

The Study of the Virtual Educational Systems Effect on Learning Process

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Abstract: Happiness is considered as one of the most hidden and ambiguous concepts used in education and the missing concepts of teachers. Few documents are found in education that provides a clear view of the concept of happiness or its place. This study has been carried out with the aim of investigating the impact of social support and social security on the social vitality of teachers in Tehran and identifying the relevant factors affecting it. This study is considered as an Applied/Survey research in terms of the method. The statistical population includes the teachers of Tehran, and a sample of 384 of them was selected for the study using Cochran's formula. The required data collection tool was a questionnaire. The research tool has face validity. The collected data were analyzed with ANOVA and Pearson's correlation coefficient statistical tests in Spss25. The effect of social support and social health was direct and significant on social vitality ($p < 0.05$). The research findings show that effective measures can be taken to improve the social vitality of teachers by promoting their support and social health.

Keywords: social vitality, social support, social health, age, gender, marriage, education.

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Introduction

Teachers are considered the starting point of any educational development. All countries need effective and motivated teachers as one of the main pillars of education so that they can educate their youth in the framework of their education system and equip themselves for a better future (Ismaili Shahmirzadi et al., 2013: 37-59). The presence of healthy, happy and efficient teachers can transform the appearance and content of the educational organization and provide a healthy environment for learners (2016:64-70, Champagne, Brunault). Happy teachers have open and creative mind, in contrast to those who are anxious or unhappy. They exhibit tunnel vision⁴ and stiff thought and face problems to achieve the goals and develop the educational system (Huebner et al, 2004: 185-199).

Social vitality is considered as an important consequence of human life satisfaction and happiness, which not only affects personal life, but also the social aspects of our life, that is, the actions and relationships we establish with others (Samiei et al., 2018 186 -200 :) Veenhoven (2006) argues: "Not only do people aim at happiness in their own life but there is also growing support for the idea that we should care about other people's happiness" (Veenhoven, 2006:1). Therefore, the definition of social vitality means innate and natural happiness that is determined in a society and this social phenomenon greatly affects people's lives from outside and inside, (Tabatabai Nasab, 2019: 249-280). Sarafino (1994), have defined social support as the amount of love, companionship, care, respect, attention, and help received by a person from other people or groups such as family members, friends, and others (

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⁴ Tunnel vision is the loss of peripheral vision with retention of central vision, resulting in a constricted circular tunnel-like field of vision.

Ghorbani et al 83- 100:2020). Some people believe that social support is a social reality and some others consider it as a result of a person's perception and imagination. Sarason (1998) considers social support as a multidimensional concept that includes both real and imaginary dimensions. In general, it may be said that social support means the feeling that a person is noticed by others and that others value her, and that she belongs to a social network (Riahi et al., 2010: 85-120). Social health is another variable of this study, social health refers to an individual's evaluation and understanding of how he/she functions in society and the quality of his relationships with other people, relatives and social groups of which he/she is a member (Keyes, 2004:122). In 2001, the World Health Organization (WHO) defines the social health of a person as "A state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity". But the two psychological and social dimensions of health are largely ignored by the health system trustees and the rulers of the countries in most countries, which, of course, our country is not an exception to this rule. (Rahmani Khalili, 2015: 106). In recent years, there has been a significant shift in researchers' focus from the approaches of about two decades ago, and WHO has issued a serious warning against this harmful neglect and has pointed out the role of nearly 85% of psycho-social factors affecting health. Some studies suggest that the contribution of various factors in the definition of social health is as follows: the contribution of the health service delivery system is 25%, the contribution of genetic and biological factors is 15%, the contribution of environmental and behavioral factors is 10%, the contribution of social factors is 50%, as it is observed (Rahmani Khalili, 2015: 106). Background variables such as: age, educational level, marital status and gender (playing a male or female social role in society and behaviors in accordance with social expectations corresponding to the role) can cause different levels of social support and health, and ultimately have an impact on social vitality. In a study, Veenhoven (2009) during a study concluded that life satisfaction does not decrease with increasing age, but a person's mood decreases. In other words, the intensity of emotions changes with increasing age (Veenhoven, 2009: 45-69). Gurin et al. (2008) believe that there is a positive relationship between education and vitality, that is, higher education level appears to increase the likelihood of being serene and happy (Gurin, 2008: 215-213). Veenhoven, (2009) also believes that those who are more satisfied with their family life are generally happier in life (Veenhoven, 2009: 22). According to research results, women seek emotional support more than men (especially in stressful situations), and therefore they become members of more social networks (Lundman-Peters and Wedigran, 2005, quoted by Riahi et al., 2010: 85-120).

