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Analysis of Mental Health And Work Stress of Teachers in Bihar

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Abstract:

Teachers greatly influence the innocent minds of children to grow as responsible and productive individuals. To a considerable extent, the destiny of a nation depends on the teachers who generally inspire students by practicing sound education system and designing associated peripherals such as curriculum, good learning environment, field interface, etc. The paper presents common mental health problems that arise from life events as well as the job stress citing case study results related to teachers. Also, bereavements, divorces, financial difficulties, family history and personal stress characteristics account for to trigger mental health problems. While unproductive levels of stress might be harmful to teachers and can affect their teaching and personal lives besides de-motivating the students, the internal characteristics are found to be one of the most important sources of teachers' stress. However, teaching profession is both exciting and demanding. Teachers always have the deeper sense to take on the additional responsibilities besides normal teaching activity, and also, enjoy exceptional sense of personal commitment. But when it comes to mental health, their dedication can work against their ability to cope up with.

Keywords: *Mental Health, Work Stress, Teachers.*

1. Introduction

Mental health reflects one's personality, character and behaviour, and is generally viewed how an individual sets his/her life style mixed with the perception of self towards adjustment in his/her life space. Mental health simply symbolizes one's state of mind. It reflects his/her integration of personality while living in rough as well as fair working conditions in his day-to-day life. Mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.

More workers are absent from work because of the stress and anxiety than due to physical illness or injury. In small doses, stress can be a good thing, giving the push one needs to do their best and stay focused and alert. However, when the going gets too tough and life's demand exceeds the ability to cope, stress can become a threat to one's physical and emotional well-being. Over time, stress can lead to mental health problems such as: anxiety, depression, eating disorders, and substance abuse. In addition, grinding away at one's mental health, chronic stress can also lead to physical ailments such as tension headaches, back pain, body aches and irregular sleep. A mentally healthy individual is he

who actively masters his environment, demonstrates a considerable unity or consistency of personality and is able to perceive self and the world realistically. Such a person is also able to function effectively without making undue demands upon other. Roger's (1957) and Torrance **(**1968**)** have viewed mental health as a behavioral characteristic of the personality having homogeneous structure of desirable attitudes, healthy values, righteous self-concept and scientific perception of the world as a whole.

The characteristic features of mental health include environmental mastery, perception of reality integration, autonomy growth and attitude towards self, Jahoda (1958). The aim of education is to bring about an all-round development of personality of the child is possible only when the child is mentally and physically healthy. Therefore, the aim of mental health is development of healthy mind in a healthy body. A good mental health is a necessary condition for education and development of a sound personality. From educational standpoint the problem of promoting mental health in a developing country like India occupies a high priority on the agenda for human development. The slogan of 'Health for all' by 2000 A.D is critically related to planning and implementing educational programme.

2. Factors Affecting Teachers' Mental Health:

The ten possible factors that they may affect a teacher's mental health are mainly based upon the investigator's observations. Other references taken into account were Borg and Falzon (1993) and Hanif (2005).

i. Lack of Professional Aptitude and Spirit:

In most countries many individuals choose teaching as their career, not because an individual is interested in teaching but because the individual could not gain entry into other professions. This was evident from the studies of professional experience as the factor for affecting mental health was found by Burns (1979) and Lee (1993).

ii. Occupational Hazards:

The teaching profession has frustrating conditions, such as dealing with students' indiscipline that could result in maladjustment and stress. Teachers of same age with differential level of teaching experience display dissatisfaction in their mental health showing differential level of stress in different dimensions. This was confirmed in the study conducted by Arora (1986) who reported that with an increase in teaching experience the occupational hazards are felt by maximum teachers and teachers having less experience are little bit satisfied.

iii. Lack of Social Prestige:

Many leaders and educationists give lip service to the important of teachers. All agree that teachers are the builders of a nation's future. The slogan sounds very sweet to the ears, but what is of importance is the teacher in the eyes of society. 182 Masalah Pendidikan 2006, University Malaya.

iv. Poor Salary:

