Profiling and action plan strategies for teachers' mental health

Öğretmenlerin Ruh Sağlığı için Felsefe Oluşturma ve Eylem Planı Stratejileri

Rahmat Aziz¹, Retno Mangestuti²

Abstract:

Good mental health is essential for teachers to perform their duties. Using positive and negative approaches, this study profiles the mental health of 928 elementary and secondary educators. Using established mental health scales for data collection, the analysis was conducted via the clustering method. Results reveal four distinct teacher mental health profiles: high mental health, high mental illness, low mental health, and low mental illness. Furthermore, findings suggest that teachers within the four profiles should be treated differently. For example, guidance and counseling may vary depending on the mental health profile. This study can be extended by testing variables associated with high and low mental health (psychological well-being and psychological distress) in future research.

Keywords: dual-factor models, profiling, teachers’ mental health, psychological distress, psychological well-being

¹PhD, Maulana Malik Ibrahim Malang University Department of Psychology, Faculty of Psychology, East Java-Indonesia, azira@uin-malang.ac.id, Orcid: 0000-0002-1094-0501
²PhD, Maulana Malik Ibrahim Malang University Department of Psychology, Faculty of Psychology, East Java-Indonesia, mangestuti@uin-malang.ac.id, Orcid: 0000-0002-5662-3931

Address of Correspondence/Yazışma Adresi: Rahmat Aziz, Maulana Malik Ibrahim Malang University Department of Psychology, Faculty of Psychology, East Java-Indonesia, E-mail: azira@uin-malang.ac.id

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Öz:


Anahtar Kelimeler: çift faktörlü modeller, profilleme, öğretmenlerin ruh sağlığı, psikolojik sıkıntı, psikolojik iyi oluş

Introduction

Mental health is an important aspect of a teacher's life in performing his profession. The heavy burden on teachers in performing their duties has the quality of their mental health. Several studies have shown high teacher stress daily (Acosta, 2019; Larson, 2018), and the presence of depressive symptoms in teachers (Cabezas, 2021; Johansson, 2022). Other data indicate the low level of life satisfaction of teachers in performing daily life (Affandi et al., 2020; Braun et al., 2020). The data entrusts the importance of identifying teachers' mental health conditions to implement their mental health development action plans.

The study of mental health in teachers is a strategic study to be performed at various levels of education. Robinson et al., (2022) found that primary school teachers were under high levels of stress during the COVID-19 pandemic. Kuwabara (2020) developed a measurement tool to survey mental health in junior high school teachers. Research on senior high school teachers was conducted by Hagan (2022) who examined teacher anxiety during the Covid-19. This study examined the teachers' mental health at three levels of education.

The dual model theory of mental health was first introduced by Keyes (2002). He created the model as an alternative to the traditional model that focuses more on mental health disorders, which is considered not to provide a complete picture of a person’s mental health. He argued that mental health is not only about the absence of mental disorders or illnesses, but also involves positive dimensions such as happiness, social engagement, and meaning in life. He introduced two main dimensions of mental health (well-being and distress), which can react separately to risk and protective factors (Keyes, 2017; Thayer, Weeks, & Cook, 2021; Wang, Zhang, & Wang, 2011). This dual model theory of mental health become accepted among mental health researchers and practitioners as a more holistic and comprehensive framework for understanding human mental health.

Some research on mental health in teachers can be categorized into two approaches. In the first approach, mental health is studied as a traditional concept. This means that an individual only has a healthy or sick category (Banfield, 2018; Oates, 2018). Studies on mental health with a single approach have long been conducted by researchers. They understand mental health as having high levels of well-being and low levels of stress. The study of mental health with this approach examines psychological well-being and psychological stress separately. For example, Harding (2019) and Jerrim (2021) examined well-being, while Larson (2018) and Li (2020) studied stress.

In the second approach, mental health is understood as a psychological condition of a continuum nature. This approach is also known as the dual-factor model (Roberson & Renshaw, 2019; Suldo et al., 2016; Wang et al., 2011). Experts suggest that a single approach to understanding mental health is considered unsatisfactory, so a dual-factor model approach has been developed as another approach to understanding mental health. This approach explains that mental health can be understood through positive and negative approaches.

According to the positive approach, healthy individuals possess three positive traits. First, these are those who perceive pleasure as a good experience that entails the existence of pleasure (Mérida, 2017) Second, they have a sense of love as an expression of a pleasant emotion while forming relationships with others (Cormier, 2021). Thirdly, they are satisfied with their lives. This means they can enjoy their life experiences with happiness (Y. Li, 2018).

