The role of psychological factors in improving health, activity and longevity

Роль психологічних факторів у покращенні здоров'я, активності та довголіття

Abstract

In recent years, many socio-economic and political factors have caused an increased psycho-emotional stress in society. Determining the impact of psychological factors on health and longevity will contribute to the improvement of a person’s subjective well-being and the efficiency of his/her life. The aim of the study is to identify the impact of psychological factors on the quality of life of young higher school teachers. The research was conducted using standardized, reliable and valid psychometric tools. Descriptive statistics and linear regression analysis were used in the course of processing the results. The study established that the young higher school teachers have high indicators of physical (M=50.84±0.97) and psychological health (M=42.38±1.06). A relationship between quality of life and self-regulation (r=0.886, p<0.001), assertiveness (r=0.684, p<0.001), stress resistance (r=0.689, p<0.001) was found. Regression analysis revealed that self-regulation has the greatest impact on

Анотація

В останні роки багато соціально-економічних і політичних факторів спричинили підвищення психоемоційного напруження суспільства. Визначення впливу психологічних факторів на здоров'я та довголіття сприятиме покращенню суб'єктивного благополуччя людини та ефективності її життя. Мета дослідження – виявити вплив психологічних факторів на якість життя молодих викладачів вищої школи. Дослідження проводилося з використанням стандартизованих, надійних і валідних психометричних інструментів. Під час обробки результатів використовували описову статистику та лінійний регресійний аналіз. Дослідження встановило, що молоді викладачі вищої школи мають високі показники фізичного (M=50,84±0.97) та психологічного здоров'я (M=42,38±1,06). Виявлено зв'язок між якістю життя та саморегуляцією (r=0,886, p<0,001), асертівністю (r=0,684, p<0,001), стresseостійкістю (r=0,689, p<0,001). Регресійний аналіз показав, що

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physical (β=1.94±0.18) and psychological health (β=2.06±0.14). The significant role of self-regulation, assertiveness and stress resistance as psychological factors in optimizing health and longevity was established. Teachers with high quality of life are self-confident, determined and persistent, capable of self-control, emotionally resistant to negative influences. The obtained results can be used for the purpose of creating a psychological training programme for the development of self-regulation, assertiveness, and stress resistance.

**Keywords:** self-regulation, assertiveness, stress resistance, quality of life, well-being, physical health, mental health.

**Introduction**

In recent years, the proportion of healthy population of Ukraine has decreased dramatically. Current information progress causes a state of passivity among the population, when activity decreases, usual duties are replaced by various gadgets, the availability of information reduces the need for its active search. All this leads to an imbalance of personal qualities and deteriorated health.

The most worrying are health problems caused by social, professional or personal factors. Psychological factors that are a background for an optimal health and longevity (Wimmelmann et al., 2020), as they determine the stability of psycho-emotional reactions (Balashov, 2022), constructive behaviour, and the desire to maintain a healthy lifestyle (Griffin et al., 2013). According to some statements, quality of life is a significant indicator of a person’s longevity, as it reflects satisfaction with all areas of life (Yorgason et al., 2018). It is also indicated that negative personal qualities lead to socio-psychological maladaptation (Lev-Ari et al., 2021), have a significant impact on stability and longevity (Fry & Debats, 2010). Longevity depends on the state of health, which is strongly influenced by subjective well-being (Ailshire & Crimmins, 2011) and personality traits (Heblich et al., 2023). In other words, psychological factors determine the value of a person’s health for himself/herself. The higher this value, the better the health and longevity. Therefore, there is a need to develop such psychological qualities that would allow optimal interaction with the modern environment, improving one’s health, activity and longevity. These psychological factors are self-regulation, assertiveness, and stress resistance.

Researchers studied the importance of the emotional sphere (Maalouf et al., 2022), self-regulation (Balashov, 2022), assertiveness (Paezy et al., 2010), stress resistance (Amrit et al., 2019) in the formation of subjective well-being and health. In particular, it is proved that assertiveness is the key to full healthy functioning (Parfanovych et al., 2022), and the ability to survive multiple stresses is the basis of longevity (Dues et al., 2019). These studies prove that psychological factors, in particular positive personality traits, are predictors of a person’s health and longevity. Taking into account the considered approaches, it should be noted that there are many recent studies on the impact of psychological factors on health and longevity. However, the issue of identifying the importance of personal psychological traits in optimizing health and longevity, which characterize the quality of life of a person, remains poorly studied.