According to the statistics in Iran, the phenomenon of happiness in Iran has suffered a crisis, and sociologists' attention to harms and problems has prevented them from paying attention to the category of happiness. According to world statistics, Iran's rank in happiness is 96th among 187 countries in the world, as a result, it increases the need for research in this field (Idrisi, 2013: 227-249). Now it seems that teachers are not excluded from this as a part of society. Nowadays, teachers are considered as one of the important components in educational opportunities. It seems that many teachers are not satisfied with their jobs, as a result some of them spend their free time in second jobs, which can have dangerous consequences for students and ultimately society. (Samiei et al., 2017: 186-200). Social supports of teachers leads to their social vitality, and the academic decline of students can be considered as one of the consequences related to teachers' lack of vitality, and even disturb their social health. Based on this, this research evaluates the effect of factors such as social support, social health, age, gender, marital status and education on the level of social vitality of teachers in Tehran, and the possible meaningful relationship between these variables is rejected or confirmed. Despite the great importance of teachers' social vitality and the increase in the number of researches conducted in this field, this issue has not been given much attention in our country. Therefore, the present research, along with other researches, can provide the basis for sociologists to pay more attention to this topic.

Experimental background

Ebadi et al., (2018), conducted a study entitled "Effective factors on life happiness". The statistical population was Sidoarjo, Indonesia. According to the results of this study, the factors of health, family harmony, use of free time, ownership of the house and its assets, and shared affection are 59.8% effective on happiness in life, indicating that there is a relationship between perceived stress and life satisfaction and perceived social support in male teachers (Abadi et al., 2018: 40-45). Mashaikh Salehani, (2015)

deals with a sociological study regarding the effects of social support on the level of happiness of employees working in government offices in Nowshahr city. Analytical results show that there is a positive and significant correlation between social support and increased happiness in work environments and among the types of support, emotional support has the strongest direct and significant relationship with increased happiness. It seems that increasing the amount of social support and reducing the amount of stress among employees can increase the amount of happiness and increase the productivity of job performance (Mashaikh Salehani, 2015: 51-82). Brajsa et al., (2017) examined the relationship between social support and satisfaction and well-being throughout life in the Croatian adult population. According to the results, there was a significant relationship with both mental health indicators in all three age groups considered in the research. Fatahi et al., (2014) in a research entitled "Social-Economic Factors Affecting Happiness" investigated the relationship between happiness and individual productivity. According to the results of multiple regression, there is a positive and significant relationship between the variables of productivity, number of children, mental health, interest in work and optimism in life with happiness. Also, the hypothesis of equality of average happiness and average productivity in the variable levels of gender was accepted. It can be predicted that social happiness is more in women than in men (Fattahi et al., 2014: 37-66). Liauma (2016), in a research entitled "Relation between social support and mental well-being and risky behaviors" concluded that social support moderates the relationship between mental health and risky behaviors. Specifically, support from family and friends moderated the relationship between vitality, happiness, and hope with risky behaviors. Sami et al., (2017), conducted a research entitled "Effective factors on the social vitality of teachers". Also, according to the results, there is a significant relationship between all background variables (age, gender, marital status, household income and expenses, and work experience) and social vitality (Samiei et al., 2017: 186-200). Rabbani and colleagues (2013) have studied the study of heads of households in Isfahan city in terms of happiness. According to the results, there is a significant relationship between people's age, marital status, level of education, economic status, level of health and place of residence with the level of happiness of people (Rabbani et al., 2010: 78-41).

Theoretical framework

The Lindbergh's Social production function (SPF) theory was used to investigate social vitality. Lindbergh presented this theory and asked people try to improve their living conditions and achieve social happiness and vitality through the optimization of two universal goals (individual and collective improvement) and five path-breaking goals through which these two goals are also achieved (comfort, motivation for individual well-being, dignity, behavioral affirmations and compassion for collective improvement). Lindenberg believes that, contrary to Maslow's hierarchy of needs, people need a certain minimum of physical and social needs fulfillment (Lindenberg, 2013: 11-33).

From the point of view of cognitive society, the important point is that social production functions are affected by mental judgments, but it does not depend on a specific way of thinking. A person should have physical and social improvement simultaneously, and there should be a right amount of comfort and motivation from physical improvement and there should be a level of dignity, behavioral approval, and love from social improvement. The general desire is to improve the personal situation. This improvement of conditions is created due to different situations that will be the basis of individual happiness (Lindenberg, 649:2000). Social support refers to belonging and being loved and loved, in this way, it brings a safe relationship for every person, the feeling of love and closeness is one of the main characteristics of these relationships (Armstrong, 2012: 87). Sources of social support include the family and other members of the social group of which the person is a member. Formal support is provided by (government) organizations and informal support is provided by friends' families (Ghorbani et al. 2019: 83-100).

