of the Non Residents, rarely spend time thinking about how to accomplish social clock and a similar proportion of 32% never spend time. But a minority of 14% often spend time on this.

Therefore it can be understood that a majority of 30% of the total Respondents, rarely spend most of the time thinking how to accomplish social clock and similar proportion of 25% never think on this. Only a minority of 2% always spend most of their time on how to accomplish Social clock.

V.PSYCHOLOGICAL EFFECTS

Table 4.20

Do you feel irritated while thinking about social clock?

Do you fe	Total					
	Resident		Non Reside	ent		
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Always	12	24.0	10	20.0	22	22%
Often	9	18.0	13	26.0	22	22%
Sometimes	17	34.0	11	22.0	28	28%
Rarely	8	16.0	7	14.0	15	15%
Never	4 8.0 9 18.0				13	13%
Total	50	100.0	50	100.0	100.0	100%

The table 4.20 shows the response of the question Do you feel irritated while thinking about social clock. From the table, it can be understood that, majority,34% of the Residents, sometimes feel irritated while hearing about social clock. But a minority of 8%, never feel irritated while hearing about social clock.

Also, a majority of 26% of the Non Residents, often feel irritated while hearing about social clock and a minority of 14% rarely feels irritated while hearing. But a similar proportion of 18% never feel irritated while hearing on this.

Therefore it can be understood that a majority of 28% of the total Respondents, sometimes feels irritated while hearing about social clock and a minority of 13% never feel irritated while hearing about Social Clock.

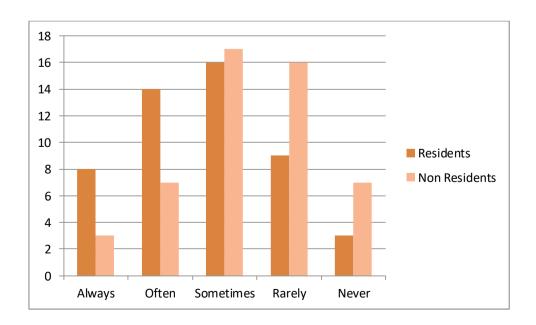
IV. PSYCHOLOGICAL EFFECTS

Table 4.21

Does this create any Stress on you?

Does it cr	eate any s	Total					
	Resident		Non Reside	ent			
Level	Frequency	%	Frequency	Percent	Frequency	Percent	
Always	8	16.0	3	6.0	11	11%	
Often	14	28.0	7	14.0	21	21%	
Sometimes	16	32.0	17	34.0	33	33%	
Rarely	9	18.0	16	32.0	25	25%	
Never	3	6.0	7	14.0	10 10%		
Total	50	100.0	50	100.0	100.0	100%	

Figure 4.21



The table 4.21 shows the response of the question Does this create any Stress on you. From the table, it can be understood that, majority,32% of the Residents, sometimes creates stress on them by social clock. But a minority of 6%, never have stress on them by social clock.

Also, a majority of 34% of the Non Residents, sometimes creates stress on them by social clock and a minority of 6% always creates stress on them by social clock. But 14% doesnot creates any stress on them by social clock.

Therefore it can be understood that a majority of 33% of the total Respondents, sometimes creates stress on them by social clock and a minority of 10% never creates stress on them . But a similar proportion of 11% always creates stress on them by social clock.

V.PSYCHOLOGICAL EFFECTS

Table 4.22

Do you feel anxiety about how to meet with social clock while being questioned by others?

Do you f	eel anxiet ck while b	Total				
	Resident		Non Reside	ent		
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Always	4	8.0	4	8.0	8	8%
Often	13	26.0	4	8.0	17	17%
Sometimes	18	36.0	13	26.0	31	31%
Rarely	9	18.0	12	24.0	21	21%
Never	6	12.0	17	34.0	23	23%
Total	50	100.0	50	100.0	100.0	100%

The table 4.22 shows the response of the question Do you feel anxiety about how to meet with social clock while being questioned by others? From the table, it can be understood that, majority,36% of the Residents, sometimes feel anxiety about how to meet with social clock while being questioned by others and 12% never feel anxiety about how to meet with social clock while being questioned by others. But a minority of 8%, always spend feels anxiety.

Also, a majority of 26% of the Non Residents, sometimes feel anxiety about how to meet with social clock while being questioned by others and 34% never feel anxiety about how to meet with social clock while being questioned by others. But a minority of 8%, always spend feels anxiety. Also same proportion of 8% always feel anxiety.

Therefore it can be understood that a majority of 31% of the total Respondents, sometimes feel anxiety about how to meet with social clock while being questioned by others and 23% never feel anxiety about how to meet with social clock while being questioned by others. But a minority of 8%, always spend feels anxiety.

V. PSYCHOLOGICAL EFFECTS

Table 4.23

Do you feel pressure to have accomplish goals in respect with social clock?

Do you f goals in re	Total					
	Resident		Non Reside	ent		
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Always	8	16.0	3	6.0	11	11%
Often	11	22.0	8	16.0	19	19%
Sometimes	16	32.0	14	28.0	30	30%
Rarely	11	22.0	18	36.0	29	29%
Never	4	8.0	11	11%		
Total	50	100.0	50	100.0	100.0	100%

The table 4.23 shows the response of the question Do you feel pressure to have accomplish goals in respect with social clock. From the table, it can be understood that, majority,32% of the Residents, sometimes feel pressure. But a minority of 8%, never feels pressure to have accomplish goals in respect with social clock

Also, a majority of 36% of the Non Residents, rarely pressure to have accomplish goals in respect with social clock and 14% never feel pressure. But a minority of 6%, always pressure to have accomplish goals in respect with social clock.

Therefore it can be understood that a majority of 30% of the total Respondents, sometimes feel pressure to have accomplish goals in respect with social clock. But a minority of 11% never feel pressure and a similar proportion of 11% always feels pressure to have accomplish goals in respect with social clock.

