A systematic review of studies on the factors affecting the quality of life in the general population of Iran

ABSTRACT

Background and Objective: The quality-of-life index is like a graph that describes the situation of all people living in a region or country and includes economic, social, and human variables. The results of various studies have shown that quality of life can be affected by various individual, social and environmental factors. This study aims to summarize the results of research conducted in the country with a focus on factors affecting the quality of life in the general population of Iran.

Materials and Methods: This study was a systematic review based on reviewing relevant document. All articles that published in Iranian electronic databases (example Magiran, SID, and Noormags) were examined via keywords related to the quality of life and its effective factors in the general population. Studies that met the inclusion criteria were evaluated in all years.

Results: In this research, 46 studies were reviewed from 2008 to 2018. Based on the results of the studies, some contextual and social variables such as; age, level of education, occupation, income, social capital, marital status, housed hold Size, socio-economic status, and social participation of individuals introduced as factors related to the quality of life. Also, the quality of life in the women studied was not very high.

Conclusion: Since the results of studies confirm that the impact of various individual, environmental and social factors on the individual's quality of life, the dynamism and continuous changes in the quality of life over time, and the different opinions of different scientific groups about the indicators affecting quality of life. It is suggested that more attention must be paid to research on this structure, individual and social components that affect individual's quality of life.

Paper Type: Systematic Review

Keywords: quality of life, quality of mental life, quality of objective life, effective factors

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Introduction

The structure of quality of life referred to an indicator of social development. It is a complex and multidimensional concept and is considered a key element in social policy (1,2). The structure of quality of life in the agenda community development has a constructive and positive effect on the individual's life and performance in society (1). The term quality of life was first used by Pigou in 1920 in a book entitled "Economy and Welfare", which discussed government support for low-income groups and its effects, as well as the national budget (2). Since the mid-1990s, the United Nations has made social welfare and quality of life at the forefront of development goals by making changes to human development goals (3). If the goal of development is human well-being, the concept of quality of life is one of the most important aspects of this goal (4).

Quality of life is a relative concept that is manifested in objectively and mentally ways, and it will be different depending on the social and cultural conditions and different geographical locations (5). In the objective aspect, indicators such as economic production, literacy rate, and life expectancy are measured, but in the mental aspect, the criterion is the evaluation of respondents' experiences in their lives based on their personal reports of satisfaction, well-being, and happiness (6). Accordingly, different definitions are considered for the concept of quality of life. It is sometimes associated with positive values such as happiness, success, health, and satisfaction(7). Some experts interpreted the quality of life as, public welfare, social well-being, happiness, and satisfaction, which includes a wide range of people's satisfaction with all issues of their lives (1,6,9). The World Health Organization defines the concept of quality of life as the assessment and perception of one's life situation that is influenced by the value and

cultural system (8). Ventegodt and colleagues divided the various concepts related to the quality of life into three main groups: psychological and mental quality of life: this category refers to how and to what extent each person feels good about their life and how it evaluates the concepts, feelings, and issues around it. Quality and biological aspects of life; this category is related to biological aspects and biological balance of human life. Objective quality of life; in the sense of how personal life is perceived and evaluated from the outside. This concept is closely related to the culture and values of society. There is also the individuals' social and economic situation in the same category(1). On the other hand, there is a quality of life that includes two interrelated psychological and environmental dimensions; the first group are dependent on an internal psychological process and create a sense of satisfaction or camaraderie, and the second group is those that are dependent on external conditions and stimulate internal processes. In the first dimension, expressions such as quality of individual life, mental well-being, and happiness or life satisfaction are generally used, and for the second dimension, terms such as quality of urban, and social or environmental are frequently used (9). Various studies have shown that quality of life is affected by various individual, social and environmental factors. They also affect it in some way such as purpose fullness in life, personal growth, and having material resources(10). Most experts also agree that the concept of quality of life has different physical, social, psychological, environmental, and economic dimensions(3). Although this concept is considered beyond physical health, the quality of life its measurement was considered in various research as one of the important consequences(11). In the last two

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decades, due to the multidimensional quality of life, it has been used in other fields of study such as social sciences and geography (12).

