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Priyanka Singh
M.ed. Student, Department of Education, M.D.U. Rohtak. Haryana, India

Correspondence
Priyanka Singh
M.ed. Student, Department of Education, M.D.U. Rohtak. Haryana, India

Mental health status of teachers in secondary school education in India

Priyanka Singh

Abstract
Study reveals that both male and female teachers have some level of mental health problems. However, when we compare the results, male teachers are healthier than female counterpart is. There are reasons, under Indian conditions women bear dual responsibility of discharging duties at family front and professional. To perform both responsibilities successfully and efficiently, may lead to some degree of stress and tension, affecting mental health inventory adversely. The study also reveals that the unmarried teachers score higher on mental health inventory scale than married one. This implies that after marriage, teachers bear more family responsibility in addition to professional duties. The study results also reveal that the teachers in government schools feel healthier and safe as compared to counterpart in private schools. To meet multi expectations from students, parents, and the management may be the reason. They are facing lot of stress and try to achieve target entrusted by the school management and parents. The study also reveals that rural and urban schoolteachers face the same level of mental health problems, and no significant difference is visible. There are little facilities in rural areas schools, whereas, urban schools have other reasons for stress, therefore, equally facing mental health problems.

Keywords: Mental Health Inventory, Secondary school teachers, Male –Female, Rural-Urban, Married-Unmarried, Private-Government

1. Introduction
Health is undoubtedly an indispensable quality in human being. Enlightened, emancipated, and empowered persons lead communities and nations in their march towards better and higher quality of life. They reveal and elaborate the secrets of attaining higher values in life and nurture empathy for the fellow beings. The teachers are considered the best part of human resource of a nation and play vital role in building educational institutions. The policies and practices of an educational institution is dependent up on various factors like human resources, infrastructure, management, and demands from the community. Teachers not only form best human resource but also are the torchbearers in creating social cohesion, national integration and a learning society. They disseminate knowledge, create, and generate new knowledge. They are responsible for acculturating role of education. No nation can even marginally slacken its efforts in giving necessary professional inputs to its people and along with that due status to the educationists along with their stature and profession.

The educational expansion, universalization of elementary education, vocationalization of secondary education, higher and professional education, and overall quality of education are major challenges before the country. Evidently, the quality of education is a direct consequence and outcome of the quality of teachers and teacher education system. The task of bringing qualitative change in institutional efficacy of the teacher education system in itself is a huge and challenging one. The last five decades have witnessed several attempts to change, modify, and indigenize the inherited system of teacher education in India. The system however continues to function more or less on the same principles, similar content, and approaches characterized by continuity in addition, unwillingness to change. Over the years, the magnitude of the task has increased manifold.

The existing programs of teacher education at primary and secondary stages are generally based upon the teacher education curriculum framework brought out by the National Council for Teacher Education (NCTE) in 1978. There was another attempt to revise the curriculum in 1988. Most of the institutions now conduct programs and courses, which were revised prior to 1988 document. The developments and changes over the last two decades require a fresh look at the teacher education. The feeling has been echoed by sensitive and concerned teachers and teacher educators. The establishment of the NCTE as a statutory body in 1995 has brought this issue at

the centre-stage in India. Consequently, NCTE began the process of nation-wide consultations to evolve a strategy to develop a new curriculum framework on teacher education.

2. Problem statement

Mental health problem of teachers interested researchers in many fields during the past few decades [1]. The teacher's bum-out problems have caused mental health problems and adjustment to categories of intellectuals. Reforms and improvement of any system is possible only when a careful study is made to discover the main causes and remedial actions based on the finding are applied. The causes of mental health have acquired a great need in the present situation of Indian education system. The effects of mental health problems vary from individual to individual depending upon such variables, as personality, gender, age, and family background. Nowadays, teaching faculty work in an environment that requires them to meet multi expectations from students, parents, and the management. The issue of mental health of students as well as teachers received considerable attention from various quarters, especially from the government and private institutions [8]. Lack of mental health may lead to unhappiness, failure, misery, and even insanity among individuals. In the light of this, present study has been taken up to study various aspects and reasons of mental health problems among senior secondary school teachers.

3. Objectives

1. To study mental health problems of males and females of senior secondary school teachers
2. To study mental health problems of married and unmarried secondary school teachers
3. To study mental health problems of urban and rural secondary school teachers
4. To study mental health problems of secondary school teachers of public and government
Schools

4. Hypotheses of the study formulated as follows:

H_1: There exists no significant mean difference in mental health problems among male and female senior secondary school teachers.

H_2: There exists no significant mean difference in mental health problems of married and unmarried senior secondary school teachers.

