Social Intelligence and Mindfulness: Impact on Mental Health and Career Decision Making Among College Students

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Abstract

The current research aims to identify the impact of social intelligence and mindfulness on mental health and career decisions making among college students. The correlational research design and the sampling method were convenient. The study's sample comprised 202 college students boys (n = 69), girls (n= 133). A demographic sheet was designed to collect data from the participants. Four scales were used: the Career decision difficulty questionnaire, the Depression anxiety stress scale (DASS), the Mindfulness attention awareness scale (MASS), and Tromso social intelligence scale. The statistical package for social sciences (SPSS) version 22.0 analyzes the data. The outcomes revealed that there is a significant positive relationship between social intelligence and career decision-making ($r = .31$, $p < .001$), and also Social intelligence has a significant negative association with mental health problems ($r = -1.7$, $p<.001$). Moreover, mindfulness has a non-significant negative relationship with career decision-making ($r= -.07$, $p <.05$) and also, Mindfulness has a significant negative relationship with mental health problems ($r = -.18$, $p <.001$). It has been concluded that if college students have an advanced level of social intelligence & mindfulness, they would have an advanced level of career decidedness and a lower level of mental health problems.

Keywords: Decision making, SI; social intelligence, Mindfulness, Mental health

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Introduction

In previous research, the focus was on the intelligence quotient, considered a milestone to success. Still, with time, when different theories of multiple intelligences emerged, the concept of emotional intelligence and social intelligence was introduced.

Emotional intelligence deals with the present situation, but Social Intelligence deals with the future. Social Intelligence is how we effectively communicate with others, understand others, deliver our point of view to them, and understand social circumstances. It is about awareness regarding self and others.

In his theory, social intelligence is not a fixed phenomenon; Jean Piaget explains that intelligence is not fixed. Still, individuals, over time, learn it by interacting with others. In a study development of social intelligence among university students has been explored, and the results showed that 7th-semester students scored high on SI than 1st-semester students.

Mindfulness can improve moral inspiration and conduct through different techniques, including expanding consciousness, feelings, and practices, supporting. Ethical qualities advance attributes, love, sympathy, compassion, and care for developing unselfishness and misidentifying with an egocentric (Shapiro, 2009).

Mindfulness is said to have emerged more than two thousand years prior in the Buddhist. The focal and clear mission of thinking and reflection practice was to determine and mitigate the enduring brought about by the useless manners by which people ordinarily seem to react to their experience. Driven by his comprehension of the significance of scrutinizing reflection, he presented the initial eight-week preparing educational plan for formal care abilities, zeroed in on his insight into intervention strategies, yet altogether smoothed out and manualized.

The short course he formulated furnished various patients with unmanageable limit agony and uneasiness from a wide range of ongoing actual medical conditions with obvious, huge, and moderately fast mental and now and again actual alleviation (Kabat-Zinn, 1994).

Social Intelligence

Social intelligence, especially a relationship to digesting knowledge, appears to be sufficiently basic. Notwithstanding, when it came to testing social insight, Thorndike (1920) discovered fairly regretfully that "advantageous social knowledge tests are hard to devise." In the nursery, in the jungle gym, in garrison huts and processing plants, and the salesroom.

Social information uncovers itself bounteously; however, it evades the unbending uniform states of the examination lab. To adjust its responses1 and face, discourse, signal, and aura as instruments, individuals should react to time. By and by, specialists quickly changed over the theoretical ideas of social knowledge into normalized research center strategies to survey singular contrasts in friendly insight, per the points of the psychometric practice. In contrast, it has been difficult for psychometricians to operationalize social knowledge. It will generally assume a significant part in individuals' credulous, natural originations of insight.

Mindfulness

Mindfulness is viewed as focusing on a method of awareness that demonstrates sound judgment (Walpola et al., 2022). Care is a flexible development portrayed as a rehearsing method and ability (Brown & Ryan, 2003a).

The concept of mindfulness refers to consciousness i-e attention and awareness. For example, while taking lectures in class, we can learn if we pay attention and are aware of the present situation. Mindfulness not only refers to awareness and attention regarding the present moment but also to the future and how much we are aware of our future. A valuable source for the enhancement of emotional intelligence is mindfulness. Mindfulness-Based on Life Enhancement was created to help individuals better their lives.