In Iran, since the late 1370s, issues related to this concept have been removed from the monopoly of medical sciences and psychology. Other scientific fields, especially social sciences, presented a new perspective on this structure by making changes in indicators and components of quality of life, so since the 1930s, the number of fields based on this structure has been developed (2). A review of studies conducted in Iran showed that there have been many studies on quality of life, most of which have examined specific groups in society such as the patients, the elderly, pregnant women, or menopausal women. Of the numerous studies in this field, most importance studies have examined the sociological quality of life in the general population because its significant part is related to the quality of relationships between individuals, groups and formal and informal institutions of society (13). This study aims to review the studies conducted in the country and summarize their results, to understand the relationship between quality of life in the general population in Iran and the factors affecting it.

Methods of Review

This study is a systematic review; which has reviewed scientific-research articles indexed in three major databases of articles in the Iran, namely the Scientific Information Database, Magiran and the database of Noor specialized journals, which were published between march 2008 until march 2018.

Study Design

The statistical population in this study was all published articles in Persian based on the quality of life and the factors affecting it, including the terms quality of life, quality of objective life,

quality of mental life, and factors affecting it. Since there are so many articles on quality of life in recent decades, studies that met the following criteria were included in this study: (1) original research articles with a quantitative research approach;(2) It has been done between 2008 until 2018; (3) describe the quality of life in the general population (articles that looked at the quality of life in specific populations, such as the sick, the elderly, menopausal women, and infertile people, or pregnant women) were excluded; (4) determine the relationship between the quality of life variable and the factors affecting it; (5) there is access to the full text of the article; (6) published in Persian language. It should be noted that review articles or studies on the subject of quality of work, urban, sexual or marital quality, and articles published in seminars were excluded from the study.

Also, we excluded studies that had extensively examined the quality of life indicators or devoted to the process of quality of life studies in the Iran. In this study, extraction and evaluation of inclusion and exclusion criteria were performed by two independent researchers based on inclusion and exclusion criteria. In the next stage, the abstracts of the remaining studies were reviewed in terms of compliance with the inclusion criteria by two research colleagues and third colleague assessed case of disagreement with the consensus, a decision was made to reject or exclude the study.

This was the result of an initial survey with keywords for published articles: obtained in the University Jihad database, for the Department of Medical Sciences in the years under review, 1163 articles, and the Department of Humanities 373 research articles. There were 853 articles in the database of the country's publications, with advanced search and application of the desired filters (elimination of exclusion criteria in the

titles of published articles) and for the database of Noor specialized journals, 258 research articles with the keyword quality of life and application of case filters. In the next step, after reading the abstracts of articles, articles that were not in line with our goal were excluded from the study, and articles that were similar on all three sites were identified (figure 1). Finally, the results of related articles were summarized based on the existence of a correlation between the studied variables and quality of life.
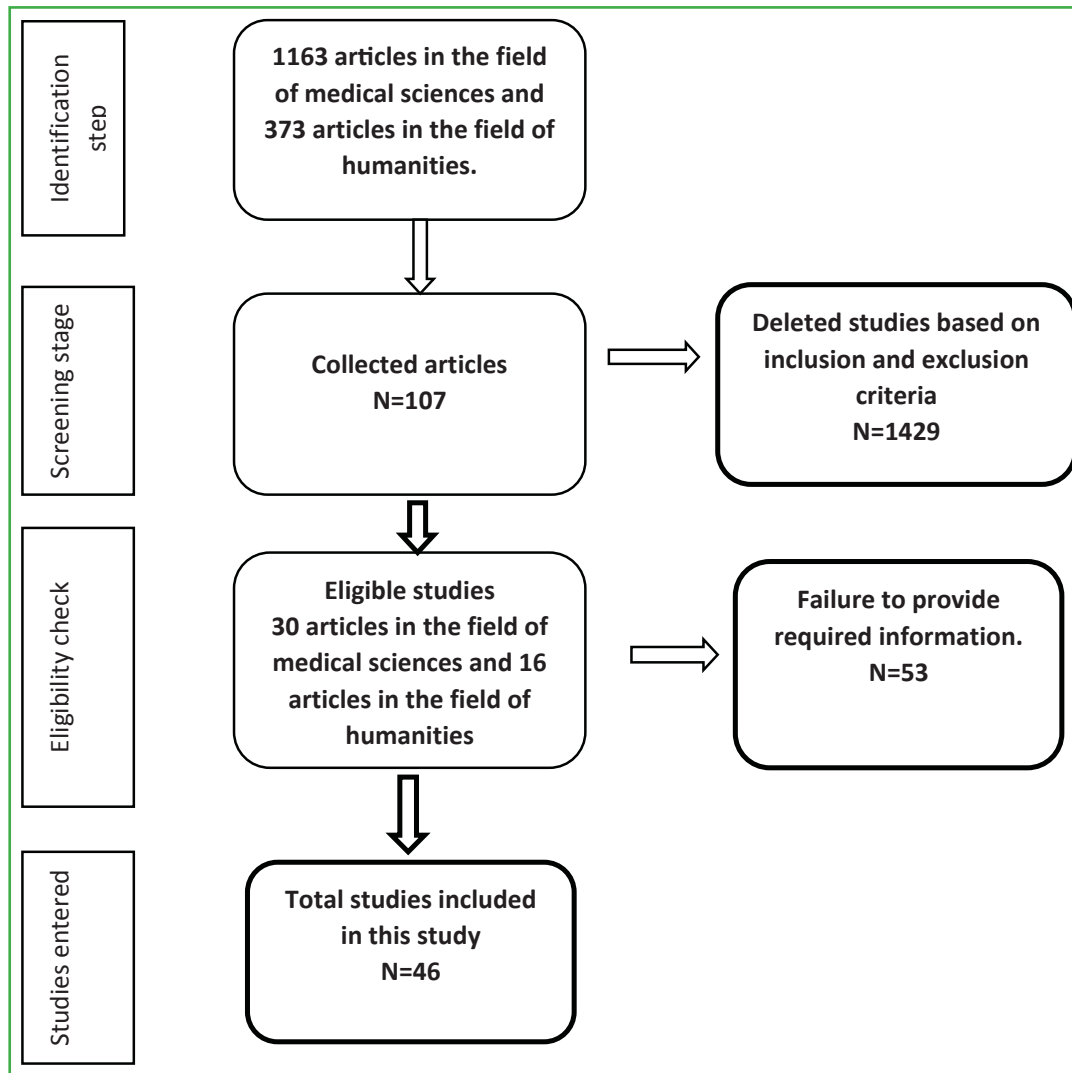
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│ Identification│        │ 1163 articles in the field│
│ step         │        │ of medical sciences and  │
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│ Screening    │        │ Collected articles       │      │ Deleted studies based on │
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│ check        │        │ 30 articles in the field │ ──>  │ required information.     │
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│ Studies      │        │ Total studies included   │
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figure 1. PRISMA checklist for selecting studies

