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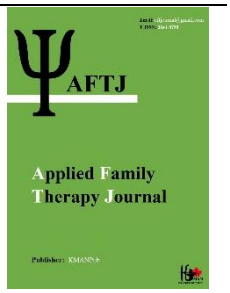

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Modeling Family Quality of Life Based on Economic Pressure, Family Adaptability, Hope, and Emotional Support: The Mediating Role of Psychological Well-Being

Mikko. Salonen[1], Liam. Desrosiers[2*], Stefan. Leitner[3]

[1] Department of Psychology, University of Helsinki, Helsinki, Finland
[2] Department of Behavioral Neuroscience, Laval University, Quebec City, Canada
[3] Department of Cognitive Psychology, University of Vienna, Vienna, Austria

*** Corresponding author email address**: liam.desrosiers@ulaval.ca

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A B S T R A C T

Objective: The present study aimed to develop and test a structural model of family quality of life based on economic pressure, family adaptability, hope, and emotional support, while examining the mediating role of psychological well-being among married adults in Canada.

Methods and Materials: This study employed a cross-sectional correlational design using structural equation modeling (SEM). The study population consisted of married adults residing in Canada. A total of 612 individuals were recruited through community organizations and online platforms, of whom 587 participants met the inclusion criteria and were retained for analysis. Data were collected using standardized instruments measuring family quality of life, economic pressure, family adaptability, hope, emotional support, and psychological well-being. Descriptive statistics, Pearson correlation analyses, confirmatory factor analysis, and structural equation modeling were conducted using SPSS 29 and AMOS 29. The significance of indirect effects was assessed through bootstrap analysis with 5,000 resamples.

Findings: The measurement model demonstrated excellent fit to the data (χ^2/df = 2.41, CFI = .956, TLI = .949, RMSEA = .049, SRMR = .042). The structural model also exhibited satisfactory fit indices (χ^2/df = 2.53, CFI = .951, TLI = .947, RMSEA = .051, SRMR = .044). Economic pressure significantly and negatively predicted psychological well-being ($\beta = -.28$, $p < .001$) and family quality of life ($\beta = -.21$, $p < .001$). Family adaptability positively predicted psychological well-being ($\beta = .24$, $p < .001$) and family quality of life ($\beta = .18$, $p < .001$). Hope showed significant positive effects on psychological well-being ($\beta = .35$, $p < .001$) and family quality of life ($\beta = .16$, $p < .001$). Emotional support positively predicted psychological well-being ($\beta = .27$, $p < .001$) and family quality of life ($\beta = .14$, $p = .001$). Psychological well-being emerged as the strongest direct predictor of family quality of life ($\beta = .49$, $p < .001$). Bootstrap analyses confirmed significant indirect effects of all predictor variables on family quality of life through psychological well-being ($p < .001$). The model explained 69% of the variance in psychological well-being and 74% of the variance in family quality of life.

Conclusion: The findings indicate that family quality of life is shaped by the combined influence of economic, familial, and psychosocial factors. Psychological well-being plays a central mediating role, transforming the effects of economic pressure, family adaptability, hope, and emotional support into family quality-of-life outcomes. Interventions aimed at strengthening psychological well-being, fostering hope, enhancing emotional support, and promoting adaptive family functioning may substantially improve family quality of life while mitigating the negative effects of economic stress.

Keywords: *Family Quality of Life, Economic Pressure, Family Adaptability, Hope, Emotional Support, Psychological Well-Being.*

1. Introduction

Family quality of life has emerged as one of the most important indicators of family functioning, adaptation, and overall well-being in contemporary societies. Beyond the assessment of material conditions, family quality of life reflects the degree to which family members experience satisfaction, emotional fulfillment, effective interpersonal relationships, psychological stability, and successful adaptation to life challenges. The concept integrates both objective and subjective dimensions of family functioning and has increasingly attracted attention from researchers seeking to understand how economic, psychological, and social factors shape family outcomes. Recent evidence suggests that family quality of life is influenced by a complex interaction of contextual stressors and protective resources operating at individual, relational, and family-system levels (Demirci et al., 2026; Wei et al., 2025). Consequently, identifying the mechanisms through which family resources contribute to quality of life has become an important objective in family psychology and well-being research.

Theoretical perspectives such as family systems theory and the family stress model suggest that family well-being is strongly influenced by environmental pressures and the family's capacity to adapt to changing circumstances. Economic challenges represent one of the most pervasive stressors affecting family functioning. Financial strain can create uncertainty, increase emotional distress, disrupt family relationships, and reduce opportunities for positive family experiences. Research consistently demonstrates that economic difficulties undermine psychological health and reduce overall quality of life across diverse populations. For example, socioeconomic factors have been shown to influence health-related quality of life through multiple psychosocial pathways, highlighting the importance of economic resources in maintaining positive functioning (Mai et al., 2023). Similarly, post-migration stress and economic insecurity have been associated with poorer quality of life and diminished mental health among vulnerable populations (Walg et al., 2024). Studies conducted among individuals experiencing chronic health conditions have further shown that economic and environmental stressors negatively affect psychological adjustment and overall well-being (Liu et al., 2025; Uwiragiye et al., 2025). These findings suggest that economic pressure may represent a significant risk factor for family quality of life by limiting resources, increasing psychological burden, and reducing adaptive coping capacities.

