

The effect of personal, social, and collective identity on mental well-being in university students

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ABSTRACT

Identity is a process in which self-perception is formed through the groups and culture of which individuals are members, as well as their internal inquiries about who they are. In this respect, personal, social and collective identity types draw attention in the literature. It is known that the achievement of individuals in identity integrity increases well-being. In this context, it was aimed to investigate the effects of personal, social and collective identity on mental well-being in this study. This study was carried out in accordance with the correlational pattern, one of the quantitative research designs. The research group of the study consisted of 341 (254 female, 87 male) university students between the ages of 18-30 (mean = 20.93). Personal Information Form, Identity Questionnaire and Warwick-Edinburgh Mental Well-Being Scale Short Form were used as data collection tools in the study. According to correlation analysis, there was a positive relationship between mental well-being and personal identity, social identity, and collective identity. According to structural equation model analysis, it was found that personal identity and collective identity positively and significantly predict mental well-being, but the effect of social identity on mental well-being was not significant. The results are discussed in the context of identity and well-being literature.

Keywords: Identity types, mental well-being, university students.

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INTRODUCTION

Mental well-being means that individuals are aware of their abilities and can contribute to life in line with these abilities, cope with stress, and be productive in business life (World Health Organization, 2004). It can be said that the most commonly used concepts related to mental well-being are psychological well-being, subjective well-being, and social well-being. Psychological well-being is defined as managing existential challenges in life, such as establishing healthy relationships with others, maintaining goals, and personal development (Keyes et al., 2002). Subjective well-being is based on a holistic positive subjective evaluation (Diener, 1984). From these cognitive and emotional evaluations; positive and negative affect dimensions are defined as emotional evaluation, and the life satisfaction dimension is defined as cognitive evaluation (Diener et al., 2008). Many factors such as wealth, age and health status play an important role in subjective well-being (Diener et al., 2018). In the related literature, social relations (Macdonald and Hülür, 2021), personality traits (Moreira et al., 2023), and identity (Fadjukoff and Pulkkinen, 2006) are associated with well-being. These variables

related to identity can be listed as identity statuses (Luyckx et al., 2008), identity dimensions (Luyckx et al., 2010) or identity styles (Vleioras and Bosma, 2005).

Identity, which is a reflection of individuals' perceptions of who they are, continues to format throughout adolescence and emerging adulthood (Arnett, 2000). Since identity has both personal and social factors simultaneously, it is considered an important concept in social life as well as individual (Way and Rogers, 2015). For this reason, identity is not only a product of internal inquiries but also a process in which individuals create their self-perception through groups. In this respect, there are many definitions of identity (Hammack, 2015). Personal identity often emphasizes individuals' beliefs, feelings, values, and goals, and defines identity as a mechanism that begins in adolescence and continues through the emerging adult years. Social identity, which focuses on belonging, approval, and admiration, deals with the importance of social relations formed by an individual's membership in a group (McLean and Syed, 2015). The view that identity development is related to the environment and social context (Luyckx et al., 2010),

provides a basis for personal and social identity. In addition, the collective identity, which determines that individuals are a part of the culture, and their religious and ethnic background, also provides an answer to the question of who the individual is. According to Erikson (1994), who provides a theoretical ground for identity studies, sociocultural, historical, and political contexts affect identity development. Therefore, factors such as the place where individuals grew up, the feeling of belonging to the society as a citizen and adapting to the norms determined by the culture cause the formation of collective identity (Taylor, 1997).

It is expected that the identity dimensions of individuals will show continuity, consistency, and harmony with each other over time (Erikson, 1994). Being inharmonious with individuals' identity means that they do not behave in accordance with how they see themselves (Pluta et al., 2022), and this may negatively affect well-being by creating a maladaptive image of the self. For example, interruption of life goals, dreams, or plans has a negative impact on the continuity of personal identity. This situation causes well-being problems (Mandiberg and Edwards, 2013). Similarly, the sense of continuity of social identity structured by belonging to any group also prevents risks to well-being (Hall and Cheston, 2002). Therefore, it can be said that the sense of continuity regarding personal and social identity is associated with well-being. On the other hand, it is known that continuity and positive commitment to collective identity, especially including ethnic and religious identity, increase well-being (Dimitrova et al., 2014).