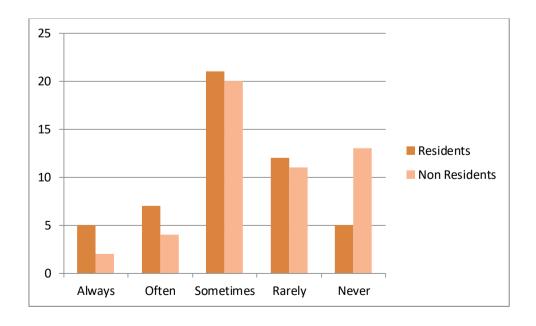
V.PSYCHOLOGICAL EFFECTS

Table 4.24

Do you feel sadness, depression or tend to be in low mood If you are not able to accord with the social clock?

Do you feel sadness, depression or tend to be in low mood if iam not able to accord with the social clock?					Total	
	Resident		Non Reside	ent		
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Always	5	10.0	2	4.0	7	7%
Often	7	14.0	4	8.0	11	11%
Sometimes	21	42.0	20	40.0	41	41%
Rarely	12	24.0	11	22.0	23	23%
Never	5	10.0	13	26.0	18	18%
Total	50	100.0	50	100.0	100.0	100%

Figure 4.24



The table 4.24 and Figure 4.24 shows the response of the question Do you feel sadness, depression or tend to be in low mood If you are not able to accord with the social clock? From the table, it can be understood that, a majority of ,42% of the Residents, sometimes feel sadness, depression or tend to be in low mood if they are not able to accord with the social clock. But a minority of 10%, never feel sadness or depression or in low state. Similar proportion of 10%, always feels sadness, depression or low mood.

Also, a majority of 40% of the Non Residents, sometimes feel sadness, depression or tend to be in low mood if they are not able to accord with the social clock. Only a minority of 4%, always feel sadness or depression or in low state. But a minority of 10%, always feels sadness, depression or low mood.

Therefore it can be understood that a majority of 41% of the total Respondents, sometimes feel sadness, depression or tend to be in low mood if they are not able to accord with the social clock. Only a minority of 7%, always feel sadness or depression or in low state. But 18% never feels sadness, depression or low mood if they are not able to accord with social clock.

VI. SOCIAL EFFECTS

Table 4.25

Do you avoid social gatherings so you could skip such questioning by others?

Do you avoid social gatherings so you could skip such questioning by others? Resident Non Resident					Total	
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Always	6	12.0	4	8.0	10	10%
Often	12	24.0	3	6.0	15	15%
Sometimes	18	36.0	16	32.0	34	34%
Rarely	6	12.0	17	34.0	23	23%
Never	8	16.0	10	20.0	18	18%
Total	50	100.0	50	100.0	100.0	100%

The table 4.25 shows the response of the question Do you avoid social gatherings so you could skip such questioning by others? From the table, it can be understood that, a majority of ,36% of the Residents, sometimes avoid social gatherings so they could skip such questioning by others. Only a minority of 12%, always avoid social gatherings. But 16% never avoid social gatherings to skip questioning by othes related to social clock.

Also, a majority of 34 % of the Non Residents, rarely avoid social gatherings so they could skip such questioning by others and only a minority 8%, always avoid social

gatherings. But 20% never avoid social gatherings to skip questioning by othes related to social clock.

Therefore it can be understood that a majority of 34% of the total Respondents, sometimes avoid social gatherings so they could skip such questioning by others. Only a minority of 10%, always avoid social gatherings. But 18% never avoid social gatherings to skip questioning by othes related to social clock.

VI.SOCIAL EFFECTS

Table 4.26

Do you feel better to be alone and to spend time with yourself, without much socialisation?

Do you	feel bette	r to be a	lone and t	o spend		
time	with yo	ourself,	without	much	Total	
socialisa	ation?				TOTAL	
	Resident		Non Reside	ent		
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Strongly Agree	5	10.0	5	10.0	10	10%
Agree	17	34.0	19	38.0	36	36%
Neutral	20	40.0	12	24.0	32	32%
Disagree	6	12.0	8	16.0	14	14%
Strongly Disagree	2	4.0	6	12.0	8	8%
Total	50	100.0	50	100.0	100.0	100%

The table 4.26 shows the response of the question Do you feel better to be alone and to spend time with yourself, without much socialisation. From the table, it can be understood that, a majority of,40% of the Residents, are neutral saying that they feel better to be alone and to spend time with themselves without much socialisation. But a similar proportion of 34% agrees to be alone and to spend time with themselves. Only a minority of 4% strongly disagree to be alone and to spend time with themselves in respect with social clock.

Also, a majority of 38 % of the Non Residents, agrees to be alone and to spend time with themselves without much socialisations and a minority of 10% strongly agress to this. But 12% strongly disagree to be alone and to spend time with themselves in respect with social clock.

Therefore it can be understood that a majority of 36% of the total Respondents, agrees to be alone and to spend time with themselves without much socialisations. But a minority of 12% strongly disagree to be alone and to spend time with themselves in respect with social clock.

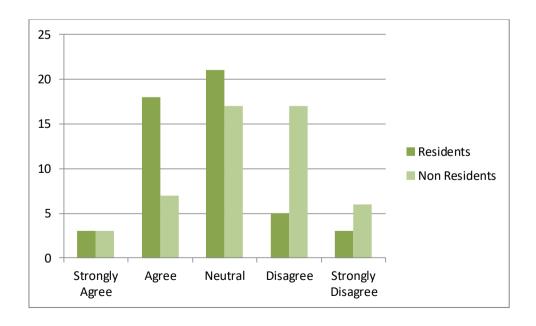
VI.SOCIAL EFFECTS

Table 4.27

Do you lost interest in social connections regarding social clock?

	lost inte	Total				
	Resident		Non Reside	Non Resident		
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Strongly Agree	3	6.0	3	6.0	6	6%
Agree	18	36.0	7	14.0	25	25%
Neutral	21	42.0	17	34.0	38	38%
Disagree	5	10.0	17	34.0	22	22%
Strongly Disagree	3	6.0	6	12.0	9	9%
Total	50	100.0	50	100.0	100.0	100%

Figure 4.27



The table 4.27 and Figure 4.27 shows the response of the question Do you lost interest in social connections regarding social clock. From the table, it can be understood that, a majority of,42% of the Residents, are neutral saying that they lost interest in social connections regarding social clock and a similar proportion of 36% agrees that they lost interest in social connections regarding social clock. But a minority of 6% strongly disagree to be losing interest in social connection. A similar proportion of 6% strongly agrees that they lost interest in social connections regarding social clock.