Results

The findings of the systematic review of studies on quality of life and the factors affecting it were as follows:

Most studies on quality of life on the general population were conducted in 2018, 2015, and 2011. In 19 articles (40.9% of studies), he WHO Quality of Life Questionnaire (WHOQOL-BREF), and in 13 studies (26.7%) the SF-36 Quality of Life Questionnaire was used (Table 1). In the humanities group, 8 studies used a researcher-made questionnaire to conduct research. Nine articles in the medical sciences study group and 2 articles in the humanities group were only used to assess the quality of life in the female

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population. In most studies, the level of quality of life reported in the majority of people was moderate or poor (1, 7, 16-23).

The results obtained in various studies show that in most of the variables such as; people's age, level of education, type of employment and satisfaction, marital status, household income, gender, socio-economic status, social capital and the level of their social participation in society and type of mass communication, are main factors affecting people's quality of life. Findings of most articles showed that with increasing age, their quality of life has decreased (12,17,24-28). Although some studies have not shown a statistically significant relationship between these two variables (13,18,20).

Most studies have reported a higher quality of life in men than women (5,13,18,24,29-31) and in several studies, this difference was not significant (13,14,20,32).

Occupation is also considered as one of the main variables related to the quality of life because in most studies has been shown to have a statistically significant relationship with quality of life (13,30,33-35).

In the study of Ziaei et al(2015), there was a statistically inverse relationship between burnout and quality of life which indicates that improving the employment status of individuals leads to improve their health status and quality of life (14). However, in the study of Hatami Nejad et al(2018), conducted in the serious neighborhood in Tehran, there was no statistically significant relationship between people's jobs and job satisfaction with the quality of life (15).

Another variable affecting the quality of life is the level of education, which in most of the studied articles, shows a statistically significant relationship (4).(16).(17).(18).(19).

Family dimension and number of children are also considered as factors affecting the

individual's mental well-being and their quality of life. In some studies, their relationship has been statistically significant (10,13,17,36). Social capital is also considered as a factor related to the quality of life, which in a way indicates the quantity and quality of individual social relations in society (16,37,38).