In spite of a high cost of living and increasing responsibilities of teachers towards the total personality development of children, the salaries of teachers have not increased in the same proportion. (Rama 1997, Sahoo 2001). Poor salaries are also found to be distracting factors by Dener (1993) who found income related to well-being of both within and across countries.

v. High Moral Expectation:

Society expects that a teacher should be a saint. No doubt, the teacher must present a model of ideal behavior before the student. But in actual practice how many students imitate or identify with the model of ideal of the teacher?

vi. Work load:

In school, the teaching workload can be heavy. The teacher may have to teach 6 out of 8 periods in a day. This overload can cause emotional tensions and mental fatigue if continued for a long period, and can lead to stress, (Nayak, 2006 relationship among teachers and Bung and Falzom 1986).

vii. Relationship among Teachers:

Conflicts among peers, such as job promotions, may disturb harmony, cooperation and good will among teachers.

viii. Relationship between the Administrator and Teachers:

Some administrators (managers or principals) are autocrats. They behave only in an official manner and impose their orders on teachers without demonstrating appreciation of services rendered.

ix. Insecurity of Service:

This factor refers to the job tenure. Some teachers may be appointed on a temporary basis. This may develop a number of problems such as anxiety, depression or stress.

x. Lack of facilities:

Many institutions do not have adequate facilities such as a well-equipped library, audiovisual aids and science laboratories. Lack of facilities can cause frustration and stress among teachers.

3. Review of Related Literature:

Hall (1988) reported in a study that the less qualified and less experienced teacher feel the stress much more severe on them than the qualified and experienced. A mismatch in qualification between tribal and non-tribal teachers may be a reason for the ill mental health. Panda (1991) attributes stress affecting the mental health of the teachers. Batool (2008) examined the relationship between mental health and job satisfaction and results indicated that mental disorders are the effects due to dissatisfaction in job. Singhal (2004) in a study on stress in tribal and non-tribal teachers found that teachers from town were unwilling to take up jobs in tribal areas. Many teachers in tribal school remain deprived of social interactions with other communities, had no access to relevant information because of lack of infrastructural facilities and lack of access to them, they were socially and culturally isolated in ashrams schools were demotivated to teach because of low standard of student.

Pradhan and Panda (1989) found teacher in ashram school were demotivated to teach because of low standard of students. The teachers in tribal school perceived in congruence between their efforts to teach and the amount and quality of learning reflected in children's behavior. Dharmalingam (1981), Usashree and Jamuna (1990) found depressive supports in tribal teachers because of disproportion between input and output.

4 Major Findings of the Reviews:

Studies related to teachers' mental health and work stress reveal that the sources of stress are more psychological and social causing burn-out in them. Even there has been evidence of higher level of stress in school, in disadvantaged areas. Teachers in Sikkim because of its peculiar geographical condition perceive stress related to place of work, satisfaction in teaching, working conditions and many other personal and social constraints. A number of personal variables are also responsible for causing stress like age, gender, education, marital status, socio- economic status, and interaction patterns. In this context mental health of teachers working in Tribal and Non-tribal areas in Sikkim needs to be investigated, so as to make the quality of education of comparable standard with the desirable form. This was the strong rationale for the problem.

5. Objectives of the Study:

The study was conducted with the following objectives:

1. To assess the status of mental health of Tribal and Non -Tribal teachers' component wise and totally.
2. To classify the Tribal and Non-Tribal teacher into five different categories in percent and proportion according to different level of mental health.
3. To find out significant difference if any in the mental health of Tribal and Non -Tribal secondary school teachers in relation to personal variables like-gender marital status, educational qualification and experience.

6. Hypothesis of the study:

The following hypotheses were formulated keeping in view the above objectives.

$HO_{1:}$ There does not exist significant difference in mental health of Tribal and Non-Tribal teachers' component wise and totally.

$HO_{2:}$ There does not exist significant difference in mental health of Tribal and Non-Tribal teachers in relation to gender variation.

$HO_{3:}$ There does not exist significant difference in mental health of Tribal and Non-Tribal teachers in relation to marital status variation.