Many studies deal with the relationship between identity and well-being and investigate direct and indirect effects. It has been found that there is a relationship between identity and well-being (Vleioras and Bosma, 2005; Adarves-Yorno et al., 2020) and that vocational identity, which is considered a general concept than personal identity and social group membership, has an effect on well-being (Binder and Blankenberg, 2022). In studies dealing with indirect effects, the role of multicultural acquisition between social identity and well-being (Damkier and Ozer, 2022) and the effect of voluntary participation in a group on well-being through identification with the social community (Bowe et al., 2020) were examined. In another indirect effect study, it was determined that self-concept consistency and self-efficacy played a mediating role in the relationship between multicultural identity configurations and well-being (Mosanya and Kwiatkowska, 2023).

In line with the information given above, it is seen that there is a relationship between identity and well-being. However, variables are generally examined within the scope of a dual-cycle identity model and identity styles (Crocetti et al., 2011; Luyckx et al., 2010), three-dimensional identity formation model and identity statuses (Karaş and Ciecuch, 2018). On the other hand, although there are studies investigating the relationship between collective identity (Dimitrova et al., 2014), social identity (Kyprianides et al., 2019) or personal identity (Mannerström, 2019) and well-being, there is no study examining the relationship of the type of these three identities with well-being, which is considered as an

important variable in achieving 'good life'. Therefore, it may be important to carry out the current study on the subject where research on personal, social, collective identity, and mental well-being is lacking. In addition, it is known that the continuity of individuals' beliefs, feelings, values and goals, meeting their needs for approval and admiration, and feeling of belonging to a group increase mental health (Binder and Blankenberg, 2022; Bowe et al., 2020; Guérin et al., 2019). In this case, it can be thought that a high personal, social and collective identity will play an important role in increasing well-being. Considering that the individual's self-evaluation style is also a concept related to well-being (Eryilmaz and Atak, 2011), it is thought that the current study will not only contribute to the literature dealing with identity types but also form the basis for intervention programs to increase mental well-being. Therefore, this study aims to examine the relationship between identity types and mental well-being. In this direction, the following hypotheses are listed:

1. Personal identity predicts mental well-being.
2. Social identity predicts mental well-being.
3. Collective identity predicts mental well-being.

METHOD

Research design

In this study, the correlational pattern model was used to describe the relationship between personal, social, collective identity, and mental well-being. This model is a type of research that determines the formation and degree of relationships between two or more variables (Fraenkel et al., 2015). It was purposed to describe the role of independent variables in predicting the dependent variable.

Participants

The study group consists of 254 female (74.5%) and 87 male (25.5%) university students in Turkey. The average age of the participants aged between 18 and 30 was (Mean = 20.93, SD = 2.57).

Instruments

Personal information form (PIF)

In the form developed by the researchers, there is information such as gender, age, and marital status.

Identity questionnaire (IQ)

The IQ was developed by Cheek et al. (1994) and was adapted to Turkish by Coşkun (2004). The scale has 25 items and three factors: Personal Identity, Social Identity, and Collective Identity. The scale, which can be

applied to adolescents and adults, is rated on a 5-point Likert-type. In the original study, reliability was examined by calculating the reliability coefficient (Cronbach's alpha). It was found to be between $\alpha = .68$ to $.82$ for the personal identity, $\alpha = .68$ to $.83$ for the social identity, $\alpha = .68$ to $.72$ for the collective identity, and between $\alpha = .70$ - $.80$ for the total scale. (Coşkun, 2004). In the adaptation study, the reliability coefficient was found as $\alpha = .76$ for the personal identity, $\alpha = .78$ for the social identity, $\alpha = .80$ for the collective identity, and $\alpha = .79$ for the total scale (Coşkun, 2004). In the current study, the internal consistency coefficient was calculated as $\alpha = .91$ for the personal identity, $\alpha = .76$ for the social identity, and $\alpha = .82$ for the collective identity.

Warwick-Edinburgh mental well-being scale short form (W-EMWBSSF)

The scale developed by Tennant et al. (2007) was adapted into Turkish by Demirtaş and Baytemir (2019). There are 7 items in the 5-point Likert-type scale. The validity and reliability of the short form, which has a single-factor structure, were examined by Haver et al. (2015) on two different samples in Norway and Sweden. The reliability coefficient based on internal consistency was found as $\alpha = .84$ for the Norwegian sample and $\alpha = .86$ for the Swedish sample. In the Turkish adaptation study, internal consistency was found as $\alpha = .84$ for the first group and $\alpha = .86$ for the second group. In the current study, $\alpha = .83$.

Data collection procedures

Firstly, the necessary permissions were obtained from the Ethics Committee of the university. It was collected from students through purposive sampling in the 2023 academic year. An online form was created by the researcher on Google Forms. Then this form was sent to the students through the university information system. In addition, on the first page of the form, consent was obtained from the participants about whether they would participate voluntarily and it was mentioned that their personal data would not be shared with third parties.

