A Co-relational Study On Quality of Life & Well-Being In Working & Retired Employees Of Private Organizations in Kolkata

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Abstract : The aim of the study is to find out the gender difference in Quality of Life & Well-Being in Working and Retired employees of Private Organization in kolkata. And also to find out the relationship between Quality of Life & Well-Being in Working and retired employees in Private organization.

Methods: In this study one hundred twenty employees (N=120) would be included. They would be divided into two groups Working (N=60), & Retired (N=60). Further, on other basis of gender these two groups would be divided into two subgroups Male (N=30), & Female (N=30) in Working & Retired groups. These groups would be formed on the basis of the criteria for inclusions. Data were obtained from the private organization, data collected tools used were The Brunnsviken Brief Quality of life Scale (BBQ) & RYFF Psychological Well-Being Scale- 42 Items Version– RYFF (189) all two scales level were assessed among an working & retired employees. Using the purposive sampling method the data analysis was performed using Mean, SD, T- test and correlation variance analysis

Conclusion: When correlation with considered there is a positive correlation in Quality of Life & Well-Being in Male & Female a Retired employees at (p <0.05) level, but there is no significant correlation is Quality of Life & Well-Being a Working & Retired employees with Quality of Life & Well-Being in Male & Female a Working employees at (p >0.05) level.

INTRODUCTION:-
Work is very important part of every one’s life. Many people spend more time at work than at home, with their families, or enjoying a hobby. That is why finding a balance between one’s personal and professional lives has been increasingly important. In other words, it is essential to know what Quality of life at work is, as well as how to improve one’s level of satisfaction and Well-being.

There is no single model for a well-being programme that would work for all. To implement well-being it is important to encourage people to adopt healthy habits and bring pleasure & happiness to their lives.

Health-related quality of life (HRQOL) is a multi-dimensional concept that includes domains related to physical, mental, emotional, and social functioning. It goes beyond direct measures of population health, life expectancy, and causes of death, and focuses on the impact health status has on quality of life. A related concept of HRQoL is well-being, which assesses the positive aspects of a person’s life, such as positive emotions and life satisfaction.

The advantages for companies that adopt the concept, as well as the culture of quality of life at work, are countless. Productivity, attention and motivation increase, the organizational environment improves, there is a decrease in expenses relating to health treatments, turnover rates go down, talent retention and profits increase, among other things.

And professionals also have many benefits: recognition for their work, healthy and inspiring work environment, spare time is spent with quality, improved diet, greater focus on physical activities, more creativity, access to benefits that improve well-being, so on and so forth.

Individual’s job and life are equally important for his/her well-being. Quality of life of an words of wisdom “Without work, all life goes rotten but when work is soul less, life stifles and die

‘Quality of work life’ is significant to all the organizational inputs which lead to employee satisfaction and influence organizational effectiveness. The importance of quality of work life is to extend jobs and working conditions that are outstanding for employees as well as economic strength of the organization.

Employment is an essential element of an adult’s life, providing not only income but also a sense of engagement, role identification, and physical and mental stimulation. Therefore, unemployment has been attributed as a possible source of adverse consequences for’ health-related-quality of life (HRQOL)’, which reflects the physical, psychological, and emotional dimensions of well-being.

‘Retirement’ is a major transition in the lives of older adults. The process of “getting used to the changed circumstances of life in retirement “has been described as adjustment to retirement (Van Solinge & Henkens 2008, ). Individuals differ considerably in their ease of adjusting to retirement.

According to the World Health Organisation (WHO), quality of life is defined as “the individual’s perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals.”

‘Well-being’ is the experience of health, happiness, and prosperity. It includes having good mental health, high life satisfaction, and a sense of meaning or purpose. More generally, well-being is just feeling well.

5 Major types of Well-Being:-

• Emotional Well-Being: The ability to practice stress-management techniques, be resilient, and generate the emotions that lead to good feelings.
• **Physical Well-Being**: The ability to improve the functioning of the body through healthy eating and good exercise and habits.

• **Social Well-Being**: Its mean to communicate, develop meaningful relationship with others, and maintain a support network that helps you overcome loneliness.

• **Workplace Well-Being**: The ability to pursue your interests, values, and purpose in order to gain meaning, happiness, and enrichment professionally.

• **Societal Well-Being**: The ability to actively participate in a thriving community, culture, and environment.

Well-being is something sought by just about everyone, because it includes so many positive things – feeling happy, healthy, socially connected, and purposeful.

Personal well-being is a particularly important dimension which we define as how satisfied we are with our lives, our sense that what we do in life is worthwhile, our day to day emotional experiences (happiness and anxiety) and our wider mental well-being.

**REVIEW OF LITERATURE:-**


Keeping in mind the objectives of the present study only those research work would be highlighted which show relevance to the present study.

**Quality of life in Working Employee:-**

David Lewis et al (2001) did an in depth study on the extrinsic and intrinsic attributes of quality of work life. The objective of the research was to test even if extrinsic or intrinsic or previous traits test predict satisfaction with Quality of Working Life (QWL) in health care. The findings show that, supervisor style, commitment and discretion, all play a role in determining QWL. Female employees were less satisfied with these traits than male. Chan & Others (1990) in their study have explained that Quality of Working Life (QWL): what can unions do? reflect as a concern for people’s experience at work, their relationship with other people, their work settings and their effectiveness on the job. Higgins & Others (1992) did articulate in their study that work conflict is a greater source of work- family conflict whereas personal or family lives interfere with work are linked for fewer hours but work that interferes with life matters as revealed by the researcher. W.N. Thalang et al. (2010) studied on Quality of Work Life Indicators as a Corporate Social Responsibility (CSR) of Electrical and Electronics Private Organisation in Thailand. Objective of the research was find out the quality of work life indicators as a CSR. The result showed that QWL gives indication of a effective CSR, developing a good Quality of Work Life (QWL) is crucial. Ayesha Tabassum et al (2012) has evaluated the quality of work life of the faculty members of private universities in Bangladesh with the objectives was to investigate into the factors affecting the overall perception of QWL.