H_3: There exists no significant mean difference in mental health problems of rural and urban senior secondary school teachers.

H_4: There exists no significant mean difference in mental health problems of private and Government senior secondary school teachers

5. Delimitations of the study

1. The study will be restricted to mental health problems among the teachers.
2. The study will be confined to the teachers of secondary school.
3. The study will be limited to teachers in Hisar city of Haryana state (India).
4. The sample will be confined to five private and five government schools only.
5. The total number of teachers taken is 100.

6. Methodology

In this survey study, the purpose is to find out the mental health problems among senior secondary school teachers within selected zone, *i.e.* Hisar city and its rural surrounding (Haryana province). This chapter has been divided into following sub headings:

1. **Population:** Population means the entire mass of observations, which is the parent group from which a sample is to be formed. In present case male and female teachers, married and unmarried in private and government senior secondary schools, in rural and urban settings, located in Hisar city and its rural surrounding, (Haryana province, India).
2. **Sample:** Sample constitutes small portion of population earmarked for the present study. The senior secondary school teachers in private and government schools are included, (Hisar). Sample of 100 teachers selected in the following order:

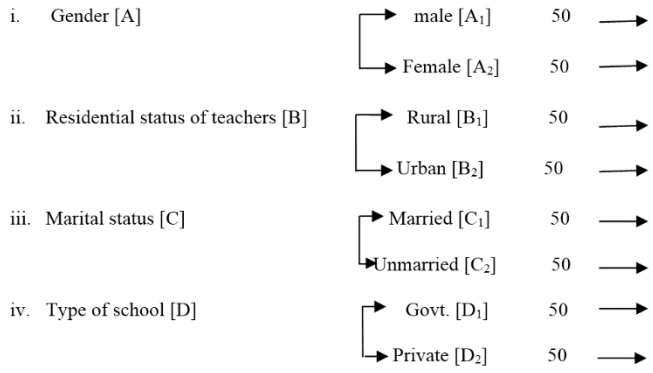

Table 1: Description of the Sample in different settings

S. No.	Name of the school
1	Govt. Senior Secondary School, Gangwa (Hisar)-Rural
2	Govt. Senior Secondary School, Kaimari (Hisar)-Rural
3	Govt. Senior Secondary School, Jahajpul (Hisar)-Urban
4	Govt. Senior Secondary School, Patel Nagar (Hisar)-Urban
5	Govt. Senior Secondary School, Hisar-Urban
6	Ved Senior Secondary School, Hisar- Urban
7	St. Sofia Senior Secondary School, Hisar- Urban
8	New Yashoda Public School, Hisar- Urban
9	Holy Angel School, Hisar- Urban
10	St. Kabir School, Hisar- Urban

Name of government schools and private schools as described in Table 1, Government Senior Secondary School, Gangwa (Hisar), Government Senior Secondary School, Kaimari (Hisar), Government Senior Secondary School, Jahajpul (Hisar), Government Senior Secondary School, Patel Nagar (Hisar), Government Senior Secondary School, Hisar, Ved Senior Secondary School, Hisar, St. Sofia Senior Secondary School, Hisar, New Yashoda Public School, Hisar, Holy Angel School, Hisar, St. Kabir School, Hisar, respectively.

7. Variables

7.1 Independent variables: Gender (male & Female), Residential status (rural & urban), Marital status (married & unmarried), Type of school (government & private)

7.2 Dependent variable: Mental Health Problems: sub-test areas (given at 4.2.1)

8. Tools Used

Following standardized tools were applied during the investigation

8.1 Personal Data Sheet (self-prepared)

To know the nature of sample background, personal data sheet was prepared for recording items like gender, marital status, residential status, and type of school, whether private or government.

8.2 Mental Health Inventory

Teacher Mental Health Inventory (MHI) Scale was used (15) for present investigation, to know the mental health problems of the teachers. Mental health inventory consists of seven areas, and thus seven sub-tests were constructed, representing one sub-test on each area. The detail of the sub-tests is explained as follows:

8.2.1 Sub-test areas

Area 1-*Security Intensity*: This sub-test measures the security and in-security feeling of the students. This area constitutes 41 items in all.

Area 2- *Neurotic Behavior*: This sub test concerned the neurotic behavior of the students

Area 3- *Depression*: This sub test is related with the depression level of the student. This sub-test is consisted of 37 items of Yes/No for the tryout.

Area 4- *Inferiority*: The purpose of preparing this sub-test is to measure the inferiority complexes among teachers. The items in sub-test are of Yes/No types. For tryout, there are 35 items in all.

Area 5- *Frustration*: Frustration is rated as one of the areas of mental health for preliminary draft, 39 items of Yes/No type are prepared for this sub-test.