The aim involved for the fulfilment of the following research objectives:

1) study the level of physical and psychological components of the quality of life of young teachers;
2) diagnose the severity of psychological factors in the studied teachers: self-regulation, assertiveness and stress resistance;
3) identify the relationship between the quality of life and personal psychological factors;
4) establish the psychological factors which determine the quality of life of the studied teachers most of all.

The following working hypothesis was advanced in order to achieve the aim and objectives of the research: psychological factors of the personality...
influence the optimization of the health, activity and longevity of young teachers: the higher the self-regulation, assertiveness, stress resistance, the better the physical and psychological health of the respondents.

**Literature Review**

In 1982, R.M. Kaplan proposed the term “health-related quality of life” (HRQOL). In 1984, the WHO formulated the concept of health based on this interpretation: “Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (World Health Organization, 2023). Since then, the term “quality of life” has been increasingly used to describe the concept of complete health. Quality of life is an individual’s ability to fully function in society and enjoy it. In modern conditions, the quality of life describes the state of physical and mental health, subjective well-being, longevity, adaptive life activity.

It is appropriate to pay attention to the concept of longevity, which also reflects the quality of a person’s life. Researchers distinguish two factors of longevity: internal (genetic, individual-typological) and external (ecology, social status, lifestyle). Fernández-Ballesteros and Sánchez-Izquierdo (2019) draw attention to the importance of psychological factors in longevity processes. The authors include such factors as cognitive functioning, self-control and self-regulation, lifestyle, resistance to stress. Quality of life and life satisfaction are components of general well-being and longevity, which are influenced by personality traits and emotional states (Wimmelmann et al., 2020).

Lev-Ari et al., (2021) note that positive personal traits are predictors of health and longevity, and destructive negative states deteriorate health. It is also noted that despite the fact that the personality type is innate, personality traits can be developed throughout life, which can improve the quality of life, health and longevity (Maalouf et al., 2022). Long-term exposure to acute crisis or stressful situations adversely affects a person’s physical health and can increase susceptibility to psychological diseases such as anxiety and depression (Zhang et al., 2023). And psychological factors combined with social factors provoke symptoms of depression, which adversely affects physical health (Park & Seo, 2023). Therefore, the ability to control one’s emotions and behaviour, to be decisive and confident, resistant to the negative effects of stress is the key to high-level well-being and health.

Internal factors — self-regulation, assertiveness, and stress resistance — are distinguished among the many psychological factors capable of influencing personal health, longevity, and effective activity. We believe that these characteristics reflect an individual’s ability to control his/her psycho-emotional state in stressful situations, the ability to find a way out of a crisis situation, and ensure the body’s stability and resource balance. In turn, this affects health and longevity.

Self-regulation is a way of managing one’s own states and activities, which ensures optimal functioning of the body, adaptation to external circumstances (Sharbatshaer, 2019). Mental self-regulation enables one to manage one’s behaviour, control one’s emotional state in tense or stressful situations (Singh & Sharma, 2018), engage in physical and mental activities effectively, and improve various skills (Peleg & Peleg, 2023). Hofer et al., (2011) considers self-regulation as a factor in the development of an achieved social identity, which is a condition for personal well-being. It is noted that self-regulation is the core of the full functioning of the body, it is becoming increasingly important for social stability and longevity (Billore et al., 2022).

Assertiveness is considered the next factor of health and longevity. Assertiveness is a significant indicator of personality maturity (Speed et al., 2017). Skolota (2020) notes that the developed assertiveness of an individual has a positive effect on his/her socio-psychological adaptation and normal functioning, while underdevelopment or lack of assertiveness leads to social incompetence, disharmony and maladaptation. Assertiveness provides personal potential and is a prerequisite for successful self-actualization, helps to reduce anxiety and fear, encourages to defend one’s rights and express feelings (Parfanovych et al., 2022). Assertive behaviour affects the optimal learning of cognitive patterns of interaction that accumulate and contribute to social integration (Vagos & Pereira, 2016).