Quality of life among working adults was better than among non-working adults. The gap between the two groups was larger among male than female participants. Further, the gender differential effect was larger in the 41-60 year old age group than in the 18-40 year old and 61-or older groups. Being employed has a positive relation to quality of life among adults. Work status plays a more important role in quality of life for men than for women, especially for the working elderly men than working elderly women. This study evidenced a positive relation between quality of life and being employed, for men in all ages. Although the women’s participation in the labour market is rapidly expanding, men’s employment status appears to be significantly more related to quality of life compared with women’s.

**Well-Being in Working Employee:-**

Dolinsky & Caputo, (2003) in their study health and female self-employment In the light of an increasing emphasis on self-employment and micro-enterprises, a growing body of research has focused on the determinants for pursuing self-employment. Jamal, M. (1997), Studied a job stress, satisfaction and mental-health. A Canadian study, the self-employed experienced more psychosomatic health problems than salaried workers did. The main aim of this article is to study the relationship between control and demands at work, the work-life balance and well-being among self-employed men and women. The results of this study confirm that the psychosocial working conditions are important because demands and control in work influence work-life balance and well-being among self-employed men and women. As psychological well-being is multi-faceted, this review includes studies that have examined: job satisfaction, an attitudinal indicator of work-related well-being; ( Diener E -1984.Subjective Well-being) and affective well-being, the more frequent experience of positive affective states than negative affective states, such as anxiety, depression, anger, boredom and fatigue. (War P & Others 1999 Well-being and the work place)

The psychological well-being of an employee results in benefits for both the individual employee and the organization, psychological well-being is a vital aspect of overall well-being and is linked to physical health, mental satisfaction and greater happiness for young employees. Alam and Rizvi (2012) in their research on psychological well-being of bank employees compare the psychological well-being of private sector and public sector employees. This study revealed that private sector employees suffer more from job related problems. Ajala (2013) studied the impact of workplace spirituality on well-being of employees at the industrial sectors. When the employee has a spiritual life he/she work with more commitment and with his full potential. It also helps in reducing the stress, conflict, and absenteism.
The literature discloses that there have been two main methods for researching the relationship between the psychological well-being and employee job performance. One method was to explore the direct role of psychological well-being in employee job performance and this contain work happiness, experience of positive effects and negative affects state job related well-being. The second method was to appraise the performance because of the work conditions, work stressors, low autonomy, and role conflict etc.

- **Quality of life in Retired Employee:**

Retirement refers to the commencement of the stage in a person’s life course in which he/she is no longer gainfully employed (full retirement), although gradual retirement (involving work hour reductions and phasing into retirement) will also be considered. Arza, & Others (2008) studied pension reform in Europe, more or less far-reaching pension reforms have been implemented, aimed at restricting access to and reducing the economic incentives for early retirement. Krueger & Others (1992), in their study the effect of social security on labour supply. A large body of empirical research evaluates the casual effects of such reforms (i.e., mainly retrenchment) on older workers retirement plans, expectations, and behaviours. Coile & Gruber, (2000) studied social security and retirement, (2007) studied future social security entitlements and the retirement decision. Calvo, & Others (2009) studied research on aging, that affect the happiness of individuals who make the transition from full employment to full retirement (using longitudinal data from the US Health and Retirement Study). They do not find support for the frequent claim (by policy makers) that workers would be happier with a gradual retirement than with an abrupt end of their careers.

The most recent studies tend to suggest that a health risk can be inherent both in continued work until very high ages as well as in (too early) retirement. The effects of work retirement transitions crucially depend on the timing and the pace of the transition and the degree to which individuals perceive control over this process. Price & Joo, (2005) studied the relationship between marital status and women’s retirement satisfaction does not represent a process, but is rather an indicator of well-being and contentment with retired life draw a distinction between these constructs, arguing that it would be possible. Quick & Moen, (1998) studied gender, employment, and retirement quality. Satisfaction with retirement has been conceived as a subjective sense of well-being, indicating how the individual understands his/her quality of life at the moment. The concept of satisfaction with retirement therefore gives greater consideration to life experiences and the quality of retirement than to the retired person’s living conditions.

- **Well-Being in Retired Employees:**

Retirement has been considered one of the most important later life status transitions (Szinovacz 1980) studied in female retirement, our knowledge of its psychological consequences is fragmentary. For most older persons retiring from their primary career jobs is a milestone, making passage into the later stages of adulthood. On the other hand, the retirement passage itself may lead to diminish well-being, as individuals lose their occupational attachments, their social network of co-workers, and a major anchor for their identities. Kim JE & Moen P (2002) studied retirement transitions, gender and psychological well-being; Szinovacz ME (2003) studied in contexts and pathways; Price & Joo (2005) studied exploring the relationship between marital status and women’s retirement satisfaction. This type of research showed that being healthy and wealthy in retirement, being married, identifying with the marital role, and joint leisure activities of spouses during retirement all contribute to well-being in retirement. (Wang, & Others,2011) studied that the role theory argues that, when retiring, people lose some of their roles (worker role, organizational member role, career role,) anxious and depressive feelings might pop up. This then leads to a lower level of well-being in retirement. (Elwell and Maltbie-Crannell, 1981) find that the role loss caused by retirement has a negative effect on life satisfaction, especially for men. Opposite to the role theory, the continuity theory argues that the continuity in identity and self concept will dominate such that there will be no significant changes in the level of well-being when retiring (Wang et al.,2011).

This 10-year follow up study investigated the impact of retirement voluntariness and participation in bridge employment on the levels of self-efficacy and life-satisfaction among retirees compared with those who remained in their career jobs. The main aim of the paper was to investigate explicitly the interaction between the voluntariness of retirement and bridge employment in the explanation of changes in well-being. Particularly involuntary full retirees experienced a drop in life satisfaction whereas those involuntarily retired but in bridge jobs did not seem to experience such a decline. The result indicated that retirement specific self-esteem, dispositional rigidity, good-directedness, social support (reliable alliance and reassurance of worth), regretfulness, leisure time activities, and family structure were the significant predictors of psychological well-being of retirees. The selected variables put together explained 93% of variance in the psychological well-being of retirees. Discriminant analysis revealed that the retirees with low and high psychological well-being found to differ on attitude towards aging, retirement specific self-esteem, dispositional rigidity, goal directedness, perceived social support, household decision making, regret fullness and leisure time activities. the study had implications for identifying and training retirees for better psychological well-being.