Although economic pressure constitutes a major source of family stress, families differ considerably in their ability to respond effectively to adverse circumstances. Family adaptability refers to the capacity of family systems to modify rules, roles, leadership structures, and interaction patterns in response to changing environmental demands. Adaptable families demonstrate greater flexibility in problem-solving, communication, and emotional regulation, enabling them to maintain stability despite external challenges. Existing evidence indicates that effective family functioning contributes substantially to quality of life outcomes. Research among patients with cervical cancer revealed that positive family functioning significantly predicted quality of life through resilience-related processes (Wang et al., 2024). Similarly, investigations of family health demonstrated that supportive and adaptive family environments play a crucial role in promoting psychological adjustment and quality of life among children and adolescents (Wei et al., 2025). Studies examining family support and interpersonal relationships have repeatedly confirmed that adaptive family environments provide emotional resources that buffer the negative consequences of stress and adversity (Khatatbeh & Almutairi, 2025; Pangandaman et al., 2021). Therefore, family adaptability may function as a protective factor that enhances family quality of life directly and indirectly through positive psychological mechanisms.

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Another important protective resource associated with quality of life is hope. Hope is generally conceptualized as a positive motivational state characterized by agency and pathways thinking, enabling individuals to pursue goals despite obstacles and challenges. Hope contributes to resilience, perseverance, emotional stability, and adaptive coping, all of which are critical for maintaining psychological and family well-being. Recent research has increasingly emphasized the role of hope in predicting quality of life across various populations. Choompunuch et al. demonstrated that hope significantly predicted quality of life among older adults, even after controlling for other psychosocial variables (Choompunuch et al., 2025). Likewise, hope was identified as an important mediator between existential well-being and quality of life among cancer patients, highlighting its role in transforming psychological resources into positive life outcomes (Nia et al., 2024). Studies examining chronic illness populations have further shown that hopeful individuals report better psychological well-being, greater resilience, and higher life satisfaction than those with lower levels of hope (Liu et al., 2025). These findings suggest that hope may represent a key psychological resource contributing to family quality of life by enhancing adaptive functioning and positive future orientation.

In addition to hope, emotional support constitutes a central component of family and social functioning. Emotional support refers to the availability of empathy, care, understanding, validation, and encouragement from significant others. Social support theories propose that emotional support protects individuals against stress, promotes psychological resilience, and enhances overall well-being. A growing body of literature demonstrates strong associations between emotional support and quality of life. Studies among individuals with chronic illnesses have consistently shown that greater social support is associated with better psychological adjustment and improved quality of life outcomes (Gao et al., 2025a, 2025b). Similar findings have been reported among cancer patients, where social support positively influenced quality of life through multiple psychological pathways (Bu et al., 2022, 2023). Research involving individuals with disabilities further revealed that perceived social support significantly contributed to quality of life through enhanced self-esteem and adaptive coping processes (Cai et al., 2023). Furthermore, emotional support has been identified as a critical predictor of family quality of life among individuals with disabilities and their families (Khatatbeh & Almutairi, 2025). Collectively, these studies indicate that emotional support serves as an essential protective resource that may strengthen family functioning and enhance quality of life.

While economic pressure, family adaptability, hope, and emotional support appear to influence family quality of life, the psychological processes connecting these variables remain insufficiently understood. One mechanism that may explain these relationships is psychological well-being. Psychological well-being encompasses positive functioning across multiple domains, including self-acceptance, personal growth, environmental mastery, positive interpersonal relationships, autonomy, and purpose in life. Psychological well-being represents more than the absence of psychological distress; it reflects optimal psychological functioning and life satisfaction. Numerous studies have identified psychological well-being as a key determinant of quality of life. Research among young adults demonstrated that family and social support significantly enhance psychological well-being, which subsequently contributes to positive life outcomes (Chen, 2025). Similarly, studies involving individuals with chronic health conditions found that positive psychological well-being predicted better quality of life and greater adaptation to illness-related challenges (Liu et al., 2025). Investigations of caregivers and family members have also shown that psychological resources are strongly associated with both individual and family well-being (Chiracu et al., 2023; Demirci et al., 2026).

The mediating role of psychological variables has received increasing empirical support in recent years. Structural equation modeling studies frequently demonstrate that psychological resources explain how external conditions influence quality of life. For instance, resilience has been found to mediate the relationship between social support and quality of life in various populations (Tang et al., 2022; Yu et al., 2022). Similar mediating mechanisms have been observed in studies examining caregiver burden, peer victimization, family functioning, and health-related challenges (Chen et al., 2023b; Deng et al., 2023; Wang et al., 2024). Psychological capital, resilience, self-esteem, and emotional intelligence have also been identified as significant mediators linking personal and environmental resources to quality of life outcomes (Cai et al., 2023; Maalouf et al., 2022; Meng et al., 2024). These findings suggest that psychological well-being may similarly function as an intermediary mechanism through which family and contextual resources contribute to family quality of life.