Stress resistance as a factor of personal health and longevity expresses the degree of resistance to stress and is an important element of the personality structure. It involves a combination of personality traits and the ability to resist stressful situations (Yang et al., 2021). Stress resistance ensures longevity, as it enables a person to successfully overcome crisis situations, effectively express negative emotions, and resolve conflicts effectively (Amrit et al., 2019).
It affects the individual’s ability to maintain optimal performance under tension and in extreme conditions (Halian et al., 2021). In turn, others claim that stress resistance is a necessary element of successful adaptation of an individual to the influence of environmental factors (Teptiuk, 2018). There is an opinion that stress resistance provides the ability not only for socio-psychological adaptation, but also contributes to self-realization, achievement of life goals, preservation of work capacity and health (Dues et al., 2019).

Methods

Research design

The study was conducted during 4 months from November 2022 to February 2023, and was divided into several stages. The first stage involved the theoretical and methodological substantiation of the issue under research, the identification of the main scientific approaches and provisions that consider health and longevity of the individual. The second stage provided for a selection of valid and reliable psychodiagnostic tools, which corresponds to the aim of the study, followed by sampling. The third stage involved quantitative and statistical data processing, as well as the presentation of the obtained results in graphic and tabular forms. The fourth stage provided for a data analysis, interpreting of the obtained results, and correlating them with previously conducted research. The fifth stage provided for the justification of the obtained results, limitations and shortcomings of the research were outlined, and prospects were determined.

The research design was implemented in an individual form in natural conditions for the respondents, without creating special research influences. Respondents were given test forms to complete within a certain time. The duration of the diagnosis is optimal for achieving the aim and testing the advanced hypothesis.

Sampling

A representative sample population of 258 respondents (116 female and 142 male) aged 25 to 44 was selected for the diagnostic purposes. All respondents are employees of higher education institutions (HEIs) of Ukraine. In particular: 74 teachers of the Department of Psychology of Activity under Special Conditions of the National University of Civil Defence of Ukraine; 59 teachers of the Department of Aviation Psychology, Faculty of Linguistics and Social Communications of the National Aviation University; 63 teachers of the Department of Psychology of the Academy of Labour, Social Relations and Tourism; 62 teachers of the Department of Psychology of the Humanities and Pedagogical Faculty of the National University of Life and Environmental Sciences of Ukraine.

Age restrictions, as well as teaching practice were the inclusion criteria. As age can have a significant impact on a person’s health and well-being, the age range was chosen to cover young respondents. According to WHO periodization, young age is 25-44 years. This age category is characterized by a conscious attitude to health, striving for its maintenance and stabilization. Therefore, respondents with such age restrictions were chosen. It is also appropriate to note that labour is also a factor of personal health, therefore, employees of the same pedagogical field of activity — higher school teachers — were selected.

Methods

The 36-Item Short Form Health Survey (SF-36) was used in order to diagnose the well-being of the subjects. This questionnaire was developed in 1992 to evaluate the components of the quality of life, including health-related. The structure of the questionnaire includes 11 sections (a total of 36 questions), the results are evaluated in points, a higher score on each scale indicates a better quality of life. The technique evaluates the quality of life on 8 scales: Physical Functioning (PF), Role-Physical (RP), Bodily Pain (BP), General Health (GH), Vitality (VT), Social Functioning (SF), Role-Emotional (RE) and Mental Health (MH). Two components of the quality of life — physical health and mental health — express the index on 8 scales.

The test-questionnaire “The study of volitional self-regulation” proposed by Zverekov and Eidman (2019) was used in order to identify the level of self-regulation of the subjects. The test is aimed at determining the general level of self-regulation, which consists of two scales: persistence and self-control. The structure of the test includes 30 questions to which the subject must answer “yes” or “no”. There are 6 masking statements in the questionnaire, so the total score ranges from 0 to 24, the “persistence” subscale — from 0 to 16 points, and the “self-control” subscale — from 0 to 13 points.

The Perceived Stress Scale (PSS-10) developed by Cohen et al., (1983) was chosen for diagnosing stress resistance. The questionnaire
consists of 10 questions with offered answer options “never”, “almost never”, “sometimes”, “quite often”, “very often”. The obtained results were processed by calculating points for the selected answers. The obtained indicator determine the level of stress resistance, which can be low, medium or high.