Findings of Noghani and et al's study (2011) showed that social capital is more important in explaining the quality of life variable than income and education. It was also found that in measuring the relationship between independent variables and the two types of objective and subjective quality of life, material capital (income) is more effective than other variables on the objective quality of life. While social capital can improve the quality of the individual's mental life more than other variables (20). In the study of Rahmani Firoozjah et al(2012), among the set of factors affecting social capital, showed the greatest impact on the variable of quality of life with a correlation coefficient of 0.58(21). The results of all the studies were summarized in Tables 2 and 3

Table 1. Frequency of the type of questionnaire used in the studies by field

Type of questionnaire	Medical Sciences		Humanities	
	frequency	Percent	frequency	Percent
WHOQOL-BREF	13	29.5	6	11.4
SF-36	13	26.7	0	0
SF-12	2	4.4	0	0
Researcher made	0	0	8	17.8
Other cases	1	2.2	3	6.7

Table 2. Frequency of articles reviewed in terms of results in the Department of Medical Sciences

Number	Author	Title	Published	Sampling	Population studied	Questionnaire type	Results
1	Amin Shokravi Farkhondeh(22)	The relationship between regular physical activity and women's quality of life	2009	Random sampling	148 Women	SF-36	The women in the active group had higher mean scores in all quality-of-life measures and except for two cases (physical function and role limitation due to mental problems There was no statistically significant difference in the level of education (except for the assessment of physical and occupational problems in the two groups.
2	Narges Shams Alizadeh (17)	Quality of life in the population of 15 to 64 years old in Kurdistan province	2010	Random cluster	700 people general population	Quality of life Euro his	Quality of life was significantly better in men than women and in rural areas was better than in urban areas. Also, people with more exercise showed a better quality of life. Quality of life deteriorates with age. Illiterates reported lower quality of life and those with higher incomes reported a higher quality of life.
3	Reza Soltani(23)	Assessing the quality of life of Guilan University students	2010	Random cluster	226 students	WHOQOL-BREF	The quality of life of 4% of students was very good, 34% good, 51% average and the quality of life of 11% of students were bad. There was no statistically significant relationship between total quality of life score and gender and age.
4	Mahboubeh Khorsandi (24)	Quality of life, related to the health of the staff and hospitals affiliated to Arak University of Medical Sciences 2008	2010	Proportional classification	300 people	SF-36	In this study, there was a statistically significant difference between the sexes and age groups. There was no statistically significant difference between different dimensions of quality of life except physical performance and participants' level of education.
5	Fatiha Kerman Sarvai(25)	Comparison of quality of life, related to the health of working women and housewives	2011	Multi-stage random	220 women	SF-36	The mean scores of working women in all dimensions, except physical performance, were higher than housewives. Employees better assessed their mental health status.
6	Reza Ali Mohammadpour Tahman(26)	Quality of life, related to the health of people over 4 years old living in Mazandaran	2011	Random cluster	1183 General population Mazandaran	SF-36	46.8% of the subjects reported that their general health was at an excellent or very good level and the average quality of life scores was lower in women than in men. In all areas, urbanites had a better quality of life than villagers, except in the area of happiness and vitality.
7	Ibrahim Abdollahpour (13)	Quality of life and its effective factors in the employees of government offices of Buchan city	2011	Random cluster	462 employees of government offices	WHOQOL-BREF	There was no statistically significant relationship between age, sex, number of household members, years of education of the spouse, type of administration, and the second job of individuals with the dimensions of quality of life. But the variable of marital status was significantly related to the social health dimension of individuals, as well as the type of employment was significantly related to the mental health dimension of quality of life.
8	Abdelkader Assarroudi (27))	The relationship between spiritual health and quality of life in nurses	2011	Easy sampling	93 nursing staff of Mashhad	SF-36	The quality of life was low at 21.5% and 45.2% of the subjects were at a moderate level. There was no significant difference in the quality-of-life scores between men and women. There was no significant relationship between age, gender, marriage, work experience, and quality of life.