$HO_{4:}$ There does not exist significant difference in mental health of Tribal and Non-Tribal teachers in relation to educational qualification variation.

$HO_{5:}$ There does not exist significant difference in mental health of Tribal and Non-Tribal teachers in relation to experience variation.

7. Scope and Delimitation:

Scope of the study was to cover assessment of mental health component wise of Tribal and Non-Tribal teachers in relation to gender, marital status, educational qualification, experience variations.

The study was delimited to 100 Tribal and Non-Tribal Secondary School teachers of Motihari District of Bihar at random by selecting 70 & 30 from non-tribal and tribal category respectively.

8. Methodology:

The descriptive method of survey was adopted. Data was collected by administering the Inventory on as it where basis, hence the study was of ex-post facto type. The population of this study consisted of Secondary school Tribal and Non-tribal teachers of the Motihari District of Bihar.

9. Tools Used:

Mental Health Inventory of Anand (1992), a 60 item five-point Likert instrument which measures six dimensions of mental health like self-concept, concept of life, perception of self-amongst others, perception of others, personal adjustment and record of achievement were used to categorize teachers as mentally healthy and mentally unhealthy.

10. Data Collection:

Techniques of data collection and analysis included techniques for collection of data, scoring, interpretation of scores in relation to the objectives stated and hypothesis formulated.

Questionnaire technique was adopted for collection of data. Scoring was done manually. For interpretation of scores both descriptive and inferential statistics have been used.

11. Analysis and Interpretation of data Sub-Sample Analysis:

In order to find out the results of the study mean, standard deviation, Skewness and Kurtosis and test of significance of difference between means were calculated for all variables of Mental Health.

Differential analysis on Mental Health:

The data were analysed through descriptive as well as inferential statistics. The normality of distribution was studied through calculation of mean, median, mode, standard deviation. Basing upon the mean and standard deviation on the scores on mental health categorization of the sample was made. It was observed that skewness is -.014 and kurtosis is -.852.

Table 1: Summary of 't' ratio of Mental Health Scores due to sample and sub-sample wise Variations

Sub-Sample	N	Mean	SD	SED	't'	Remark
Tribal Married VS	17	154.3	17.56	5.1	0.11	NS
Non-Tribal Married	52	153.7	18.2			
Tribal Unmarried VS Non-Tribal Unmarried	13	157.3	19.14	7.1	0.47	NS
	18	160.7	18.22			
Tribal Graduate VS Non-Tribal Graduate	22	155.1	15.44	4.67	0.47	NS
	56	152.9	17.66			
Tribal Post -Graduate VS	8	159.5	10.58	7.4	0.97	NS
Non-Tribal Post-Graduate	14	166.7	22.22			

Tribal Graduate VS Non-Tribal Graduate	22	155.1	15.44	4.67	0.47	NS
	56	152.9	17.66			
Tribal Post -Graduate VS Non-Tribal Post-Graduate	8	159.5	10.58	7.4	0.97	NS
	8	159.5	10.58	7.4	0.97	NS
	14	166.7	22.22			
Tribal Inexperienced VS Non-Tribal Inexperienced	17	156.7	16.97	5.01	2.32	S
	55	145.1	19.79			
Tribal More Experienced VS Non-Tribal More Experienced	13	157.1	26.07	8.5	0.21	NS
	17	158.9	1.7			

t 0.05 for df 98 = 1.98; t 0.01 for df 98 = 2.63

On perusal of the above table, it was observed that the 't' ratio in all cases are not significant but Tribal Inexperienced VS Tribal Inexperienced Teachers have significant difference in their mental health. The result was in conformity with earlier studies of Dharmalingam (1981), Usashree and Jamuna (1990)**.** On above basis the investigator concluded that the result obtained in the present study was appropriate.

12. Findings of the Study:

Based on the results of the study made, the following findings had been interpreted. Each point had been referred to the hypothesis that was formulated which had been expressed in null form for easy interpretation of results.