Assertiveness test by Capponi and Novak (1995) was used to diagnose assertiveness. The purpose of the questionnaire is to determine the level of assertiveness of the individual in general and such criteria as confidence, self-reliance; independence, autonomy; social desirability in particular. The technique consists of 24 statements; 3 scales are distinguished in its structure: persistence, determination, and social desirability (sincerity, truthfulness). Depending on the obtained results, the subjects were attributed to one of the groups according to the levels: 0-3 points (low level), 4-6 points (medium level), 7-8 (high level of assertiveness).

All calculations for the techniques were carried out in Microsoft Excel 2016 and SPSS 22.0. The analysis of the average values of the respondents for the techniques was carried out on the basis of descriptive statistics. The role of psychological factors in optimizing the quality of life of the respondents was determined through regression analysis, which established the significance of the factors, as well as the correlation between the variables.

**Ethical criteria of the research**

In order to comply with the ethics of the study, all respondents received informed consent for the diagnosis. They were introduced into the purpose of the research, informed about the confidentiality of the obtained results.

**Results**

Processing the results of the SF-36 survey gave grounds to assess the respondents’ quality of life, their general well-being, and the degree of satisfaction with those aspects of life that affect their health (Table 1).

<table>
<thead>
<tr>
<th>Scales</th>
<th>MIN</th>
<th>MAX</th>
<th>Mean</th>
<th>SD</th>
<th>σ</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Functioning (PF)</td>
<td>11.00</td>
<td>30.00</td>
<td>21.87</td>
<td>0.36</td>
<td>34.11</td>
</tr>
<tr>
<td>Role-Physical (RP)</td>
<td>4.00</td>
<td>8.00</td>
<td>6.14</td>
<td>0.10</td>
<td>2.46</td>
</tr>
<tr>
<td>Bodily Pain (BP)</td>
<td>2.00</td>
<td>11.00</td>
<td>6.96</td>
<td>0.18</td>
<td>8.60</td>
</tr>
<tr>
<td>General Health (GH)</td>
<td>4.00</td>
<td>24.00</td>
<td>15.87</td>
<td>0.39</td>
<td>39.96</td>
</tr>
<tr>
<td>Vitality (VT)</td>
<td>4.00</td>
<td>23.00</td>
<td>14.63</td>
<td>0.39</td>
<td>40.10</td>
</tr>
<tr>
<td>Social Functioning (SF)</td>
<td>2.00</td>
<td>10.00</td>
<td>6.10</td>
<td>0.16</td>
<td>6.42</td>
</tr>
<tr>
<td>Role-Emotional (RE)</td>
<td>3.00</td>
<td>6.00</td>
<td>4.47</td>
<td>0.07</td>
<td>1.14</td>
</tr>
<tr>
<td>Mental Health (MH)</td>
<td>5.00</td>
<td>29.00</td>
<td>17.19</td>
<td>0.49</td>
<td>60.73</td>
</tr>
<tr>
<td>Physical component of health</td>
<td>24.00</td>
<td>71.00</td>
<td>50.84</td>
<td>0.97</td>
<td>240.40</td>
</tr>
<tr>
<td>Psychological component of health</td>
<td>15.00</td>
<td>66.00</td>
<td>42.38</td>
<td>1.06</td>
<td>290.14</td>
</tr>
</tbody>
</table>

(Developed by the author)

The data in the table indicate that the respondents have a pronounced average Physical Functioning (M=21.87±0.36), which reflects the ability to perform physical exercises. These indicators show that the physical activity of the respondents in general is not limited by their state of health. Role-Physical functioning is expressed at a sufficient level (M=6.14±0.10), which indicates a completely normal life activity of the respondents, which is determined by the physical condition. Slightly increased indicators are observed (M=6.96±0.18) for the Bodily Pain scale, which reflects the lack of influence of pain sensations on the ability to engage in daily activities. The General Health scale is represented by indicators above the medium (M=15.87±0.39), which indicates the satisfaction of the subjects with their state of health. The Vitality of the surveyed teachers is also represented by the medium-level indicators (M=14.63±0.39), which indicates a sufficient level of vitality and a sense of energy. The Social Functioning of the respondents (M=6.10±0.16) shows that their physical and emotional state does not limit social activity and interpersonal interaction. The Role-Emotional functioning (M=6.47±0.07) reflects the absence of restrictions in the performance of daily work caused by the deteriorating emotional state. Such respondents have a completely stable emotional state.