No	Author	Title	Year	Sampling	Sample	Tool	Results
9	Somayeh Makoundi (28)	Study of quality of life and its various dimensions among students of Islamic Azad University, Ahvaz Branch in 2010	2011	Random cluster	400 students of Ahvaz Branch of Azad University	WHOQOL-BREF	There was no significant difference in the overall score of quality of life in terms of the gender of the subjects. Social health scores showed a statistically significant difference with students' marital status so that this score was higher in married students.
10	Mohammad Ali Heydarnia (29)	The relationship between deprivation (economic poverty) and quality of life dependent on the health	2012	random sampling	400 people	SF-36	The results of statistical tests showed that people in the deprived group have significantly lower mean scores in all sub-measures of quality of life. There was a statistically significant relationship between the variables of gender, level of education, employment status, and economic status with physical and mental health.
11	Azam Ghorbani (30)	Comparison of quality of life of obese women with women of normal weight	2012	random sampling	115 obese women and 114 women of normal weight	SF-36	Comparison of the mean scores of the 8 dimensions of quality of life in the two groups of obese and normal-weight women showed that the averages in all 8 dimensions of quality of life were higher in the group of normal-weight women than obese women. There was a statistically significant difference between the quality-of-life score in the physical dimension and the level of education of individuals, but in the psychological dimension, this difference was not statistically significant.
12	Mohammad Amiri(31)	Study of quality of life of students in one of the medical universities of northeastern Iran	2013	random Sampling	525 Medical students of Shahroud	WHOQOL-BREF	16.2% of students described their quality of life as very good, and 8.9% as bad or very bad. A significant relationship was observed between the quality of life and monthly family income. But no statistically significant relationship was observed between the quality-of-life status and variables of gender, educational level, marital status, place of residence, economic activity, family dimension, and place of residence of parents.
13	Nader Rajabi Gilian (32)	Investigating the relationship between social capital and health-related quality of life in teachers	2013	Multi-stage cluster	375 people	SF-36	The results showed that there was a statistically significant correlation between the overall score of social capital and the total score of quality of life. No statistically significant relationship was found between the variable of gender and marital status with the quality-of-life score. There was a positive statistical relationship between income and overall quality of life score and its dimensions.
14	Zahra Hashemi (33)	Is women's Employment in Health Centers Associated With their Quality of life? A Case Study of Employed Women in Zabol	2013	Random cluster	420 women in Zabul	SF-36	35.4% of people had low quality of life, 33.7% had moderate and 30.9% of them had a high level. There was a statistically significant relationship between age, place of residence, and employment status with quality of life. But variables such as education and the number of children did not show a statistically significant relationship with quality of life.
15	Siamak Amiri(8)	Quality of Life and Influencing Factors in Alborz University of Medical Sciences Staff.	2014	Census	100 employees working in the university	WHOQOL-BREF	The quality of life of official employees was higher than other types of employment, which was statistically significant. Also, the results showed a statistically significant correlation between work experience and the number of children and quality of life. There was no significant relationship between the psychological dimension of quality of life and work experience, age, and marriage

No.	Author	Title	Year	Sampling	Sample size	Instrument	Results
16	Parisa Janjani (34)	The Relationship between Social Security and Life Style with Life Quality and Happiness of the Women in Kermanshah security and lifestyle with quality of life and happiness of women in Kermanshah	2014	Multi-stage cluster	384 women	WHOQOL-BREF	There was a statistically significant correlation between social security and lifestyle scores and quality of life scores. Predictive variables such as; Lifestyle, self-image, social support, and attitudes toward policing can all predict the quality of life.
17	Somayeh Alizadeh (20)	Correlation between social participation of women and their quality of life in Kerman	2014	Random cluster	300 women	WHOQOL-BREF	The quality of life was appropriate in 44% of cases, moderate in 54%, and inappropriate in 1.7%. There was a direct and significant correlation between social participation and quality of life. Also, a statistically significant relationship was observed between the variables of age and educational status with quality of life. But no statistical relationship was observed between employment status, marriage, number of family members and income with quality of life
18	Hossein Bani Fatemeh (35)	Health status, education, and gender: effects on people's awareness, lifestyle and health-related quality of life	2015	Multi-stage sampling	650 people	SF36	The results showed that, compared to women, men scored higher on quality of life. Peoples with higher education had better health compared to those with lower education. There was a statistically significant difference between the quality of life and gender and level of education.
19	Mahtab Azizi(36)	Study of Nurses Quality of Life using WHO Questionnaire in Hospitals of Hamadan University of Medical Sciences	2015	Stratified random sampling	300 nurses	WHOQOL-BREF	The average score of quality of life in physical and psychological dimensions was higher in men than women, which was statistically significant. The average score of physical dimensions in single people was higher than married people, but the average score of two social and psychological dimensions in married people was higher than single people.
20	Ali Gholami (37)	A survey on Quality of Life in Women Referred to Health Centers of Neyshabur-2012	2015	random Sampling	384 women	WHOQOL-BREF	In this study, statistically, the dimensions of quality of life and its total score had a significant relationship with the variables of age, family income level, spouse's education level and chronic family history.
21	Mansour Ziaei(14)	Association between Occupational Burnout and Quality of Life among Healthcare workers	2015	Census	80 Kamyaran health care providers	SF-12	33.75%, 60%, and 6.25% of employees had good, average and poor quality of life, respectively. Spearman correlation test did not show a statistically significant relationship between variables such as age, sex, marital status, level of education, and type of job with the quality of life.
22	Zohreh Rahaei(38)	The Relationship between Demographic Variables with General Health and Quality of Life in Students of Islamic Azad University, Sabzevar Branch, Iran	2015	Stratified random Sampling	209 Sabzevar students	WHOQOL-BREF	The overall average quality of life and its subscale scores were lower in female students than in male students and statistically significant. There was no significant relationship between quality of life and marital status and level of education.