- **Quality of Life in Male & Female Working Employees:**

Baroudi & Others, (1995), studied An examination of gender effects on career success of information systems employees. Based on the literature, we expected that women in IT jobs would report poorer QWL, then men in IT jobs leading to greater turnover for women in IT. Women have a statistically significant higher level of education versus men. Carayon, P.(1997). Studied a temporal issues of quality of working life and stress in human- computer interaction. Defined QWL the complex interactions of the elements of the work system, namely the individual, the tasks, organizational factors, the environment, and tools and technology. There were some differences between women and men with regard to the job characteristics that influenced QWL. Only for women, role ambiguity is related to fatigue and tensions. Only for men, role ambiguity is related to job satisfaction and organizational involvement.

We examined the relationship between quality of life by EQ-5D and work status among Korean adults. We also tested whether and how the relationship between quality of life and work status differed by gender. Quality of life among working adults was better than among non-working adult being employed has a positive relation to quality of life among adults. Work status plays a more important role in quality of life for men than for women, especially for the working elderly men than working elderly women.
This study evidenced a positive relation between quality of life and being employed for men in all ages. Although the women’s participation in the labour market is rapidly expanding and the risk of labour shortage. One way to meet these challenges is to retain older workers in the labour market by improving their work life. This entry based on (Larsen 2008) deals with whether quality of work life measures differ in importance for male and female workers in their retirement planning.

Population ageing in most western countries involves an increase in public expenditures and the risk of labour shortage. One way to meet these challenges is to retain older workers in the labour market by improving their work life. This entry based on (Filer & Others 1988; Hurd & Others 1993). Consequently, older workers are generally more satisfied with their job than younger workers.

The World Health Organization WHO identified four broad domains as being universally relevant to the quality of life, namely physical, and psychological health, social relationships, and environment. The aim of this study was to assess the relationships between socio-demographic characteristics and quality of life of old people.

Retirement is one of the most important later life status transition related to changes in work force participation, lifestyle and social roles among older adults. Retirement may be associated with poor mental status, including depression, due to reducing the financial stability, losing work role and social networks, or feeling the gap between the social norms of workforce participation and retirement age. On the other hand, some retired people may feel relief from the pressure of work. We would expect that men & women after retirement might experience very different consequences in terms of their mental health problems.

Well-Being in Male & Female Working Employees:

The significant findings are that basic psychological needs satisfaction partially mediated the relationships between the gender effect and health problems and fully mediated the relationships between gender and psychological well-being. This result suggests that basic need satisfaction might play a more central role in exclusively mediating the link between gender and psychological well-being when the indirect paths were tested, and gender and psychological well-being were significantly positively linked through basic need satisfaction.

The main aim of this article is to study the relationships between control and demands at work, the work life balance and well-being among self-employed men & women. The result show that men & women who are self-employed experience a lower level of work life balance than those employed and this result is found more in men than women.

The levels of control and demands on the job are also shown to strongly influence work-life balance. High demands at work increase the risk of experiencing work-family conflicts (Chung, 2011). Several studies show that the self-employed have very high decision authority, control how resources are distributed at their workplace, as they often own their own enterprise (Hundley, 2001) studied why and when are the self-employed more satisfied with their job; (Stephan & Roesler, 2010) studied Health of entrepreneurs vs. Employees in a national representative sample. Research has found that the self-employed have higher levels of job control concerning autonomy, discretion and opportunities for skill- utilisation than employees.

Well-Being in Male & Female Retired employees:

It is not simply an objective life course transition but is also a subjective developmental and social-psychological transformation that may be related to physical and psychological well-being (Moen, 2001).studied the gendered life course. Others researchers have found no deleterious psychological effects associated with retirement, reporting mixed findings or no relationship between retirement and life satisfaction or physical health (Palmore & Others 1984) studied the consequences of retirement. The results suggest the importance of examining various resources and contexts surrounding retirement transition to understand the dynamics of the retirement transition and its relationship with psychological well-being. Gendered experience throughout the life course are only partially reflected in current retirement research (Calasanti, 1996; Slevin & Others, 1995). Although an increasing number of studies have explored gender differences in subjective well-being. Which suggested that women report slightly lower levels of well-being than do men (Pinquart & Sorensen, 2001). Results indicate that pre-retirement physical health, tenacity in goal pursuit, and flexibility in goal adjustment are beneficial for men’s and women’s well-being alike.

Quality of Life in working & Retired Employees:

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The quality of an individual’s work life affects his or her retirement behaviour (Filer & Others 1988; Hurd & Others 1993; Friedberg, 2003). A complementary strategy for reversing the tendency towards earlier withdrawal from the labour market could actually be that of improving older workers’ quality of work life and thus making employment more attractive to them. To measure changes in health related quality of life and employment status of NHS Staff one year after early retirement because of ill-health and to identify predictors of re-employment. Those working at one year after ill-health retirement showed greater improvement in quality of life than those not working. This study cannot establish a cause relation between this improvement and re-employment as we do not know whether quality of life improved before or after returning the work. Early retirement from regular employment provides a major challenge to social and health policy in European countries. Poor quality of work and employment is a determinant of premature departure from working life. This has been observed in employees with physically or mentally demanding work, with monotonous repetitive work, and other types of stressful experience.

Well-Being in Working & Retired Employees:

One solution to these challenges, recently proposed by (Kemal Derviș 2013), entails more individual choice regarding employment, including a scheme whereby older workers gradually lower their working hours but remain in the labour force (and pay taxes) until the age of 60. Gradual retirement could be beneficial for governments, employers, and workers. Specifically, from
a public finance perspective, phased-in retirement will likely increase tax revenues and reduce expenditures on pensions and retirement benefits.