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Research examining resilience and positive psychological functioning provides additional support for this proposition. Resilience has consistently emerged as a significant predictor and mediator of quality of life across diverse contexts. Studies involving adolescents, patients with chronic illnesses, and family caregivers have shown that resilience buffers the adverse effects of stress while promoting positive adaptation and life satisfaction (Chen et al., 2023a; Deng et al., 2023; Kong et al., 2024). Investigations of social support further demonstrate that psychological resilience strengthens the relationship between supportive environments and quality of life (Gao et al., 2025a; Yu et al., 2022). Similarly, psychological capital and positive psychological resources have been linked to improved quality of life through enhanced coping and emotional regulation capacities (Chiracu et al., 2023; Meng et al., 2024). Since psychological well-being encompasses many of these positive psychological characteristics, it is reasonable to expect that it serves as a central mechanism connecting family resources to family quality of life.

Recent evidence also highlights the importance of family-related factors in shaping psychological and quality-of-life outcomes. Family health, family support, family functioning, and maternal quality of life have been shown to influence the well-being of family members across developmental stages and health conditions (Cho et al., 2025; Wei et al., 2025). Family styles characterized by support, adaptability, and positive interactions contribute to better adjustment and quality of life among adolescents and adults alike (Valero-Moreno et al., 2022). Likewise, family resilience and family support have been associated with improved quality of life among individuals confronting significant life challenges (Demirci et al., 2026; Pangandaman et al., 2021). These findings reinforce the notion that family-level resources play a fundamental role in promoting psychological well-being and enhancing overall family quality of life.

Despite the growing literature on quality of life, several gaps remain. First, most studies have focused on individual quality of life rather than family quality of life as a systemic construct. Second, previous investigations typically examine isolated predictors such as social support, resilience, hope, or economic conditions without integrating these variables within a comprehensive family-based model. Third, limited research has simultaneously considered both risk factors and protective resources while examining the mediating role of psychological well-being. Existing evidence suggests that economic pressure may undermine family functioning, whereas family adaptability, hope, and emotional support may enhance positive outcomes. However, the extent to which psychological well-being explains these relationships remains unclear. Addressing this gap is important because understanding mediating mechanisms can inform interventions designed to strengthen family functioning and improve quality of life.

Given these theoretical and empirical considerations, the present study aimed to model family quality of life based on economic pressure, family adaptability, hope, and emotional support, with psychological well-being serving as a mediating variable.

2. Methods and Materials

2.1. Study Design and Participants

This study employed a cross-sectional correlational design using structural equation modeling (SEM) to investigate the direct and indirect relationships among economic pressure, family adaptability, hope, emotional support, psychological well-being, and family quality of life. The study was conducted in Canada between January and April 2026. The target population consisted of married adults residing in major Canadian provinces, including Ontario, British Columbia, Alberta, Quebec, and Manitoba. Participants were recruited through community centers, family support organizations, social media platforms, and online survey distribution networks. Inclusion criteria included being at least 18 years of age, being legally married or living with a long-term partner for at least one year, possessing sufficient English language proficiency to complete the questionnaires, and providing informed consent to participate in the study. Individuals with severe cognitive impairments or incomplete questionnaire responses were excluded from the final analyses.

A total of 612 participants were initially recruited. After screening for missing data, response inconsistencies, and multivariate outliers, 587 participants met the inclusion criteria and were retained for the final analysis. The final sample included both men and women from diverse socioeconomic and cultural backgrounds, reflecting the multicultural composition of Canadian families. The sample size was considered adequate for structural equation modeling because it exceeded recommended participant-to-parameter ratios and provided sufficient statistical power for testing direct and indirect pathways within the proposed conceptual model. Participation was voluntary, and all respondents completed the survey anonymously through a

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secure online data collection platform. Ethical principles regarding confidentiality, privacy protection, and informed consent were observed throughout the research process.

2.2. Measures

Family Quality of Life was assessed using the Family Quality of Life Scale (FQOLS) developed by Brown et al. (2006). This instrument evaluates individuals' perceptions of overall family functioning and satisfaction across several domains, including family interaction, parenting, emotional well-being, physical and material well-being, and support-related factors. The scale consists of 25 items rated on a five-point Likert continuum ranging from strongly disagree to strongly agree. Higher scores indicate greater perceived family quality of life. Previous studies have demonstrated satisfactory psychometric properties for the instrument, including strong internal consistency, construct validity, and convergent validity across diverse populations. Reliability coefficients reported in previous investigations have generally exceeded 0.80, supporting the scale's suitability for family-related research.

Economic pressure was measured using the Economic Strain Scale developed by Conger and Elder (1994). This instrument assesses subjective experiences of financial stress, economic hardship, difficulty meeting family expenses, and concerns regarding financial stability. The scale contains 18 items rated on a five-point Likert scale ranging from never to always. Higher scores represent greater perceived economic pressure. Previous studies have reported favorable psychometric characteristics, including acceptable construct validity, criterion validity, and internal consistency coefficients above 0.85. The measure has been extensively used in family and developmental research to examine the effects of financial stress on family functioning and psychological outcomes.