Data analysis

Firstly, descriptive statistics were determined for identity and mental well-being. The dataset was evaluated in the context of missing or incorrect entries. It was determined that there were no outliers in this process. Normality assumption were evaluated via skewness and kurtosis values. Since it is known that the data set has a normal distribution as the skewness and kurtosis values approach 0 (George and Mallery, 2019), it can be said that the skewness (between $-.79$ and $.63$) and kurtosis (between $-.39$ and 1.26) values have a normal distribution in this study. Then, the predictive model was tested to test the hypotheses. In this direction, the structural equation modeling process was carried out according to the maximum probability estimation via the IBM AMOS Graphics program. For the χ^2/sd goodness of fit value of the fit indices examined as a result of the analysis, a χ^2/sd ratio of three or less in small samples and five or less in large samples is indicated as good fit (Tabachnick and Fidell, 2014). Values between $.90$ and $.95$ for NFI goodness of fit value, between $.95$ and $.97$ for CFI goodness of fit value, and between $.08$ and $.05$ for SRMR and RMSEA goodness of fit values are accepted (Tabachnick and Fidell, 2014).

FINDINGS

Correlation analysis

Firstly, normality values were examined. It was observed that the skewness values were between $-.79$ and $.63$, and the kurtosis values were between $-.39$ and 1.26 . Correlation values were investigated to determine the relationships between identity types and mental well-being. Table 1 shows the relationships, means, standard deviations, skewness, and kurtosis values among the observed variables. According to correlation analysis, there was a positive relationship between mental well-being and personal identity ($r = .422$, $p < .001$), social identity ($r = .386$, $p < .001$), and collective identity ($r = .458$, $p < .001$). These values are presented in Table 1.

Table 1. Normality values and correlations related to measurement tools.

Variables	1	2	3	4
Personal identity	1			
Social identity	.43**	1		
Collective identity	.50**	.55**	1	
Mental well-being	.42**	.39**	.46**	1

** $p < .01$

Measurement model

The measurement model consists of four latent and nine observed variables. The analysis revealed that the

measurement model fit the data well ($X^2 = 97.25$, $p < .001$, $X^2/sd = 4.63$, $CFI = .96$, $NFI = .95$, $RMSEA = .080$, $SRMR = .043$).

Structural model

In this study, the structural model was tested to examine the predictive role of personal, social, and collective identity on mental well-being. Parameter estimates related to the structural model were calculated and it was seen that other paths were significant except for the path from social identity to mental well-being in the model. After this process, the fit indices of the model were examined ($X^2 = 97.25$, $p < .001$, $X^2/sd = 4.63$, $CFI = .96$,

$NFI = .95$, $RMSEA = .080$, $SRMR = .043$). It was found that personal identity ($\beta = .27$, $p < .01$) and collective identity ($\beta = .28$, $p < .05$) positively and significantly predict mental well-being, on the other hand, social identity ($\beta = .12$, $p = .667$) predicted mental well-being positively but nonsignificantly. In addition to the model analysis, it was found that the mental well-being variable of identity types explained 34% of the variance. The obtained results are shown in Figure 1.