Mental Health Problem

Mental health problems have peak onset during adolescents at the age of 15 to 19 years of age. At this stage, psychological disorders can be triggered. When students enroll in college after High School, they face so much stress that they are not fully prepared. Most college students depend on their parents and are unable to fulfill the adult-like responsibilities that they face at

this age, creating a stressful environment for them.

Career decision making

A person selects a specific career for herself. In our society, career decision is mainly affected by other opinions because, in our culture, students are not fully aware of themselves and the environment. Some theories describe why a person chooses a specific career for themself.

Aim

The research aims to identify the impact of social intelligence and mindfulness on college student's mental health and career decision-making.

Objective

The research objective is to identify the influence of social intelligence on mental health and career decision-making; because previous work was focused on emotional intelligence, and there are few works available on social intelligence.

- The research objective is to identify the influence of mindfulness on mental health issues and career decision-making in college students.
- The research objective is to identify the difference in social intelligence and mindfulness among males and females.

Literature Review

We present an overview of the literature that relates to our work. Several studies have explored the possessions of mindfulness on mental health, but the previous work is limited to social intelligence and mental health. Prior work on social intelligence needs to address college students' career decisions explicitly. The limited literature on mindfulness and career decisions by college students is also available.

In an investigation completed by Abu Amsha (2013) expected to examine the social intelligence and passionate knowledge and their relationship with upbeat inclination among college understudies in the Gaza governorate, the example comprised of 603 college understudies in the Gaza Strip, the analyst utilized the social insight scale, enthusiastic insight scale notwithstanding satisfaction scale. The outcomes showed that the degree of enthusiasm and social insight between the individuals from the example was acceptable, more than medium. There is also a good connection between social insight, enthusiastic knowledge, and measurements other than cheerful inclination among the individuals from the example.

Correlational research was conducted on adolescents' social intelligence, empathy, and aggression. The ample size was 203 adolescents, and data were collected using peer estimation social intelligence (PESI), and empathy was measured by the empathy scale (PEE). Data were analyzed by correlational analysis. The study's results indicated that social intelligence significantly correlates with all forms of violent performance. In contrast, empathy is not significantly correlated with verbal or corporal aggression (Kaukiainin et al., 2002).

Experimental research was conducted on 38 participants, from whom 21 were females and 19 males between 18 to 66 years old, to identify how social intelligence is associated with the understanding of nonverbal behavior presented by other people. For this purpose, photographs of individuals with different expressions were shown to the research participants. The fallouts of the investigation were analyzed centered on Sternberg's tri-archaic theory of social intelligence, and it was analyzed that social intelligence is an essential type of intelligence that is very beneficial in decoding non-verbal behavior or cues (Barnes & Sternberg, 1989).

Descriptive survey research was used to determine whether social intelligence is higher among males or females. The study sample consists of 120 first-year college students, 60 males and 60 females, from the arts and science group. The social intelligence scale by Chadda and Ganeshan was used for measuring social intelligence. Mean standard deviation and t-test were used to analyze the data. The study results indicated that females are more socially intelligent than males, and art college students have higher levels of social intelligence than science college students. (Sexena, 2013).

Experimental research was conducted in japan on trust Gullibility and social intelligence. The findings of the study revealed that people who can understand self and others and can predict other people's behavior, i.e., people who are high in social intelligence, can trust others

more confidently than those with lower levels of social intelligence (Yamagishi et al., 1999).

A study was carried out on social intelligence's role in explaining physical education teachers' mental health. The study sample consisted of 78 physical education teachers, and dater was collected using the crown social intelligence inventory and Goldberg's mental health questionnaire. Mental health is very effective in effectively communicating with students, and the results of this analysis indicate that teachers who have good social intelligence can communicate effectively with students. They can adjust to different social situations to have good mental health (Norris et al., 2020).