**Table 1. Indicators of the quality of life of the surveyed teachers**

The role of psychological factors in optimizing the quality of life of the respondents was determined through regression analysis, which established the significance of the factors, as well as the correlation between the variables.

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</tr>
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<td>6.96</td>
<td>0.18</td>
<td>8.60</td>
</tr>
<tr>
<td>General Health (GH)</td>
<td>4.00</td>
<td>24.00</td>
<td>15.87</td>
<td>0.39</td>
<td>39.96</td>
</tr>
<tr>
<td>Vitality (VT)</td>
<td>4.00</td>
<td>23.00</td>
<td>14.63</td>
<td>0.39</td>
<td>40.10</td>
</tr>
<tr>
<td>Social Functioning (SF)</td>
<td>2.00</td>
<td>10.00</td>
<td>6.10</td>
<td>0.16</td>
<td>6.42</td>
</tr>
<tr>
<td>Role-Emotional (RE)</td>
<td>3.00</td>
<td>6.00</td>
<td>4.47</td>
<td>0.07</td>
<td>1.14</td>
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</tr>
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<td>50.84</td>
<td>0.97</td>
<td>240.40</td>
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state, positive emotional well-being. According to the Mental Health scale ($M=17.19\pm0.49$), the subjects have positive emotions, a good mood, and they do not have anxious and depressive experiences.

Integral indicators indicate a high level of physical health ($M=50.84\pm0.97$) and mental health ($M=42.38\pm1.06$). Such data reflect the positive state of health of the subjects. They have a high quality of life indicator.

Diagnostics of self-regulation showed a predominance of subjects with a high level of self-regulation (Table 2).

**Table 2.**
*Indicators of self-regulation of the surveyed teachers*

<table>
<thead>
<tr>
<th>Scales</th>
<th>MIN</th>
<th>MAX</th>
<th>Mean</th>
<th>SD</th>
<th>σ</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persistence</td>
<td>3.00</td>
<td>15.00</td>
<td>8.75</td>
<td>0.22</td>
<td>12.45</td>
</tr>
<tr>
<td>Self-control</td>
<td>2.00</td>
<td>13.00</td>
<td>10.36</td>
<td>0.24</td>
<td>15.04</td>
</tr>
<tr>
<td>Self-regulation</td>
<td>5.00</td>
<td>28.00</td>
<td>18.12</td>
<td>0.45</td>
<td>51.64</td>
</tr>
</tbody>
</table>

(Developed by the author)

The research found a medium level of respondents’ persistence ($M=8.75\pm0.22$), which indicates their ability to achieve a goal, be confident in their actions, and work hard for a result. A high level of self-control ($M=10.36\pm0.24$) is found. This speaks of high self-management of the studied teachers, their ability to maintain balance under any circumstances. The general level of teachers’ self-regulation was high among the subjects ($M=18.12\pm0.45$). Subjects with a high level of self-regulation are able to effectively engage in professional activities, are inclined to self-development and self-improvement, and have a pronounced social positive orientation.

The level of stress resistance of the studied teachers was identified in the course of the research (Table 3).

**Table 3.**
*Indicators of stress resistance of the surveyed teachers*

<table>
<thead>
<tr>
<th>Scale</th>
<th>MIN</th>
<th>MAX</th>
<th>Mean</th>
<th>SD</th>
<th>σ</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stress resistance</td>
<td>6.00</td>
<td>39.00</td>
<td>2.86</td>
<td>0.60</td>
<td>92.13</td>
</tr>
</tbody>
</table>

(Developed by the author)

According to the table, the surveyed teachers have a high level of stress resistance ($M=2.86\pm0.60$). The respondents have high emotional stability, self-control, and self-regulation. In extreme and stressful situations, they show high self-control and determination in their actions.

The conducted research established the level of assertiveness of the surveyed teachers (Table 4).