Also, a majority of 34 % of the Non Residents, are neutral saying that they lost interest in social connections regarding social clock and a same proportion of 34% disagrees that they lost interest in social connections regarding social clock. But a minority of 6% strongly agree to be losing interest in social connection regarding social clock.

Therefore it can be understood that a majority of 38% of the total Respondents, are neutral saying that they lost interest in social connections regarding social clock and 25% agrees that they lost interest in social connections regarding social clock. But a minority of 9% strongly disagree to be losing interest in social connection regarding social clock.

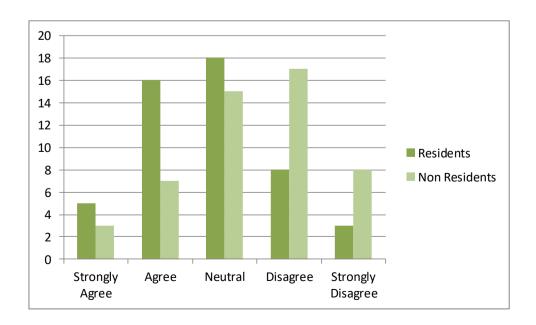
VI.SOCIAL EFFECTS

Table 4.28

Does it affect your confidence level?

Does it affects your confidence level?					Total	
	Resident		Non Resident			
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Strongly Agree	5	10.0	3	6.0	8	8%
Agree	16	32.0	7	14.0	23	23%
Neutral	18	36.0	15	30.0	33	33%
Disagree	8	16.0	17	34.0	25	25%
Strongly Disagree	3	6.0	8	16.0	11	11%
Total	50	100.0	50	100.0	100.0	100%

Figure 4.28



The table 4.28 shows the response of the question Does it affect your confidence level?

From the table, it can be understood that, a majority of,36% of the Residents, are neutral saying that their confidence level is affected neutrally by social clock and a similar proportion of 32% agrees that social clock affect their confidence level. But a minority of 6% strongly disagree that social clock doesnot affect their confidence level.

Also, a majority of 34 % of the Non Residents, are disagrees saying that social clock doesnot affect their confidence level. A similar proportion of 30% are neutral saying that their confidence level is affected neutrally by social clock But a minority of 6% strongly agrees saying that their confidence level is deeply affected by social clock.

Therefore it can be understood that a majority of 33% of the total Respondents, are neutral saying that their confidence level is affected neutrally by social clock and 23% agrees with the statement of social clock affect their confidence level. But a minority of 8% strongly agrees that social clock strongly affect their confidence level.

VI.SOCIAL EFFECTS

Table 4.29

Do you feel to ignore somebody or not to talk to them anymore when they compare your success/performance level with others of same age?

to them		Total					
Level	Resident Frequency	%	Non Reside	Percent	Frequency Percent		
Strongly Agree	9	18.0	15	30.0	24	24%	
Agree	17	34.0	9	18.0	26	26%	
Neutral	16	32.0	15	30.0	31	31%	
Disagree	7	14.0	5	10.0	12	12%	
Strongly Disagree	1	2.0	6	12.0	7	7%	
Total	50	100.0	50	100.0	100.0	100%	

The table 4.29 shows the response of the question Do you feel to ignore somebody or not to talk to them anymore when they compare your success/ performance level with others of same age? From the table, it can be understood that, a majority of 34% of the Residents, agrees that they feel to ignore somebody or not to talk to them anymore when they compare your success/ performance level with others of same age. But a minority of 2 % strongly disagree with they ignore somebody in respect with social clock.

Also, a majority of 30 % of the Non Residents, strongly agrees that they feel to ignore somebody or not to talk to them anymore when they compare your success/ performance level with others of same age. But a same proportion of 30% are neutral to the statement of they feel to ignore someone in respect with social clock. But a minority of 12 % strongly disagree with the feeling to ignore somebody in respect with social clock.

Therefore it can be understood that a majority of 31% of the total Respondents, are neutral saying that they feel neutral to ignore somebody or not to talk to them anymore when they compare your success/ performance level with others of same age and 26% strongly agrees to ignore somebody in respect with social clock, But a minority of 7% strongly disagree with the feeling to ignore somebody in respect with social clock.

VII. COPING STRATEGIES

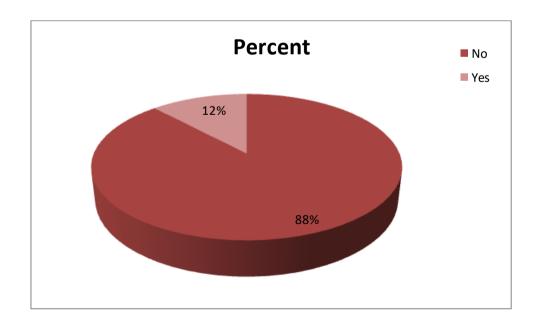
Table 4.30

Are you Following Social Clock Blindly (being a victim) without having any coping strategies?

Are you following social clock blindly (being a victim) without having any coping strategies?								
	Resident		Non Resident Total					
	Frequency	%	Frequency Percent Frequency			Percent		
No	41	84%	47	94%	88	88%		
Yes	9	18%	3	6%	12	12%		
Total	50	100%	50	100%	100	100%		

Figure 4.30

Percent Wise Distribution of people following Social Clock.



The table 4.30 shows of response of the question Are you Following Social Clock Blindly (being a victim) without having any coping strategies. From the table, it can be understood that, 84% of the total Resident Keralities, ie 41 in number said 'NO' which indicates they are not following social clock blindly without any coping strategies and 13% of the total Resident Keralities, ie 9 in number said 'YES' which indicates that they are following social clock blindly, being a victim, without any coping strategies.