Experimental research was conducted to identify the role of mindfulness practice in emotion regulation. One hundred and three university students participated in this research study, of which 70 were females, and 26 were males. The mean age of the sample was 19.19. The individuals participated in the lab sessions that were conducted twice a week. In the first session, a multifaceted mindfulness questionnaire was used to identify the level of mindfulness before sessions. Participants of the study also filled out the emotion regulation scale to identify their current emotional situation palm pilot were used in which questions were asked about the current feelings of the participants. The focus of this study was how self-reported mindfulness plays a part in emotion regulation. The study's findings revealed that trait mindfulness and mindfulness practice play an important role in emotion regulation, such as anger, frustration, sadness, and happiness. The study also helped understand the emotional difficulties present in different psychological disorders (Hill & Updegraff, 2012).

A study was conducted on mindfulness and decision-making style by (Galles et al., 2019). The study design was correlational. The study sample comprises 258 undergraduate students (204 women and 54 men). The age range of the participants was 17 to 47, and the mean age was 20.3. The measures of the study were the Cognitive, affective mindfulness scale (CAM-S), career thought Inventory (CTI), and vocational identity subscale vocational situation. The study aimed to identify the relationship between mindfulness decision-making-styled career thoughts and vocational identity. The study suggests that mindfulness and decision-making style helps reduce anxiety and negative thoughts about the future and increase self-clarity and problem-solving skills. Mindfulness is associated with clarity regarding career decisions and goals (Galles et al., 2019).

Zubair conducted a research study at Quaid e Azam University in Islamabad, Pakistan. The study design was correlational, and the sample consisted of university students from Russia and Pakistan. The Mindful Attention Awareness Scale (MAAS) and Edenberg mental well-being scale are used to collect the data from the sample in the study. It was hypothesized that mindfulness positively correlates with mental well-being, and the results supported the hypothesis. Results indicate that individuals with mindfulness are conscious and pay attention to their surroundings, have problem-solving skills, and can manage their problems effectively, which leads an individual toward overall well-being and mental health. (Zubair, 2018).

The rationale of the study

Previous research was conducted on emotional intelligence and its impact on mental health, career, and self-efficacy. Still, social intelligence is more explored than emotional and quantitative intelligence. So we will research social intelligence to see its impact on mental health and career decision-making among college students in Pakistan. At the college level, students are deciding about their future, and further education is solely based on their decision at this level.

According to theories, social intelligence plays a vital role in future success. Social intelligence is also a kind of intelligence that can be learned. Through this research, we can identify college students' social intelligence levels. After getting to know, we can introduce kinds of workshops that can play a vital role in enhancing social intelligence among college students.

Hypothesis

- "There would be a significant positive relationship between social intelligence and career decision-making among college students."
- "There would be a significant Negative relationship between Social intelligence

and mental health problems among college students."

- "There would be a significant positive relationship between mindfulness and career decision-making among college students."
- "There would be a significant negative relationship between Mindfulness and mental health problems among college students."

Methodology

Research Design

In this research used correlational research design because we will explore the relationship between social intelligence and mental health, social intelligence and career decision-making, mindfulness and mental health, and mindfulness and career decision-making. Previously social intelligence was not explored concerning career decision-making on the national and international level, and the relation of social intelligence is explored with mental health. Still, the scale of mental health is different from the research population. Mindfulness is also not explored concerning career decision-making, and mindfulness's relation with mental health is explored. Still, the population was university students, and we will take college-level students in our research.

Participants

Participants of the research include college students of Pakistan from different departments; the age range is between 17 years to 22 years, and both genders, males and females, participated in this research.

Sampling

A convenient sampling technique has been used for data collection. The research was conducted on college students in Pakistan. The sample size of the study consists of 202 college students. The age range is between 17 years to 22 years. Data were collected from rural and urban areas of Pakistan. Online and physical modes were used to collect the data. Students, males, and females, participated in this research. College students from the Arts science, social Science, computer science, and commerce departments participated in this research study.

Inclusion criteria

The students who are enrolled in college participated in this research. Both genders, male and female, participate in this research.

Exclusion criteria

The students not enrolled in colleges have yet to participate in this research. School and University students do not participate in this research.

Measures

Demographic sheet

The demographic sheet was designed to collect information regarding demographic variables. The demographic sheet consists of the participant's age, Gender (Male, Female), College (Public, Private), Father Qualification, Mother Qualification, Subject (Science, Social Science, Arts, Commerce, Computer Science), Residence (Rural, Urban), Family System (Joint, Nuclear).