Family adaptability was measured using the Family Adaptability subscale of the Family Adaptability and Cohesion Evaluation Scales IV (FACES-IV) developed by Olson (2011). This instrument evaluates the family's ability to modify leadership roles, relationship rules, problem-solving strategies, and interaction patterns in response to changing life circumstances. The adaptability subscale includes 14 items rated on a five-point Likert scale ranging from strongly disagree to strongly agree. Higher scores indicate greater family adaptability and flexibility. Previous research has demonstrated satisfactory reliability and validity indices for the scale, with internal consistency coefficients generally ranging from 0.80 to 0.90. The instrument has been widely applied in family systems research and has shown strong predictive value for family adjustment and resilience.

Hope was assessed using the Adult Hope Scale developed by Snyder et al. (1991). The scale consists of 12 items, including four agency items, four pathways items, and four filler items. Respondents indicate the extent to which each statement describes them using an eight-point Likert scale ranging from definitely false to definitely true. The agency component measures motivational aspects of goal pursuit, whereas the pathways component assesses perceived ability to generate routes toward desired goals. Higher scores reflect greater levels of hope. Numerous studies have confirmed the scale's factorial validity, convergent validity, and reliability, with Cronbach's alpha coefficients typically exceeding 0.80.

Emotional support was measured using the Emotional Support Scale derived from the Medical Outcomes Study Social Support Survey developed by Sherbourne and Stewart (1991). The emotional support dimension contains 8 items assessing the perceived availability of empathy, understanding, caring, encouragement, and emotional assistance from significant others. Responses are recorded on a five-point Likert scale ranging from none of the time to all of the time. Higher scores indicate greater perceived emotional support. Previous research has consistently demonstrated strong psychometric properties for the instrument, including excellent internal consistency, convergent validity, and cross-cultural applicability.

Psychological well-being was assessed using Ryff's Psychological Well-Being Scale developed by Ryff (1989). The version used in the present study consisted of 42 items covering six dimensions: self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth. Participants responded using a six-point Likert scale ranging from strongly disagree to strongly agree. Higher scores indicate greater psychological well-being. Extensive research has confirmed the instrument's multidimensional structure, construct validity, and reliability across different age groups and cultural contexts. Reported Cronbach's alpha coefficients for the subscales and total score have generally ranged between 0.70 and 0.90.

All instruments used in the study have demonstrated satisfactory validity and reliability in previous empirical investigations. Prior to analysis, the internal consistency of each scale was examined using Cronbach's alpha coefficients, and all measures exhibited acceptable reliability levels for research purposes.

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2.3. *Data Analysis*

Data analysis was conducted using IBM SPSS Statistics version 29 and AMOS version 29. Initially, descriptive statistics including means, standard deviations, skewness, and kurtosis values were calculated to examine the distributional characteristics of the study variables. Pearson correlation coefficients were then computed to evaluate bivariate associations among economic pressure, family adaptability, hope, emotional support, psychological well-being, and family quality of life. Before testing the structural model, assumptions of normality, multicollinearity, linearity, and absence of significant outliers were assessed. Confirmatory factor analysis was performed to evaluate the measurement properties of the latent constructs and to verify the adequacy of the measurement model.

Subsequently, structural equation modeling was employed to test the hypothesized direct and indirect relationships among the study variables. Psychological well-being was specified as a mediating variable linking economic pressure, family adaptability, hope, and emotional support with family quality of life. The overall fit of the model was evaluated using multiple goodness-of-fit indices, including the chi-square statistic, chi-square to degrees-of-freedom ratio, Comparative Fit Index (CFI), Tucker-Lewis Index (TLI), Goodness-of-Fit Index (GFI), Adjusted Goodness-of-Fit Index (AGFI), Root Mean Square Error of Approximation (RMSEA), and Standardized Root Mean Square Residual (SRMR). Bootstrap resampling with 5,000 iterations was conducted to assess the significance of indirect effects and mediation pathways. Statistical significance was established at a probability level of $p < .05$ for all analyses.

3. Findings and Results

The final sample consisted of 587 married adults residing in Canada. Among the participants, 309 (52.6%) were women and 278 (47.4%) were men. The mean age of the participants was 39.84 years (SD = 10.72), with ages ranging from 21 to 68 years. Regarding educational attainment, 112 participants (19.1%) held a high school diploma, 178 (30.3%) had completed college education, 221 (37.6%) possessed a bachelor's degree, and 76 (13.0%) had postgraduate qualifications. The average duration of marriage was 12.47 years (SD = 8.15). In terms of employment status, 71.2% were employed full-time, 12.6% were employed part-time, 8.9% were self-employed, and 7.3% were unemployed or retired. Approximately 61.8% of participants reported having children. Household income distribution indicated that 24.5% of respondents reported annual family incomes below CAD 50,000, 41.1% reported incomes between CAD 50,000 and CAD 100,000, and 34.4% reported incomes exceeding CAD 100,000 annually.