Also, 94% of the total Non Resident Keralities, ie 47 in number said 'NO' which indicates they are they are not following social clock blindly without any coping strategies and 6% of the total Non Resident Keralities, ie 3 in number said 'YES' which indicates that they are following social clock blindly, being a victim, without any coping strategies.

From Figure 4.31 and Table 4.31, it can be understood that 88% of the total Respondents, ie 88 in number said 'NO' which indicates they are they are not following social clock blindly without any coping strategies and 12% of the Respondents, ie 12 in number said 'YES' which indicates that they are following social clock blindly, being a victim, without any coping strategies and thus creates a total of 100 Respondents.

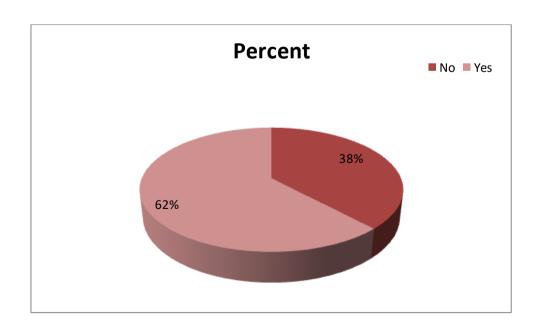
VII.COPING STRATEGIES

Table 4.31

Do you practice any coping strategies to overcome or manage social clock?

Do you practice any coping strategies to overcome or manage social clock?								
	Resident		nt	Total				
	Frequency	%	Frequency	Percent	Frequency	Percent		
No	18	36%	20	40%	38	38%		
Yes	32	64%	30	60%	62	62%		
Total	50	100%	50	100%	100	100%		

Figure 4.31



The table 4.31 shows of response of the question Do you practice any coping strategies to overcome or manage social clock. From the table, it can be understood that, 36% of the total Resident Keralities, ie 18 in number said 'NO' which indicates they do not practice any coping strategies to overcome or manage social clock. Meanwhile, 64 % of the total Resident Keralities, ie 32 in number said 'YES' which indicates that they practice coping strategies to overcome or manage social clock.

Also, 40% of the total Non Resident Keralities, ie 20 in number said 'NO' which indicates they do not practice any coping strategies to overcome or manage social clock. Meanwhile, 60 % of the total Non Resident Keralities, ie 30 in number said 'YES' which indicates that they practice coping strategies to overcome or manage social clock.

From Figure 4.31 and Table 4.31, it can be understood that 38% of the total Respondents, ie 38 in number said 'NO' which indicates they do not practice any coping strategies to overcome or manage social clock. Meanwhile, 62 % of the total Respondents, ie 62 in number said 'YES' which indicates that they practice coping strategies to overcome or manage social clock.

VII.COPING STRATEGIES

Table 4.32What are the Coping Strategies you follow?

What are the Coping Strategies you	follow?				
Residents	Frequency	%	Non Residents	Frequency	%
Avoiding Social Gatherings	27	54%	Avoiding Social Gatherings	19	38%
Spending Time Alone	22	44%	Spending Time Alone	20	40%
Ignoring Social Clock Concept	20	40%	Ignoring Social Clock Concept	28	56%
Fight with those who are saying			Fight with those who are saying		
about Social Clock	25	50%	about Social Clock	19	38%
Demotivating others for following			Demotivating others for following		
Social Clock	20	40%	Social Clock	16	32%
Focusing on our desire time to			Focusing on our desire time to		
accomplish the goals	32	64%	accomplish the goals	30	60%
Migration	5	10%	Migration	15	30%

The table 4.32 shows the response of the question What are the Coping Strategies you follow.

From the table, it can be understood that, a majority of ,64% of the Residents, that is 32 in number out of 50, focus on their desired time to accomplish the goal as their coping strategy and a minority of 10% of the Residents, ie 5 in number do migration as their coping strategy of social clock.

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Also, a majority of 60% of the total Non Resident Keralities, ie 30 in number out of 50 are Focusing on their desired goal to accomplish the goal as their coping strategy and a minority of 30% follow migration as their coping strategy.

Therefore it can be understood that both Residents and Non Residents suffer from the questioning of parents, relatives, neighbours are friends almost similarly. But Residents are affected more if we check in detail.

Also the sever other coping strategies that the respondents follows are:

- a. Avoiding social gatherings
- b. Spending time alone
- c. Ignoring social clock concept
- d. Fight with those who are saying about social clock
- e. Demotivating others for following social clock
- f. Focusing on our desire time to accomplish the goals.
- g. Migration

Through following these coping strategies we reduce the effects of social clock and can overcome the issue.

VII.COPING STRATEGIES

Table 4.33Does Social Clock a reason to migrate from your home town?

Does So	ocial clock					
your ho	me town?	Total				
	Resident		Non Resident			
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Strongly Agree	8	16.0	17	34.0	25	25%
Agree	7	14.0	8	16.0	15	15%
Neutral	12	24.0	11	22.0	23	23%
Disagree	16	32.0	6	12.0	22	22%
Strongly Disagree	7	14.0	8	16.0	15	15%
Total	50	100.0	50	100.0	100.0	100%

The table 4.33 shows the response of the question Does Social Clock a reason to migrate from your home town. From the table, it can be understood that, a majority of 32% of the Residents, disagrees with the statement of Social Clock a reason to migrate from your home tow. But a minority of 14% strongly disagree with this and same proportion of 14% agrees that social clock is a reason to migrate from their home town.

Also, a majority of 34 % of the Non Residents, strongly agrees with the statement of social clock is a reason to migrate people from their home town. But a minority of

12% disagrees to the statement saying that social clock is not a reason to migrate from their home town.

Therefore it can be understood that a majority of 25% of the total Respondents, strongly agrees to the statement of social clock is a reason to migrate from their home town. But a minority of 15% agree to this and same proportion of 15% strongly disagree saying that social clock is not a reason to migrate from their home town.

VII.COPING STRATEGIES

Table 4.34

Does Migration will reduce its effects on people?