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No	Author	Title	Year	Sampling	Sample size	Tool	Results
23	Zahra Hossein Khani (39)	Quality of Life among Behvarzs in Qazvin province Hosseinkhani	2016	Census	406 health workers	WHOQOL-BREF	In this study, the quality of life scores of health workers with higher education, In all four areas, was significantly higher than the others. There was also a statistically significant relationship between the gender variable and mental health and environmental health.
24	Wafa Feyzi(10)	The Investigation of Occupational and Demographic factors effective on the Quality of life of nurses and nurse aides working in teaching hospitals affiliated to Kerman university of medical sciences in 2014. J Ergon	2016	Simple random	620 nurses and paramedics	WHOQOL-BREF	There was a statistically significant relationship between gender and physical and psychological dimensions. Also showed a statistically significant relationship between age and social and psychological dimensions. The highest relationship was found between quality of life and environmental health and the least relationship with social health.
25	Ali Gholami (40)	Study of Related Factors to Quality of Life in Students at Neyshabur University of Medical Sciences 2012	2017	Census	220 people	WHOQOL-BREF	There was a statistically significant relationship between the variable of residence with the dimension of social relations and the overall quality of life of students. Other variables such as gender, the field of study, and the semester were not statistically significant. Although younger students had a higher quality of life, this difference was not statistically significant.
26	Soheila Karimi (41)	The Relationship between Sports Participation and Quality of Life of Women in Isfahan, Iran	2017	Stratified random Sampling	386 people	WHOQOL-BREF	The results showed a positive and significant correlation between sports participation and the QOL of women. Based on the regression analysis, 29% of QOL can be predicted by sports participation.
27	Byram Bibi Bayat(42)	Quality of Life Predictors Among Health Volunteers in South Tehran Health Centers	2018	Cluster sampling	200 people	SF36	Health-promoting behaviors as strong predictors of two dimensions of quality of life included physical health and mental health quality of life. It was found that the age variable as an important predictor in improving the quality of life of the subjects.
28	Rahman Panahi (43)	Relationship of health literacy and quality of life in adults residing in Karaj,Iran	2018	Sampling available	256 people	SF-12	The mean scores of quality of life in the physical health and mental health domains, as well as the overall quality of life, were 16.24, 20.43, and 36.68, respectively. Health literacy had a significant positive correlation with physical and mental dimensions of quality of life and overall quality of life
29	Ali Moradi (44)	Association of social networks and health-related quality of life among adults	2018	Cluster sampling	1900 people	SF36	The results showed that there is a statistically significant relationship between the quality-of-life status of study participants with variables such as participation in social networks, marital status, travel with relatives and friends, membership in religious delegations, Age and gender.
30	Fatemeh Abbasi (35)	Satisfaction and quality of life of young women by Social Clock theory	2018	Cluster sampling	185 people	SF36	There was a significant difference between the mean score of the subscale of vitality according to the level of education. Employed people showed lower physical performance than non-employed people. There were significant differences in the subscales of quality of life of single and married women.

