

RESEARCH ARTICLE

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Quality of Life: Concept, Domains, Dimensions -Analytical Study Dr. INCHAKOUT Ahmed ¹, Pr. NEFIDSA Fatima ², Pr. BOUTAANI Farid ³

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Abstract:

This study aims to identify the quality of life and discuss a number of the literature that included it, In order to delve more deeply into its concept and dimensions, And shed light on some of the theories explaining it, And trying to deconstruct and analyze these elements.

We concluded from this that there is no single agreed upon definition of quality of life, she is defined according to the context in which she is used, Mostly, the comprehensive definition provided by the World Health Organization is taken into account, Despite the different fields and studies, especially psychological and medical ones, Because it includes both objective and subjective dimensions. We concluded that its fields and dimensions are multiple and diverse, she is formed according to the indicator to be measured, However, much of the literature and theories have converged in identified it between broadening and narrowing it.

Keywords: Quality of Life, Dimensions of Quality of Life, Domains of Quality of Life, Positive Psychology.

Introduction:

Individuals strive for what constitutes a life of well-being, or at least a good life. Quality of life is a primary and comprehensive goal for them, encompassing multiple aspects such as psychological, social, economic, and professional well-being, among others. It focuses on life issues and ways of dealing with them in a way that enhances those aspects. In other words, the improvement or lack thereof in living and health conditions is determined by the degree of development and enhancement in these areas. This can only be judged by understanding and measuring the diverse objective and subjective indicators in different disciplines, and by different scales, as well as by adapting the subjective well-being surveys to the desired goals.

The term "quality of life" has been used in many disciplines, most notably philosophy, psychology, and medicine, over the last five decades. Each discipline defines it according to its own specialization and perspective. Although the term "quality" is primarily applied to material and technological aspects, it can also be used to refer to human development, function, and consciousness.

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The topic of quality of life has received more attention from researchers and psychologists than in other disciplines, both quantitatively and qualitatively, when compared to other fields. Anyone following modern psychological studies will notice a clear focus on the concept of quality of life in general, and individual quality of life in particular. This interest reflects the importance of this term and its impact on various psychological aspects. Generally speaking, it can be said that quality of life refers to an individual's understanding of their lifestyle within the social environment and cultural context in which they live, and how these elements contribute to fulfilling their interests and desires in a way that suits their psychological state. It should be noted that the differing opinions of researchers across various disciplines, the numerous methodologies employed, and the diverse interpretations of this concept significantly influence past research and studies in this field, and may also affect future ones. The informed reader will understand why there is no single, definitive, and unambiguous definition of quality of life, or why so many different definitions of it have been proposed. To delve deeper into this topic, we will review some of the studies that have addressed quality of life, starting with Joan Ismail Bakr's (2011) study entitled: Quality of Life and its Relationship to Belonging and Social Acceptance. This study concluded that its dimensions are summarized as family relationships, income, education, mental health, general health and social relationships, leisure time, and optimism about the future. These are considered indicators of quality of life for the students in the research sample. The dimensions of social belonging were represented by satisfaction with the group, self-esteem, community participation, and social conformity. Social acceptance, however, was considered a single dimension. In a study by Suad Houti (2023) entitled: Quality of Life among Women with Breast Cancer During Chemotherapy, the aim was to determine their level of quality of life during chemotherapy and to identify the most important indicators contributing to it. This was achieved through a clinical study of two breast cancer patients undergoing chemotherapy. The study concluded that both patients enjoyed a high level of quality of life, albeit with some differences in degree. It also concluded that family and marital support were among the indicators that contributed to their quality of life. In addition, the following dimensions were considered: family, marital, professional, and religious, as indicators that helped both cases during the treatment and chemotherapy phase. A 2022 study by Agnieszka Magiera and Agnieszka Pak, titled "Determinants of Quality of Life Among Adolescents in the Małopolska Region, Poland," aimed to identify the determinants of different dimensions of quality of life in several areas among a sample of Polish adolescents. The study found that different risk factors were associated with low quality of life in different dimensions: female gender was a risk factor for physical health, psychological well-being, self-image, independence, relationships with parents and home life, and financial resources; the highest school year was associated with physical well-being, psychological well-being, mood and emotions (second year of secondary school only), self-image, social and peer support, and the school environment; and dissatisfaction with appearance was attributed to both physical and psychological health. Based on what has been mentioned previously, in this scientific paper we will seek to review and discuss a set of elements, namely: the concept of quality of life, addressing its history, fields and dimensions in relation to psychology, and touching on some of the theoretical approaches to it. Based on that, we pose the following questions: - What is the concept of quality of life? What determines it? Is it the same as well-being and happiness, or does it aim for something else? What are its fields? What are its dimensions?