Does M people?	ligration \	Total				
	Resident Non Resident			ent		
Level	Frequency	%	Frequency	Percent	Frequency	Percent
Strongly Agree	3	6.0	9	18.0	12	12%
Agree	5	10.0	19	38.0	24	24%
Neutral	24	48.0	12	24.0	36	36%
Disagree	9	18.0	4	8.0	13	13%
Strongly Disagree	9	18.0	6	12.0	15	15%
Total	50	100.0	50	100.0	100.0	100%

The table 4.34 shows the response of the question Does Migration will reduce its effects on people. From the table, it can be understood that, a majority of 48% of the Residents, are neutral with the statement of Migration will reduce effects of Social Clock on people. But a minority of 10 % agrees with this the statement of Migration will reduce its effects on people.

Also, a majority of 38 % of the Non Residents, agrees with the statement of statement of Migration will reduce effects of Social Clock on people. But a minority of 8 % disagrees with this the statement saying that Migration will not reduce its effects on people.

Therefore it can be understood that a majority of 36% of the total Respondents, are neutral with the statement of Migration will reduce effects of Social Clock on people.

But a minority of 12 % strongly agrees with this the statement of Migration will reduce its effects on people.

IV. COPING STRATEGIES

Table 4.35

Do you ever practice questioning others in respect with social clock?

Do you ever practice questioning others in respect with social clock?							
	Resident		Non Resident		Total		
	Frequency	%	Frequency	Percent	Frequency	Percent	
No	36	72%	41	82%	77	77%	
Yes	14	28%	9	18%	23	23%	
Total	50	100%	50	100%	100	100%	

The table 4.33 shows of response of the question Do you ever practice questioning others in respect with social clock. From the table, it can be understood that, 72% of the total Resident Keralities, ie 36 in number said 'NO' which indicates they do not practice questioning others in respect with social clock. Meanwhile, 28 % of the total Resident Keralities, ie 14 in number said 'YES' which indicates that they practice questioning others in respect with social clock

Also, 82% of the total Non Resident Keralities, ie 41 in number said 'NO' which indicates they do not practice questioning others in respect with social clock. Meanwhile, 18 % of the total Non Resident Keralities, ie 9 in number said 'YES' which indicates that they practice questioning others in respect with social clock

Therefore it can be understood that 77% of the total Respondents, ie 77 in number said 'NO' which indicates they do not practice questioning others in respect with social clock. Meanwhile, 23 % of the total Non Resident Keralities, ie 23 in number said 'YES' which indicates that they practice questioning others in respect with social clock.

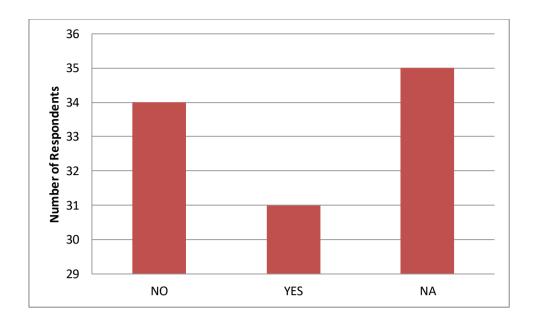
VII.COPING STRATEGIES

Table 4.36

Will you try to change your behaviour of questioning others regarding social clock.

If yes, will you try to change your behaviour? (Questioning others regarding social clock)							
	Resident		Non Resident		Total		
	Frequency	%	Frequency	Percent	Frequency	Percent	
No	21	42%	13	26%	34	34%	
Yes	15	30%	16	32%	31	31%	
NA	14	28%	21	42%	35	35%	
Total	50	100%	50	100%	100	100%	

Figure 4.6



The table 4.36 shows of response of the question "Will you try to change your behaviour of questioning others regarding social clock". From the table, it can be understood that, 42% of the total Resident Keralities, ie 21 in number said 'NO' which indicates they will not try to change their behaviour of questioning others regarding social clock. Meanwhile, 30 % of the total Resident Keralities, ie 15 in number said 'YES' which indicates that they will try to change their behaviour of questioning others regarding social clock. Next, 28% of the Non Resident Keralities are NA which indicates Not Applicable since they are not practicing the questioning behaviour in respect with social clock.

Also, 26% of the total Non Resident Keralities, ie 13 said 'NO' which indicates they will not try to change their behaviour of questioning others regarding social clock. Meanwhile, 32 % of the total Non Resident Keralities, ie 16 in number said 'YES' which indicates that they will try to change their behaviour of questioning others regarding social clock. Next, 42% of the Non Resident Keralities are NA which

indicates Not Applicable since they are not practicing the questioning behaviour in respect with social clock.

From Figure 4.36 and Table 4.36 it can be understood that 34% of the total Respondents, ie 34 in number said 'NO' which indicates they will not try to change their behaviour of questioning others regarding social clock. Meanwhile, 31 % of the total Respondents, ie 31 in number said 'YES' which indicates that they will try to change their behaviour of questioning others regarding social clock. Next, 35% of the total respondents, ie 35 in number are NA which indicates Not Applicable since they are not practicing the questioning behaviour in respect with social clock.

CHAPTER V FINDINGS, SUGGESTIONS, IMPLICATION FOR PROFESSIONAL SOCIAL WORK PRACTICE AND CONCLUSION

INTRODUCTION

Findings are the important outcomes of research. The findings are drawn based on a crucial analysis and interpretation of the obtained data. Suggestions are made from the findings which put forward something which needs to be improved. The research paper should end with a conclusion.

MAJOR FINDINGS

The researcher could study the bio psychosocial effects among young Adults based on the theory of social clock. For that the researcher collected data using questionnaire from young adults of Kerala between the age of 18-25. The data collected thus collected was analysed and interpreted and major findings were obtained.

