

Self-efficacy, Life Satisfaction and Quality of Life in Local Tourists of Pakistan

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ABSTRACT

The present study was conducted with the aim to investigate the relationship between Self-efficacy, Life satisfaction, and Quality of life in local tourists of Pakistan. Data was collected from local tourists, a total of 151 men and women. A correlational research design was used along with snowball sampling to collect data from participants by using of Self-efficacy scale (SES), Satisfaction with Life Scale (SWLS), and Quality of life scale (QOL). The results revealed that there was a significant positive relationship among self-efficacy, life satisfaction, and quality of life in local tourists of Pakistan. Further, the results showed that self-efficacy and satisfaction with life are significantly correlated with factors of quality of life. Self-efficacy, satisfaction with life, and quality of life are found more in tourists who travel more frequently in a year. This study has implications for developing the tourist industry and encouraging local travel for Pakistani's as an intervention to improve the health and wellbeing of people.

Keywords: Life satisfaction, local tourism, tourism, Pakistan, quality of life, self-efficacy

INTRODUCTION

In recent years, tourism has started to flourish and became a leisure activity for people in Pakistan. Though most of us have been “tourists” at some point in our lives, defining tourism can be challenging. Tourism is popularly defined by scholars as people traveling away from home to intermingle and be connected to a new community and other settings (Sharpley, 2014). The changing aspects of tourism have shaped a new way where tourists want some reason and sense about their holidays. Moscardo (2009) explored the future of tourism and quality of life of tourists. Residents were asked to give their positive or negative views with regards to visiting attractions in their tourist destination. Another study aimed to understand whether tourist impressions and experiences affect general satisfaction with life (Andereck et al, 2007).

It is generally observed that tourists with large social groups and interactions have good psychological well-being and quality of life and that positive interactions of tourists affects their satisfaction in life, well-being, and behaviors regarding the future commitment to revisit and travel (Sharpley, 2014). Tourism affects the state of well-being which leads to overall satisfaction in life. People who are happier, extroverted, lively, and social are more likely to be travelers as they like to explore new things. Tourism can confirm constructive affiliation among people and give them a purpose for living contributing to their wellness. Tourists commonly wish to escape from daily mundane routines and tension. Travel offers people new perspectives of life, novel experiences, and opportunity for adventure (Villamira, 2001). Argan and colleagues (2018) recommended that vacation pleasure and life satisfaction were mediators for experiences of joy, and facilitate the effect of general wellness on pleasure.

The average level of tourism in Pakistan has amplified over the last few years. Tourism can contribute directly and indirectly to development goals of a country (Santos et al., 2020), and can also help to improve life satisfaction and quality of life in people. Specialists have confirmed that tourism can contribute to positive psychology and the development of wellbeing (Garcês et al., 2020). Experiences during travel can improve the happiness in tourists and give them opportunity to plan future travels, which can further support satisfaction levels and quality of life (Garcês et al., 2018).

Individuals who seek adventure are found to show improvement in life satisfaction when they travel (Schimmack et al, 2003). Tourist usually spends their time sightseeing, exploring, eating and relaxing; which provides them as escape from their daily routine. Researchers from psychology have examined the role in tourism in altering personality traits and perceptions of satisfaction. Traveler's have been investigated based on their expressions and behavioral choices (Ryglová et al., 2011). In tourism psychology, different areas have been investigated such as desires, decision making, frequency of travel, and gratification and practice. Theory of Maslow's "hierarchy of needs" proposes that basic needs are achieved by people when they travel, especially if they had the desire to travel (Kotler, 2000).

As tourists change their destinations and tourist sites, they are able to explore more places and thus the frequency of travel is also associated with better quality of life. Tourists also experience greater satisfaction when they are supported by the local citizens and in convenience for transportation and safety. The Pakistan tourist industry has not taken into account the behavior and demographics of tourists or planned development according to tourist needs and commitment to return (Ahmad et al., 2014). This study would be an effort to help advise the tourism industry and motivate their planning according to tourist needs. Quality of life and its

association with tourism has been researched over the years. Scholarship suggests that travel can improve quality of life, including the dimensions of physical, psychological, social, and environmental health (Woo et al., 2015).

Scholars like Fodness and Murray (1999) contend that in the contemporary times tourism would become the principal means to gratify human needs and advance quality of life. Travel would also help develop understanding and harmony between people (Copeland, 1991). As the fastest growing industry these days is tourism, it also has a significant role in business development and economic progress of a nation (Mowforth & Munt, 2003). Tourism provides many opportunities including employment, and increase in GDP (Delibasic et al., 2008). There has been ample research to prove that increase in travel can boost quality of life (Cohen, 1978; Jurowski, Uysal, & Williams, 1997; Kim, 2002; Linton, 1987).