A- Study objectives:

Psychology has focused its daily critical attention on the individual, paying particular attention to understanding and interacting with individuals in order to promote healthy behaviors, modify unhealthy ones, and identify the underlying psychological causes, or at least mitigate them.

Recently, with the emergence of other psychological concepts such as positive and wellness psychology, the efforts of scientists, theorists, and experts have moved beyond simply isolating the individual from illnesses and diseases, aiming instead to enable them to enjoy life in its fullest potential.

Therefore, the study aims to:

- Identify the concept of quality of life and its related concepts in psychology.
- Explore its history, as the universe is fundamental to defining its concepts and understanding its dimensions.
- Discuss its divisions and dimensions, and examine its main aspects.
- Highlight some of the theories that explain it.

B- Importance of the study:

The importance of this study lies in establishing a theoretical framework for quality of life, adding to the existing literature and enriching the modest body of Arabic scientific research and output on the subject. Quality of life is a relatively new term, largely confined to positive psychology at the expense of other branches of psychology that have focused primarily on treating psychological disorders and modifying abnormal behaviors. However, other sciences in general have also embraced it, encompassing numerous factors that extend beyond the scope of those other branches to address the basic and secondary needs of individuals, both moral and material.

Therefore, the study's significance can be summarized as follows:

- Attempting to provide a comprehensive analysis of the concept of quality of life, contributing to a better understanding of its dimensions and areas.
- Enriching related scientific research.
- Raising public awareness of its importance and how to achieve it.

 In short, this study represents a significant contribution to understanding quality of life, which

in short, this study represents a significant contribution to understanding quality of life, which will positively impact individuals and societies.

2. The Concept of Quality of Life:

2.1 The Emergence and Development of the Concept of Quality of Life:

The concept can be traced back to the early philosophical period (427-322 BCE), where happiness was the central goal of a good life, defined by attitudes, feelings, and beliefs. The principle of quality of life indicators emerged with the rise of social indicators in the early 1960s, and its roots can be traced back to economic measurement tools of the 18th, 19th, and early 20th centuries, which were divided into quantitative and qualitative indicators. In 1947, the World Health Organization defined it as "a state of complete physical, mental, and social well-being and not merely the absence of disease and infirmity." In 1990, Hanestad believed the concept gained popularity partly due to its positive connotations, stating that "most people would agree that it is a goal for both the individual and groups of individuals." However, this assumes that quality of life, or even the concept of quality itself, refers only to a positive state, not simply a "state."

In 1995, the WHO revised its definition to: "An individual's perception of their place in life within the context of the culture and value systems in which they live and in relation to their goals, expectations, norms, and interests." This definition is broad and encompasses areas such as physical health, psychological state, level of independence, social relationships, and personal beliefs.

2.2 The concept of quality of life:

The concept of quality of life has gained widespread adoption in scientific applications and even in our daily lives. Attempts to define quality of life have varied according to the theoretical frameworks from which these definitions emerged. However, existing indicators, with all their observable, statistically verifiable, and measurable physical manifestations, are no longer sufficient

for a precise and comprehensible formulation of quality of life. It is considered a relatively recent concept, and in some Arabic research, it has been referred to as "quality of life." Quality of life encompasses three aspects: health, psychological, and social.

From a psychological perspective, it is viewed as a comprehensive holistic structure composed of diverse variables aimed at satisfying the basic needs of the individual. It can be measured using both objective and subjective indicators.

2.3 Definitions of Quality of Life:

Definitions of quality of life are numerous and varied, depending on the researcher's ideological and intellectual background, their approach to the concept within different contexts, and the implications and dimensions of the concept.

In terms of definitions, there is a very wide range of definitions and interpretations of quality of life—more than 100, according to Robert Schalock. It should be emphasized that publications on quality of life from the medical literature often fail to define it precisely. In a recent systematic review, only 16 of the 68 health-related quality of life models assessed provided a definition of quality of life. This common failure to specify what is being measured, or even to cite definitions used elsewhere, greatly increases its conceptual ambiguity. Keith argues that many researchers believe quality of life cannot be precisely defined, and therefore they often choose to study different aspects and dimensions of quality of life rather than attempt an explicit definition. Currently, the term carries different meanings depending on the context in which it is used. For example, in the field of health promotion and disease prevention, it is often used synonymously with health status. In psychology, quality of life is defined as a subjective relationship to health, manifested in overall life satisfaction and well-being, characterized by a predominance of positive emotions, a relative absence of negative emotions, and a subjective sense of good health.

In his publications, *Psychology of Health* (2009), Křivohlavý states that "quality of life is defined in relation to an individual's satisfaction with achieving the goals that define the direction of their life."