- ▶ By the questions from the Study of Rosefield "What is the Right Time", the researcher asked the respondents what is the right time in Social Clock Framework as well as Right Time according to your Desire. From the 15 questions asked to both Residents and Non Resident Keralites, researcher found significant difference between the age in Social clock framework as well their desire age in each 15 events for both Residents and Non Residents For Example: For Residents, according to the response from 50 Resident Keralites, the best age for a man to marry in social clock framework is 25.52 years but their desired age is 29.84 years. Meanwhile, for Non Residents, according to the response from 50 Non Resident Keralites, the best age for a man to Marry in social clock framework is 25.46 years but their desired age is 30.38 years.
- Majority of 76% of the total Respondents, ie 76 in number said 'NO' which indicates they are not heard or familiar with the theory of Social Clock and

- 24% of the total Respondents, ie 24 in number said 'YES' which indicates that they are heard or familiar with the theory of Social Clock and thus creates a total of 100 Respondents.
- Majority of 36% of the total Respondents, ie 36 are sometimes have been a victim to social clock Theory and only 4% of the total respondents,2 in number are never been a victim to Social Clock Theory.
- ➤ Majority of ,74% of the Residents, that is 37 in number out of 50, are suffering from the questioning of Relatives in respect with social clock and a minority of 50%, ie 25 in number out of 50 are suffering from the questioning of friends in respect with social clock framework.

Also, a majority of 62% of the total Non Resident Keralities, ie 31 in number out of 50 are suffering from the questioning of Relatives in respect with social clock and and a minority of 54%, ie 27 in number out of 50 are suffering from the questioning of friends in respect with social clock framework.

Therefore it can be understood that both Residents and Non Residents suffer from the questioning of parents, relatives, neighbours are friends almost similarly. But Residents are affected more if we check in detail.

- ➤ It can be understood that 65% of the total Respondents, are affected occasionally with the theory of Social Clock and 8% are not affected by the experience of Social Clock. But a minority of 5% are affected almost everytime.
- ➤ It can be understood that, 32% of the total Non Resident Keralities, are Socially Affected. and similar proportion of 32% of the total Non Resident Keralities, are Psychologically affected and 14% of the total Non Resident Keralities are Biologically affected.

- ➤ Also, 38% of the total Resident Keralities are Socially Affected and similar proportion of 38% of the total Resident Keralities are Psychologically affected and 30% of the total Resident Keralities, are Biologically affected. Therefore it
- ➤ It can be understood that Residents are more affected biologically, psychologically and socially compared to Non Resident Keralites.

BIOLOGICAL EFFECTS

- ➤ Majority of 35% of the total Respondents, are never having the feeling having some kind of dizziness or weakness while hearing/ thinking about Social Clock. Only a minority of 3% always have this feeling.
- ➤ Majority of 31% of the total Respondents, are sometimes having the feeling of headache while hearing about social clock and only 4% are not having headache while hearing about social clock.
- Majority of 50% of the total Respondents, are never having the feeling of panic attacks while thinking about social clock but 25% are rarely having this feeling and a minority of 2% are always having this feeling.
- Majority of 32% of the total Respondents, never loss/ gain body weight while having stress related to social clock but a similar proportion of 30% sometimes loss/ gain body weight. Only a minority of 2% always loss/ gain body weight while having stress related to social clock.

PSYCHOLOGICAL EFFECTS

➤ Majority of 30% of the total Respondents, rarely spend most of the time thinking how to accomplish social clock and similar proportion of 25% never

- think on this. Only a minority of 2% always spend most of their time on how to accomplish Social clock.
- ➤ Majority of 28% of the total Respondents, sometimes feels irritated while hearing about social clock and a minority of 13% never feel irritated while hearing about Social Clock.
- ➤ Majority of 33% of the total Respondents, sometimes creates stress on them by social clock and a minority of 10% never creates stress on them . But a similar proportion of 11% always creates stress on them by social clock.
- Majority of 31% of the total Respondents, sometimes feel anxiety about how to meet with social clock while being questioned by others and 23% never feel anxiety about how to meet with social clock while being questioned by others. But a minority of 8%, always spend feels anxiety.
- ➤ Majority of 30% of the total Respondents, sometimes feel pressure to have accomplish goals in respect with social clock. But a minority of 11% never feel pressure and a similar proportion of 11% always feels pressure to have accomplish goals in respect with social clock.
- Majority of 41% of the total Respondents, sometimes feel sadness, depression or tend to be in low mood if they are not able to accord with the social clock. Only a minority of 7%, always feel sadness or depression or in low state. But 18% never feels sadness, depression or low mood if they are not able to accord with social clock.

SOCIAL EFFECTS

➤ Majority of 34% of the total Respondents, sometimes avoid social gatherings so they could skip such questioning by others. Only a minority of 10%,

- always avoid social gatherings. But 18% never avoid social gatherings to skip questioning by othes related to social clock.
- ➤ Majority of 36% of the total Respondents, agrees to be alone and to spend time with themselves without much socialisations. But a minority of 12% strongly disagree to be alone and to spend time with themselves in respect with social clock.
- ➤ Majority of 38% of the total Respondents, are neutral saying that they lost interest in social connections regarding social clock and 25% agrees that they lost interest in social connections regarding social clock. But a minority of 9% strongly disagree to be losing interest in social connection regarding social clock.
- Majority of 33% of the total Respondents, are neutral saying that their confidence level is affected neutrally by social clock and 23% agrees with the statement of social clock affect their confidence level. But a minority of 8% strongly agrees that social clock strongly affect their confidence level.
- ➤ Majority of 31% of the total Respondents, are neutral saying that they feel neutral to ignore somebody or not to talk to them anymore when they compare your success/ performance level with others of same age and 26% strongly agrees to ignore somebody in respect with social clock, But a minority of 7% strongly disagree with the feeling to ignore somebody in respect with social clock.

COPING STRATEGIES

It can be understood that 88% of the total Respondents, ie 88 in number said 'NO' which indicates they are they are not following social clock blindly without any coping strategies and 12% of the Respondents, said 'YES' which

- indicates that they are following social clock blindly, being a victim, without any coping strategies and thus creates a total of 100 Respondents.
- Also, 38% of the total Respondents, said 'NO' which indicates they do not practice any coping strategies to overcome or manage social clock.