**Table 4.**
*Indicators of assertiveness of the surveyed teachers*

<table>
<thead>
<tr>
<th>Scales</th>
<th>MIN</th>
<th>MAX</th>
<th>Mean</th>
<th>SD</th>
<th>σ</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independence</td>
<td>0.00</td>
<td>8.00</td>
<td>6.14</td>
<td>0.15</td>
<td>6.03</td>
</tr>
<tr>
<td>decisiveness</td>
<td>1.00</td>
<td>8.00</td>
<td>7.26</td>
<td>0.14</td>
<td>5.16</td>
</tr>
<tr>
<td>Social desirability</td>
<td>1.00</td>
<td>8.00</td>
<td>4.40</td>
<td>0.15</td>
<td>5.90</td>
</tr>
<tr>
<td>General level of assertiveness</td>
<td>3.00</td>
<td>24.00</td>
<td>18.77</td>
<td>1.13</td>
<td>5.21</td>
</tr>
</tbody>
</table>

(Developed by the author)

It was found that the respondents have a high level of independence ($M=6.14\pm0.15$), a high level of decisiveness ($M=7.26\pm0.14$) and a medium level of social desirability. The obtained results indicate that the surveyed teachers are active, decisive in making important decisions. The general level of assertiveness of the subjects is high ($M=18.77\pm1.13$), so they are confident, independent and decisive.
A correlation analysis was used to identify the relationship between psychological factors (self-regulation, assertiveness and stress resistance) with indicators of the quality of life of the studied teachers. It established the dependence between the variables. A correlation between indicators of quality of life and self-regulation was established (Table 5).

Table 5.
Correlation analysis of the relationship between quality of life and self-regulation, assertiveness, and stress resistance (N=258)

<table>
<thead>
<tr>
<th>Factors</th>
<th>Components of emotional intelligence</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical health</td>
<td>Self-regulation</td>
<td>0.886**</td>
<td>0.684**</td>
</tr>
<tr>
<td>Mental health</td>
<td>Assertiveness</td>
<td>0.719**</td>
<td>0.722**</td>
</tr>
<tr>
<td></td>
<td>Stress resistance</td>
<td>0.689**</td>
<td>0.718**</td>
</tr>
</tbody>
</table>

Note: ** - correlation coefficients for p≤0.001 (Developed by the author)

High direct correlation coefficients were found between physical health and self-regulation (r=0.886, p≤0.001), assertiveness (r=0.684, p≤0.001), stress resistance (r=0.689, p≤0.001). Such connections indicate that the higher the psychological factors, the better the mental health. The ability to manage one’s condition, behaviour and actions contributes to full physical functioning. At the same time, confidence in one’s actions ensures their purposefulness, and high stress resistance contributes to the optimal use of the body’s resources.

A direct high correlation was found between mental health and self-regulation (r=0.719, p≤0.001), assertiveness (r=0.722, p≤0.001), stress resistance (r=0.718, p≤0.001). This indicates that the respondents with high self-control, persistence and confidence, high stress resistance have high indicators of mental health.

A linear regression analysis was conducted to determine the importance of psychological factors in optimizing health and longevity (Table 6).

Table 6.
Regression analysis of the relationship between quality of life and personal psychological factors of teachers

<table>
<thead>
<tr>
<th>Symptoms of PTSD</th>
<th>β</th>
<th>SD</th>
<th>R</th>
<th>R²</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>self-regulation</td>
<td>1.94</td>
<td>0.18</td>
<td>0.864</td>
<td>0.746</td>
<td>248.80</td>
<td>0.000</td>
</tr>
<tr>
<td>assertiveness</td>
<td>1.58</td>
<td>0.12</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>stress resistance</td>
<td>0.86</td>
<td>0.03</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>self-regulation</td>
<td>2.06</td>
<td>0.14</td>
<td>0.923</td>
<td>0.851</td>
<td>484.4</td>
<td>0.000</td>
</tr>
<tr>
<td>assertiveness</td>
<td>1.25</td>
<td>0.08</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>stress resistance</td>
<td>0.56</td>
<td>0.06</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Developed by the author)

Regression analysis showed that personal psychological factors influence the respondents’ health. It was established that 75% of physical health is explained by psychological factors (R²=0.746), in particular, self-regulation is of the greatest importance (β=1.94±0.18), assertiveness has a slightly less effect on physical health (β=1.58±0.12), and stress resistance has the least effect on physical health (β=0.86±0.03). Such data indicate that physical health and longevity depend on psychological factors, on the ability of an individual to control his/her behaviour, on the ability to be decisive and confident, on the ability to maintain balance in stressful situations.