It is also defined as the degree to which life meets the various criteria for a good life.

Quality of life is the experience of life through feelings of satisfaction, happiness, and well-being, living a life free from behavioral, psychological, and health disorders, resulting in security, stability, and contentment that enables one to serve oneself and the community in which one lives. Al-Ghandou (1999) explained that it is a holistic structure comprised of a set of variables aimed at satisfying the individual, and indicators that measure the degree of this satisfaction. These indicators include objective measures of the available resources and subjective measures of the degree of satisfaction achieved. According to Fayers and Machin (2000), quality of life represents the differences between an individual's hopes and expectations and their current experience.

3. Positive psychology and quality of life:

Positive psychology shares many commonalities with the fields of social indicators and quality of life research. However, not all research can be described as positive. Research on quality of life can be divided into one of four approaches based on whether it uses a subjective or objective methodology, and whether its focus is on negative or positive indicators. While the subjective approach relies on self-reported quality of life, the objective approach relies instead on sources of information that exist independently of the participant (e.g., poverty status) or, if reported by the participant, can be verified (e.g., academic interests). Conversely, while some quality of life indicators are negative, as researchers seek to understand or address the presence of undesirable conditions or situations (e.g., violence, fear), others are positive, as researchers measure the presence of undesirable conditions like violence or fear in relation to desirable conditions like cooperation, happiness, joy, and prosperity. Therefore, positive psychology is an important paradigm within the quality of life tradition that emphasizes positive indicators and thus addresses imbalances in human well-being such as the absence of negativity. Since the latter half of the 20th

century, researchers have focused on understanding quality of life as a concept linked to positive psychology. Research in this field has increased, encompassing subjective experiences, positive habits, personality traits, and everything that contributes to improving quality of life. Positive psychologists describe it as "the study of all human strengths and what can prevent individuals from falling prey to psychological and behavioral disorders, as well as the study of all the subjective and societal factors that govern human life."

In the last two decades, research has identified a range of factors that influence well-being and quality of life. These include demographic factors such as economic status, marital status, gender, and age; perceived health; factors related to social life; sense of belonging to the community; and the quality of interpersonal relationships.

4. Areas of quality of life:

Kekic (2005), as well as Felce & Perry (1995), state that the factors of quality of life are diverse and extensive, covering a wide range of areas of life. These include, for example, physical comforts, health conditions, social interaction, education, creative expression, cultural values, the work environment, and housing. When placed within a common frame of reference, these factors provide an alternative and broader understanding of current external influences and living conditions—that is, a more complete and comprehensive assessment of quality of life. Quality of life is a complex system comprised of a range of physical, psychological, and social domains.

4.1 The psychological field:

For Deware (1989), the psychological component of quality of life includes positive emotions and affective states, while for others it is synonymous with the absence of negative affect, which means that it is analogous to mental health or subjective psychological well-being, which are more comprehensive concepts in terms of their inclusion of cognitive processes, i.e., satisfaction with life.

4.2 The physical field:

This book categorizes various aspects of physical health and functional abilities. Physical health encompasses energy, vitality, fatigue, rest, pain, and biological indicators, while functional abilities include job status, active engagement, and daily activities.

4.3 The social sphere:

Social relationships and activities constitute the third most important area of quality of life. The social dimension of quality of life encompasses social interaction, which, in contrast to isolation or social withdrawal, involves various spheres such as family, friendship, and work—a network of relationships that fosters social and emotional integration. In terms of quality, it provides social support within the social environment.

Flanagan (1982) considers individual evaluation of social activities to be based on self-esteem, self-actualization, success, and failure, which are indicators of social well-being.

The World Health Organization (WHO) has identified five dimensions of quality of life:

- 1. Physical: This includes pain, activity and fatigue, sleep and rest, and sensory functions.
- 2. Psychological: This includes negative and positive emotions, self-esteem, and body image.
- 3. Social: This includes activities of daily living, communication skills, interpersonal relationships, social support, and the ability to work.
- 4. Environmental: This includes freedom, physical safety and home environment, financial resources, health and social care, and employment opportunities. 5- The cognitive domain, which

includes (the ability to remember, focus attention, maintain attention, and satisfaction with personal abilities).

5. Dimensions of quality of life:

The concept of quality of life is viewed as a multidimensional construct. Researchers who have attempted a comprehensive analysis of it have acknowledged its multidimensional nature. This is due to the diversity of fields that utilize it, and the relatively recent number of studies examining this variable across various disciplines, such as medicine, economics, sociology, counseling and rehabilitation programs, and education, confirms that this concept is indeed multidimensional.

