



EXPLORING THE RELATIONSHIP BETWEEN HOUSING TYPE AND ENVIRONMENTAL QUALITY

ON COMMUNITY LIFESTYLE AND HEALTH & WELLBEING

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Abstract: The present study was designed to examine the how residents residing in two different styles of residential settings with good and bad environmental quality conditions respond to various community lifestyle features of their housing environment and what are its likely consequences on health & well-being. The study was conducted on a homogeneous sample comprising of 320 residents who were heads their respective residential units. A 2X2 factorial design was employed in which equal number of respondents were drawn across environmental quality (good versus bad) and Type of housing (apartments versus duplexes). The major results of this study revealed that residents living in Duplex style of housing perceived their community life- style significantly better than their counterparts living in apartment complexes. Similar trends of result were found between environmental quality and community life - style with residents living in good environmental quality dwellings reported significantly better community life- style in their complexes than their counterparts living in bad quality housing. Finally, the results indicated that high level of community predicted better health & wellbeing. Thus, duplex type of dwelling and high-quality residential complex independently promotes better community life- style to its residents. However, housing type and environmental quality were not related to health & well-being. Finally, community lifestyle was found to be significantly correlated with health. All these results reported are on total scores obtained on Community life-style and health & wellbeing. Implications of the study were discussed.

Keywords: Type of housing, environmental quality Community lifestyle, Health & Well-being

INTRODUCTION

The pace of urbanization has been increasing rapidly. A striking factor of the urbanization process in India is the growth of cities. India urban population for 2021 was 498,179,071, a 2.15% increase from 2020. The population of Madhya Pradesh is 7,26,26,809 which consist of 5.99% of the Country's population. As per the Census 2011 out of total population of Madhya Pradesh, 27.63% people lived in urban regions while 72.37% in rural areas. Bhopal district of Madhya Pradesh has a total population of 2,371,061 as per the Census 2011. Out of which 1,236,130 are males while 1,134,931 are females. To accommodate parallel increase in different type of housing is evident.

Housing has been a serious concern in urban India. The capital of Madhya Pradesh is slowly attaining the state of a metro. To accommodate large number of people the enclosed residential complexes both flats and duplexes are becoming a popular choice and are available in all price range varied environmental quality. Some complexes are good; some are bad in terms of its overall Quality of appearance, inbuilt facilities and environmental aesthetics. Within this backdrop the present research is planned to examine how the residents living in good and bad environmental quality homes and apartments in respond to various physical and social features of their residential complexes and what are its likely consequences on their health and well-being. Another related purpose is to examine how the community life-style factors are related to major related to health. The enclosed residential complexes provide ample opportunity for community development. In is seen that the residents organize different social, cultural and religious functions and get together which provide the opportunity to residents to interact with each other.

To accommodate a large number of people in restricted space, multi-storeyed complexes that satisfies the users psychological and social needs. Some physical provisions of the apartment buildings are related to sharing of common apartment wall, ceiling, floor and close proximity with neighbours; sharing of common facilities like stairways, gardens, parking areas and recreational areas. The independent duplexes provide the residents with more privacy, less noise and

disturbance relative to flat type of accommodation. Different type of needs are satisfied in varied intensity with regard to different style of accommodation.

Attitudes on housing have been studied in setting ranging from single-family dwellings, apartments, high-rise developments, dormitories, prisons and mobile home parks (Paulus et.al. 1991., Amerigo and Aragonés, 1997; Paulus et al Nagar 1996). In addition, the literature on the dimensions of the housing environment is described in terms of social relationship (physical structure (Greenfield and Lewis, 1969) management Ahlbrandt and Brophy, 1976), ecological quality (Paulus et al., 1991) crowding (Nagar, 2006; Baum and Paulus, 1987) and residential satisfaction and health.

A large number of scholars have defined residential environmental quality in terms of a larger concept extending beyond the boundaries of quality of life"; combining it with qualities as health & wellbeing, safety and residential satisfaction. (Aminsalehi, 2008). Each component of residential environmental quality (e.g., nature, open space, infrastructures, build environment, facilities of physical environment and natural reserves) has its special characteristics with regard to quality as perceived by the users. Among the methods of evaluating environmental quality, research instruments for environment quality, at the levels of housing, neighbourhoods and communities, have been well developed. A number of studies have developed measures to assess the residential environmental quality. In some studies, the scholars have assessed environmental quality by using objective features of the complexes like greenery, upkeep of the area, aesthetics, security etc. (Paulus et al. 1991., Erdogant, et. al. (2007 Esperanza & Victoria, 2008). These studies have linked perceived environmental quality with residential satisfaction and health (Weildeman & Anderson, 1985)

Evidence exists that the type of residential accommodation, its environmental quality and community life style factors having some linkages with psychosomatic health. The literature on the dimensions of the housing environment is described in terms of social relationship (Gans, 1967; Nagar, 2006), physical structure (Jotwani & Nagar, 2018). A number of studies have reported

that having supportive relationships is one of the strongest predictors of well being, having a notably positive effect.