 Meanwhile, 62 % of the total Respondents, said 'YES' which indicates that they practice coping strategies to overcome or manage social clock.
- ➤ Majority of ,64% of the Residents, that is 32 in number out of 50, focus on their desired time to accomplish the goal as their coping strategy and a minority of 10% of the Residents, ie 5 in number do migration as their coping strategy of social clock.
- ➤ Also, a majority of 60% of the total Non Resident Keralities, ie 30 in number out of 50 are Focusing on their desired goal to accomplish the goal as their coping strategy and a minority of 30% follow migration as their coping strategy.
- ➤ Majority of 25% of the total Respondents, strongly agrees to the statement of social clock is a reason to0 migrate from their home town. But a minority of 15% agree to this and same proportion of 15% strongly disagree saying that social clock is not a reason to migrate from their home town.
- ➤ Majority of 36% of the total Respondents, are neutral with the statement of Migration will reduce effects of Social Clock on people. But a minority of 12 % strongly agrees with this the statement of Migration will reduce its effects on people
- ➤ It can be understood that 77% of the total Respondents, ie 77 in number said 'NO' which indicates they do not practice questioning others in respect with social clock. Meanwhile, 23 % of the total Non Resident Keralities, ie 23 in

- number said 'YES' which indicates that they practice questioning others in respect with social clock
- Also, 34% of the total Respondents, ie 34 in number said 'NO' which indicates they will not try to change their behaviour of questioning others regarding social clock. Meanwhile, 31 % of the total Respondents, ie 31 in number said 'YES' which indicates that they will try to change their behaviour of questioning others regarding social clock. Next, 35% of the total respondents, ie 35 in number are NA which indicates Not Applicable since they are not practicing the questioning behaviour in respect with social clock.

SUGGESTIONS

From the major findings of the Comparative Study of Bio- Psycho Social Effects among Young Adults based on the theory of Social Clock, the researcher has many suggesstions or recommendations to put forward.

- ➤ Giving awareness to the general public about what is social clock. Because many are still unaware about this concept and still follow the conventional thoughts of social clock that is to pressurise people for the right occurrence of events at the right time.
- The importance of focusing on our own desired age is an important one among them. Knowing and accepting yourself is a significant matter to focus. Because everyone are unique in their own way and circumstances. So there is no right or wrong time. Allow people to focus on their desired time.
- Media plays a major role in this. Because still in movies, serials, television programmes, social media, people are conveying wrong messages to still follow social clock. This creates a negative impact to young minds to continue the tradition without breaking the chain. Also media promote gender sterotyping and this creates double negative impact. So try not to promote such programmes and discourage the people who are following it.
- ➤ Focus on the positive coping strategies to overcome the bio psycho social effects of social clock theory. It includes
- Avoid social gatherings that spread negativity regarding social clock. Some of the people migrate their home town as a coping strategy. Also these results into avoid the people who create negative Impact.
- > Spend time alone and focus on yourself.
- ➤ Ignore the concept of social clock.

- Fight with those who are saying about social clock and try to make them aware about its negative impacts.
- ➤ Demotivate or discourage people for following social clock.
- ➤ Focus on your desire time to accomplish the goals.
- Also a huge research gap was found in the study since there is a lack of studies related to Social clock and it effects among young adults. So conduct many more research in the field can help to identify more problems related to the Social Clock and could address the issue more effectively.
- ➤ Promote people to write articles, journals related to Social Clock and its impact so that general public will be more aware to address the problem and will more causious for not to get any bio psycho social problem related to this.

SOCIAL WORK IMPLICATION

The reseacher can use all six methods of Social work practice to address the issue related to Social Clock and to reduce its Bio- Psycho Social Impacts on the young adults.

Case Work

The social worker can conduct case work, take case study, conduct counselling to the people who are negatively affected based on social clock theory. From the current study, researcher identified the bio- psycho social effects on young adults related to social clock. So a social worker can work with individuals, help them to identify the problem, address the issue, find out out the solution and to treat or overcome the problem faced. Biological effects includes having bodily related diseases and affects health. So social worker can refer them to concern doctors and Psychological effects includes having psychological issues like anxiety, depression etc. Social issue includes problems like isolation etc.

Group Work

The social worker can conduct group work among young adult to overcome the problems affected that are related to social clock and to teach coping strategies related to the topic. Also more group work should be conducted among elder people because they are the people who are still following and promoting the young ones to follow the traditional ways. So giving awareness on the importance of the accomplishing one's desired goals by focusing on oneself is an important matter to be considered.

Community Organisation

The researcher could practice the primary method of community organisation, by conducting various community programmes inorder to give awareness to general public on the negative impact of social clock. So programmes like awareness sessions, campaigns, circulating posters, brochure, creating videos, posters through social media platforms etc.

Social Work Research

It is one of the significant method that the social worker can practice. Only by research we can identify more problems and address the issues in more effective ways. Currently there is big lack of studies related to the topic.

Social Welfare Administration

Social Worker can practice this method by dealing with the people who are having social effects such as isolation, lack of interest to socialise etc. The social worker can refer those people to various social welfare administration if they are in need of a place to socialise, stay, rehabilate etc.

Social Action

It is the most powerful method of social work practice that a social worker can use. Social worker can conduct social movements if required.

In all these, social worker can do the play the role of an advocate, mediator, mentor, educator, resource mobilizer, counsellor, supporter etc.

CONCLUSION

The present research is a Comparative study of Bio-Psycho Social Effects and Coping Strategies among young adults based on Social Clock Theory. The social clock theory is an idea that explores the timeline of an individual determined by the society that imposes different pressure and creates various bio- psycho social effects to the individual regarding the occurrence of the events.

Researcher selected the topic easily since the problems and effects of social work can be easily connected with and the researcher is also an insider of the topic and had similar experiences in respect with social work. The researcher conducted the study mainly to understand the various bio- psycho social effects and coping strategies of social clock theory among the young adults.

For that, the researcher used descriptive Quantitative Research and survey method in which questionnaire was used to collect the data. The data was collected from the young adult between the age of 18-32 who is belonging to Kerala, either living inside or outside Kerala. 50 Respondents were Residents and 50n were Non Residents among which 25 are non resident Keralites living within India and 25 are NRI, Non Resident Indian and thus creates the total of 100 respondents.