Saleh (1990) explained that there are two types of indicators for quality of life: the first is objective, which includes factors such as population, social status, occupation, income, transportation, housing, education, and health.

The second is subjective, which assesses quality of life based on individuals' perceptions and responses to it, the satisfactions it provides, and their level of contentment and happiness. This is considered the best indicator of quality of life.

Abdel-Moati (2005) asserts that quality of life has three dimensions: 1. Objective quality of life (social life), 2. Subjective quality of life (life satisfaction), and 3. Existential quality of life (meeting needs and psychological adjustment to oneself and society).

From the above, it can be said that the concept of quality of life encompasses the following dimensions:

- Physical: concerned with illnesses.
- Functional: concerned with medical care and the level of physical activity.
- Social: concerned with communication and social interaction.
- Psychological: concerned with cognitive functions, emotional state, mental health, life satisfaction, and happiness.

6. Some theories explaining quality of life:

6.1 Rafe's Theory (1999):

Reeve's theory focuses specifically on the key dimensions of psychological well-being, which are:

Dimension 1: Autonomy, representing an individual's ability to make decisions and be self-reliant.

Dimension 2: Environmental mastery.

Dimension 3: Personal growth.

Dimension 4: Positive relationships with others.

Dimension 5: Self-acceptance.

Dimension 6: Purpose in life.

Therefore, according to Reeve's theory, quality of life is achieved through an individual's autonomy, their ability to make their own decisions successfully, their control over their environment, the development of various aspects of their personality, their social balance, their self-acceptance, and the setting of clear goals to strive for.

6.2 The Schalok model:

Schalok (1996) developed a detailed analytical model of the concept of quality of life, which he presented in his book, "Quality of Life: An Application to People with Disabilities." He proposed that it is a composite concept comprising eight domains, each containing three indicators. All of these domains stem from the premise that subjective dimensions significantly influence an individual's perception of quality of life more than objective dimensions. He emphasizes that a

portion of an individual's perceived quality of life is attributable to a crucial factor: the nature of their own perception of it.

Schalok's analytical model can be summarized in two main directions:

- 1- The subjective direction: This includes functional assessment, daily active interactions, observation, participation, daily events, self-reports, and questionnaires about various circumstances and roles such as education, occupation, and housing.
- 2- The external direction: This includes various social stimuli and events, and living and working conditions.

From the foregoing, it is clear that the term "quality of life" is a modern, ambiguous, and broad concept, although its origins, according to some literature, can be traced back to Aristotle and the philosophers of his time and those who followed them. Despite this, it has not yet been defined or agreed upon by scientists and experts. Quality of life is largely relative and so broad that it cannot be confined to a good income and standard of living, as it encompasses many different areas such as health, living conditions, family life, professional life, and much more. Despite the numerous definitions of quality of life, they differ more than they agree. In fact, no single definition has yet been agreed upon, especially in psychological studies, due to its multiple, diverse, and branching dimensions, and the differences between individuals and societies. For example, the determinants of quality of life for patients may not be the same as for healthy individuals, and for the elderly, they may not necessarily align with those of young people. They may also differ between rural and urban communities, which has further complicated its precise definition and measurement. However, the World Health Organization has established a comprehensive definition of quality of life, which has been adopted and continues to be widely used in numerous applied and theoretical studies. This may be due to its comprehensive inclusion of both subjective and objective indicators, as we observed during our review of some of these studies.

Quality of life is linked to positive psychology, a relatively recent branch of psychology that focuses on positive mental phenomena in human life. Psychology has been at the forefront of efforts to define, analyze, and clarify this variable, aiming to achieve a good life for the individual. This goal is not limited to treating disorders and illnesses, nor simply being free from disease, but extends to achieving happiness and subjective well-being in various aspects.

Quality of life has two dimensions: subjective and objective, and other dimensions as previously mentioned. Subjective aspects include, but are not limited to, personal well-being, happiness, and life satisfaction. Objective aspects include, for example, living standards, income, economic production, and societal development.

conclusion:

In conclusion, quality of life is a concept that has received, and continues to receive, significant social, scientific, and political attention due to its close links to the well-being of individuals and societies. This study, which sheds light on the concept of quality of life, its domains, and dimensions, can summarize its findings in the following points:

- Quality of life is a modern, complex concept influenced by numerous factors, including health, social, and economic factors.
- The study demonstrated that healthcare, psychological well-being, social relationships, education, and the environment play a crucial role in improving quality of life.
- The study identified key dimensions affecting quality of life, such as physical and mental health, education, the environment, and standard of living.
- The study showed that raising societal awareness of its importance often leads to the adoption of positive behaviors that enhance overall well-being.

- The study concluded that improving quality of life significantly contributes to building more stable and prosperous societies.

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