Tromso social intelligence scale

Tromso social intelligence scale English version was adapted to collect data regarding the social intelligence of participants. The scale was developed by (Silvera et al., 2001). This scale consists of three factors, social information processing, social skills, and social awareness, and each factor consists of 7 items, of 21 total items. There are 11 negative statements in the scale (2, 4, 5, 8, 11, 12, 13, 15, 16, 20 and 21). The response categories of the scale were strongly agreed, agreed, uncertain, disagreed, and strongly disagreed. The values that are given for analysis are 1,2,3,4 and 5, respectively.

Mindfulness attention awareness scale (MASS)

The current study utilized the Mindfulness Attention Awareness Scale (MASS) developed by (Brown & Rayan, 2003b) to degree the level of mindfulness among college students. The MASS consists of 15 items of self-report measures. The response categories of the scale are almost always, very frequently, somewhat frequently, somewhat infrequently, very infrequently, and rarely. The values that are used for the analysis are 1,2,3,4,5 and 6, respectively. Agreeing with Brwon and Rayan, MASS has greater inner consistency, i.e., Cronbach alpha, extending from .82 to .87. the highest score on the scale indicates that the respondents are mindful,

i.e., they pay attention and awareness of the surroundings.

Depression anxiety stress scale (DASS)

In the current study, the mental health assessment DASS-42 item scale was used. This scale assessed the rate of depression, anxiety, and stress among college students. Different studies describe the excellent internal consistency and reliability of this scale. The Urdu version of the DASS-42 (Husain & Gulzar, 2020) has been used. The scale consists of the same order as the English version of DASS-42, and the scoring method is the same as the English version of DASS-42. The cut score for depression is 9, anxiety is 7, and stress is 14.

Career decision difficulty questionnaire

A career decision difficulty Questionnaire was used to collect data regarding career decisiveness and indecisiveness among college students (CDDQ; Gati et al., 1996). The scale is handy for counseling purposes and also for research purposes. The scale consists of 34 items. The scale was rated on nine points. Does not describe me at all to describe me well. The scoring value is from 1 to 9. There are three subscales in the scale readiness, lack of information, and difficulty related to inconsistent information. In these three categories, there are ten subscales. Item 7 and item 12 in the scale are validity items. These are not included in the scoring. The scoring is computed by calculating the mean score of 10 subscales. A higher score on the scale indicates career indecisiveness, and a lower score indicates career decisiveness.

Procedure

The research process started after taking permission from the Research cell of the Lahore School of Professional Studies, the University of Lahore. Informed consent was taken from the students, and ensured their confidentiality. For confidentiality, the names of the students were not collected. A demographic sheet and four scales were administered to the college students. Before using the scales, permission was taken from the authors to use a scale for research. After taking permission, online and physical modes were used to collect data. After permission from the supervisor, a Google form is created for online data collection, and the link is shared with college-level students via social media and WhatsApp. In the online form-filling process, students from the whole of Pakistan participated. For physical data collection, I visited different colleges of District Sialkot, both public and private, and distributed forms among students; they filled out the forms and gave them back to me after completing the form within 30 minutes.

Statistical Analysis

For data analysis, we used a statistical package for social sciences (SPSS 21). We have used descriptive statistics for analyzing demographic variables. We have used correlational analysis, t-test, and ANOVA to analyze this research study's results.

Ethical considerations

For this research, study permission has been taken from the Research cell of the Lahore School of professional studies, The University of Lahore. After taking permission for the research, permission was taken from the authors of the scales we used. After formal permission from the research, data were collected from different colleges in Pakistan. Confidentiality of the information collected from the participants has been ensured, and results were used only for the research purpose.

Results

In this part of the research will be described outcomes from investigations.

Table 1

Mean and Standard Deviation Table for Age (N=202)

Variable	*M*	*S.D*
Age	19.6	1.4

Note: *M* = Mean, *S.D* = standard deviation

The above table showed that the participants mean age is 19.6 and standard deviation is 1.4.