Table 1

Descriptive Statistics and Correlations Among Study Variable

Variable	Mean	SD	1	2	3	4	5	6
1. Economic Pressure	49.26	11.84	1					
2. Family Adaptability	52.81	9.47	-0.42**	1				
3. Hope	46.33	8.65	-0.39**	0.58**	1			
4. Emotional Support	31.72	6.51	-0.36**	0.54**	0.61**	1		
5. Psychological Well-Being	184.56	26.37	-0.53**	0.65**	0.72**	0.69**	1	
6. Family Quality of Life	96.41	14.28	-0.57**	0.63**	0.67**	0.64**	0.78**	1

Table 1 presents the descriptive statistics and Pearson correlation coefficients for all study variables. Examination of the means and standard deviations indicated adequate variability across all measures. Economic pressure demonstrated significant negative correlations with family adaptability ($r = -.42$, $p < .01$), hope ($r = -.39$, $p < .01$), emotional support ($r = -.36$, $p < .01$), psychological well-being ($r = -.53$, $p < .01$), and family quality of life ($r = -.57$, $p < .01$). These findings suggest that greater financial strain is associated with poorer family functioning and lower psychological adjustment. In contrast, family adaptability, hope, and emotional support exhibited significant positive associations with psychological well-being and family quality of life. The strongest bivariate association was observed between psychological well-being and family quality of life ($r = .78$, $p < .01$), indicating that individuals with higher levels of psychological well-being tended to report substantially greater satisfaction with their family life. Overall, the correlation matrix provided preliminary support for the hypothesized model and justified proceeding with structural equation modeling.

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Table 2

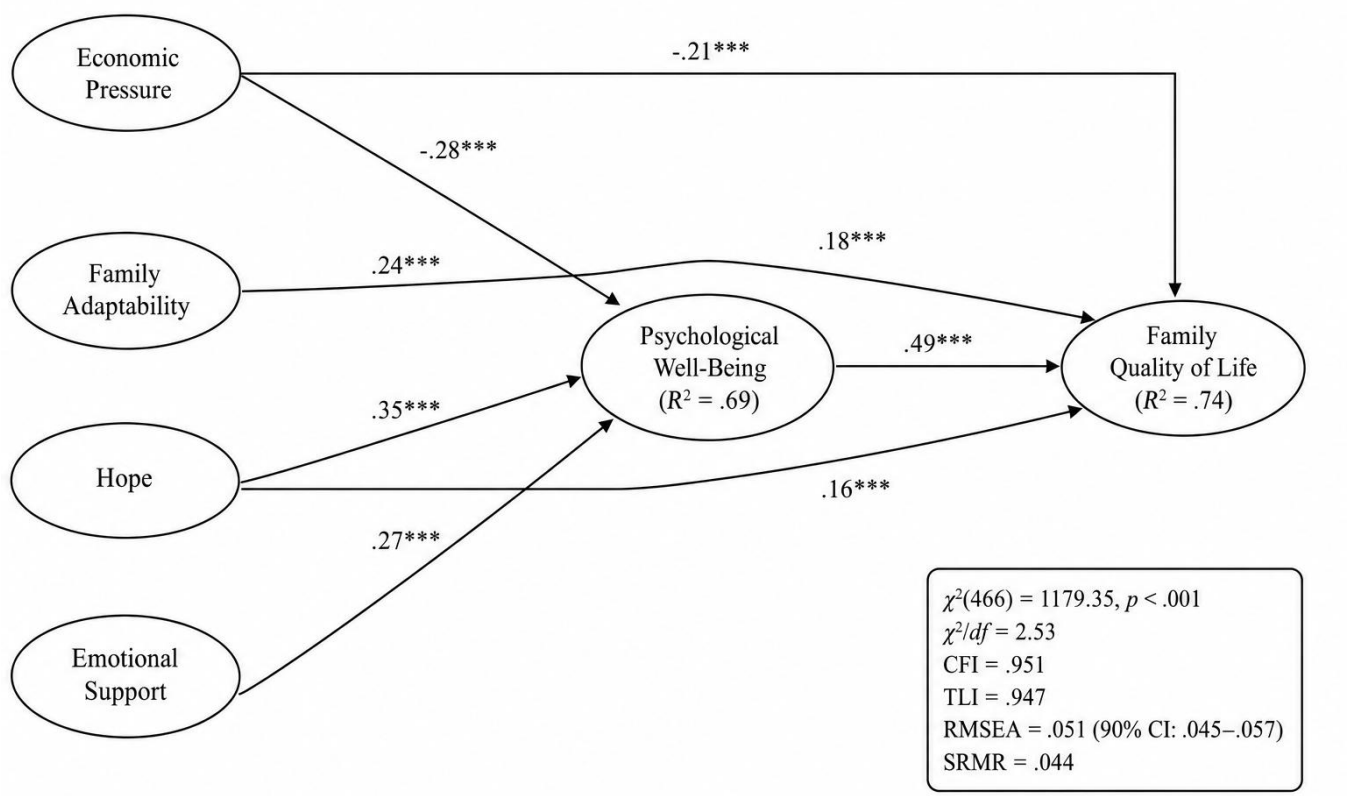
Confirmatory Factor Analysis and Measurement Model Fit Indices

Fit Index	Obtained Value	Recommended Value
χ^2	873.24	—
df	362	—
χ^2/df	2.41	< 3.00
CFI	0.956	> 0.90
TLI	0.949	> 0.90
GFI	0.917	> 0.90
AGFI	0.901	> 0.90
RMSEA	0.049	< 0.08
SRMR	0.042	< 0.08

The measurement model was evaluated using confirmatory factor analysis before testing the structural model. As shown in Table 2, all fit indices indicated an acceptable to excellent fit between the observed data and the proposed latent-variable structure. The chi-square to degrees-of-freedom ratio was 2.41, which falls within recommended thresholds. Incremental fit indices were also satisfactory, with CFI = .956 and TLI = .949. Absolute fit measures including GFI (.917), AGFI (.901), RMSEA (.049), and SRMR (.042) further supported the adequacy of the measurement model. Standardized factor loadings ranged from .64 to .89 and were statistically significant ($p < .001$), indicating that all observed indicators adequately represented their corresponding latent constructs. These findings confirmed the construct validity of the measurement model and justified proceeding to structural model evaluation.