Duplexes and apartments were related differently along several dimensions such as noise and attractiveness but not differences were obtained on overall low quality was rated significantly more negatively relative to high-quality housing. Turkoglu (1997) analyzed residential environmental satisfaction and predicted satisfaction in terms of housing and neighbourhood characteristics. Berkoz (2009) indicated that housing accessibility, maintain ability of the residential environment and good neighbourhood relationship have significant and direct effects on residential satisfaction.

The most important residential quality aspects appearing in the literature are social ties in the neighbourhood, safety risks (e.g., crime, traffic), environmental hygiene (e.g., noise, air pollution), and the presence of facilities (e.g., shops, greenery) (Kaplan & Kaplan, 2003; Austin, Furr & Spine, 2002; Stansfeld, Haines & Brown, 2000; van Poll, 1997;).

Apart from daily household routine, interaction with other people in the home was found to be an important determinant of the definition of home. Thus, it seems that people need to get out of their homes to appreciate the taken-for-granted order of life. People also need to be away to recognize that interaction with friends and neighbour's is an important part of home life. Neighbours have an inescapable interdependence emanating from common local concerns, such as house, values, safety and status (Downs, 1981). The two factors that seem to be inseparably interlocked in the housing environment are type of housing and environmental quality of the surrounding. Both these factors are related to residential satisfaction, feeling and health.

The community concept within the overall setting of the residential environment is where the residential satisfaction mostly depends on the social composition and type of interactions. Therefore, the process of a dwelling occupant satisfaction evaluation focused on social aspects, shall primarily target the neighbourhood and the relevant community. The immediate housing

environment and the neighbourhood represent an everyday-landscape, which can either support or limit the physical, mental and social well-being of the residents. For many years, the housing environment has been acknowledged as one of the main settings that affect human health. Living and housing conditions are the basis for many aspects that affect residential health.

The major objective of the study is focused to examine the effect of environmental quality and type of housing (apartment vs duplex) on measures related to community life style and health.

METHOD

The study was conducted in two phase. In the first phase the pilot study was carried out. A brief Pilot Survey was conducted on small sample of apartment and Duplex dwellers who were earlier residing or are currently residing in High Eny apartment and Duplex having good and bad environmental quality features. Responses were taken from both male and female respondents. Respondents were approached directly on the site. A total 30 respondents participated in the pilot study. The data obtained from the pilot study was analyzed and suitable modification was done in the questionnaire. In this regard, some items have been simplified, some deleted and some items were modified. Furthermore, for gathering the in-depth information or knowledge related to the good and bad features of their present housing, some open ended questions were included in the final version of the questionnaire.

The city has its historical significance and it is a cultural capital or educational center of Madhya Pradesh. Due to its unique geographical situation, present climate, employment opportunities, social security and educational facilities available in the city use population from the rural areas is attracted towards the city. Industrialization is the key factor of migration from all over the country day by day. These are some basic reasons for different lifestyle of people in city of Bhopal. A brief description of assessment of environmental quality is given below:-

High Environmental Quality

High Environmental Quality of the selected unit was characterized by its locality and distance from

the city, availability of conveyance and employment near the colony. Presence of portable water, playground, greenery and electricity, Satisfactory facilities of drainage, sewage and reducing garbage, besides it the absence of mosquitoes, flies, stagnated and contaminated water and also the good condition of shelter

Low Environmental Quality

The Low Environmental Quality were characterized in term of their location, foul of fresh air, lack of clean drinking water, faulty sewage system, lack of greenery, inadequate supply of electricity, presence of mosquitoes and flies and absence of walking area.

The main study was conducted after making some changes which were based on the results obtained

from the pilot study. The pilot study was done on small samples derived from apartment and Duplex to have an idea of nature of the problems and suitability of the tools and techniques for collection of data and also to examine the effectiveness of instructions and appropriateness of the research design.