Table 2

Frequency Distribution Table for Age Category, Gender, Subject, Residents, Socio Economic Status, and Family System (N = 202)

Variable	*f*	%
Age_ Cat.		
17-18	48	23
19-20	107	53
21-22	47	23
Gender		
Male	69	34.2
Female	133	65.8
Subject		
Arts	52	25.7
Science	71	35.1
Social Science	50	24.8
Commerce	18	18.9
Computer Science	11	5.4
Family System		
Joint	87	43.1
Nuclear	115	56.9
Residence		
Urban	101	50
Rural	101	50
College		
Public	152	75.2
Private	50	24.8

Note: *f* = Frequency, % = Percentage

The above table shows that most of the participants belong to the age range of 19 to 20 years, that is, 53% and 17-18 years, and 21-22 years 23%, and most of the participants are females that are 65.8% and 34.2% are males. Most of the participants are from science subject that is 35%; arts subject participants are 25.7%; social science participants, 24.8%; commerce department 18.9% and 5.4% are from computer science and family system nuclear that is 56.9% and 43.1% are from the joint family system. Most of the participants are from Government College.

Table 3

Psychometric Properties for Scales

Scale	*M*	*S.D*	Range	Cronbach's *α*
SI	60.57	6.2	44-77	.71
MASS	4.29	.59	2-6	.63
CDDQ	4.29	4.7	4-25	.96
DASS_FT	28.85	13.5	0-80	.88

Note: *SI* = Social intelligence, *MASS* = Mindfulness attention awareness scale, *CDDQ* = Career decision difficulty questionnaire, *DASS_FT* = Depression anxiety stress scale, *M* = Mean, *S.D* = standard deviation

The above table shows the psychometric properties of scales. The Cronbach α value for the social intelligence scale is .71 (>.70), which indicates satisfactory internal consistency. The Cronbach's α value for the Mindfulness attention awareness scale is .63 (>.70), indicating lower internal consistency. The Cronbach's α value for the career decision difficulty questionnaire is .96 (<.70), which indicates excellent internal consistency. The Cronbach's α value for the depression anxiety stress scale is .88 (<.70), indicating good internal consistency.

Table 4

Correlation mean and standard deviation table (N = 202)

Variable	SI	MASS	CDDQ	DASS_FT
SI	--	.22**	.31**	-1.7*
MASS	.22**	--	-.07	-.18**
CDDQ	.31**	-.07	--	.13**
DASS_FT	-1.7*	-.18**	.13**	--
M	60.57	4.29	12.22	28.8
S.D	6.1	.5	4.7	13.5

Note. *p<0.05, **p<0.01, ***p<0.001, *SI* = Social intelligence, *MASS* = Mindfulness attention awareness scale, *CDDQ* = Career decision making difficulty questionnaire, *DASS_FT* = Mental health problems, *M* = Mean, *SD* = Standard deviation

The above table stated that all variables significantly correlate with each other's e. There is a significant positive relationship between

social intelligence and career decision-making (r = .31, p < .001). The more social intelligence there will be career decidedness among college students. Our research study hypothesized that there should be a significant positive relationship between social intelligence and career decision-making. The results approved our hypothesis.

Social intelligence has a significant negative relationship with mental health problems (r = -1.7, p<.001). In our study, it was hypothesized that social intelligence would have a significant negative relationship with mental health problems results approved our hypothesis that if Social intelligence increases, mental health problems decrease.

Mindfulness has a non-significant negative relationship with career decision-making (r= -.07, p <.05). Our study hypothesized that there would be a significant positive relationship between mindfulness and career decision-making among college students. The results of the study rejected our hypothesis.

Mindfulness has a significant negative relationship with mental health problems (r = -.18, p <.001). It was hypothesized in this research study that there would be a significant negative relationship between mindfulness and mental health problems among college students. If mindfulness increases, mental health problems decrease among college students.

Discussion

This study aims to investigate the impact of mindfulness and social intelligence on college student's mental health and career decision-making. If college students have a higher degree of social intelligence, they would be more career-decided. Our analysis hypothesized that social intelligence and career decision-making should have a substantial positive relationship. The data confirmed our hypothesis.