The negative perspective states that healthy persons avoid experiencing anxiety, depression, and loss of control. Anxiety is a psychological disorder characterized by worry, pain, and fear (Aperribai et al., 2020). Depression is a mood condition marked by profound apathy for the state of affairs (Taghvaenia, 2020). The loss of control is characterized as a person's inability to consciously regulate themselves, resulting in harmful behavior (Yu et al., 2021). Thus, according to the second method, individuals with low levels of anxiety, depression, and loss of control are characterized by these three qualities.

The research has three objectives. The first objective is to characterize the mental health of educators in terms of both psychological well-being and psychological stress. The second objective is to create mental health profiles for teachers based on gender disparities and the schools in which they teach. The third and final objective is to examine the outcomes of the profiling to plan teacher mental health development initiatives. The first two objectives are demonstrated by the research findings, while the third objective is detailed in the discussion of the research findings.
Methods
The method section outlines five points relating to research design, research procedure, research subject, data collection, and data analysis.

Research design
This study uses a descriptive quantitative approach. The selection of this approach was tailored to the study’s purpose to profile teacher mental health based on dual-factor models. The quantitative data are analyzed using cluster analysis techniques. This technique is used to categorize teachers’ mental health into high and low categories. In addition, categorization was also performed to create four mental health profile categories.

Research procedures
The research process is conducted after obtaining research permission from the research school. The process has met the ethical standards of the State Islamic University of Malang. By providing a mental health scale consisting of 12 items, the research process was conducted online. The subject’s demographic data were collected on the scale. Before the completion of the scale, the subject gave consent to be the subject of the study.

Research subject
The subjects of the study were teachers who taught at the elementary, junior high, and high school levels in the province of East Java, Indonesia. The subjects of the study totaled 928 teachers from 45 public and private schools (15 elementary schools, 15 junior high schools, and 15 high schools). Male teachers numbered 340 and female teachers numbered 588. The age of the subjects ranged from 23 years to 56 years (mean = 37.72). The identification of the research subjects was based on the recommendations and considerations of the principal, as well as the willingness of the teacher to be a subject study evidenced in a written letter.

Data collection
The data was collected through the Brief Mental Health Scale (BMHS-12). It can measure mental health from positive (positive emotions, positive social relationships, life satisfaction) and negative (anxiety, depression, loss of control) aspects. Each aspect comprises 6 items. The measuring instrument is a Likert scale with five alternative answers: Very often, Often, Sometimes, Rarely, and Never. The scoring process for psychological well-being ranges from 1 to 5, while for psychological distress it ranges from 5 to 1. The content validity test showed an alpha Cronbach value of 0.824. Construct validity is tested using confirmatory factor analysis. It shows that the model's goodness of fit is in line with the specified requirements (Aziz & Zamroni, 2020). This measuring instrument is displayed in Appendix 1.

Data analysis
The data were analyzed using descriptive statistical analysis techniques. Two types of analysis were performed. First, high and low categorization analysts were used to group the mental health of the subject, both on the aspects of psychological well-being and psychological distress. The subject was included in the high category when the score obtained was higher than the mean value of the group, and vice versa. The second analysis involved assigning the mental health profiling into four groups: high mental health, high mental illness, low mental illness, and low mental health. The mental health profiling process is performed by considering gender differences and the school level.

Results
The results section describes the categorization of teachers’ mental health into high and low categories, the profiling of teachers’ mental health by gender, and the profiling of teachers’ mental health by the school.

Overview of teacher mental health
This section outlines the results of the analysis of each aspect of mental health. The analysis is performed by categorizing into high and low categories. The analysis technique is performed by comparing the scores obtained with the mean scores of the group. The full data is in Table 1.

Table 1. Overview of teacher mental health

<table>
<thead>
<tr>
<th>Teachers’ Mental health</th>
<th>Mean</th>
<th>SD</th>
<th>Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>High</td>
</tr>
<tr>
<td>Psychological well-being</td>
<td>25.25</td>
<td>6.46</td>
<td>389</td>
</tr>
<tr>
<td>1. Positive emotion</td>
<td>8.30</td>
<td>1.20</td>
<td>343</td>
</tr>
<tr>
<td>2. Positive social relationships</td>
<td>8.31</td>
<td>1.18</td>
<td>344</td>
</tr>
<tr>
<td>3. Life satisfaction</td>
<td>8.63</td>
<td>1.09</td>
<td>429</td>
</tr>
<tr>
<td>Psychological distress</td>
<td>11.19</td>
<td>7.74</td>
<td>123</td>
</tr>
<tr>
<td>1. Anxiety</td>
<td>4.13</td>
<td>1.72</td>
<td>310</td>
</tr>
<tr>
<td>2. Depression</td>
<td>3.74</td>
<td>1.66</td>
<td>475</td>
</tr>
<tr>
<td>3. Loss of control</td>
<td>3.52</td>
<td>1.63</td>
<td>423</td>
</tr>
</tbody>
</table>

SD = Standard Deviation
Table 1 explains that in the psychological well-being aspect, a majority of subjects (539) had a low level of psychological well-being. The most prominent data is seen in the positive emotion indicator (585:343). On the aspect of psychological distress, the majority of subjects (228) had a low category. The most prominent data is indicated by the anxiety indicator (310:618). Nevertheless, it was found that the subject's depression rate was in the high category. To clarify the results, a histogram 1 is made.
Figure 1 indicates that the comparison between high scores and low scores in the psychological well-being aspect shows a lower score than a high score. Likewise on the aspect of psychological distress, except on indicators of depression.