Sample and Design:

The 2X2 factorial design structure with two types of residential environment (apartment and Duplexes) and two levels of

environmental quality (good and bad) was utilized involving 320 respondents. In each of the four potential conditions, there were 80 subjects.

Table-1-Schematic Presentation of Sample Distribution across Environmental Quality And Type of Residence:

TYPE OF RESIDENCE	ENVIRONMENT QUALITY		
	Good	Bad	
Apartment	80	80	160
Duplex	80	80	160
Total	160	160	320

Measure

A survey questionnaire entitled "Community Life style" was developed. The detailed instruction about the objectives together with the general instructions for each section regarding the rating of the item was given to the respondents. The first section of the questionnaire contained some personal information about the respondents. Some of the items included in this section were related to age, sex, occupancy status, income, duration of stay in the present dwelling, number of rooms in the dwelling and number of family members, floor in which you are living, Number of occupants sharing the floor, physical features of the residential environment housing, facilities of the housing environment and so forth. The preceding sections of this questionnaire incorporated items on community lifestyle and health. A brief description of these scales is presented below.

Community Lifestyle

A Community life style scale involving measures on sense of community, social support and socialization was developed. The items used in this scale were simulated from the scales utilized in military studies (Paulus, Nagar and Camacho, 1991; Paulus, Nagar, Larey and Camacho, 1996). The sense of community sub- scale **six items**. Some of them related to liking of the complex, unpleasant housing, experience, probable duration of stay m the complex, proud to be part of the complex, and so on. The social support sub-scale contained **four items**. This scale measured the degree of social support derived in the neighbourhood, help in emergencies, taking care of children, loan of money and food, and so forth. Finally, the socialization sub-scale comprised six items. The items in this scale related to degree of socialization, entertaining guests outside and inside the primary and secondary environment, participation in social activities, getting along with others in the neighbourhood, and so on.

To assess the general well-being and health, a 25-item scale developed by Dupuy (1978) was used. This scale measured the extent to which individuals had experienced depression, anxiety, nervousness and various bodily ailments. Subjects were required to rate these items on a 6-point scale. The composite score was treated as index of well-being. This scale had been used successfully in the past (Martin and Iokovic, 1987). The high score was indicative of positive well-being.

Health

A condensed version of the Hopkins Symptoms Checklist-90R (Derogatis, 1983) was administered as a measure of overall health. For each of the fifteen common symptoms including watery eyes, itching or painful eyes, temporary deafness or hard hearing sensation sneezing spells, running nose, congested nose, asthma, coughing, out of breath, chest pain, deep difficulty, toothaches, upset stomach and headaches, the subjects were asked to indicate the extent to which they had been bothered by that symptom during the preceding month. The rating of these symptoms was done on a 5-point rating scale. This checklist has been used successfully by many studies to demonstrate the health-related effects of stress (Schaeffer et al., 1988). The scale scores ranged from 0 to 75 and the high score indicated less health-related

Procedure: The president and the executive body was contacted by the investigator and the purpose to the study was explained to them. A circular was sent by the secretary of the society to residents regarding the purpose of the study. The residents who agreed to participate were invited in the community hall of the society where the investigator explained the purpose of the research and distributed the survey questionnaire to them. The respondents were encouraged to clarify doubts if any before responding to the items. The respondents were also assured that their responses will be used for academic purpose only and will be kept confidential and that their responses cannot be traced back to them. Respondents were asked to know the instructions carefully and were told that there was nothing like right or wrong answer to any of the questions. Instructions for each section of the questionnaire were given before the beginning of each section. The questionnaire had the following general instructions mentioned prominently on the page one. Most of the respondents on an average responded to the questionnaire in 45 minutes. In the end, respondents were thanked for their participation

In order to develop understanding about the research questions, the data required appropriate descriptive, and analysis of variance on major dependent and outcome variables across type of housing (apartment and duplexes), environmental quality (Good and Bad). A 2x2 ANOVA was also performed. However, only significant main effects of IVs with dependent variables were noticed. No significant interaction effects were found. Thus, to make the computation easy t test was performed. Furthermore, the correlation result has also been presented to demonstrate the nature and strength of relationship between independent and outcome variables. The mean, standard deviation and t test among the major independent major variables like community life style and health are presented. A brief description of the results is given below:

Community lifestyle across Apartment and Duplex

Table 2 presents the result on all the individual component of community lifestyle across apartments and duplexes of residential complexes. The t test was performed on these factors to understand the differences between residents residing in two types of housing (Apartments and Duplexes) of the three components of community life style. Significant mean difference between respondents residing in apartments and duplex was found on three components of community life style. The apartment residents significantly reported more help from their neighbour in term of getting job related information, decision making and relaxing with neighbour relative to their counterparts residing duplex. However, No difference between residents of both apartments and duplex were found on other components of community lifestyle like healthy environment, lending money, help in emergency, social events, helping neighbor, helping food supply, help in good or bad time and feel peace with neighbour based on the composite score mean. Comparison was made between respondents living in two different style of housing The results revealed that apartment residents reported significantly higher degree of support from their neighbourhood related to residents who were residing in duplex style of housing

Table 2: Mean difference on community lifestyle across apartment and duplex

Community lifestyle	Apartment	Duplex		Sig
	Mean	Mean	T	
Sense of Community				
Help in good and bad time	2.11	2.17	.86	.38
Dependency in Neighbour	2.19	2.24	.67	.50
Feel peace with Neighbour	2.01	2.07	.65	.51
Healthy Environment	1.78	1.72	1.07	.29
Social Support				
Helping Neighbours	2.06	2.18	1.55	.12
Financial help Neighbours	2.04	2.15	1.33	.18
Lending money	1.95	2.03	.97	.33
Helping supply food	2.03	2.07	.57	.57
Help in emergency	1.90	1.85	.72	.47
Helping in Job	2.09	2.28	2.90	.01**
Socialization				
Helping decision making	2.19	2.42	2.91	.01**
Social events	1.89	1.87	.30	.77
Feel peace with Neighbour	2.01	2.07	.66	.51
Relaxing with Neighbour	2.14	2.30	2.18	.03*
Total	26.413	27.373		.01**

Component of health across apartment and duplex

Table-3 presents the t test results on all the individual component of health among respondents residing in apartments and duplexes. The duplex residents significantly reported less health related problem expressed more complain like deafness, headache, eating less, dizziness, temperature feeling and shivering hand and

leg and body pain relative to their counterparts residing in duplex style of housing. However, no difference between residents of apartment and duplexes were found on other components of health like watering in eyes, itching eyes, sleep, cough and cold, breathing problem, chest pain, gas problem, constipation, nervousness feel, joint stiffness, weakness feeling and sudden panic

Table 3: Mean difference between apartment and duplex on component of health

Apartment		Duplex		
Health	Mean	Mean	T	Sig
Watering eyes	2.10	2.22	1.77	.08
Itching eyes	2.15	2.20	.67	.50
Deafness	1.61	1.32	4.19	.00**
Headache	2.29	2.53	2.70	.01**
Sleep	2.19	2.23	.42	.67
Cough and Cold	2.29	2.38	.83	.40
Breathing problem	2.21	2.30	.99	.32
Chest pain	1.92	1.90	.23	.81
Gas problem	2.04	2.07	.40	.69
Constipation	2.02	2.02	.01	.99
Eating less	1.77	1.59	2.66	.01**
Dizziness	1.74	1.56	2.55	.01*
Temperature feels	1.62	1.12	7.29	.00**
Shivering hand and leg	1.82	1.64	2.23	.03*
Nervousness feels	1.94	1.97	.27	.79
Joint stiffness	2.04	2.07	.49	.62
Tired body	2.05	2.23	2.63	.01**
Weakness feeling	2.01	2.02	.080	.93
Body pain	2.04	2.15	1.51	.13
Sudden panic	1.90	1.87	.30	.76
Total	39.77	39.44	.73	.47

Component of well-being in apartment and duplex

Table 4 presented the results on all the individual components of well-being across apartments and duplexes of the housing complexes. The mean, standard deviation and t test are performed on these factors to understand the differences between apartments and duplexes. No significant difference between apartments and duplexes are found on any of the

twenty-five components of well-being. However, both apartments and duplexes reported strong degree satisfaction with well-being, fresh feel, good health, good sleep, happiness, no anxiety, positive attitude, life useful to others, happy life, easy life and peaceful life. Furthermore, both apartments and duplexes reported dissatisfaction with mental irritation, irritation feeling, stable mind and lack of confidence in well-being