Retirement from work is a very important event in life. The retiree has to face many changes, e.g. changes in spending time, changes in social life and financial changes. Ample research focuses on the consequences of retiring for individual well-being. Some find a positive average effect of retirement on well-being (Latif, 2011), studied the impact of retirement on psychological well-being in Canada; (Reitzes, & Others 1996) in their study does retirement hurt well-being; Others find no significant effect (Crowley, 1985) studied longitudinal effects of retirement on men’s psychological and physical well-being. While still others find a negative effect of retirement on well-being (Kim & Moen, 2002) studied retirement transition, gender, and psychological well-being a life course, ecological model.

Building on research on the well-being effects of unemployment, late-life work, and job satisfaction, we explored the effects of different employment status and retirement arrangements on well-being. The most important of these are the seeming well-being benefits to voluntary part-time employment as well as to remaining in the workforce beyond retirement age.

**SIGNIFICANCE/ RATIONALE OF THE STUDY:-**

In modern society, every individual is suffering from anxiety, depression or stress. These are the words which we frequently use in our day to day life. These psychological problems which are not taken care of in time, may build up in severe problems and as a result we would lose our wellbeing. If we focus on these problems we would find the source of problems lie in, not having a good and healthy quality of life which adversely affects our wellbeing. This is more important for working individuals who need to take care of their jobs as well as their home. It is also seen that retired people suffer more as they do not take care of their health and wellbeing after retirement. So some intervention programme for their quality of life and wellbeing along with the working individuals is essential and suggested in this study.

For Improving QWL, exercise is important for all age groups. Individuals would be suggested to do regular exercise to improve flexibility, reduce anxiety and improve their wellbeing. Obesity is a serious public health problem with worldwide prevalence. This emphasizes the importance of introducing programs aimed at weight loss, with the objective of improving workers’ health, productivity and self-esteem. Healthy habits acquired through correct information at the work environment would enable workers to feel more energetic and healthy.

QoL dimensions and well-being also relates to good communication between employers and employees. To improve communication in them some better ways of placing problems before the employers and cohesiveness can be improved by conducting workshops on communication skills such as friendliness, trustfulness, taking enough time for the employee, and listening well by the employers.

Mostly, older adults retire from their job, leading to a loss of social ties and reduced opportunities for social contact. This could increase feelings of loneliness and lead to poorer mental health outcomes Psychological well-being of retirees can be improved by giving them the feelings of self-worth, flexibility, setting new goals, perceived availability of interpersonal resources and not having regrets about past life, involving oneself in leisure time activities, and if possible living in joint family system would be suggested to enhance a retirees quality of life. These psychosocial predictors of psychological well-being would prevent deterioration of well-being and enable the retirees to adjust better with family, relatives and in society.

**METHODOLOGY:-**

**PROBLEM:-**

A study on Quality of Life and Wellbeing in Working and Retired Employees of Private organizations

**OBJECTIVES:-**

- To study the relationship in Quality of life and Well-being in Working Employees of Private organizations.
- To study the relationship in Quality of life and Well-being in Retired Employees of Private organizations.
- To study the relationship in Quality of life in Male & Female in Working Employees of Private organizations.
- To study the relationship in Well-being in Male & Female in Working Employees of Private organizations.
- To study the relationship in Quality of life in Male & Female in Retired Employees of Private organizations.
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- To study the difference in Quality of life in Working & Retired Employees of Private organizations.
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**HYPOTHESES:-**

- There is no significant relationship in Quality of life and Well-being in Working Employees of Private organizations.
- There is no significant relationship in Quality of life and Well-being in Retired Employees of Private organizations.
- There is no significant relationship in Quality of life in Male & Female Working Employees of Private organizations.
- There is no significant relationship in Well-being in Male & Female in Working Employees of Private organizations.
- There is no significant relationship in Quality of life in Male & Female in Retired Employees of Private organizations.
- There is no significant relationship in Well-being in Male & Female in Retired Employees of Private organizations.
- There is no significant difference in Quality of life in Working & Retired Employees of Private organizations.
- There is no significant difference in Well-being in working & Retired Employees of Private organizations.

**OPERATIONAL DEFINITION:-**

**QUALITY OF LIFE:**

The concept “quality of life” was first used by A. C. Pigou in his book about economic well-being in 1920. There was no reaction to this and it was ignored until the end of world war II. At that time The World Health Organization (WHO) expanded the definition of health and included the concept of physical, psychological and social well-being. The WHO...
defines quality of life (QOL) as an individual’s purpose-aligned cultural and value system by which a person lives, relate to their aims, hopes, living standards, and interests. This is a detailed concept which incorporates individuals’ physical and psychological health, their degree of independence, their social liaisons and how they relate to their surroundings. Quality of life is an area of study that has attracted an ever increasing amount of interest. Quality of life conceptual models and instruments for research, evaluation, and assessment have been developed since the middle of last century (McCall, 2005; Ruzevicius, 2012).

In this study Quality of life would be decided on the basis of the cut-off point of the scale used.

**WELL-BEING:** Well-being is a positive outcome that is meaningful for people and for many sectors of society, because it tells us that people perceive that their lives are going well. Good living conditions are fundamental to well-being. Well-being is the experience of health, happiness, and prosperity. It has good mental health, high life satisfaction, and a sense of meaning or purpose. Well-being is defined by the Oxford English Dictionary as “the state of being comfortable healthy or happy.”

“Well-being can be understood as how people feel and how they function, both on a personal and a social level, and how they evaluate their lives as a whole.”

In this study well-being would be decided on the basis of the cut-off point of the scale used.

**WORKING EMPLOYEES:**

Working outside home. Employment is a relationship between two parties, usually based on a contract where work is paid for, where one party, which may be a corporation, for profit, not-for-profit organization, co-operative or other entity is the employer and the other is the employee.

In this study working employees would be from any private organizations but not doing business.

**RETIRED EMPLOYEES:**

Retirement is the withdrawal from one’s position or occupation or from one’s active working life. A person may also semi-retain by reducing work hours. An increasing number of individuals are choosing to put off this point of total retirement, by selecting to exist in the emerging state of pre-retirement. Some people who have retired from a position with a pre-nominal title, particularly military officers, are often listed with a post-nominal indicating retirement. A retired person is an older person who has left his or her job and has usually stopped working completely.

In this study retired employees would be those who have retired from their job for at least one year or more.