In the evaluation of mental retardation, social intelligence has always played a part. This clinical condition remembers proof of weaknesses for "correspondence, self-care, home living, social and relational abilities, utilization of local area administrations self-course useful scholastic abilities, work, recreation, well-being, and insurance," notwithstanding a proof of odd scholarly working (i.e., IQ 70).

There is a strong connection between social intelligence and mental health issues. We hypothesized that social intelligence would have a strong negative association with mental health problems. The findings confirmed our hypothesis that mental health problems would decrease as social intelligence increased.

As a result, mindfulness is negatively correlated with psychological problems such as anxiety, depression, and psychological distress, according to previous studies published in 2003. These findings also align with (Williams, 2008a) research, which found that mindfulness is linked to a lower risk of depression. (Williams, 2008b) Previous studies that looked at the connection between psychological health and psychological distress and mindfulness found that mindfulness substantially affects psychological issues. Mindfulness has been shown in research to minimize depression and aggression levels, either directly or indirectly. (Hoffman et al., 2007) A previous study on mindfulness enables people to engage more, feel more self-assured, and be less averse to uncomfortable situations by educating them (Marlatt, 2002).

Makki et al. (2018) the discoveries showed that care and mental issues like melancholy, tension, loss of social control, passionate relations, and mental pain are firmly related. Care positively affects discouraged patients' psychological well-being. However, the findings also showed that trained clinical patients are more mindful than uneducated clinical patients. Mindfulness-based therapies, in addition to cognitive behavioral therapy, are another way to improve mental and physical health. Mindfulness is a nonjudgmental, accessible, and curious perception of the present moment. (Bishop et al., 2004) Care-based pressure decrease (MBSR) and care-based psychological treatment (MBCT) are the most regularly utilized of the many preparation programs accessible and have been demonstrated to be successful in the treatment of sadness and tension. Just as improving physical and mental prosperity in both clinical and nonclinical populations (Grossman et al., 2004). In clinical and local area settings, meta-examinations have additionally shown that care-based preparation is compelling in decreasing pressure and nervousness among working

grown-ups and understudies (Regehr et al., 2013; Virgili, 2015).

Theoretically and experimentally, mindfulness and psychological well-being are related. The significant components of mindfulness are awareness and nonjudgmental acceptance of one's present experience, which effectively combats common psychological distresses such as anxiety, worry, fear, and rage. (Feldman et al, 2007) Pity and an absence of interest in recently delighted leisure activities are regular indications of discouragement. Depression is referred to as a state of apprehension. Because of its prevalence, high mortality rates, risk of suicide and economic effects on society, depression is a significant public health problem. It is believed to be the primary source of years spent impaired, and it is anticipated to be one of the two driving reasons for handicapped changes a very long time by 2020, close by ischemic coronary illness. Discouragement causes intellectual restrictions equivalent to, if not more prominent than, those brought about by numerous other ongoing ailments. (Kamenov et al., 2014) Beck's hypothesis was reinforced by research, which showed that students' pessimistic expectations of their future are linked to depression (Abela & D'Alessandro, 2002).

There is no evidence that mindfulness harms job decisions. Our research proposed that there will be a significant positive association between mindfulness and college students' career decision-making. The study's findings refuted our hypothesis. Mindfulness has a strong negative association with mental health issues. In our research, we hypothesized that if mindfulness improves, mental health problems decrease among college students, and there will be a robust negative association between mindfulness and mental health problems.

Following past research, mindfulness and care were discovered to be unequivocally, emphatically related, and true to form. While these constructions have all the earmarks of being indistinguishable and are connected, it is essential to perceive the distinctions. (Wall, 2005) Care is portrayed as keeping up awareness of and regard for oneself, and one's environmental factors. Mindfulness is information on one's sentiments, feelings, and practices. Our discoveries show that as mindfulness rises, care ascends and the other way around. Since care was found to be a significant arbiter inside the relationship, this supports the connection between self-care esteem, mindfulness, and prosperity.