Quality of life increases during after travel as it contributes to relaxation and recreational needs in people (Dolnicar et al., 2013). Favorite hobbies of tourists include sporting, fishing, shooting (Tomka et al., 2015; Weiermair & Peters, 2012). Some variables that may influence quality of life during travel include participation in leisure activities, the duration of the visit, and availability of choices for tourists (Neal et al., 2007). Some research suggests that satisfaction during travel is also related to who you travel with, such as friends or family members (Kovács, 2007).

Life satisfaction is defined as satisfaction of the mind and emotions. It is related to pleasure and fulfillment. The key symptoms of satisfaction with life are happiness and subjective well-being (Lyubomirsky, 2001). Liang and Hui (2016) discovered the association among local tourists and their satisfaction with life. There is model constructed by Neal and colleagues

(1999), which has found that satisfaction with life is linked to satisfaction with many domains of life and subdomains, and also with overall quality of life (Neal et al., 1999; Neal et al., 2004).

Self-efficacy refers to an individual's belief in his or her capacity to execute behaviors necessary to produce specific performance attainments (Bandura, 1986). Self-efficacy too is associated with tourism as people experience independence and opportunities to learn (Siebenhandl et al., 2009). Other research finds that higher self-efficacy is related higher frequency of travel (Minnaert et al., 2010) and an improved perception of life satisfaction and wellbeing (McCabe & Johnson, 2013). Prior research also shows that self-efficacy and quality of life are associated positively (Maddux, 2002). Travellers build their self-efficacy through travel-related activities where they involve themselves with new surroundings and learn new things. They socially interact with the locals, learn different languages or learn to communicate despite language barriers and gain from a process of self-discovery (Coghlan, 2007; Campbell & Smith, 2006).

Aim the Study

Individual life has altered and improved by many activities, including ability to travel. With the spread of the tourism industry, people have become more interested in engaging themselves in leisure activity and tourism is preferred. Friends and family relations, health, activity, and work are significant inspirations of traveling, and this is also known as health tourism and wellness tourism (Kovacs et al., 2007), It is important that a person has exposure to different places and travels to gain experience and observe other cultures. Traveling is associated with quality of life.. Tourism can reduce a person's loneliness, depression and distress and help to improve their life satisfaction and performance in daily activities. Traveling can also help in making a person's life

more productive and meaningful. The main objective of this study was to explore the relationship among life satisfaction, quality of life, and self-efficacy in local tourists.

Research Questions

This study aims to answer the following research questions: (1) To identify the relationship between quality of life and life satisfaction in local tourists of Pakistan; (2) To explore gender differences of self-efficacy, life satisfaction and quality of life in local tourists of Pakistan; and (3) To investigate the nature of relationship among self-efficacy and quality of life in local tourists of Pakistan.

METHODOLOGY

Ethics

This study was approved by the Ethics Review Committee (ERC) of Lahore School of Professional Studies (LSPS), The University of Lahore; ERC No. ERC-20/04. Consent was taken from the participants after explaining the objectives of the study. Confidentiality and anonymity was protected of all participants and they were informed of their right to withdraw from the study at any point. All the respondents were informed that the data would be kept securely with the lead researcher.

Research Design

This study adopted a correlational research design. A snowball sampling technique was used to collect data.

Hypotheses of the Study

Based on literature review and previous research the following hypotheses was developed for this study:

H1. There is a significant positive relationship between self-efficacy and life satisfaction.

H2. There is a significant positive relationship between self-efficacy and quality of life.

H3. There is a significant positive relationship between quality of life and life satisfaction.

Sample selection

The selection criterion was tourists of Pakistan who agreed to participate in the study, both male and female and from any age group. Only tourists who could speak in Urdu or English were eligible for participation.

Instrument

The following measures were used to collect relevant data from participants (Appendix A):

Demographic Questionnaire

Demographic information of the patients was collected through a form generated by the researcher including age, gender, and the frequency of travel in a year.

General Self-Efficacy Scale

General Self-Efficacy Scale was used to assess the level of self-efficacy of the participants (Schwarzer & Jerusalem, 1995). This is a 10 item scale which measures responses on a 4-point Likert scale of 1-4: '1' indicating 'not at all', '2' indicating 'hardly true', '3' indicating 'moderately true' and '4' indicating 'exactly true'. Its reliability is 0.80.