**RESEARCH DESIGN:**

In this study one hundred twenty employees (N=120) would be included. They would be divided into two groups Working (N-60), & Retired (N-60). Further, on other basis of gender these two groups would be divided into two subgroups Male (N-30), & Female (N-30) in Working & Retired groups. These groups would be formed on the basis of the criteria for inclusions. Finally, their Quality of Life & Well-Being would be assessed with the help of RYFF Psychological Well-being Scale & Brunsviken Brief Quality of Life Scale (BBQ) Questionnaires.

**SAMPLE:**

Employees of Private Organizations
N-120
AGE- 30-70 Years

**PURPOSIVE SAMPLING:**
In this study purpose sample would be used. Purposive sampling is one of the most cost-effective and time effective sampling methods available. It may be the only appropriate method available if there are only limited numbers of primary data sources with can contribute to the study.

**INCLUSION CRITERIA:**

1. Employees within 30-70 years would only be part of this study.
2. Retired employees would be strictly 60 and above.
3. They would be from any working group or organization government or private.
4. Subgroup would have 30 Male & 30 Female Employees.
5. Minimum education qualification of the participants would be graduation.
6. They would all married.
7. They would be from any family structure.

**EXCLUSION CRITERIA:-**
1. Employees with known physical / mental problem would not be included.
2. Employees above 70 and below 30 would not be part of this study.
3. Education qualification of the participants less than graduation would not be included.

**TESTS & TOOLS:-**
**The Brunnsviken Brief Quality of life Scale (BBQ):**
Brunnsviken Brief Quality of life scale (BBQ) identifies the six life areas: Leisure, View on life, Creativity, Learning, Friends and Friendship, and View on self showing the greatest importance for a unified, latent QoL factors. It has a total of 12 items. All items are scored using the same response format, consisting of a five-step Likert rating scale, visually scored 0–4 with written anchor points at 0 (Strongly disagree) and 4 (Strongly agree). The BBQ total score is computed by summing the weighted satisfaction rating, i.e. by multiplying the Satisfaction and Importance items for each life area and summing the six products for a total score (possible score range 0–96).

**RYFF PSYCHOLOGICAL WELL-BEING SCALE- 42 ITGEMS VERSION- RYFF (1i89):-**
In this study the 42- item version of the scale would be used. The test is self administered and can be administered within half an hour. The scale consists of statements, positive and negative, related to six different dimensions of psychological well-being. The six dimensions are 1. Autonomy, 2. Environmental Mastery, 3. Personal Growth, 4. Purpose in Life, 5. Positive Relations, and 6. Self Acceptance. Participants rate each item on a six-point scale according to how much they agree or disagree with the statement. The test-retest reliability coefficient of RPWBS was 0.82. The subscales of Self-acceptance, Positive Relation with Others, Autonomy, Environmental Mastery, Purpose in life, and Personal Growth were found to be 0.71, 0.77, 0.78, 0.77, 0.70, and 0.78 respectively, which were statistically significant (p<0.001). The correlation coefficient of RPWBS with satisfaction life, Happiness, and Self-esteem were also found to be: 0.47, 0.58, and 0.46 respectively which were also significant (p<0.001). it is a widely used measures of well-being.

**STATISTICAL ANALYSIS:** Mean, SD, Correlation & t-test would be computed.

**PROCEDURE:-**
At permission letter would be collected from CU study centre to introduce the project to the Working & Retired Male (N=60) & Female (N=60) employees of any private organization in Kolkata. They would be approached personally. Aims & Objectives of the study would be explained to them and all their Questions would be answered to get their co-operation. Once they agree to be part of the study; proper instructions would be given to them regarding Quality of life and Well-being Scales. When they would be clear about the instructions they would be requested to fill up the questionnaires and after they complete answering, answer sheets would be collected back, scored on the basis of test norms, data would be then statistically treated & interpretation would be done and finally a conclusion would be drawn.

**ETHICAL CONSIDERATION:-**
1. Only the working employees of private organizations would be requested to fill-up the Quality of Life.
2. They would be informed about the aims & objectives of the study.
3. A written consent would be taken from them.
4. Confidentiality of their responses would be maintained.
5. The result would be shared with them as far as practicable.
6. Rapport would be established with the participants.
7. They would be assured of confidentiality of their Information provided by them.
8. Acceptance & Non-judgemental attitude would be maintained.
9. Autonomy of the participants would be respected.
10. Cultural context & background of the participants would also be respected.

**Summary Table**

**Table 1: Mean and SD value on Quality of Life & Well-Being in Working & Retired**

<table>
<thead>
<tr>
<th>Variables</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of Life (Working)</td>
<td>36.85</td>
<td>6.78</td>
</tr>
<tr>
<td>Well-Being (Working)</td>
<td>174.09</td>
<td>23.58</td>
</tr>
<tr>
<td>Quality of Life (Retired)</td>
<td>34.7</td>
<td>6.50</td>
</tr>
<tr>
<td>Well-Being (Retired)</td>
<td>161.19</td>
<td>16.86</td>
</tr>
</tbody>
</table>

**Table 2- Mean and SD value on Quality of life & Well-being in Working Male & female**

<table>
<thead>
<tr>
<th>Variables</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of Life (Male)</td>
<td>37.4</td>
<td>6.37</td>
</tr>
<tr>
<td>Well-Being (Male)</td>
<td>177.17</td>
<td>23.27</td>
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<tr>
<td>Quality of Life (Female)</td>
<td>36.3</td>
<td>6.78</td>
</tr>
<tr>
<td>Well-Being (Female)</td>
<td>171</td>
<td>23.67</td>
</tr>
</tbody>
</table>

**Table 3- Mean and SD value on Quality of Life & Well-Being in Retired Male & Female**

<table>
<thead>
<tr>
<th>Variables</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of Life (Male)</td>
<td>35.4</td>
<td>5.03</td>
</tr>
<tr>
<td>Well-Being (Male)</td>
<td>169.27</td>
<td>17.30</td>
</tr>
<tr>
<td>Hypothesis</td>
<td>T-Value</td>
<td>P-Value</td>
</tr>
<tr>
<td>------------------------------------</td>
<td>---------</td>
<td>---------</td>
</tr>
<tr>
<td>Quality of Life in Working &amp; Retired</td>
<td>1.80</td>
<td>0.077062</td>
</tr>
<tr>
<td>Well-Being in Working &amp; Retired</td>
<td>3.45</td>
<td>0.001051</td>
</tr>
</tbody>
</table>