The data thus collected, analysed and interpreted by the researcher. So that the researcher could meet the specific objectives such as could know the difference between age in social clock framework and the desired age among the Residents and Non Residents of Kerala. Helped to understand the biological effects between the Residents and non Residents of Kerala based on Social Clock Theory, underst the psychological effects between the Residents and Non Residents of Kerala based on Social Clock Theory. Also could understood the social effects between the Residents

and Non Residents of Kerala based on Social Clock Theory. The research also helped to know about the coping strategies adopted by the Young adults based on social clock theory. The researcher could find the relevance of the topic. This study helped the researcher to generate new knowledge on the topic.

All the respondents were very cooperative and shared maximum details with the research for the study purpose. Through the research the researcher was able to identify many problems faced by young adults and get a notion of to address or find out the solution of these problems at the earliest and to make more social work interventions. The researcher also made and focus on many suggestions that could address the issues and effects of Social Clock.

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APPENDIX

COMPARATIVE STUDY ON BIO-PSYCHO SOCIAL EFFECTS AND COPING STRATEGIES AMONG YOUNG ADULTS BASED ON THE THEORY OF SOCIAL CLOCK

COCIO	DEL	\mathbf{r}	A DITTO	
SOCIO-	-DEN	IL)(TK/	APHIC	DATA:

NAME:

AGE:

GENDER: Male Female others

EDUCATION QUALIFICATION: SSLC PLUS TWO UG PG PhD Others

NAME OF THE INSTITUTION LAST STUDIED:

ARE YOU WORKING: Yes No

OCCUPATION: Student Government Private Daily Wages

NAME OF THE ORGANISATION YOU ARE CURRENTLY WORKING/ studying

(if any)

RELIGION: Hindu Muslim Christian other

SOCIO-ECONOMIC STATUS: Lower Middle Upper

MARITAL STATUS: Married Single

PLACE OF PERMENANT RESIDENCE:

CURRENT RESIDENCE:

EMAIL ID:

READ THE FOLLOWING QUESTIONS AND STATEMENTS CAREFULLY AND MARK THE MOST RELEVANT RESPONSE

1. Have you heard of or are you familiar with the term Social Clock Theory?

Yes No

2. Have you been a victim to Social Clock Theory?

Never Rarely Sometimes Often Always

3. Under what environment/ by whom you have suffered from this (being questioned					
regarding social clock)?					
Parents Friends Neighbours Relatives All the above					
4. Does this experience affect you?					
Never Almostnever Occasionally All most every Every time					
5. If affected, how does it affect you?					
Biologically Psychologically Socially All of the above					
In this section please write down the age for the time that that society says you to be followed (Age in Social Clock Framework) and the age you wish to engage in the following life events (Desired Age)					
1) What is the best age for a man to marry?					
Social clock framework Your desired age					
2) What is the best age for a woman to marry?					
3) What is the best age to have children?					
4) When should most people become grandparents?					
5) What is the best age for most people to finish school and go to work?					
6) When should most men be settled on a career?					
7) When should most men hold their top jobs?					
8) When should most people be ready to retire?					
9) When does a man have the most responsibilities?					
10) When does a man accomplish the most?					
11) When is the prime of life for a man?					
12) When should a woman be settled on a career?					
13) When is the prime of life for a woman?					
14) When does a woman have the most responsibilities?					
15) When does a woman accomplish the most?					

Biological Effects

210108					
1.	How does this affect you biologically?				
2.	Do you feel any kind of illness while hearing about social clock? If Yes, Specisfy				
3.	Do you feel head ache while hearing about social clock? Strongly Disagree Disagree Neutral Agree Strongly Agree				
4.	Do you feel some kind of dizziness or weakness while hearing/ thinking about social clock. Strongly Dissagree Disagree Neutral Agree Strongly Agree				
5.	Do you feel like having panic attacks while thinking about social clock. Strongly Dissagree Disagree Neutral Agree Strongly Agree				
6.	Do you loss / gain body weight when having stress related to social clock? Never Rarely Sometimes Often Always				
Psycho	ological Effects				
1.	How does this it affected you Psychologically?				
2.	Do you spend most of the time thinking how to accomplish social clock? Never Rarely Sometimes Often Always				
3.	Do you feel irritated while hearing about social clock? Never Rarely Sometimes Often Always				
4.	Does this create any stress on you? Never Rarely Sometimes Often Always				
5.	Do you feel anxiety about how to meet with social clock while being questioned by others? Never Rarely Sometimes Often Always				
6.	Do you feel pressured to have accomplish goals in respect with social clock? Never Rarely Sometimes Often Always				

7. I feel sadness, depression or tend to be in low mood if iam not able to accord with the social clock?

Never Rarely Sometimes Often Always

Social Effects

- 1. How does this it affect you Socially?
- 2. Do you avoid social gatherings so I could skip such questioning by others. Never Rarely Sometimes Often Always
- 3. Do you feel better to be alone and to spend time with yourself, without much socialization?

Strongly Dissagree Disagree Neutral Agree Strongly Agree

- 4. Do you lost interest in social connections because of the social interaction regarding social clock? Strongly Dissagree Disagree Neutral Agree Strongly Agree
- 5. Does it affects your confidence level.

Strongly Dissagree Disagree Neutral Agree Strongly Agree

Coping Strategies

1. Are you following social clock blindly (being a victim) without having any coping strategies

Yes No

- 2. Do you practice any coping strategies to overcome or manage social clock? Yes No
- 3. If yes, What are your coping strategies you follow?
- a. Avoiding social gatherings
- b. Spending time alone
- c. Ignoring social clock concept
- d. Fight with those who are saying about social clock
- e. Demotivating others for following social clock
- f. Focusing on our desire time to accomplish the goals.
- g. Migration
- h. All of the above

i.	Mention	the	options	you follow

- 4. Does Social clock a reason to migrate from my home town? Strongly Dissagree Disagree Neutral Agree Strongly Agree
- 5. Does migration will reduce its effects on you?
 Strongly Dissagree Disagree Neutral Agree Strongly Agree
- 6. Do you ever practice questioning others in respect with social clock?
- 7. Will you try to change your behavior of questioning others regarding social clock?