A person can take advantage of support resources at the micro level such as positive communication with neighbors, colleagues, friends and relatives to deal with the damage of urbanization and the lack of feelings and emotions, each of which has many effects on human emotions, especially the occurrence or non-occurrence of the phenomenon of vitality. Fisher also emphasizes three types of support, which are: consultative support, conversational support and practical support (Fisher, 1982: 128).

The role of social factors has been increasingly emphasized in defining social health. Social health refers to the way a person adapts to the world, people who have social health are satisfied with their lives, and as a result of this satisfaction with life, the tendency to happiness increases among them. Keyes defines social health as follows: "Evaluation of people's knowledge of how they function in society and the quality of their relationships with others, relatives and social groups of which they are members." (Keyes and Shapiro, 2004: 83). Keyes and Shapiro believe that relatives, relationships and shared experiences give life more richness and meaning. He believes that social health is a person's ability to interact effectively with others and society in order to create satisfying personal relationships and fulfill social roles. Keyes believes that social health is a combination of several factors that show how well a person performs in his social life, for example, as a neighbor, colleague and citizen (Keyes and Shapiro, 2004: 29).

Regarding the relationship between happiness and gender, Diener et al believe that women experience both negative and positive emotions more. Therefore, the result of these two emotions equalizes the happiness of men and women (Diener et al., 2003: 403-425). Regarding the effect of marriage on vitality, Veenhoven (2009) also believes that those who are more satisfied with their family life are generally happier in life (Veenhoven, 2009: 22).

Also, according to the results reported by many researches, married people are happier than single people, maybe because marriage provides an emotional and social situation that increases positive emotions, maybe because of the ability to share issues and problems, and Also, the appearance of sympathy, understanding and prevention of loneliness reduces the amount of emotion and negative feeling in people, and for this reason, married people usually report less negative emotion compared to single people (Eysenck, 1999:96). In a study, Veenhoven (2009) concluded that life satisfaction does not decrease with age, but the individual's mood decreases. In other words, emotions change with increasing age of intensity (Veenhoven, 2009: 45-69). The research results show that there is a significant but low correlation between the level of education and happiness. The role of education on happiness in the United States has weakened over time. A major part of the relationship between education and vitality comes from the correlation of education with occupational success and income. They believe that education may even interfere with vitality if it leads to expectations that cannot be met, thus increasing the distance between the goal and its achievement (Diener et al., 2003: 403-425). Gurin et al. (2008), believe that there is a positive relationship between education and vitality, that is, with increasing education, the level of vitality increases. They believe that people who have lower educational qualifications than people with high university education, enjoy a lower level of vitality (Gurin, 2008: 215-213).

Research method

This study is a survey and applied research. Also, it is considered a cross-sectional research in terms of time criteria, which took place at one time and examines the reality at one point in time. The statistical population of this study includes all teachers who live in Tehran in 2019. Cochran's formula was used to calculate the sample size. Questionnaire is the tool of data collection in the present study, Lindenberg's social vitality questionnaire (Lindenberg, 2000), Fisher's social support questionnaire (, 1999) and Keyes's social health questionnaire (Keyes, 2004) as well as a questionnaire including demographic information (such as age, education, marital status, gender) were used to collect data. In the present study, the sample size was selected 10% more than the estimated amount for certainty, which reached 384 questionnaires after removing incomplete questionnaires and outlier data. For sampling, first, multi-stage cluster sampling method is used in this study. This means that, in the first stage, 5 districts were selected among the 22 districts of Tehran city (district1 in the north of Tehran, district7 in the center of Tehran, district17 in the south of Tehran, district5 in the east of Tehran and district22 in the west of Tehran) are selected as completely random. Then, four schools (two boys' and two girls' schools) were selected from each district in each level (primary, first secondary, second secondary) using simple random sampling, finally 7 to 6 teachers were randomly selected from any school. A list of schools was prepared after coordinating with the officials of the Tehran Education Department and then sampling

was done to conduct this research. Compliance with ethical points, the importance and necessity of the research were explained to the samples and they were asked to answer the questionnaires after studying them carefully. The collected data were analyzed with ANOVA and Pearson's correlation coefficient statistical tests in Spss25.

Conceptual and operational definitions of research variables

Conceptual definition of social vitality: Social vitality can be defined as "a positive assessment of people's life as a whole or its various parts, the appearance of pleasant psychological qualities and emotions, and the appearance of positive social interests and symptoms in people". Social vitality includes a scientific analysis of how people evaluate their lives (both in the moment and in long periods like the past). A positive psychological state, which is a high level of satisfaction with life, a high level of positive emotion and a low level of negative emotion (Kar, 2008: 104, quoted by Idrisi, 2013: 227-249).