Table 3. Frequency of articles reviewed in terms of results in the Department of Humanities

Number	Author	Title	Published	Sampling	Population studied	Questionnaire type	Results
1	Mohammad Zahedi Asl((45)	Studying the relation between life quality and social capital.	2010	Multi-stage random sampling	384 people	WHOQOL-BREF	Most respondents were above average in terms of quality of life. There was a significant positive relationship between the two variables of social capital and quality of life.
2	Mohsen Noghani (20)	The quality of life and its relation to social capital in the city of Mashhad	2011	------	300 people	A researcher-made objective and mental quality of life questionnaire	The result showed that social capital has a greater role in the explanation of the quality of life compared to income and education. There was no statistically significant relationship between age and per capita income with quality of life, but between marital status and quality of life.
3	Mohsen Niazi (6))	The Exploration of social and cultural factors Affecting Quality of Life. Cult Stud Commun	2012	Random quota sampling	610 people	Researcher-made questionnaire	There was a statistically significant relationship between the variables of religiosity, self-satisfaction, control of social tendencies, sense of need and social relationship with the variable of quality of life.
4	Ali Rahmani Firoozjah (21)	The Sociological Study of the Relationship Between Life Quality and Social Capital	2012	Secondary analysis	20,670 students	WHO QOL_BREF	People with the average quality of life obtained the highest scores in the variables of social trust, social participation, and social capital. Quality of life had the greatest impact on the factors affecting social capital.
5	Sirus Ahmadi (46)	The Impact of Social Capital on the Quality of Life of Yasuj Citizens	2013	Multi-stage random sampling	400 people	who questionnaire	Married people had a higher quality of life. In this study, a positive and significant relationship was found between the quality of life of individuals and social capital in them. The mean score of quality of life was higher in people with higher education. The quality of life of employed women had a higher mean score than non-employed women in all areas studied. The social status variable also showed a statistically significant relationship with women's quality of life.
6	Ahmad Bukharaei (18)	Sociological Study of the Factors Affecting the Development of the Quality of Life of Women in Mashhad	2014	Random cluster	391 Women of Mashhad	WHO QOL_BREF	There was a statistically significant difference between physical function, physical problems and general health in different age groups. There was a significant difference between the quality of life of women in terms of marital status so that the results indicate that single women had a higher average quality of life than married women.
7	Ali Hossein Hosseinzadeh(4)	A Study Relation Emotion Social Security–Economy, Social-Economy Status on Quality of Life Persons (Case Study: Ahwaz City)	2014	Multi-stage cluster	385 people	Researcher-made questionnaire	The mean score of quality of life was significantly different between men and women. The higher the socio-economic, objective, and mental base, the higher the quality of life. There was no relationship between age and quality of life. There was a relationship between marital status and education quality and quality of life.

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No.	Author	Title	Year	Sampling method	Sample size	Tool	Results
8	Ali Asghar Firoozjaeian (34)	The relationship and impact of life objective quality on the life subjective quality (Case Study: Amol city, Mazandaran province)	2015	Simple random sampling	384 people	Researcher-made questionnaire	There was a statistically significant relationship between the variables of marital status, level of education, employment status of individuals, monthly household income, monthly household expenditure, and housing status with their quality of mental life.
9	Seyedeh Narges Hosseini Amin (16)	Socio-Economic Factors Affecting the Quality of Life of Tehranian Citizens	2016	Clustering and disproportionate classification	420 people	WHOQOL-BREF	There was a significant relationship between the quality of life of Tehran citizens and their education. The results of path analysis indicate that social happiness has the greatest impact on the quality of life. After that, education and finally social support are variables affecting the quality of life.
10	Mohammad Mirzaei (47)	An Investigation of Health-Related Quality of Life (HRQOL) in Adults of the City of Tehran with Emphasis on Self - Reported Health	2016	random sampling	623 people	EQ-5D-5L Questionnaire	There was a significant correlation between the age variable and all dimensions of health and visual scale. The relationship between gender and visual scale scores was positive and significant.
11	Abbas Amini(12)	Structural Modeling and Causal Interpretation of Rural Communities 'Self-Evaluation of Quality of Lie and its Determinants.	2017	Stratified sampling and proportional assignment	339 people	Researcher-made questionnaire	In assessing the different dimensions and components of quality of life, no significant difference was observed between the dual groups of age, sex, and marriage of the respondents. Socio-economic status, housing status, recreational activities, and facilities are the most positive factors on the evaluation of rural communities' quality of life, respectively.
12	Mohsen Aghayari Hir(48)	Analysis of subjective indicators affecting the quality of life in rural areas (Case study: Sina suburb - Varzagh city)	2018	random sampling	266 people	Researcher-made questionnaire	The results of this study prove the effect of economic indicators, Socio-cultural and physical-environmental in measuring the mental quality of life of rural society. Also, the indicators of the health-social dimension are the key indicators in measuring the mental indicators of quality of life.
13	Zahra Khademi (49)	The Study of the Relationship between Social Capital and Quality of Life (Case Study: Women Aged 25-65 Years in Tehran)	2018	Multi-stage cluster	351 people	Zaf Quality of Life Questionnaire	There was a statistically significant relationship between intra-group and extra-group social capital with the quality of the mental and objective life of women. The relationship between constructive social capital and objective quality of life was significant.
14	Hossein Hataminejad (15)	Assessment of Quality of Life in Syroos Neighborhood in Tehran	2018	Simple random	100 households	Researcher-made questionnaire	There was no statistically significant relationship between education, job, and job satisfaction with the quality of life. There was a statistically significant relationship between age and quality of life.
15	Issa Ebrahimzadeh (50)	Assess the subjective perception of quality of life in urban areas and the factors influencing Case Study: City of Konarak.	2018	Simple random	310 people	Researcher-made questionnaire	The quality of the mental life of the people in the city of Konarak was below average and poor. There was a significant relationship between household education, employment status, average land ownership, and durable goods along with the degree of appreciation, with the quality of mental life.
16	Gholamreza Ghaffari(51)	Measuring the quality of life in Tehran based on the WHOQOL-BREF standard questionnaire	2018	Multi-stage cluster	1515 people	WHOQOL-BREF	The majority of respondents rated their quality of life as average. There was no statistically significant relationship between the variables of quality of life in them with the variables of gender and marital status, but this relationship was significant with the variables of health status, level of education and age.