Figure 1

Structural Model of Family Quality of Life Based on Economic Pressure, Family Adaptability, Hope, Emotional Support, and Psychological Well-Being



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The structural model was estimated using maximum likelihood procedures. Figure 1 illustrates the final model depicting the direct and indirect pathways among the study variables. The overall structural model demonstrated excellent fit to the data ($\chi^2/df = 2.53$, CFI = .951, TLI = .947, RMSEA = .051, SRMR = .044). The model accounted for 69% of the variance in psychological well-being and 74% of the variance in family quality of life, indicating substantial explanatory power. Economic pressure negatively predicted psychological well-being and family quality of life, whereas family adaptability, hope, and emotional support exerted positive effects on both outcomes. The magnitude of explained variance suggests that the proposed framework successfully captured the principal psychosocial mechanisms underlying family quality of life among Canadian families.

Table 3

Direct Effects of the Structural Model

Path	β	SE	CR	p
Economic Pressure → Psychological Well-Being	-0.28	0.04	-7.34	< .001
Family Adaptability → Psychological Well-Being	0.24	0.05	5.48	< .001
Hope → Psychological Well-Being	0.35	0.04	8.21	< .001
Emotional Support → Psychological Well-Being	0.27	0.04	6.17	< .001
Economic Pressure → Family Quality of Life	-0.21	0.05	-5.02	< .001
Family Adaptability → Family Quality of Life	0.18	0.05	4.11	< .001
Hope → Family Quality of Life	0.16	0.04	3.86	< .001
Emotional Support → Family Quality of Life	0.14	0.04	3.29	.001
Psychological Well-Being → Family Quality of Life	0.49	0.05	10.62	< .001

Table 3 presents the standardized direct effects among the latent variables. Economic pressure exerted a significant negative influence on psychological well-being (β = -.28, p < .001) and family quality of life (β = -.21, p < .001), indicating that financial difficulties directly undermine both psychological functioning and family life satisfaction. Family adaptability significantly predicted psychological well-being (β = .24, p < .001) and family quality of life (β = .18, p < .001), highlighting the importance of flexible family functioning in promoting positive outcomes. Hope emerged as the strongest positive predictor of psychological well-being among the exogenous variables (β = .35, p < .001), while emotional support also contributed significantly to psychological well-being (β = .27, p < .001) and family quality of life (β = .14, p = .001). The strongest direct predictor of family quality of life was psychological well-being (β = .49, p < .001), demonstrating its central role within the proposed model. Collectively, these findings indicate that both individual and family resources contribute significantly to family quality of life, whereas economic pressure serves as an important risk factor.

Table 4

Bootstrap Analysis of Indirect Effects Through Psychological Well-Being

Indirect Path	Indirect Effect (β)	95% CI Lower	95% CI Upper	p
Economic Pressure → Psychological Well-Being → Family Quality of Life	-0.14	-0.19	-0.09	< .001
Family Adaptability → Psychological Well-Being → Family Quality of Life	0.12	0.08	0.17	< .001
Hope → Psychological Well-Being → Family Quality of Life	0.17	0.12	0.23	< .001
Emotional Support → Psychological Well-Being → Family Quality of Life	0.13	0.09	0.18	< .001

Bootstrap analyses based on 5,000 resamples were conducted to evaluate the mediating role of psychological well-being. As shown in Table 4, all indirect effects were statistically significant because the bias-corrected confidence intervals did not include zero. Economic pressure exerted a significant negative indirect effect on family quality of life through psychological well-being (β = -.14, p < .001), suggesting that financial stress reduces family quality of life partly by diminishing psychological well-being. Family adaptability demonstrated a significant positive indirect effect (β = .12, p < .001), indicating that adaptable families tend to experience higher family quality of life because adaptability enhances psychological well-being. Similarly, hope exerted the largest positive indirect

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effect through psychological well-being (β = .17, p < .001), followed by emotional support (β = .13, p < .001). The significance of all indirect pathways confirms the mediating role of psychological well-being and demonstrates that psychological functioning serves as a critical mechanism linking family and individual resources to family quality of life. These findings support the proposed theoretical model and underscore the importance of psychological well-being as both an outcome of positive family resources and a determinant of overall family quality of life.