Operational definition of social vitality: In the present study, social vitality is based on a questionnaire that was compiled in two long and short forms by Lindenberg, this scale is measured with five options: very high, high, medium, low and very low.

Table (1): Axial dimensions of the conceptual elements of social vitality variable

Scale	Item	Subcomponents	Components	Concept
Interval	Do people pay attention to you?	Affection	Social improvement	Social vitality
	Will people help you if you run into a problem?			
	Do you think people love you romantically?			
	Have you felt complete ease and comfort from being with others?			
	Do you feel like not enough people care about you?			
	Do others appreciate your role and presence in the group?	Behavioral verification		
	Do people believe you are trustworthy?			
	Do you feel useful to people?			
	Do people think you do things better than others?			
Interval	Do others feel that you are putting the burden of your responsibilities on them?	Dignity		
	Do people believe you are influential and effective?			
	Are you satisfied with your success?			
	Do you think you made a lot of progress?			
	Are you an independent person from people's point of view?			
	Are you famous for what you do?	Comfort		
	How relaxed do you feel?			
	How healthy do you feel?			
	How fit do you feel?			
	To what extent do you feel in good physical condition?			
How much pain do you feel? (For example, physical pain(Motivation			
Does the activity make you want to keep doing it?				
Do you really enjoy the activities?				
How often do you do something with full concentration?				
Do you feel that life is boring for you?				
What is interesting to you?				

Conceptual definition of social support: Social support is defined as "Belonging to and being loved and loved, in this way, it brings a secure relationship for each person whose feeling of love and closeness is one of the main characteristics of these relationships" (Armstrong, 2012: 87). .

Operational definition of social support: Fisher's standard questionnaire was used to operationalize the social support variable. This questionnaire has three sub-components: consultative support, accompanying support and practical support.

Table (2): Axial dimensions of the conceptual elements of social support variable

Scale	Item	Dimension	Concept
Interval	I can use the Farhangian health insurance during illness.	Practical support	Social support
	In case of financial need, I can take a loan from the Farhangian funds.		
	If I have a serious financial need to visit a doctor or buy medicine, my family members help me.		
	If I need someone to move into my new home, it's easy to find a relative to help me.		
	If I go out of town for a few weeks, it's easy for me to find a friend to take care of my house (plants, pets, garden, etc).		
	I have colleagues who are willing to run my classes instead of me if needed.		
Interval	There is a special person in my life who is the real source of my peace and comfort.	Accompanying support	
	In difficult and critical situations, I can use the help of my friends.		
	I get as much help and support from my family as I need, my friends really try to help me.		
	I have friends with whom I can share my joys and sorrows.		
	There is a special person in my life for whom my feelings are important.		
	If I have a problem, I have a close colleague to talk to.		
Interval	There is someone who will listen when you need to talk.	Consultative support	
	There are those among my colleagues who guide me wholeheartedly.		
	I can talk about my problems with my friends.		
	My family is willing to help me make decisions.		
	You have someone to share your personal worries and fears with.		
	There is someone who will give you information that will help you understand things.		

Conceptual definition of social health: Keyes defines social health as "An assessment of people's knowledge of how they function in society and the quality of their relationships with others, relatives and social groups of which they are members." (Keyes and Shapiro, 2004: 83).

Operational definition of social health: This scale contains 15 items: 3 items related to social integration, 3 items related to social acceptance, 3 items related to social actualization, 3 items related to social participation and 3 items related to social cohesion (Keyes) and Shapiro, 2004: 10).

Table (3): Axial dimensions of the conceptual elements of social health variable

Scale	Item	Dimension	Concept
Interval	Society is constantly changing.	social actualization	social health
	Society is a useful place for people.		
	Social progress has no meaning.		
Interval	It is difficult for me to understand what will happen in the world.	social cohesion	
	Social institutions such as law and government have no effect on my life.		
	It is difficult to predict what will happen in the future.		
Interval	I belong to a group called community.	social integration	
	I am an important part of my community.		

	People in society value me as a person.		
Interval	People are trustworthy.	social acceptance	
	I think people are kind.		
	People have become more fraudulent these days.		
Interval	I can offer valuable work to the world.	social participation	
	I don't have a valuable product to share with the community.		
	I don't have the time and energy to provide a valuable product to the society.		