Discussion

The purpose of this study was to review the factors affecting the quality of life in the general population. Approaches to quality of life's researches are generally divided into descriptive and explanatory categories. Descriptive approaches address the relationship between quality of life and demographic variables such as; gender, age and literacy, and the main issue in them is measuring the quality of life based on contextual variables. But in the explanatory approach, the factors affecting the quality of life that include all objective and subjective factors are examined.

Objective measurements inequality of life are based on tangible variables, economic accounts, health status, education, urban pollution, and general information (52). On the other hand, in the discussion of factors affecting the quality of life, one of the main parts that play a role in the human mind more than anything else, are mental factors. Therefore, it is not always easy to find the factors affecting it and the definition of quality of life depends on the people's living conditions, their work, cultural, and ethnic origin (53). Therefore, there is a need for scientific research in this field to determine the effective factors for any society. Furthermore, mental indicators are more used at the individual level to measure life satisfaction and to indicate the mentality, inner attitude, and individuals experiences (54).

A look at the various articles published in domestic scientific journals shows that the number of articles on the concept of quality of life in the field of medical sciences is much higher than other fields. However, since the study population in the field of health and medicine is more dedicated to patients or a specific population with a more superficial look at issues related to this multidimensional concept, it cannot fully identify the effective and predictive factors. In general, in social sciences and humanities, the number of studied on social components that affect the individual's quality of life are broader in terms of content. These studies can be conducted with a more comprehensive view and explanation, and thus evaluate the progress and development of society, Therefore, it can be effective in planning and policy-making related to society. Therefore, it is suggested that the social approach and its social determinants be considered more by researchers in studies related to the concept of quality of life.

In most studies, women's quality of life reported being moderate and It is also at a lower level than men (13,29,36,42,45). Women's lifestyle and activity patterns are a complex combination of family and social roles that affect their different needs(55). Given the key role of women in the family, it seems necessary to take appropriate measures by the authorities to improve the quality of life in this segment of society.

The results of various studies showed that there is a significant relationship between the level of education and employment of people with their quality of life (10,17,20.27.30). It seems, people who are at higher levels of education, due to having more knowledge and awareness of their physical and social status, report a higher quality of life.

Conclusion

Certainly, the higher a person's quality of life will be the less vulnerable and the more they can overcome interpersonal, social, and family problems. Several studies showed that various economic and social components will impact the quality of life, therefore, paying attention to this concept, by considering these components, leads to the formation of a more accurate index in measuring and the current situation can

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better determine for more accurate planning and effective policies. In recent years, there have been many changes in the general trend of the quality-of-life studies in terms of number and content in Iran. As its course is ascending, but in terms of content especially in the medical sciences field, not much attention has paid to the dimensions of this structure and, the most of them have examined in a one-dimensional way. This issue has led to a reductionist view of measuring this concept and, cannot study in detail the quality of life of individuals. One of the important limitations of the present study is that all the studies were correlational and descriptive, so the cause-and-effect relationship cannot be deduced from them. It is suggested that in another review study, the findings of studies conducted by other methods such as experimental, quasi-experimental and cohort study be review.

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