**Categorization of teachers' mental health**

In this section, descriptive analysis is performed to make the categorization of the mental health of teachers into high and low categories. Based on the results of the analysis, it was found that the mean score for psychological well-being was 25.25 (23.435:928), while for psychological distress it was 11.19 (10.575:928). Furthermore, categorization analysis is performed by comparing the mean score with the subject's score. This means that if the subject's score is higher than the number 25.25 it means that the subject has high psychological well-being criteria, and below that number means that it has low criteria. Likewise with psychological distress, when the subject's score has a number above 11.19 means having high criteria, and below it means having low criteria. The results of the analysis are shown in Table 2.

**Table 2. Categorization of teachers’ mental health**

<table>
<thead>
<tr>
<th>Level</th>
<th>Gender</th>
<th>Elementary school</th>
<th>Junior high school</th>
<th>Senior high school</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychological well-being</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>High</td>
<td>19</td>
<td>62</td>
<td>72</td>
<td>153</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>42</td>
<td>78</td>
<td>67</td>
<td>187</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>61</td>
<td>140</td>
<td>139</td>
<td>340</td>
</tr>
<tr>
<td>Female</td>
<td>High</td>
<td>53</td>
<td>72</td>
<td>111</td>
<td>236</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>147</td>
<td>104</td>
<td>101</td>
<td>352</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>200</td>
<td>176</td>
<td>212</td>
<td>588</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>261</td>
<td>316</td>
<td>351</td>
<td>928</td>
</tr>
<tr>
<td>Psychological distress</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>High</td>
<td>38</td>
<td>81</td>
<td>55</td>
<td>174</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>23</td>
<td>59</td>
<td>84</td>
<td>166</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>61</td>
<td>140</td>
<td>139</td>
<td>340</td>
</tr>
<tr>
<td>Female</td>
<td>High</td>
<td>115</td>
<td>83</td>
<td>68</td>
<td>266</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>85</td>
<td>93</td>
<td>144</td>
<td>322</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>200</td>
<td>176</td>
<td>212</td>
<td>588</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>261</td>
<td>316</td>
<td>351</td>
<td>928</td>
</tr>
</tbody>
</table>

Based on Table 2, it is known that the picture of teacher mental health can be described as follows: First, the level of psychological well-being of teachers is more in the low category in both men and women (539:389). This means that efforts are needed for the development of the psychological well-being of the teacher. Second, the level of psychological distress in teachers is more in the low category (440:488). This means that teachers don't have too many problems related to psychological distress, but the difference between teachers who have high and low levels of psychological distress is almost evenly matched. Figure 2 clarifies those results.
Figure 2. Teachers’ mental health levels

Figure 2 shows that in general the level of well-being and psychological distress of teachers is in a low category. For the psychological well-being aspect, this data shows that there are teacher mental health problems that must be solved, while for the psychological stress aspect, these data show the positive condition of the teacher’s mental health.

**Teacher mental health profiling**

Furthermore, the results of a mental health profiling analysis of 928 teachers found four types of mental health.

The four types are high mental health, high mental illness, low mental illness, and low mental health. The analysis process is performed by categorizing aspects of psychological well-being and psychological distress into two categories, namely high and low. High criteria are obtained when the subject's score is higher than the average value of the group and vice versa. The results of the analysis are displayed in Table 3.

**Table 3. Teachers’ mental health profiling**

<table>
<thead>
<tr>
<th>Gender</th>
<th>Schools</th>
<th>Profiling of mental health</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>HMH</td>
<td>HMI</td>
</tr>
<tr>
<td>Male</td>
<td>Elementary school</td>
<td>28</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Junior high school</td>
<td>46</td>
<td>34</td>
</tr>
<tr>
<td></td>
<td>Senior high school</td>
<td>36</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>110</td>
<td>61</td>
</tr>
<tr>
<td>Female</td>
<td>Elementary school</td>
<td>93</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>Junior high school</td>
<td>52</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>Senior high school</td>
<td>46</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>191</td>
<td>65</td>
</tr>
<tr>
<td>Total</td>
<td>Elementary school</td>
<td>121</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>Junior high school</td>
<td>98</td>
<td>61</td>
</tr>
<tr>
<td></td>
<td>Senior high school</td>
<td>82</td>
<td>38</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>301</td>
<td>126</td>
</tr>
</tbody>
</table>