Even though these results did not support the theory, they have significant consequences. Expanded contribution in self-care exercises is related to expanded general prosperity, as per the solid, positive relationship between self-care recurrence and prosperity. These outcomes are upheld by research (Boero et al., 2005; Lustyk et al., 2004), which shows that increasing self-care practices boosts happiness. Moreover, care doesn't affect this relationship's impacts, inferring that self-care propensities are connected to expanding Wellness, and care doesn't indirectly affect this relationship. Imply that self-care propensities don't generally require information on oneself and one's environmental factors; rather, essentially captivating in self-care rehearses effects by enormous well-being.

Conclusion

The results of the study showed that if college-level students have a higher level of social intelligence they have a higher level of career decidedness and a lower level of mental health problems. Because when an individual is socially intelligent, they can understand in a better way self and others and how to behave and react under different circumstances. The results also showed that if students have a higher level of mindfulness, they have a lower level of mental health problems because mindful students are aware of themselves and their environment. On the other hand, our analysis showed a non-significant negative relationship between mindfulness and career decisions; and if a student has a higher level of mindfulness, that doesn't mean that the has they decided about their career in the future. The results also explained that there is no gender difference in SI.

Findings also suggest that students from the joint family system have a higher level of mindfulness than students from the nuclear family system. Findings also suggest that public college students are more socially intelligent than private.

Limitations

The sample size of the present study was small; the sample size should be large enough so that the results could be generalized more precisely. The results of the study cannot explain over the globe. The data collection tools are in English except for DASS, which is difficult for some students; scales should be translated into the national language. Career decision-making is a vast topic that could be studied separately.

Suggestions

Social intelligence could be learned and very important for success in life; at the college level, there should be training workshops to enhance social intelligence among college students.

For college-level students facing difficulty regarding career decision-making, there should be a career counselor appointed at the college level who can guide them properly to choose the right career without any pressure from society. A psychologist should be appointed at college to resolve the mental health problems of college students. Training workshops should be organized to enhance the level of attention and awareness among students. There is an essential role in a stress-free environment for students to enhance their mindfulness, SI, MH, and CDM, so there is a need to create an environment for enhancing the student's level of success in every field of life. In the future, such a study should be conducted on a large sample size.

References

Abu-Amsha, M. K. (2013). Enhacing Corporate Govennance Principles and the Different Emonomic Effects in the State of Kuwait. *Journal of the Gulf & Arabian Peninsula Studies*, *39*(149).

Norris, E., van Steen, T., Direito, A., & Stamatakis, E. (2020). Physically active lessons in schools and their impact on physical activity, educational, health and cognition outcomes: a systematic review and meta-analysis. *British Journal of Sports Medicine*, *54*(14), 826-838.

Zubair, A. (2018). Mindfulness and resilience as predictors of subjective well-being among university students: A cross cultural perspective. *Journal of behavioural sciences*, *28*(2), 1-19.

Silvera, D., Martinussen, M., & Dahl, T. (2001). The Tromso social intelligence scale, a self-report measure of social intelligence. Scandinavian Journal of Psychology, 42(4), 313 – 319.

Husain, W., & Gulzar, A. (2020). Translation, adaptation and validation of Depression, Anxiety and Stress Scale in Urdu. *Insights Depress Anxiety*, *4*(1).

Abela, J. R., & D'Alessandro, D. U. (2002). Beck's cognitive theory of depression: A test of the diathesis-stress and causal mediation components. *British Journal of Clinical Psychology, 41*(2), 111-128.

Barnes, M. L., & Sternberg, R. J. (1989). Social intelligence and decoding of nonverbal cues. *Intelligence*, *13*(3), 263–287. https://doi.org/10.1016/0160-2896(89)90022-6

Bishop, S. R., Lau, M., Shapiro, S., Carlson, L., Anderson, N. D., Carmody, J., . . . Velting, D. (2004). Mindfulness: A proposed operational definition. *Clinical psychology: Science and practice, 11*(3), 230-241.

Boero, M. E., Caviglia, M., Monteverdi, R., Braida, V., Fabello, M., & Zorzella, L. (2005). Spirituality of health workers: a descriptive study. *International journal of nursing studies, 42*(8), 915-921.

Brown, K. W., & Ryan, R. M. (2003). The benefits of being present: mindfulness and its role in psychological well-being. *Journal of personality and social psychology, 84*(4), 822.