Validity and reliability

In relation to validity or reliability, the question is "Does the instrument measure what it was intended to measure?" In other words, validity examines the appropriateness of a measurement tool. Content validity has been used to check the validity of the questionnaire, which emphasizes whether the definitions presented for the concepts measure the desired concepts or not. The consensus method of the judges was used to ensure the content validity of the research concepts, and their suggestions were used to solve the problems related to the definitions of the main concepts of the research and the questions related to their measurement, while consulting with experienced professors. Cronbach's alpha test has been used to measure reliability. This statistic varies from 0 to 1, the reliability of the scale increases by increasing this figure. Based on a rule of thumb, alpha should be at least 0.7 so that we can say that the scale has reliability (Dovas, 1997: 332).

Rahmani Khalili confirmed the construct validity of the tool using exploratory factor analysis, and confirmed the total reliability with Cronbach's alpha value of 0.82 of the Lindenberg social vitality questionnaire and also the Fisher social support questionnaire conformed the total reliability with Cronbach's alpha value of 0.82 (2014). Rahmani Khalili . Farsi Nejad also standardized the Keyes Social Health Questionnaire in a research. He conformed the construct validity of the tool using exploratory factor analysis and showed that the total reliability with Cronbach's alpha value of the social health subscale is 0.78 and used it in the cultural and social conditions of Iranian society (Farsi Najad (2004). According to the results of Cronbach's alpha test in the present study, social vitality questionnaire and independent variables have good reliability, so that the variables are social support with 0.89, social health with 0.91 and social happiness with 0.92. In total, the alpha of all variables has a good value.

Research findings

In this section, the variables and the test of research hypotheses are described using descriptive and inferential statistics.

Table (4): Description of the variables of gender, age, education, marital status

%	Frequency	Variable	%	Frequency	Variable
		Age			Sex
14.15	54	25-35	48.84	186	Man
43	165	36-45	51.63	198	Female
33.13	127	46-55			education
9.92	38	Higher than55	26.84	103	Associate Degree
		Marital status	48.25	185	Bachelor's Degree
54.5	21	Divorced people	15.44	59	Master's Degree
1.84	7	People whose spouses have died	8.73	30	P.H.D
73.45	282	married			
19.34	74	Single			

According to descriptive findings, 48.84% were male and 51.63% were female, of which 43% were in the age group of 45-36 years and 48.25% had a bachelor's degree and 73.45% were reported to be married.

Table (5): Kolmogorov-Smirnov normality results, standard deviation, mean, Pearson correlation test

Variables		Social vitality	Social support	Social health	SD	M	KS
Social vitality	Correlation value	1			12.08	63.62	0.07
	Significance level	.					
Social support	Correlation value	0.572	1		7.502	33.66	0.05
	Significance level	0.00	0				
Social health	Correlation value	0.540	0.786	1	7.696	41.22	0.08
	Significance level	0.00	0.00	0			

The results of table 5 - According to the significance level in the Kolmogorov-Smirnov (K-S) T test, it is concluded that the distribution of data in all variables is normal. Pearson's correlation test indicates a significant level of $P < 0.05$ between all research variables. There was a positive and significant correlation between all the studied variables.

Hypothesis 1: It seems that social support has a significant effect on social vitality.

Table (6): Path coefficients and statistical significance of social support variables on social vitality

Result	Direction of relationship	Significance number	Path coefficient	Hypothesis 1
It is confirmed.	Positive and Direct	5.027	0.284	Social vitality ← Social support

According to the table, it is concluded that the effect of social support on social vitality is significant with a path coefficient of 0.284 and with a probability of 95% because the value of the calculated t statistic is equal to 5.027 and more than 1.96. Therefore, according to the collected data, hypothesis 1, "Social support has a significant effect on social vitality", is confirmed.

Hypothesis 2: It seems that social health has a significant effect on social vitality.

Table (7): Path coefficients and statistical significance of social health variables on social vitality

Result	Direction of relationship	Significance number	Path coefficient	Hypothesis 1
It is confirmed.	Positive and Direct	3.858	0.233	Social vitality ← Social health

According to the table, it is concluded that the effect of social health on social vitality is significant with a path coefficient of 0.233 and with a probability of 95% because the value of the calculated t statistic is equal to 3.858 and more than 1.96. Therefore, according to the collected data, hypothesis 2, "Social health has a significant effect on social vitality", is confirmed.

Hypothesis 3: It seems that there is a significant difference in social vitality among male and female teachers.

Given that the gender variable consists of male and female categories, the parametric T test of two independent samples was used to check the above hypothesis.