HMH = High Mental Health, HMI = High Mental Illness, LMI = Low Mental Illness, and LMH = Low Mental Health

Based on the data in Table 3, it can be seen that the highest profile of teacher mental health is the high mental health profile (301) and the lowest profile is high mental illness (126). Interesting data to look at is the profile of high mental health (225) which indicates the presence of subjects who have mental health problems. The results of this study show that the number of teachers who have a high level of mental health is higher than those who have low mental health. See Figure 3.
Figure 3 shows that out of 928 teachers, 301 (32.44%) teachers have a good mental health profile. The remaining 627 teachers (67.56%) have profiles that require the development of their mental health (high mental illness 126 teachers, low mental illness 276 teachers, and low mental health 225 teachers).

**Discussion**

The study found that based on the comparison of the average group of subjects on the aspect of psychological well-being it was found that the level of psychological well-being of the subjects was in a low category. Furthermore, the results of the profiling analysis show that the most dominant mental health profile of teachers is high mental health. They are teachers who have a high level of psychological well-being and a low level of psychological distress.

The results of this study explain that there are different ways to profile mental health. Some researchers have created mental health profiles depending on the focus of the study. For example, mood-focused profiling about mental health (Terry, 2021), focus on crime about mental health (McGrath, 2012), and focus on the condition of diabetic patients (Nyoni et al., 2018). The study provides a new understanding of the existence of four mental health profiles. As such, the study has provided an opportunity and hope for researchers to further examine in depth the implications of the existence of four mental health profiles.

Previous studies have indicated that there are many factors related to psychological well-being and psychological distress in teachers. The atmosphere at work is a factor reviewed by researchers (Gashi & Mojsoska-Blazevski, 2016; Mahipalan, 2019; Sun, 2022). Some of these studies focus more on factors related to teacher well-being and psychological distress. However, there is a paucity of research that discusses treatments to overcome these problems. This study can provide an understanding of solutions to address teachers' mental health problems according to their mental health profiles.

The result of a typology of teachers’ mental health can be interpreted as the importance of schools and education agencies to provide special treatment in the development of teachers’ mental health according to their mental health profiles. Some of the models of teacher competency development that have been performed so far are through training and short courses (Cobos, 2016; Shaver, 2017; Yasar-Akyar, 2022). Some forms of teacher development focus more on the competence of teachers in performing their profession, while development that focuses on teacher mental health can be done by optimizing the role of guidance and counseling institutions in schools (Renshaw, 2015; Sandilos, 2018).

Several previous studies have emphasized the importance of Guidance and counseling in teachers to improve their professional quality and personality (Demir, 2015; Natesan, 2016; Wijaya, 2019). In line with the study, three treatments can be given to all three mental health profiles of teachers. First, the importance of guiding teachers who have a low level of psychological well-being. Second, providing counseling to teachers who have a high level of psychological distress. Third, providing guidance and counseling to teachers who have a low level of psychological well-being but high psychological distress. These three recommendations for a solution to develop teachers’ mental health.

**Conclusions**

Profiling mental health based on dual-factor models on the teachers has resulted in four different mental health profiles. The four profiles are high mental health, high mental illness, low mental illness, and low mental health. Mental health profiling can be used to identify the mental health needs and problems of teachers in schools. The results of this identification can be used as a guideline in providing treatment for the development of teachers' mental health according to their profiles.

Based on differences in teachers' mental health profiles, schools can provide three different treatments to develop their mental health. Counseling is appropriate for teachers with high mental illness, while guidance is appropriate for teachers with low mental illness. Furthermore, both
guidance and counseling are suitable for teachers with a low mental health profile.

The limitation of descriptive research lies in the inability to provide explanations of factors that influence one particular phenomenon. This study only describes teachers’ mental health through profiling based on a dual-factor model. The factors that cause high or low mental health were not able to be answered in this study. Further research is expected to be able to test the factors that cause mental health. Survey or experimental research approaches can be an alternative to refining this research.

Declarations

Ethics Approval and Consent to Participate

The study was conducted in accordance with the ethical guidelines for research. Required permissions were obtained from the State Islamic University of Malang.

Consent for Publication

Not applicable

Availability of Data and Materials

The dataset obtained and analyzed during this study is available from the corresponding author upon reasonable request.

Competing Interests

The author declares that no competing interests in this manuscript.

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Authors’ Contributions

RA carried out the proposal of the main idea of the research, the collection of data, analysis and article writing. RA and RM contributed to revision of the article content. All authors have read and approved the final article.

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