Feldman, G., Hayes, A., Kumar, S., Greeson, J., & Laurenceau, J.-P. (2007). Mindfulness and emotion regulation: The development and initial validation of the Cognitive and Affective Mindfulness Scale-Revised (CAMS-R). *Journal of psychopathology and Behavioral Assessment, 29*(3), 177.

Galles, J., Lenz, J., Peterson, G. W., & Sampson, J. P. (2019). Mindfulness and Decision-Making Style: Predicting Career Thoughts and Vocational Identity. *The Career Development Quarterly*, *67*(1), 77–91. https://doi.org/10.1002/cdq.12164

Grossman, P., Niemann, L., Schmidt, S., & Walach, H. (2004). Mindfulness-based stress

reduction and health benefits: A meta-analysis. *Journal of psychosomatic research, 57*(1), 35-43.

Hill, C. L. M., & Updegraff, J. A. (2012). Mindfulness and its relationship to emotional regulation. *Emotion*, *12*(1), 81–90. https://doi.org/10.1037/a0026355

Hoffman, B. M., Papas, R. K., Chatkoff, D. K., & Kerns, R. D. (2007). Meta-analysis of psychological interventions for chronic low back pain. *Health psychology, 26*(1), 1.

Kaukiainen, A., Salmivalli, C., Lagerspetz, K., Tamminen, M., Mäki, H., & Poskiparta, E. (2002). Learning BlackwellScienceLtd difficulties, social intelligence, and self-concept: Connections to bully-victim problems. *Scand J Psychol*, 10.

Kamenov, K., Mellor-Marsá, B., Leal, I., Ayuso-Mateos, J. L., & Cabello, M. (2014). Analysing psychosocial difficulties in depression: a content comparison between systematic literature review and patient perspective. *BioMed research international, 2014*.

Kabat-Zinn, J. (1994). Where you go, there you are: Mindfulness meditation in everyday life. *New York, NY: Hyperion. Laranjo, J., Bernier, A., & Meins, E.(2008). Associations between maternal mind-mindedness and infant attachment security: Investigating the mediating role of maternal sensitivity. Infant Behavior and Development*, *31*, 688-695.

Lustyk, M. K. B., Widman, L., Paschane, A. A., & Olson, K. C. (2004). Physical activity and quality of life: assessing the influence of activity frequency, intensity, volume, and motives. *Behavioral Medicine, 30*(3), 124-132.

Makki, A., Ajmal, A., & Bajwa, R. S. (2018). Impact of mindfulness on mental health of patients diagnosed with major depressive disorder. *Isra Medical Journal, 10*(2), 66-69.

Marlatt, G. A. (2002). Buddhist philosophy and the treatment of addictive behavior. *Cognitive and behavioral practice, 9*(1), 44-50.

Regehr, C., Glancy, D., & Pitts, A. (2013). Interventions to reduce stress in university students: A review and meta-analysis. *Journal of affective disorders, 148*(1), 1-11.

Shapiro, S. L., & Carlson, L. E. (2009). *The art and science of mindfulness: Integrating mindfulness into psychology and the helping professions*. American Psychological Association.

Thorndike, E. L. (1920). Intelligence and its uses. *Harper's magazine*.

Virgili, M. (2015). Mindfulness-based interventions reduce psychological distress in working adults: a meta-analysis of intervention studies. *Mindfulness, 6*(2), 326-337.

Wall, R. B. (2005). Tai chi and mindfulness-based stress reduction in a Boston public middle school. *Journal of Pediatric Health Care, 19*(4), 230-237.

Williams, J. M. G. (2008). Mindfulness, depression and modes of mind. *Cognitive Therapy and Research, 32*(6), 721-733.

Walpola, P., Walpola, I., & Toneatto, T. (2022). A Contemporary Model for Right Mindfulness Based on Theravada Buddhist Texts. *Mindfulness*, 1-15.

Yamagishi, T., Kikuchi, M., & Kosugi, M. (1999). Trust, Gullibility, and Social Intelligence. *Asian Journal of Social Psychology*, *2*(1), 145–161. https://doi.org/10.1111/1467-839X.00030