**Correlation Value**

<table>
<thead>
<tr>
<th>Hypothesis</th>
<th>Correlation</th>
<th>P-Value</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of Life &amp; Well-Being (Working)</td>
<td>0.58</td>
<td>0.564162</td>
<td>Not significant</td>
</tr>
<tr>
<td>Quality of Life &amp; Well-Being (Retired)</td>
<td>0.18</td>
<td>0.857780</td>
<td>Not significant</td>
</tr>
<tr>
<td>Quality of Life &amp; Well-Being in Male (Working)</td>
<td>0.52</td>
<td>0.607151</td>
<td>Not significant</td>
</tr>
<tr>
<td>Quality of Life &amp; Well-Being in Male (Retired)</td>
<td>0.95</td>
<td>0.350240</td>
<td>Significant</td>
</tr>
<tr>
<td>Quality of Life &amp; Well-Being in Female (Working)</td>
<td>0.62</td>
<td>0.541637</td>
<td>Not significant</td>
</tr>
<tr>
<td>Quality of Life &amp; Well-Being in Female (Retired)</td>
<td>0.93</td>
<td>0.360320</td>
<td>Significant</td>
</tr>
</tbody>
</table>

**Results**

Table -1 Shows Mean and SD values on Quality of Life & Well-Being in Working and Retired. Mean of Quality of Life in Working is 36.85, Standard Deviation is 6.78. Mean of Well-Being in Working is 174.09, Standard Deviation is 23.58. Mean of Quality of Life in Retired is 34.7, Standard Deviation is 6.50. Mean of Well-Being in Retired is 161.19, Standard Deviation is 16.86.  
Table -2 Shows Mean and SD values on Quality of Life & Well-being in Working Male & female. Mean of Quality of Life (Male) is 37.4, Standard Deviation is 6.37. Mean of Well-being (Male) is 177.17, Standard deviation is 23.27. Mean of Quality of Life (female) is 36.3. Standard Deviation is 6.78. Mean of Well-Being (Female) is 171, Standard Deviation is 23.67.  
Table -3 Shows Mean and SD values on Quality of Life & well-being in Retired Male & female. Mean of Quality of Life (Male) is 35.4, Standard Deviation is 5.03. Mean of Well-being (Male) is 169.27, Standard deviation is 17.30. Mean of Quality of Life (Female) is 34. Standard Deviation is 7.67. Mean of Well-Being (Female) is 153.1, Standard Deviation is 11.89.  
Table -4 Shows hypothesis 1 which says, “There is no significant difference in Quality of Life in Working & Retired” T-Test Value is 1.80 and P-Value is 0.077062 which is less than 0.05 level.  
Table -5 Shows hypothesis 2 which says, “There is no significant difference in Well-Being in Working & Retired” T-Test Value is 3.45 and P-Value is 0.001051 which is less than 0.05 level.  
Table -6 Shows hypothesis 3 which says, ”There is no significant relationship in Quality of Life & Well-Being in Working” Correlation Value is 0.58 and P-Value is 0.564162. Which is more than 0.05 level.  
Table -7 Shows hypothesis 4 which says, “There is no significant relationship in Quality of Life & Well-Being in Retired” Correlation Value is 0.18 and P-Value is 0.857780. which is more than 0.05 level.  
Table -8 Shows hypothesis 5 which says, “There is no significant relationship in Quality of Life & Well-Being in Male (Working)” Correlation Value is 0.52 and P-Value is 0.607151, which is more than 0.05 level.  
Table -9 Shows hypothesis 7 which says, “There is no significant relationship in Quality of Life & Well-Being in Male (Retired)” Correlation Value is 0.95 and P-Value is 0.350240, which is less than 0.05 level.  
Table -10 Shows hypothesis 6 which says, “There is no significant relationship in Quality of Life & Well-Being in Female (Working)” Correlation Value is 0.62 and P-Value is 0.541637. which is more than 0.05 level.  
Table -11 Shows hypothesis 8 which says, “There is no significant relationship in Quality of Life & Well-Being in Female (Retired)” Correlation Value is 0.93 and P-Value is 0.360320. which is less than 0.05 level.
Only Working and Retired employees graph on Quality of Life and Well-Being in Male and Female.

Discussion:
The aim of the study is to find out the gender difference in Quality of Life & Well-Being in Working and Retired employees of private organisation in kolkata. And also to find out the relationship between Quality of Life & Well-Being in Working and Retired employees in Private Organization.

Table-4: Shows T-test between Quality of Life in Working and Retired. When T-Value is 1.80 and P-Value is 0.077062. The result shows its significance at 0.05 level which indicates that there is T-test between Quality of Life in Working and Retired which is positively related to each other. Thus the null hypothesis is rejected, as we have significant relationship. The result is supported by many research by Filer & Petri (1988) where topic of study was relationship between job characteristics and retirement. These results suggest that job characteristics determine an appropriate retirement age for a specific job and that the retirement age in turn determines the structure of the pension program. They found that many job characteristics are significant predictors of early retirement, Including heavy physical demands and stress. Flexibility of employment, as measured by the possibility of self-employment or part-time employment, increased the retirement age.

Blekesaune & Solem(2005). This article investigates the impact of working conditions on individual retirement for 270 occupations. It combines survey data for estimates of job strains, and income and social insurance/security data, for the transition from work to retirement for 19,114 Norwegian employees between the ages of 60 and 67. Retirement was identified by a drop in work-related income and studied both jointly and separately for disability and non-disability retirement. Findings indicate that disability retirement is related to physical job strains. Among men & women, both pathways of early retirement are related to low autonomy in job tasks. Furthermore, psychological job stress may reduce non-disability retirement. Larsen (2008) This study applies samples of workers and retirees born in 1940 and 1945 drawn from Danish panel surveys in 1997 and 2002 and merged with longitudinal register data. Results suggest that male and female workers’ retirement plans are affected differently by various aspects of the job. Indeed, job demands lower planned retirement age, while increases in earnings, work hour satisfaction, and the opportunity to use skills on the job increase this age for men and women. Nevertheless, the impact of earnings is largest for men, and only male workers attach importance to job control and job security. These gender differences suggest, first, that men are more
influenced than women by the quality of job dimensions in their retirement planning and, second, that an employer-initiated effort directed towards retaining older workers at the workplace will not necessarily be as effective for female as for male workers.