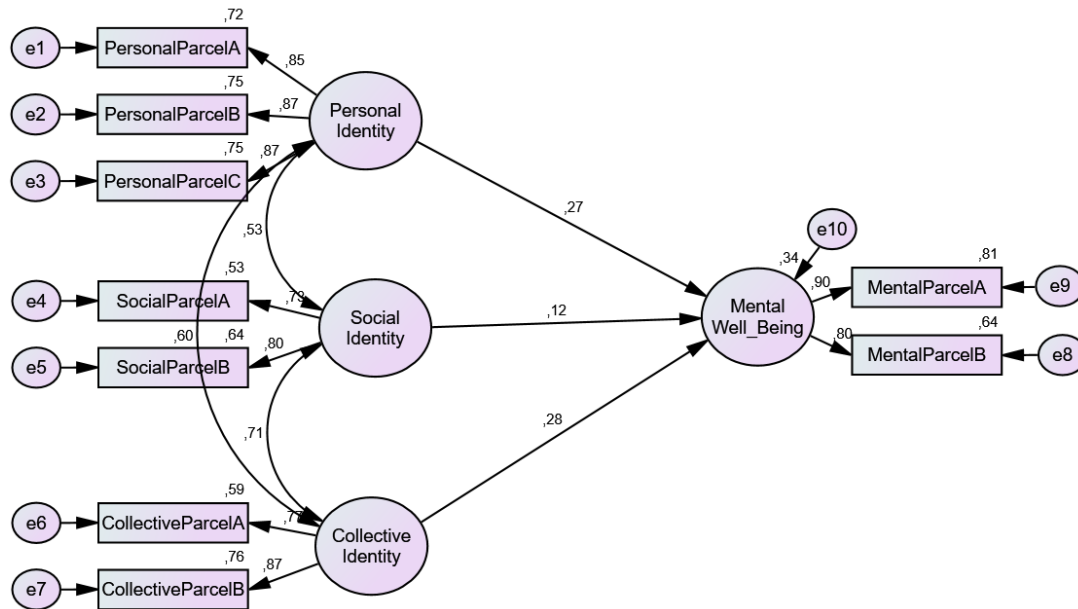


Figure 1. The predictive role of personal, social, and collective identity on mental well-being.

DISCUSSION

In the study, the relationships between personal, social, and collective identity and mental well-being were examined and it was found that personal and collective identity positively predicted mental well-being. In addition, the effect of social identity on mental well-being was found to be non-significantly.

Findings in the study confirm hypothesis 1 and a positive effect of personal identity on mental well-being was found. This finding shows that personal identity can be an important predictor of mental well-being. The finding is similar to the related literature (Berezina et al., 2020; Syed and McLean, 2022). The more individuals achieve identity integrity, the better their well-being (Serafini and Adams, 2002). At the same time, it was emphasized to support identity and personal responsibility in the protection of mental health, which is an indicator of well-being (Slade, 2009). According to the relevant literature, individuals who create a personal identity that emphasizes consistency and continuity in goals, values, feelings and beliefs have well-being (Schwartz et al., 2011). In the study conducted by Mandiberg and Edwards (2013), it is argued that social

roles change with the instability of personal identity, and the mental health of individuals is negatively affected by not being able to do what they can do in their lives. Therefore, it can be said that the effect of personal identity on mental well-being is parallel to the relevant literature.

According to another result obtained from the research, the effect of social identity on mental well-being was found to be nonsignificant and hypothesis 2 was not confirmed. According to Damkier and Ozer (2022), the reason why social identity does not always positively affect well-being can be explained by cultural factors. This may be due to individuals prioritizing and preferring individual values and cultures. Another reason why social identity nonsignificantly predicts mental well-being may be that social identity does not play a significant role in the society in which the individual lives. According to Brook et al. (2008), in societies where social identity is very important, having multiple identities and adapting between these identities increase well-being. However, if there are conflicts between identities and an inharmonious process is experienced, well-being decreases. However, in situations where social identity is less important, neither social identity nor inter-identity

harmony affects well-being. In other words, the scarcity of commitments in social identity does not affect well-being. In the current study, the nonsignificance of the effect of social identity on mental well-being can be explained by the fact that the participants did not commit and give importance to social identity as much as other identity types.

Other findings in the study confirm hypothesis 3 and positive effect of collective identity on mental well-being was found. Accordingly, collective identity can be considered an important factor in increasing mental well-being. In the study of Haslam et al. (2022), it is suggested that providing collective meanings supports mental health, which is a sign of well-being. In the study conducted by Gardner and Garr Schultz (2017), it was found that collective self-concept clarity increases well-being. Collective identity is defined as one of the two structures that make up collective self-concept clarity. Therefore, the positive prediction of collective identity on well-being is similar to the relevant literature. In addition, according to Dimitrova et al. (2014), a continuous and consistent commitment to ethnic, familial, and religious issues covered by collective identity increases well-being. In addition, individuals being aware of cultural values as citizens and internalizing these values autonomously may also contribute to their well-being. This may be one of the reasons why collective identity increases mental health.

LIMITATIONS

This study has some limitations. First, the study was cross-sectional. Since identity has dynamic mechanisms of change over time and the view of identity processes is the continuity of personality (Lilgendahl, 2015), further studies on identity can be conducted longitudinally. Secondly, since identity continues to take format in both emerging adulthood and adolescence (Cookston and Remy, 2015), new studies to be conducted in different age groups, especially in adolescents, may ensure the generalizability of the results. Third, it may be suggested to examine mediator variables in new studies to investigate the relationships between the concepts in this study. Finally, the correlational pattern was used in this study. Considering that the narratives of the participants in the studies on identity are used, it can be suggested to conduct qualitative research by investigating the Narrative Identity Approach together with mental well-being.

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