Satisfaction with Life Scale

The Satisfaction with Life Scale was used, to measure life satisfaction and includes 5 items (Diener et al., 1985). It includes five self-reference declarations on perceived global life satisfaction and measures responses on a 7-point Likert scale with points ranging from '7' for strongly agree and '1' for strongly disagree. The reliability of this scale is 0.87.

The Quality of Life Scale

The Quality of Life Scale was used to measure quality of life in participants (Burckhardt & Anderson, 2003). This is a 26 item scale and measures areas like fulfillment, insights of control, participation, obligation, and work-life balance. It uses a 5-point Likert scale and has a reliability of 0.83.

Data collection

After the permission for usage of questionnaire from respective authors of scales, official permission to collect survey data from clients was taken from university adventure clubs and tourism companies. Participants were then approached by the lead researcher in person for permission to participate. Data was collected over a period of 30 days in December 2019 from the adventure clubs and tourism companies of four cities: Lahore (n=81), Islamabad (n=25), Faisalabad (n=30), and Sialkot (n=15). We were able to sample 151 tourists in all. The participants were given guidelines related to the questionnaire and scales and supported by the researcher in completing the survey. Data was collected in both Urdu and English language.

Data Analysis

Data was entered into the Statistical Package for the Social Sciences (SPSS-21). Both correlation analysis and t-tests were used to test the hypotheses of the study. A p-value of ≤ 0.05 was considered statistically significant for this study.

RESULTS

Demographic Results

We had a final sample of 151 local tourists from Pakistan (**Table 1**). About 70% of the tourists were men and 30% were women. The tourist participants were split equally between the age

groups of 20 to 26 years (50%) and 27 to 35 years (50%). Majority of the participants travelled 1 to 3 times per year (53%); whereas 47% travelled 4 to 20 times per year.

Table 1

Frequency of the demographic characteristics of the participants (N = 151)

Variable	Male	Female	Total
	<i>f</i>	<i>f</i>	<i>f</i>
Gender	106	45	151
Age			
20 to 26 years	50	26	76
27 to 35 years	56	19	75
No. of Tours in a Year			
1-3	54	26	76
4-20	52	19	71

Note: *f* = Frequency, % = Percentage

Reliability Results

Alpha coefficients of all scales used in the present study were satisfactory (**Table2**).

Table 2:

Descriptive statistics of the scales (N=151).

Variables	Number of Items	Mean ± SD	α
Self-efficacy	10	31.54 ± 4.89	.66
Satisfaction with life	5	24.16 ± 5.83	.71
Quality of life	26	93.66 ± 11.60	.82

Correlation Results

Table 3 shows the correlation among study variables. Results revealed that self-efficacy has significant positive correlation with life satisfaction ($r=.33^{***}$, $^{***}p<.001$) and with quality of life ($r=.35^{***}$, $^{***}p<.001$). In addition, life satisfaction has a significant positive correlation with the quality of life ($r=.62^{***}$, $^{***}p<.001$) of the local tourists of Pakistan (**Table-2**).

Table 3

Pearson Correlation, Mean and Standard Deviation on Self-efficacy (SES), Satisfaction with Life (SWL), Quality of Life (QOL) and their Factors (N = 151)

Variable	1	2	3
1. Self-efficacy	---	.33***	.35***
2. Satisfaction with Life	---	---	.62***
3. Quality of Life	---	---	---
<i>M</i>	31.54	24.15	93.65
<i>SD</i>	4.89	5.83	11.59

Table 4 shows Pearson Correlation among study variables. The findings indicate that self-efficacy and satisfaction with life have significant positive correlation with factors of quality of life including general health quality of life, physical health quality of life, psychological health quality of life, social health quality of life, and environmental health quality of life

Table 4

Pearson Correlation, Mean and Standard Deviation on Self-efficacy (SES), Satisfaction with Life (SWL), Quality of Life (QOL) and their Factors (N = 151)

Variable	1	2	3	4	5	6	7
1. Self-efficacy	---	.33***	.24**	.18*	.34***	.20*	.30**
2. Life satisfaction	---	---	.45***	.35***	.53***	.42***	.52***
3. GHQOL	---	---	---	.28**	.41***	.33***	.37***
4. PHQOL	---	---	---	---	.51***	.26**	.51***
5. PSYHQOL	---	---	---	---	---	.30**	.58***
6. SHQOL	---	---	---	---	---	---	.44***
7. EHQOL	---	---	---	---	---	---	---
<i>M</i>	31.54	24.15	7.42	24.13	21.54	11.15	29.39
<i>SD</i>	4.89	5.83	1.61	3.81	3.28	2.22	4.50

Note: GHQOL = General Health Quality of Life, PHQOL = Physical Health Quality of Life, PSYHQOL = Psychological Health Quality of Life, SHQOL = Social health Quality of Life, EHQOL = Environmental Health Quality of Life, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

Mean Results

Table 5 shows significant differences in the number of annual tours participants engaged in and study variables. Self-efficacy, satisfaction with life, and quality of life were found to be higher in participants who have had higher frequency of travel in a year ($p < .001$).