4. Discussion

The present study aimed to model family quality of life based on economic pressure, family adaptability, hope, and emotional support, with psychological well-being serving as a mediating variable. The findings demonstrated that economic pressure negatively predicted both psychological well-being and family quality of life, whereas family adaptability, hope, and emotional support exerted significant positive effects on psychological well-being and family quality of life. Furthermore, psychological well-being emerged as the strongest direct predictor of family quality of life and significantly mediated the relationships between all exogenous variables and family quality of life. The proposed structural model explained a substantial proportion of variance in both psychological well-being and family quality of life, indicating that the selected predictors collectively provide a comprehensive explanation of family functioning and well-being outcomes.

One of the most important findings was the negative effect of economic pressure on psychological well-being and family quality of life. This finding is consistent with family stress theories, which propose that financial hardship undermines emotional stability, interpersonal functioning, and overall family adjustment. Economic pressure often creates uncertainty regarding basic needs, future planning, and family security, thereby increasing psychological distress and reducing positive family interactions. Families experiencing persistent financial strain may allocate considerable emotional and cognitive resources to managing economic concerns, leaving fewer resources available for relationship maintenance, emotional support, and adaptive coping. The present findings are consistent with previous studies demonstrating that socioeconomic disadvantage and financial stress negatively influence quality of life and psychological functioning. Mai et al. reported that socioeconomic conditions significantly affect health-related quality of life through multiple psychological mechanisms (Mai et al., 2023). Similarly, Walg et al. found that stressors associated with instability and uncertainty were linked to lower quality of life and poorer mental health outcomes (Walg et al., 2024). Research among individuals with chronic health conditions also indicates that adverse life circumstances and stress-related burdens reduce psychological well-being and quality of life (Liu et al., 2025; Uwiragiye et al., 2025). The current findings extend this literature by demonstrating that economic pressure operates not only as a direct determinant of family quality of life but also as an indirect influence through psychological well-being.

The results further revealed that family adaptability positively predicted psychological well-being and family quality of life. Families characterized by flexibility, effective communication, and adaptive problem-solving appear better equipped to manage challenges and maintain positive functioning. Family adaptability allows members to adjust roles, expectations, and interaction patterns when confronted with stressors, thereby preventing the escalation of conflict and emotional distress. From a systems perspective, adaptability enhances family resilience and contributes to a supportive environment that promotes individual and collective well-being. These findings align with previous evidence emphasizing the importance of family functioning for quality of life outcomes. Wang et al. demonstrated that family function significantly contributes to quality of life through resilience-related pathways (Wang et al., 2024). Similarly, Wei et al. found that positive family health and functioning promote well-being and quality of life among young people (Wei et al., 2025). Research on family support among older adults and individuals with disabilities has also highlighted the beneficial role of adaptive family environments in fostering quality of life (Khatatbeh & Almutairi, 2025; Pangandaman et al., 2021). The current findings suggest that adaptability serves as an essential family-level resource that strengthens psychological functioning while directly enhancing family quality of life.

Another notable finding concerned the positive role of hope. Hope emerged as one of the strongest predictors of psychological well-being and demonstrated both direct and indirect effects on family quality of life. Individuals with greater hope tend to perceive challenges as manageable, maintain positive expectations regarding the future, and persist in pursuing meaningful goals despite adversity. Hope may facilitate adaptive coping, reduce vulnerability to stress, and encourage constructive engagement with family

members. Consequently, hopeful individuals are more likely to contribute positively to family functioning and experience higher levels of satisfaction with family life. These findings are highly consistent with previous research. Choompunuch et al. reported that hope significantly predicted quality of life among older adults, emphasizing its role as a psychological resource that enhances positive adaptation (Choompunuch et al., 2025). Similarly, Nia et al. found that hope mediated the relationship between existential well-being and quality of life among patients with cancer (Nia et al., 2024). Mahamid et al. also observed that positive psychological resources help individuals maintain quality of life even under highly stressful conditions (Mahamid et al., 2022). Moreover, studies examining resilience, psychological capital, and positive adaptation consistently identify hope-related processes as important contributors to well-being and life satisfaction (Chiracu et al., 2023; Meng et al., 2024). The present findings reinforce the view that hope functions as a crucial psychological asset capable of enhancing family quality of life through both direct and indirect pathways.

The positive effect of emotional support on psychological well-being and family quality of life also warrants attention. Emotional support provides individuals with experiences of acceptance, empathy, validation, and belonging, all of which contribute to emotional security and psychological adjustment. Supportive relationships reduce feelings of isolation, facilitate adaptive coping, and enhance individuals' confidence in their ability to manage life challenges. Within family systems, emotional support strengthens interpersonal bonds and promotes a climate of trust and cooperation. The current findings correspond closely with a substantial body of literature demonstrating the importance of social and emotional support for quality of life. Gao et al. reported that social support significantly improves quality of life among heart transplant recipients through psychological mechanisms (Gao et al., 2025a, 2025b). Similar results were reported among breast cancer patients, where social support contributed to quality of life through reduced stigma and enhanced coping resources (Bu et al., 2022, 2023). Studies involving individuals with disabilities and chronic illnesses likewise indicate that perceived support positively influences quality of life through self-esteem, resilience, and psychological adaptation (Cai et al., 2023; Hassani et al., 2022). Furthermore, emotional and social support have been identified as major determinants of family quality of life among prospective spouses with disabilities and other family-oriented populations (Khatatbeh & Almutairi, 2025). Collectively, these studies support the conclusion that emotional support constitutes a fundamental protective factor promoting both psychological well-being and family quality of life.