Table 4: Mean difference between Apartment and Duplex on component of Wellbeing

Wellbeing	Type Of Housing			
	Apartment	Duplex		
↓	Mean	Mean	t	Sig
Fresh feel	1.814	1.803	.232	.816
Good Health	1.950	1.892	.732	.464
Good Sleep	1.938	1.898	1.003	.317
Irritation feeling	3.154	3.291	.945	.345
Irritation Mental	2.276	3.500	1.871	.062
Feel good Ideas	2.284	2.278	.071	.943
Happiness in work	1.753	1.838	.521	.603
Controlled Mind Behaviour	2.024	2.000	.248	.804
Feeling Unhappy	2.808	2.905	.632	.528
No Anxiety	2.030	1.987	.386	.699
Positive Attitude	1.469	1.398	1.114	.266
Life Useful to others	1.963	2.000	.445	.656
Happy Life	1.938	1.993	.556	.579
Easy Life	1.907	1.898	.095	.924
Feeling Pressure	2.864	2.765	.742	.458
Stable Mind	3.728	3.892	1.227	.221
Lack of Confidence	3.561	3.588	.192	.848
Sudden Anger	2.648	2.696	.391	.696
Peaceful life	1.549	1.500	.824	.410
Pressure mind	2.037	2.057	.221	.825
Joyful Morning	2.074	2.107	.362	.718
Emotion	2.047	2.057	.360	.719
Feeling Energetic	2.030	2.082	.560	.576
Feeling Disappointment	2.049	2.057	.084	.933
Total	56.821	57.303	.549	.938

Community
across good

lifestyle
and bad

environmental quality

Table - 5 presents the result on all the individual components of community lifestyle across good and bad environmental quality of residential complexes. The mean, standard deviation and t test are performed on these factors to understand the differences between residents residing in two types of housing (Good and Bad) of the thirteen components of community lifestyle. Significant mean difference between respondents residing in good and bad environmental quality was found on community life style. The good environmental quality residents more help three components of from their neighbour in term of getting job related information, helping decision making and relaxing with neighbour relative to their counterparts residing bad environmental quality. However, no difference between residents of both good and bad environmental quality and were found on other components of community lifestyle like healthy environment, lending money, help in emergency, social events, helping neighbour, helping food supply, help in good or bad time and feel peace with neighbour based on the composite score mean comparison was made between respondents living in two different styles of housing. The result revealed that good

environmental quality reported significantly higher degree of support from their neighbourhood relative to residents who were in bad environmental quality.

. Table 5: Mean difference on Community lifestyle across good and bad environmental quality

Community lifestyle	Environment Quality			
	Good	Bad		
	Mean	Mean	t	Sig
Sense of community				
Healthy Environment	1.78	1.72	.961	.34
Help in good and bad time	2.11	2.17	.816	.41
Dependency in Neighbour	2.19	2.22	.759	.45
Social Support				
Helping supply food	2.04	2.07	.394	.69
Helping Neighbours	2.06	2.17	1.51	.13
Help in emergency	1.90	1.85	.68	.50
Financial help Neighbours	2.05	2.15	1.30	.19
Helping in Job	2.10	2.27	2.81	.01**
Lending money	1.95	2.0	.97	.33
Socialization				
Helping decision making	2.19	2.42	2.97	.01**
Social events	1.89	1.87	.26	.79
Feel peace with Neighbour	2.01	2.08	.79	.43
Relaxing with Neighbour	2.15	2.30	2.11	.04**
Total	26.41	27.36	2.71	.07*

Health across good and bad environmental quality

Table-6 presents the results on all the individual component of health across good and bad environmental quality of residential complexes. The Table - standard deviation and t test are performed on these factors to understand the differences between residents residing in two types of mean, housing (good and bad) of the twenty components significant mean difference between good and bad environmental quality was found on seven components of health. The bad environmental quality residents significantly reported less health related problem expressed more complain like are deafness, headache, eating less,

dizziness, temperature feeling and shivering hand and leg and body pain relative to their counterparts residing in good environmental quality. However, no difference between residents of good and bad environmental quality were found on other components of health like watering in eyes, itching eyes, sleep, cough and cold, breathing problem, chest pain. gas problem, constipation, nervousness feel, joint stiffness, weakness feeling and sudden panic.