Table 5

Independent sample t-test for Number of Tours and Self-Efficacy, Satisfaction with Life and Quality of Life (N = 151)

Variable	No. of tours	<i>M</i>	<i>SD</i>	<i>t</i> (149)	<i>p</i>	95%		Cohen's <i>d</i>
						<i>LL</i>	<i>UL</i>	
Self-efficacy	1-3	30.13	4.89	3.83	.001***	-4.44	1.42	0.64
	4-20	33.07	4.14					
Life satisfaction	1-3	22.68	5.43	3.34	.001***	-4.92	1.26	0.54
	4-20	25.78	5.89					
Quality Of life	1-3	91.66	12.56	1.00	.022**	-7.93	0.51	0.37
	4-20	95.88	10.08					

DISCUSSION

Tourism is an important aspect of a person's life as it is related to well-being and opportunity for leisure. Many positive factors like life satisfaction and self-efficacy are linked to tourism. The intellectual and emotive features of travelling create feelings of accomplishment and self-image in people. Furthermore, it affords people experience and knowledge of different regions and culture (Zhang et al., 2018). There is increased interest in identifying the role of tourism in the lives of people and the influence it may have on self-efficacy, life satisfaction and quality of life, which is what this study aimed to do.

The current study sampled local tourists of Pakistan belonging to different cities and settings. Different population groups were sampled, including: students, adults, and tourism managers. Tourism has led to positive effects on tourist's life in terms of satisfaction, wellness, health, and self-efficacy. Higher frequency of travel has shown to have advantages for people. In this way, the tourist industry can contribute to supporting well-being in people's lives. This study found that there is a positive relationship between tourism and all three independent variables of study including satisfaction with life, self-efficacy, and quality of life.

The first study hypothesis predicted that there would be a significant positive relationship between self-efficacy and life satisfaction. In other words as self-efficacy improves in tourists, it also improves satisfaction with life. Results confirm that there is a positive relationship between self-efficacy and life satisfaction in local tourists of Pakistan. A previous study conducted by Lightsey and colleagues (2013) on the relationship between the self-efficacy and life satisfaction of young adults, also confirms that young adult's self-efficacy significantly predicts their satisfaction with life.

The second study hypothesis predicted that there would be a significant positive relationship between self-efficacy and quality of life. This suggests that when tourists show improvement in self-efficacy, there is also an improvement in quality of life. Results of our study indicate that self-efficacy is significantly correlated with quality of life in tourists. Previous research conducted by Ginting (2016) on how self-efficacy enhances heritage tourism in Medan historical corridor also corroborates our results. When self-efficacy and tourist satisfaction grows there are implications for attracting and sustaining tourism for the country, which would also help the economy and image of Pakistan.

The third study hypothesis predicted that there would be a significant positive relationship between quality of life and life satisfaction. The results show that life satisfaction is positively correlated with factors of quality of life. Previous research was conducted by Benckendorff and colleagues (2009) on the future of tourism and quality of life and their results indicated that quality of life, well-being, and happiness define an individual satisfaction with life and mental state of fulfillment.

Limitations of the Study

Some of the limitations of the study include snowball sampling, and gathering data from only 45 female tourists. We were also unable to sample elderly people to identify their experiences. Similarly, there needs to be further research while sampling foreign tourists and not just local tourists. We would recommend that further studies also do group-based research on families to examine whether there are any differences in experiences between different family members.

CONCLUSION

Tourism is increasing radically and must become a priority for research and development of Pakistan. Local tourism is gaining attention in recent times, as more people in the country recognize that Pakistan has beautiful tourist spots and they do not have to travel abroad to experience an avenue for leisure and adventure. Travelling is also associated with an increase in the quality of life and life satisfaction in people. Our study concludes that self-efficacy, life satisfaction, and quality of life increases in local tourists of Pakistan. This study helps in shedding light on the benefits of tourism and travel in people's lives. Additionally, the findings of this research also has implications for developing the tourist industry of Pakistan and encouraging local travel for Pakistani's as an intervention to improve the health and wellbeing of people.