Table-5: Shows T-Value between Well-Being in Working and Retired. When T-test is 3.45 and P-Value is 0.001051. The result shows its significance at 0.05 level which indicates that there is T-test between Well-Being in Working and Retired which is positively related to each other. Thus the null hypothesis is rejected, as we have significant relationship. (Elder & Rudolph, 1999; Reitzes & Mutran, 2004; Rosenkoeter & Garris, 2001; Wang, 2007; Petkoska & Earl, 2009) have been shown to be positively related to retirees’ psychological well-being. In other words, retirees who perceive their retirement decision to be voluntary and who have prepared extensively for retirement are more likely to enjoy better psychological well-being in retirement. People who retire earlier than expected or planned are more likely to experience decreased psychological wellbeing entering retirement. The ‘higher employee productivity was associated with… better… psychological wellbeing’, and the research means the results can be viewed as generalizable to other employee groups’. Similarly, Robertson and Cooper16 refer to research that establishes the relationship between psychological well-being on the one hand, and job performance and productivity on the other, and note that they have ‘obtained similar results [to those of Donald et al.] from organisations in many different settings’. In well-being at work and its relationship to business outcomes, well-being at work is particularly worthy of attention today, as the financial crisis has produced a less secure and more stressful environment for many individuals at work. In 2005, a review by (Biddle and Ekkedalas) summarised the evidence to date on the relationship between physical activity and well-being. They found significant and lasting positive impacts on life satisfaction, eudaimonic well-being or good functioning and positive affect. The evaluation found strong relations between changes in physical activity and changes in subjective well-being.

Table-6: Shows Correlation between Quality of Life & Well-Being in Working. When Correlation Value is 0.58 and P-Value is 0.564162. The result shows its significance at 0.05 level which indicates that there is no correlation between Quality of Life & Well-Being in Working which is positively related to each other. Thus the null hypothesis is accepted as we have not significant relationship. In regard to the study of the effects of different types of physical activity on health-related quality of life, the results describe the impact of a program of supervised exercise on health-related quality of life among a group of participants receiving conventional medical treatment for ischemic cardiopathy, in comparison with the impact of an unsupervised walking program. No significant differences were observed between the supervised and unsupervised groups in relation to the improvements attained.

Table-7: Shows Correlation between Quality of Life & Well-Being in Retired. When Correlation Value is 0.18 and P-Value is 0.857780. The result shows its significance at 0.05 level which indicates that there is no correlation between Quality of Life & Well-Being in Retired which is positively related to each other. Thus the null hypothesis is accepted as we have not significant relationship. The result is supported by many studies. This study was designed to investigate central aspects in the retirement process; the effects of retirement transition type and individual resources on changes in life satisfaction in the years before and after retirement. We found retirement to be associated with an overall increase in life satisfaction after 1 year while unchanged retirement status was related to a smaller overall decrease. Based on the idea that gradual retirement leads to more successive lifestyle changes (Shultz & Wang, 2011; Wang & Shultz, 2010; Zhang & Wang, 2015), we further anticipated that gradual retirement would be associated with fewer changes in life satisfaction than those observed for abrupt retirement. We found no significant difference in average rate of change between gradual and abrupt retirement. However, in the literature, we have found different results from those obtained for resources in the domains of cognitive abilities and motivation where there is no significant change, suggesting that retirees can maintain the resources in these two domains after retiring from their jobs. As this study only evaluates the changes in resources one year after actual retirement, long-term changes remain largely unknown.

Table-8: Shows Correlation between Quality of Life & Well-Being in Male Working. When Correlation Value is 0.52 and P-Value is 0.607150. The result shows its significance at 0.05 level which indicates that there is no correlation between Quality of Life in Male & Female Working which is positively related to each other. Thus the null hypothesis is accepted as we have no significant relationship. The result is supported by many studies. The study was done to compare quality of life among working and non-working females. More of working women were in overweight category (66%) as compared to non working women (58%). The study concluded that non-working females had a better quality of life as compared to working females. But the differences were not statistically significant (Ayesh tabassum 2011) According to the Mann-Whitney U Test result, the perception of male and female employees of the private sector does not differ significantly in terms of work and total life space, opportunity to develop human capacities, opportunity for growth and job security, safe & healthy working environment, and socialization efforts. But the mean values of the male employees regarding these aspects differ a little from the female employees. For all of the factors, the male employees’ perception is more positive compared to the female employees except the socialization efforts dimension, where the mean value of the males (3.50) is slightly greater than the males (3.34).

Table-9: Shows Correlation between Quality of Life & Well-Being in Male Retired. When Correlation Value is 0.95 and P-Value is 0.350240. The result shows its significance at 0.05 level which indicates that there is correlation between Quality of life in Male & Female Retired which is negatively related to each other. Thus the null hypothesis is rejected as we have significant relationship. The result is supported by many studies. J Epidemiol Community Health, 2006 We look for predictors of quality of life other than age. Significant events during this stage of the life span include loss of income because of exit from the labour force and the increasing probability of illness. Measures of subjective wellbeing have been shown to be associated with financial situation and health and functioning. The Berlin aging study found that good health (measured as self reported illnesses and self assessed health) was important for a strong sense of wellbeing in its sample of people aged 70–105 years; an age spread that includes the third age. The study also found that income and satisfaction with income influenced subjective wellbeing in old age. Although life satisfaction does not show gender differences. Contextual factors like social capital, social networks, and social participation also can contribute to the quality of life in older ages. Women had significantly higher quality of life than men. A woman's quality of life was decreased by those factors representing domestic labour: informal care, looking after the home and family, and more
frequent contact with children and family; and it was increased by living alone and affluence. For men none of these factors were significant. Some of these differences might be because of the longer life expectancy of women, with the consequently greater chance that when living in a couple the woman will be the carer rather than the man.