Mental health is 85% explained by psychological factors (R²=0.851). Self-regulation has the greatest impact on mental health (β=2.06±0.14), assertiveness has a little less influence (β=1.25±0.08), stress resistance has the least impact on mental health (β=0.56±0.03). The obtained indicators prove that mental health and well-being depend on self-regulation, confidence, and stress resistance.
The conducted research showed that psychological factors such as self-regulation, assertiveness and stress resistance play a significant role in optimizing physical and mental health. The more developed these factors are, the better a person’s health, activity potential and longevity prospects.

Discussion

It was established that the surveyed young higher school teachers have a high level of quality of life, physical and mental health. High quality of life indicators are a prerequisite not only for a healthy personality, but also a longevity factor (Ailshire & Crimmins, 2011). Batsyljeva et al., (2018) obtained similar results in their study, who found that the subjects with a high level of psycho-emotional stress showed low quality of life. In other words, an increased level of psycho-emotional stress contributes to a decreased quality of life of the respondents in terms of physical and psychological components. Yorgason et al., (2018) also indicate the impact of satisfaction with the quality and life on physical health and longevity.

Young teachers have a high level of self-regulation, a high level of stress resistance, and a high level of assertiveness. The obtained results reflect their ability to control their actions, behaviour, ability to manage their emotions, thoughts and mood, as well as adjust their behaviour to achieve long-term goals. They are self-confident, determined, persistent, able to effectively interact with others to achieve their goals. Billore et al., (2022) studied the impact of self-regulation on well-being and proved that self-regulation provides functional stability and longevity. The stress resistance of such persons provides emotional stability in stressful and crisis situations, the ability to quickly make decisions with the least loss of resources (Tasneem & Panwar, 2022). Amrit et al., (2019) confirmed the obtained results in their study and found that the ability to consciously manage one’s actions, states and motivations affects physical health and well-being.

Correlation analysis found a relationship between self-regulation, assertiveness, stress resistance and health of the surveyed teachers. This proves that psychological factors affect the health and longevity of the surveyed teachers. The higher the listed factors, the better the respondents’ health. The same results were obtained in other studies on the impact of self-regulation on mental health (Rodríguez et al., 2022), the relationship between stress resistance and physical health of adults (Zhang et al., 2023), the importance of emotional regulation in sub-objective well-being (Maalouf et al., 2022), the correlation between self-regulation and well-being (Sharbafshaer, 2019), the impact of effective self-regulation on psychological well-being (Heblich et al., 2023). Paeezy et al., (2010) also found that assertiveness provides a subjective feeling of well-being, a high quality of life.

Regression analysis showed that there is a significant role of psychological factors in physical and mental health. Such indicators prove that health and longevity depend on personal psychological factors. Fry and Debaets (2010) obtained similar results, who established through a regression analysis that psychosocial resources and psychological personality traits affect health and longevity.

The conducted research proved the role of psychological factors in improving health, activity and longevity. It was established that such personality qualities as assertiveness, self-regulation and stress resistance have a positive effect on the quality of life and well-being. Self-regulation has the greatest impact, which indicates its important role in improving health and longevity.

Conclusions

The conducted research gives grounds to state that teachers with a high level of quality of life are characterized by the stability of the emotional sphere, a sense of subjective well-being, satisfaction with their position, and the ability to satisfy their needs and interests. A positive quality of life is a guarantee of longevity, a prerequisite for a healthy personality. Subjects with high self-regulation, assertiveness and stress resistance have high indicators of quality of life in terms of physical and psychological components of health. The ability to regulate one’s actions and behaviour, to be decisive and confident, to be emotionally resistant to stressful situations, to maintain self-control ensure stability of health and longevity.

The limitations of the conducted research include the influence of situational, genetic and external factors on the health and well-being of the respondents. Quality of life indicators can change under the influence of temporary health restrictions, or as a result of hereditary diseases, or due to socio-economic changes. All these factors cannot be controlled by a person, so they
can be used as additional criteria in further studies.

Research prospects include the creation of a programme for the development of psychological factors affecting the improvement of health and longevity, as well as the study of additional psychological determinants of attitudes toward health among young people.

**Bibliographic references**