Table (8): Inferential statistics of the T test of two independent samples

Result	Mean difference	t-test significance level (sig)	The significance level of Levine's test (sig)
It is rejected.	0.002	0.972	0.802

According to the obtained results, the significance level of Levene's test (0.802) confirms the equality of variances of the two communities of men and women. Also, the significance level of the independent two-sample T-test in the case of equality of variances is above 0.05 and equal to 0.972, which shows that there is no significant difference between the average social vitality in the two groups of men and women, and the average of these two groups is equal. Therefore, the above hypothesis is rejected.

Hypothesis 4: It seems that there is a significant difference in social vitality among different educational groups of teachers.

Given that the variable of education consists of five categories, we have used the analysis of variance (ANOVA) test to check the above hypothesis.

Test result	Significance level	F value	Variable	
There is no significant difference in social happiness among different educational groups	0.871	0.311	Associate Degree	Social vitality
			Bachelor's degree	
			Master's degree	
			P.H.D	

The results show that the significance level of the ANOVA test is equal to 0.871 and higher than 0.05, which shows that there is no significant difference between the average of social happiness in different educational groups, and the average of these four groups is equal. Therefore, the above hypothesis is rejected.

Hypothesis 5: It seems that there is a significant difference in social vitality among different age groups of teachers.

Given that the age variable consists of four categories, we have used the analysis of variance (ANOVA) test to check the above hypothesis.

Table (10): ANOVA test to check the average social vitality among different age groups

Test result	Significance level	F value	Variable	
There is no significant difference in social happiness among different age groups	0.576	0.661	25-35 years	Social vitality
			36-45 years	
			45-55 years	
			More than 55 years	

According to the results, the significance level of the ANOVA test is equal to 0.576 and above 0.05, it can be concluded that there is no significant difference between the average of social vitality in different age groups, and the average of these four groups is equal. Therefore, the above hypothesis is rejected.

Hypothesis 6: It seems that social vitality has a significant difference among different groups of teachers' marital status.

Considering that the variable of marital status consists of four groups, we have used the analysis of variance (ANOVA) test to check the above hypothesis.

Table (11): ANOVA test to check the average social vitality among different marital status groups

Test result	Significance level	F value	Variable	
There is no significant difference in social happiness among different groups of marital status	0.846	0.271	married	social vitality
			Single	
			Divorced people	
			People whose spouses have died	

According to the results, the significance level of the ANOVA test is equal to 0.846 and above 0.05, which shows that there is no significant difference between the average of social happiness in different groups of marital status, and the average of these five groups is equal. Therefore, the above hypothesis is rejected.

Discussion and conclusion

According to the research results, social support has a significant effect on social vitality with a path coefficient of 0.284 and with a probability of 95%. Therefore, according to the collected data, the first research hypothesis, "There is an effect of social support on social vitality", is confirmed. People can bear their psychological pressure through social support and coping power is known for successful and easy facing of people when faced with stressful situations, which can make it easier for people to bear problems. Symptoms of depression are not observed in teachers who have more support from family, friends, colleagues, organizations and other people. Social support leads to reducing the impact of psychological stress by increasing the correct understanding of stressful psychological events. People who receive more social support have more mental, physical and social health, and finally, social support increases a happy and cheerful mood. This study has used Fisher's social support scale, according to Fisher, social support includes material (practical) support, consultative support and accompanying support.

Material support for teachers is formed in two formal ways (support from the government or the Ministry of Education) and informal support (family, relatives, friends, colleagues, neighbors). According to the results, there is a significant direct relationship between the types of social support and social vitality. That is, as practical support increases, consultative support and accompanying support, the social vitality of teachers also increases. Humans may suffer from depression and anxiety when under stress. Friends and family can help the person at this time and reassure him that they support him. On the other hand, the presence of others makes a person cope with mental pressure with more encouragement and hope. Material support for teachers in two formal ways (support from the government or the Ministry of Education) and informal support (family, relatives, friends, colleagues, neighbors), for example, the government through support programs (increasing salaries and placing appropriate insurances) as well as family and friends can provide good services and facilities to teachers when they are faced with the pressures of life and help a person who is in trouble with advisory support from family, relatives, friends, colleagues, neighbors and giving suggestions.