Perhaps the most significant finding of the study was the central role of psychological well-being. Psychological well-being emerged as the strongest direct predictor of family quality of life and significantly mediated the effects of economic pressure, family adaptability, hope, and emotional support. This finding suggests that the influence of family and contextual factors on quality of life operates largely through individuals' psychological functioning. Families may encounter various stressors and resources, but their ultimate impact on family quality of life depends substantially on how these experiences shape psychological well-being. Individuals who experience greater self-acceptance, purpose in life, positive relationships, autonomy, and environmental mastery are more likely to contribute positively to family functioning and perceive family life as satisfying and meaningful.

The mediating role of psychological well-being is consistent with numerous studies demonstrating that positive psychological processes explain the relationship between environmental resources and quality of life. Chen found that family and social support significantly enhance psychological well-being, which subsequently promotes positive developmental outcomes (Chen, 2025). Liu et al. reported that positive psychological well-being contributes directly to quality of life among individuals facing chronic health challenges (Liu et al., 2025). Similarly, resilience, psychological capital, self-esteem, emotional intelligence, and related psychological resources have been shown to mediate the effects of external factors on quality of life outcomes (Gao et al., 2025a; Maalouf et al., 2022; Meng et al., 2024). Research has also demonstrated mediating roles for resilience in the relationships between social support and quality of life, family function and quality of life, and adverse experiences and quality of life (Deng et al., 2023; Tang et al., 2022; Wang et al., 2024; Yu et al., 2022). Likewise, studies involving caregivers and family members have found that psychological resources substantially explain how environmental and relational factors influence quality of life (Chen et al., 2023a; Chen et al., 2023b; Demirci et al., 2026). The present findings extend this growing body of evidence by demonstrating that psychological well-being serves as a key explanatory mechanism linking economic, familial, and interpersonal factors to family quality of life.

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The significance of the indirect pathways provides additional theoretical insights. Economic pressure reduced family quality of life partly because it diminished psychological well-being, whereas family adaptability, hope, and emotional support enhanced family quality of life because they strengthened psychological well-being. These findings support contemporary models of positive psychology and family resilience, which emphasize that external resources exert their influence through internal psychological processes. They also suggest that interventions focused solely on reducing stressors may be insufficient unless they simultaneously strengthen psychological well-being. Promoting adaptive family functioning, fostering hope, and enhancing emotional support may therefore represent effective strategies for improving family quality of life through their beneficial effects on psychological functioning.

5. Conclusion

Overall, the findings highlight the importance of integrating economic, relational, and psychological perspectives when seeking to understand family quality of life. Family quality of life appears to be shaped not only by external circumstances but also by the psychological resources that enable individuals and families to interpret, manage, and overcome life challenges. By demonstrating the mediating role of psychological well-being, the present study provides a more comprehensive understanding of how family systems maintain positive functioning and life satisfaction despite adversity.

6. Suggestions and Limitations

Several limitations should be considered when interpreting the findings. First, the cross-sectional design prevents causal inferences regarding the relationships among the study variables. Although the proposed model was theoretically supported, longitudinal designs are necessary to establish temporal ordering and causal pathways. Second, all variables were assessed through self-report questionnaires, creating the possibility of common method variance, response bias, and social desirability effects. Third, the sample consisted exclusively of Canadian adults, which may limit the generalizability of the findings to other cultural contexts. Fourth, unmeasured variables such as personality traits, marital satisfaction, coping strategies, physical health, and cultural values may also influence family quality of life. Finally, the study focused primarily on positive and negative psychosocial factors and did not incorporate broader environmental influences such as community resources, social policies, or neighborhood characteristics.

Future studies should employ longitudinal and prospective designs to examine how changes in economic pressure, family adaptability, hope, emotional support, and psychological well-being influence family quality of life over time. Researchers may also investigate additional mediating and moderating variables, including resilience, emotional intelligence, coping strategies, family communication patterns, and marital satisfaction. Comparative studies across different countries and cultural contexts would enhance understanding of the universality and cultural specificity of the proposed relationships. Future research could further explore differences across demographic groups, such as gender, age, socioeconomic status, and family structure. Experimental and intervention-based studies are also recommended to determine whether improvements in psychological well-being can directly enhance family quality of life.

The findings suggest that family-focused interventions should address both external stressors and internal psychological resources. Programs designed to reduce financial stress, improve family adaptability, strengthen emotional support networks, and cultivate hope may contribute substantially to family quality of life. Mental health professionals should incorporate psychological well-being enhancement strategies into family counseling and support services. Community organizations and policymakers can assist families by providing accessible support resources, financial education programs, and family-strengthening initiatives. Educational workshops focused on communication skills, problem-solving abilities, emotional support, and positive future orientation may also help families maintain high levels of functioning and well-being. Interventions that simultaneously target family dynamics and psychological well-being are likely to produce the greatest improvements in family quality of life.

Authors' Contributions

All authors have contributed significantly to the research process and the development of the manuscript.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

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Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

The authors report no conflict of interest.

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Ethical Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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