1. There was no significant difference in mental health of teachers in relation to the category i.e., Tribal and Non -Tribal.
2. The findings also indicated that there was no significant difference in mental health of Male and Female teacher of both Tribal and Non- Tribal category.
3. There was no significant difference in mental health of Tribal and Non- Tribal Teachers in relation to marital status variation.
4. There was no significant difference in mental health of Tribal and Non- Tribal Teachers in relation to Educational Qualification variation.
5 There was partial significant difference in mental health of Tribal and Non- Tribal Teachers in relation to Teaching Experience variation.
6 However, there was significant difference in the component of perception of others of the mental health scale of Tribal and Non- Tribal Teachers.

13. Recommendations

Since the experience of stress happens to be natural to all situations asking for some standard in performance, it will continue to affect adolescents, young adults and teachers in schools and colleges. The system thus has to make some provision, in addition to taking steps to include a module in early training to initiate every person into stress management options, which may be individually geared to help them discover what matches their temperament and preferences, involve minimum costs both physical and psychological and are socially acceptable.

The findings of the study can have the following educational implications for the qualitative improvement of the secondary school education. In line with it, there is an urgent need to recognize that the government and the community both have big responsibility to create healthy conditions for work, motivate and inspire teachers to engage in constructive and creative activities. The findings also suggest us that there is a need for periodical stress management programmes for reducing the levels of stress among the teachers which in turn will improve their functional skills and lead to effective teaching and learning.

- **Making the school environment more attractive:**

It has become important for all of us to try and help prepare our mental health better by modifying the environment to a greater extent so that the external danger is eliminated. The school environment should be a place of joy and happiness for the teachers as well as the learners for effective teaching and learning. School environment should be developed as a center of meaningful engagement and creativity.

- **Cordial Relationship among the members of the staff:**

Cordial relationship must exist among the members of the staff of a school for ensuring stability and for smooth functioning of the school. It brings positive relationship avoiding personal rivalry, jealousy among the peer group and the teaching faculty, etc.

- **Consulting Doctor:**

Consultation with doctor remains an integral part in order to diagnose the mental health of teachers. Consequently, by counseling and through treatment, individual's ill mental health can be improved.

- **Self-Help:**

Learning how to maintain a good mental health will help a teacher to stay calm and focused. Talking with trusted friends can also be very helpful. By utilizing the leisure time in fruitful events such as games, sports, gardening, music, attending social functions, field trips etc, can break the monotony of routine life and leads to sound mental health.

- **Literary Therapy:**

By gathering variety of information from the books, articles and other research materials one can acquire in-depth ideas and knowledge about his or her problems, as a result this knowledge provides essential tools for controlling and resolving one's issues and problems. Many books can be checked out from a local library and many of the information can be viewed through internet.

- **Counseling:**

Counseling (professional) and co-counseling (between peers) may be used. Psycho education programs may provide people with the information to understand and manage their problems. Creative therapies are

sometimes used, including music therapy, art therapy or drama therapy. Lifestyle adjustments and supportive measures are often used, including peer support, self-help groups for mental health and supported housing or supported employment (including social firms). Some advocate dietary supplements.

- **Diet and Mental Health:**

Scientists, psychiatrists, and other health care professionals know that the brain is made up large part of essential fatty acids, water and other nutrients. It is an accepted fact that food affects how people feel, think and behave. Most experts accept that dietary interventions could have an impact on a number of the mental health challenges society faces today. So, why is it that governments and public health authorities in developed economies invest so little in developing this knowledge?

The evidence is growing and becoming more compelling that diet can play a significant role in the care and treatment of people with mental health problems, including depression, ADHD (attention deficit hyperactivity disorder) to name but a few. If experts are talking about an integrated approach which recognizes the interplay of biological, psychological, social and environmental factors - with diet in the middle of it as being key- and challenging the growing burden of mental health problems in developed nations, surely individuals can speed things up and do something about their diet themselves and improve their mental health.

- **Reducing Worry and Emotionality:**

Very often it is observed that the teacher worries about their students' performance and progress leading to stress and depression. It may be due to workload left for last minute to be completed. Teachers should avoid it and update the work timely so that sound mental health will not get disturbed.

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