For example, colleagues in the workplace can help a colleague who is under work pressure by expressing sincerity and giving useful and correct information, so that he/she can perform his duties better, which increases people's vitality; or accompanying support can be used by family, people, friends, colleagues and neighbors with teachers who have problems, for example, share their sorrows and joys with them. The present study is consistent with the following studies. Mashayekh Salehani (2015) deals with the sociological study of the effects of social support on the level of happiness of employees working in government offices in Nowshahr city. Analytical results show that there is a positive and significant correlation between social support and increased happiness in work environments, and among the types of support, emotional support has the strongest direct and significant relationship with increased happiness. It seems that increasing the level of social support and reducing the amount of stress among employees can increase the amount of happiness and increase the productivity of job performance. Brajsa et al. (2017) examined the relationship between social support and satisfaction and vitality throughout life in the Croatian adult population. According to the results, there was a significant relationship with both mental health indicators in all three age groups considered in the research. Hypothesis 2: "Social health has a significant effect on social vitality with a path coefficient of 0.233 and a probability of 95%". Therefore, according to the collected data, the second hypothesis of the research, "social health has a significant effect on social vitality", is confirmed. Therefore, social health has a positive effect on the variable of social vitality. Keyes defines social health as "the assessment of people's knowledge of how they function in society and the quality of their relationships with others, relatives and social groups of which they are members." (Keyes and Shapiro, 2004: 83). Keyes and Shapiro believe that relatives, relationships and shared experiences give more richness and meaning to

life. Therefore, Keyes defines social health as "a person's ability to effectively interact with others and the community in order to create personally satisfying relationships and fulfill social roles", Keyes believes that social health is a combination of several factors that show how well a person performs in his social life, for example as a neighbor, colleague and citizen (Keyes and Shapiro, 2004: 29).

The present study is consistent with the following research. Fatahi et al. (2014), during a research entitled "Social-Economic Factors Affecting Happiness", investigated the relationship between happiness and individual labor productivity. According to the results of multiple regression, there is a positive and significant relationship between productivity variables, number of children, mental health, interest in work and optimism in life with happiness. Also, the hypothesis of equality of average happiness and average productivity in the variable levels of gender was accepted. It can be predicted that social happiness is more in women than in men. Liauma (2016), during a study entitled "Relationship between social support and mental vitality and risky behaviors" concluded that social support moderates the relationship between mental health and risky behaviors. Specifically, support from family and friends moderated the relationship between cheerfulness, happiness, and hope with risky behaviors. One of the research questions was related to "Investigating the relationship between the background variables of age, sex, marital status and education", which according to the results, there is no significant relationship between the background variables and social vitality, which is inconsistent with the following research.

Samiei et al., (2017) in a research entitled "social factors affecting the social vitality of teachers" investigated the relationship between background variables, age, gender, marital status, household income and expenses, and work experience, which reached different results. According to the results, there is a significant relationship between all background variables with social vitality. Rabbani et al (2013) studied the heads of households in Isfahan city in terms of their level of vitality. According to the results, there is a significant relationship between people's age, marital status, education level, economic status, level of health and place of residence with the level of vitality of people. One of the limitations of the present study is the inability to generalize the results to the whole society, but it should be noted that according to the findings of the present study, there is a significant statistical relationship between support and social health with social vitality, in such a way that, with increasing the level of support and social health of teachers, their social vitality increases. We need to take effective measures in culture-building to increase the social vitality of teachers. In the first stage, we are facing a very difficult and expert work that requires specialized work with the presence of experienced sociologists, psychologists, economists and political scientists. On the other hand, it seems that social support for teachers can be increased by applying and providing suitable solutions, such as increasing teachers' salaries, reducing working hours, teaching life skills, and also the presence of knowledgeable and experienced counselors in schools. The social health status of teachers in the country can be improved using appropriate educational and intervention approaches, attracting the participation of officials and related organizations and effective steps can be taken in promoting the social vitality of teachers.

References

1. Abadi TW, Choiriyah U, Sukmana I, et al. (2018). Factors affecting of life happiness. Public policy study program, universitas airlangga, surabaya indonesia. *Social sciences and humanities ANCOSH*, 43(8):41-45.
2. Akbarzadeh, Fatima; Dehghani, Hamid; Khoshfar, Gholamreza; Jan Alizadeh Chobdasti, Haider. (2012). Investigating three types of economic, cultural and social capital on youth happiness. *Applied Sociology*, year 67, number 1.
3. Alan Carr (2008), *Positive Psychology: The Science of Happiness and Human Strengths*, translated by Hasan Pasha Sharifi, Jafarnajafi Zand and Bagrothanai, Tehran: Nashre sokhan