Conflict of interest statement

The authors declare no conflict of interest

Funding

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Ethics and Permission

The study gained ethics clearance from the Departmental Ethical and Research Committee of the Psychology Department, Lahore School of Professional Studies The University of Lahore.

Author Contributions

AG planned the study with approval and guidance of MNI, FJ and SQ. AG collected the data and drafted the paper. MNI assisted in data analysis. All authors approved the final manuscript.

Data sharing and availability statement

Data is available from the corresponding author based on request.

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Appendix A

Demographic Sheet

Age _____
 Gender _____
 Number of Tours in a Year _____

General Self-Efficacy Scale

#	Item	1 Not at all	2 Hardly true	3 Moderately true	4 Exactly true
1.	I can always manage to solve difficult problems if I try hard enough.				
2.	If someone opposes me, I can find the means and ways to get what I want.				
3.	It is easy for me to stick to my aims and accomplish my goals.				
4.	I am confident that I could deal efficiently with unexpected events.				
5.	Thanks to my resourcefulness, I know how to handle unforeseen situations.				
6.	I can solve most problems if I invest the necessary effort.				
7.	I can remain calm when facing difficulties because I can rely on my coping abilities.				
8.	When I am confronted with a problem, I can usually find several solutions.				
9.	If I am in trouble, I can usually think of a solution.				
10.	I can usually handle whatever comes my way.				

Satisfaction with Life Scale

Instructions: Below are five statements that you may agree or disagree with. Using the 1 - 7 scale below, indicate your agreement with each item by placing the appropriate number on the line preceding that item. Please be open and honest in your responding.

- 7 - Strongly agree
6 - Agree
5 - Slightly agree
4 - Neither agree nor disagree
3 - Slightly disagree
2 - Disagree
1 - Strongly disagree

_____ In most ways my life is close to my ideal.

_____ The conditions of my life are excellent.

_____ I am satisfied with my life.

_____ So far I have gotten the important things I want in life.

_____ If I could live my life over, I would change almost nothing.

Quality of Life

Instructions: Please read each question, assess your feelings, and circle the number on the scale for each question that gives the best answer for you.

		Very poor	Poor	Neither poor nor good	Good	Very good
1	How would you rate your quality of life?	1	2	3	4	5

		Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
2	How satisfied are you with your health?	1	2	3	4	5

The following questions ask about **how much** you have experienced certain things in the last two weeks.

		Not at all	A little	A moderate amount	Very much	An extreme amount
3	To what extent do you feel that physical pain prevents you from doing what you need to do?	1	2	3	4	5

4	How much do you need any medical treatment to function in your daily life?	1	2	3	4	5
5	How much do you enjoy life?	1	2	3	4	5
6	To what extent do you feel your life to be meaningful?	1	2	3	4	5

		Not at all	A little	A moderate amount	Very much	Extremely
7	How well are you able to concentrate?	1	2	3	4	5
8	How safe do you feel in your daily life?	1	2	3	4	5
9	How healthy is your physical environment?	1	2	3	4	5

The following questions ask about **how completely** you experience or were able to do certain things in the last two weeks.

		Not at all	A little	Moderately	Mostly	Completely
10	Do you have enough energy for everyday life?	1	2	3	4	5
11	Are you able to accept your bodily appearance?	1	2	3	4	5
12	Have you enough money to meet your needs?	1	2	3	4	5
13	How available to you is the information that you need in your day-to-day life?	1	2	3	4	5
14	To what extent do you have the opportunity for leisure activities?	1	2	3	4	5

		Very poor	Poor	Neither poor not good	Good	Very good
15	How well are you able to get around?	1	2	3	4	5

The following questions ask you to say how **good or satisfied** you have felt about various aspects of your life over the last two weeks.

		Very dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Very satisfied
16	How satisfied are you with your sleep?	1	2	3	4	5
17	How satisfied are you with your ability to perform your daily living activities?	1	2	3	4	5
18	How satisfied are you with your capacity for work?	1	2	3	4	5
19	How satisfied are you with yourself?	1	2	3	4	5
20	How satisfied are you with your personal relationships?	1	2	3	4	5

21	How satisfied are you with your sex life?	1	2	3	4	5
22	How satisfied are you with the support you get from your friends?	1	2	3	4	5
23	How satisfied are you with the conditions of your living place?	1	2	3	4	5
24	How satisfied are you with your access to health services?	1	2	3	4	5
25	How satisfied are you with your transport?	1	2	3	4	5

The following question refers to **how often** you have felt or experienced certain things in the last two weeks.

		Never	Seldom	Quite often	Very often	Always
26	How often do you have negative feelings such as blue mood, despair, anxiety, depression?	1	2	3	4	5