Table 6: Mean difference on Health across good and bad environmental quality

Health	Environment Quality			
	Good	Bad	t	Sig
Watering eyes	2.10	2.22	1.71	.09
Itching eyes	2.14	2.21	.77	.44
Deafness	1.612	1.32	4.16	.000**
Headache	2.29	2.52	2.59	.01**
Sleep	2.19	2.22	.36	.72
Cough and Cold	2.29	2.37	.75	.45
Breathing problem	2.21	2.30	.93	.35
Chest pain	1.92	1.91	.21	.83
Gas problem	2.04	2.08	.53	.60
Constipation	2.02	2.03	.15	.88
Eating less	1.77	1.60	2.52	.01**
Dizziness	1.74	1.57	2.59	.01**
Temperature feels	1.6	1.12	7.38	.000**
Shivering hand and leg	1.82	1.64	2.30	.02**
Nervousness feels	1.94	1.97	.43	.67
Joint stiffness	2.04	2.07	.31	.75
Tired body	2.06	2.22	2.56	.01**
Weakness feeling	2.01	2.02	.07	.94
Body pain	2.04	2.15	1.47	.14
Sudden panic	1.89	1.88	.14	.89
Total	39.77	39.44	.73	.46

Table 7:

Pearson correlation between Health and Community Lifestyle on total sample.

	Health
Community lifestyle	.255**

DISCUSSION

The present study was designed to examine and explain how residents residing in apartment and duplex style of residential complexes with good and bad environmental quality conditions respond to various community lifestyle features of their

housing environment and what are its likely consequences on health.

The major results of this study reveal that residents living in duplex style of residential accommodation reported significantly better community life than their counterparts residing in apartment complexes. In a similar vein, residents residing in good quality housing reported significantly better community

life relative to their counterparts residing in bad quality housing. These effects were observed on the total scores of community life style and not on all the separate components of Community life style.

Finally, community life was found to be significantly correlated with health.

It seems that duplex style of housing provides unique features which relates to enhanced privacy, less interference and noise related disturbance and more control over the environment than residents residing in apartments. The study of a variety of perspectives emphasize that human seek an optimal level of stimulation from social interaction (Altman, 1975; Zuckerman, 1979). In this study it seems that the apartment residents were over stimulated with too much social contact and interference from neighbours and thus they reported suffering from some psychosomatic problems. In contrast, the residents residing in duplexes perceived more control over their environment, having interaction with neighbours when they desired and were having more privacy in their dwelling environment and thus no health-related complaints were found. Baron and Rodin (1978) proposed that deleterious effects of environmental stressors like crowding are related to the loss of control experienced (e.g., unpredictability, uncertainty, inability to escape).

Furthermore,

It seems plausible that residents residing in duplex might have derived pleasure of living in independent house with lot of privacy relative to their counterparts residing in apartments were residents sharing the same floor space with other residents is imminent. The residential satisfaction derived from living in an independent house with less disturbance from neighbours might have enhanced their desire to interact with neighbours as and when required in common areas of the residential complex. In duplex residents have lot of freedom to control the interaction which is not possible in multi-storeyed apartments.

In addition, the main effect of environmental quality on overall community life style was found to be significant. In other words, residents residing in high quality residential complexes reported significantly higher degree of social cohesiveness

and better neighbourhood relationship than residents who were residing in low quality complexes. The residents who were residing in high quality complexes exhibited more help from neighbours in terms of fetching jobs, decision making and relaxing with neighbours than residents who were residing in low quality housing complexes. Finally, no significant difference of environmental quality was found on most of the measures of health.

The results presented in table 6 reveal that community life style is a potent predictor of health. The results seem to indicate that residents who are able to derive high levels of social support in their neighbourhood do report higher levels of psychological well-being and better health. The results are consistent with a large body of research wherein the buffering effect of social variables are reported between stressors and health. High levels of social support seem to shield the individual from the adverse effects of stressors on health and well-being. Housing satisfaction was predicted more strongly by subjective evaluation of housing than by environmental quality. Obviously, other environmental, social and psychological variables besides the environmental quality once assessed may play a major role in housing evaluation and satisfaction.

Conclusion-A very cohesive picture emerges if we look at the major results comprehensively. The major result revealed that residents living in duplex style of housing reported better community life in their residential complexes and those residents who were residing in good quality complexes did reported better community life in their complexes. The type of housing was not related to health.

Thus, based on research one can conclude that residents are more satisfied living in apartment complexes than duplexes. In addition to this good environmental quality also generates pleasant emotional states and higher residential satisfaction. In most cases, the architecture feature of apartment complexes, felicitated, social interaction between residents and thus frequency of social exchange is very high in apartment complexes. Thus, the apartment complexes are judged more favourably by the residents relative to the duplexes. Supportive evidence is available (Baum & Paulus, 1987).

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