4. Argyle, Michael. (2004). *the psychology of happiness*, (translated by Masoud Gohari Anarki and others). Tehran: Jihad Academic Publications (2004).
5. Armstrong, David. (1999). *Medical Sociology*, (Translation: Mohammad Tawakal). Tehran: Legal Publishing (1998)
6. Champagne A, Brunault P. (2016). Personality disorders but not cancer severity or treatment type, are risk factors for later generalised anxiety disorder and major depressive disorder in non metastatic breast cancer patients. *Psychiatry research*, 236(236) 64-70.
7. Diener, E., Oishi, S., & Lucas, R.E. (2003). Personality, Culture, and Subjective Well-being: Emotional and Cognitive Evaluations of Life, *Annu. Rev. Psychology*, (54): 403-425.
8. Farsinejad, Masoumeh (2004). Investigating the relationship of identity styles with social health and academic self-efficacy in second grade male and female students of high schools in Tehran, Master's thesis, Faculty of Psychology, University of Tehran
9. Fatahi, Shahram; Kerami, Jahangir; Mohammadi Rad, Mansour (2015), Investigating socio-economic factors affecting the happiness and productivity of the workforce (a case study of industrial workshops in Kermanshah), *Productivity Management Journal*, Volume 9, Number 36, pp. 37-66
10. Fischer, C. (1982). *To Dwell among Friends*. Berkeley: University of California Press.
11. Ghorbani S, Jahanizadeh MR, Mirbod M. (2020). Studying the association between psychological and social capital and social health based on the mediating variable of social support. *Journal of social psychology research summer*, 10(38):83-100.
12. Gurin, P. J., Jr., and Veroff, L. F. Feld, L. S. (2008). *The evaluation and treatment of marital conflict: A four stage approach*. Basic Books, Inc. USA, 215.
13. Huebner, E. S., & Dew, T. (1994). Adolescents perceived quality of life: An exploratory investigation. *Journal of school Psychology*, (32): 185-199.
14. Idrisi, Afsaneh, Mubarak, Simin (2013), Social Happiness, Social Rationality (case study: Tehrani adult citizens aged 18-65), *Social and Cultural Strategy Quarterly*, 4th year, 13th issue, Winter 93, pp. 227-249.
15. Ismaili Shahmirzadi, Sima, Khoshe Mehri, Gitti, Muslimi, Zainab (2012), Social support and public health of female teachers, *Journal of Sociology of Education* No. 6, Fall and Winter 92, pp. 37-59.
16. Keyes C. (2004). Mental health and or mental illness? Investigation axioms of the complete state model of health. *Journal of consulting and clinical psychology*, 73(3): 539-548.
17. Keyes, C. L. M. & Shapiro, A. (2004). "Social Well-Being in the United States", *A Descriptive Epidemiology* Pp. 350-372 in *How Healthy Are We? A National Study of Well-Being at Midlife*, edited by Orville G. Brim, Carol Ryff and Ronald Kessler. Chicago: University of Chicago Press.
18. Lindenberg S. (2000). It takes both trust and lack of mistrust: the workings of solidarity and relational signaling in contractual relationships. *Journal of management and governance*, 8 (4):11-33.
19. Mashayekh Salehani A. (2015). A sociological investigation of the impacts of social support on vitality: A case study of employees' working in state administrations in Noshahr Iran, 51-82. (<https://ganj.irandoc.ac.ir>)
20. Michael W. Eysenck. (1999). *Always be happy*. (Translated by Chalongar, Zahra). Tehran: Nasl-e No Andish Publication.
21. Rabbani, Ali, Rabbani, Rasul and Ganji, Muhammad. (2017), A sociological approach to the happiness of household heads in the city of Isfahan., *Social issues of Iran*. Year 6. Number 5
22. Rahmani Khalili E. (2014). Investigating the impacts of social capital on social vitality under the influence of social support and religious variables, *cultural studies –communication*, 16(32): 121-122.
23. Riahi, Mohammad Ismail, Vardinia, Ali Akbar, Pour Hossein, Sayedah Zainab (2009), Examining the relationship between social support and mental health, *Social welfare scientific-psychological quarterly*, 10th year, No. 39, pp. 85-121.
24. Samieyi Isfahani A, Pordanesh S, Danesh H. (2018). Factors affecting the social vitality of teachers. *Sociology of education*, spring and summer, 97 (6):186-200.

25. Sarafino ED, Simmel G. (1994). Health psychology: bio-psychosocial interactions (2nd ed), New York: The metropolis of mental life (Translated by), Abazari Y. social sciences letter, 9 (3):52-54.
26. Tabatabai Nesab, Seyyed Mojtabi (2019), investigation and analysis of sociological factors affecting vitality and happiness, New Approach in Islamic Studies, summer 2019, number 3, pp. 280-249.
27. Veenhoven, R. (2009). How do we assess how happy we are? Tenets, implications and tenability of three theories. Happiness, economics and politics, 45-69.
28. Yousefi, Seyyed Karim (2013), the relationship between hope and happiness with job satisfaction of elementary teachers in Ilam city, Islamic Azad University, Kermanshah branch.