**Table-10:** Shows Correlation between Quality of Life & Well-Being in Female Working. When Correlation Value is 0.62 and P-Value is 0.541637. The result shows its significance at 0.05 level which indicates that there is no correlation between Well-Being in Male & Female Working which is positively related to each other. Thus the null hypothesis is accepted as we have no significant relationship. The result is supported by many studies. As in the case of our findings, the state of gender rights may play a role in this, although we do not know for sure. As one test of this, we explored whether the positive well-being “effect” of marriage was driven by married women. In contrast to what we expected, the result is driven by married men! Married men report lower levels of well-being than do married women in all three income regions, although the gap between married men and married women is smallest in the low income countries. There is no statistically significant gap between unmarried men and unmarried women in the low income countries, meanwhile, while the gender difference still holds for unmarried men and women in the middle and high income countries, with unmarried women having higher levels of well-being (Gallup World Poll (2005-2011)).

**Table-11:** Shows Correlation between Quality of Life & Well-Being in Female Retired. When Correlation Value is 0.93 and P-Value is 0.360320. The result shows its significance at 0.05 level which indicates that there is correlation between Well-Being in Male & Female Retired which is positively related to each other. Thus the null hypothesis is rejected as we have significant relationship. The result is supported by many studies. Research on retirement suggests that marriage and family relationships serve as social–relational resources in retirement (George and Maddox 1977; Gove, Style, and Hughes 1990; Hendrick et al. 1982; Kessler and Essex 1982; Kilty and Behling 1985; Mutran et al. 1997; Vinick and Ekerdt 1989). Strong emotional support from a spouse may well help individuals overcome stressful life events, thereby sustaining their psychological well-being. For instance, Lee 1978 reported significant contributions of marital satisfaction to morale for older men and women (aged 60 and older), but the positive effect of marital satisfaction on morale was notably stronger for women than for men. The research findings similarly indicate that women's psychological well-being is more heavily influenced by marital quality than is men's (Acitelli and Antonucci 1994; Dehle and Weiss 1998; Ross 1995).

**Conclusion:**

From the findings of the study it can be concluded that Working employees have better Quality of Life & Well-Being as compared to Retired employees in Private Organization.

When correlation with considered there is a positive correlation in Quality of Life & Well-Being in Male & Female a Retired employees but there is no significant correlation is Quality of Life & Well-Being a Working & Retired employees with Quality of Life & Well-Being in Male & Female a Working employees.

Last but not the least the research finding reveals that half of our daily life is spent at work places and work life has become an integral part of our total life. Making work place happier has to be not only mandatory part of our role but it is to be carried out by the functionaries with the same passion, spirit, enthusiasm, commitment and energy so management should make sure that all the employees working in their organization are happily working leading to good QWL which will boost up their performance to come happily daily to their work place.

At present times it is an basic issue to develop positive psychological Well-Being for the whole work force whether it be employees or employers. To enhance well-being employees should engage in recreation, meditation, yoga, or just have a good holiday. It will bring efficacy, hope, optimism among workers. Healthy work force signifies improved performance by employee that in turn helps the management to achieve its higher goals which will help to create a strong community also. Enhancing Well-Being in the workplace accelerate performance and profitability by having employees who are psychologically healthy and happy at workplace. Further, the retirees will low psychological Well-Being can be identified by the measures used in the study to cope effectively with their psychological problems. As the study found self-esteem, flexibility, and perceived social support to be salient features for promoting Well-Being, Counselling can be focus on these aspects.

**Implications of the study:**

In modern society, every individual is suffering from anxiety, depression or stress. These are the words which we frequently use in our day to day life. These psychological problems which are not taken care of in time, may build up in severe problems and as a result we would lose our wellbeing. If we focus on these problems we would find the source of problems lie in, not having a good and healthy quality of life which adversely affects our wellbeing. This is more important for working individuals who need to take care of their jobs as well as their home. It is also seen that retired people suffer more as they do not take care of their health and wellbeing after retirement. So some intervention programme for their quality of life and wellbeing along with the working individuals is essential and suggested in this study.

For Improving QWL, exercise is important for all age groups. Individuals would be suggested to do regular exercise to improve flexibility, reduce anxiety and improve their wellbeing. Obesity is a serious public health problem with worldwide prevalence. This emphasizes the importance of introducing programs aimed at weight loss, with the objective of improving workers’ health, productivity and self-esteem. Healthy habits acquired through correct information at the work environment would enable workers to feel more energetic and healthy.

QWL, dimensions and well-being also relates to good communication between employers and employees. To improve communication in them some better ways of placing problems before the employers and cohesiveness can be improved by conducting workshops on communication skills such as friendliness, trustfulness, taking enough time for the employee, and listening well by the employers.

Mostly, older adults retire from their job, leading to a loss of social ties and reduced opportunities for social contact. This could increase feelings of loneliness and lead to poorer mental health outcomes Psychological well-being of retirees can be improved by giving them the feelings of self-worth, flexibility, setting new goals, perceived availability of interpersonal resources and not having
regrets about past life, involving oneself in leisure time activities, and if possible living in joint family system would be suggested to enhance a retirees quality of life. These psychosocial predictors of psychological well-being would prevent deterioration of well-being and enable the retirees to adjust better with family, relatives and in society.

Limitations:
1. Size of the sample is very small.
2. Sample is this not a representative sample, so generalization of the finding is not possible.
3. Only two variables are included, other variables taken into contributions.

Suggestion for Further Research:
There are few humble suggestion which could be followed in future research related to this variables;--
While working on the topic of a co-relational study on Quality Of Life & Well-Being in Working & Retired Employees of Private Organizations in Baruipur but also we could be use important variables as like “personality characteristics responsible for perception of a specific event in an individual’s life and how it affects their Quality of Life”, and “Quality of life in addition to gender such as the employment status of the spouse could be undertake on further research”.
- Larger sample size & random sampling would help in generalization of the finding.
- Job stress & motivation can also be included.
- Married and un-married can be studies separately for further research.

REFERENCES:-