Area 6- *Anxiety*: This sub-test is to measure anxiety among students. Anxiety is thought to be a significant important area of mental health. In a sub-test there are 39 items of Yes/No type.

Area 7- *Adjustment*: Adjustment is the tendency to seek for balanced behavior. It is treated as one of the most important constituents of mental health. The inventory consisted of 39 items of Yes/No type before the tryout.

8.2.2 Item Analysis of Mental Health Inventory

Mental health inventory is to be administered to the sample selected for tryout. The scoring is done with the help of the keys prepared. Items for the final draft of the inventory are selected out of the preliminary draft according to the merits. Based on the correct responses given by 27 % lower and 27% upper to each item, the determination index is noted. In all 140 items are selected for the final drafts of mental health inventory. It was decided to drop the items that showed the discrimination less than 29 in the first area. Similarly, in the remaining sub-test, *i.e.* in the 2nd, 3rd, 4th, 5th, 6th, and 7th areas, the items for which obtained less than 0.41, 0.34, 0.35, 0.40, 0.49, and 0.54, respectively were dropped out. Thus, based on above mentioned out points, 20 were retained in all the sub-tests. In all 140 items selected for final drafts of mental health inventory**.**

8.2.3 Reliability of Mental Health Inventory (MHI)

In this study split half method is used to estimate reliability of various sub-areas. All sub-areas are divided into two equal halves on odd-even basis. Correlation coefficients between the scores on the halves are computed, which provides reliability for the half test. Spearman Brown prophecy formula:

Spearman brown prophecy formula is used to measure split half reliability. Split-half reliability is used in single test, consisting of two parallel forms-odd items and even items. Each of which measure the same things. We may administrate a test and assign separate scores to every participant on two arbitrarily selected half of the test. For example, a participant may be given score of odd items, second score on the even items. Then the correlation between two score is a parallel form reliability coefficient. We can assume that two halves are equivalent. We can use the spearman Brown formula**:**

$$r_{11} = \frac{2r_{\frac{11}{22}}}{1+r_{\frac{11}{22}}} \text{(aiken)}$$

r(1/2)= correlation between odd and even items
As given in Table 2

Table 2: Split-half reliability coefficient of mental health inventory of reliability

SL.NO.	Sub-scale	Reliability of half test	Reliability of total test
1.	Security intensity	0.86	0.92
2.	Neurotic behavior	0.47	0.65
3.	Depression	0.52	0.68
4.	Inferiority	0.50	0.67
5.	Frustration	0.47	0.65
6.	Anxiety	0.45	0.62
7.	Adjustment	0.72	0.84

As the inventory is composed of seven sub-tests, the estimation of composite reliability area, a function of the reliabilities of its components, their dispersion, and inter-correlation and the respective weights assigned to them. The composite reliability of the inventory is computed by:

$$r_{oe} = \frac{r_{ot}\sigma_t - \sigma_o}{\sqrt{\sigma_t^2 + \sigma_o^2 - 2r_{ot}\sigma_o\sigma_t}}$$

Here,
Roe=reliability
Correlation between odds score and total score
=SD of odds scores
=SD of total scores
Which comes to be 0.92 according to table 2?

8.2.4 Validity of Mental Health Inventory (MHI)

The question of validity process is the problem of finding a suitable external criterion. Generally, validity is studied by comparing test results with the available criterion. The concurrent external criterions used, generally are teachers rating, standard test on similar area observations through investigation. The validity shows relationship between the

needs during devices, which are meant to test the same phenomenon or area. The selection of criteria for the validation of the present inventory on mental health was available and hence some external criterion has to be searched out. In the present investigation of mental health inventory, the teacher was used as external criterion. Due precautions were taken in obtaining teacher's rating of the randomly selected 100 students of both boys and girls. The class or the subject who knew the students personally, were asked to tell about the various aspects of the mental health of the students. The investigators explained the concept and areas of mental health to the teachers. They were asked to observe the behavior of the students carefully and after that they had to rate the students (whom they know personally) on the points mentioned under each area of mental health, the rating were converted into percentage to make the scores comparable. The works of mental health inventory and rating of the teachers were considered for evaluating the correlation of coefficient, which is obtained as 0.76.

8.2.5 Scoring of Mental Health Inventory (MHI)

Scoring is done with the help of prepared keys. Scores of all seven sub-tests are added and total scores are considered as the idea regarding mental health, higher the score better the mental health.

9. Data Collection

After selecting the tools, the investigators personally administered the inventory on the selected teachers of secondary schools. Adequate instructions are applied to the respondents. They are informed about the nature and utility of the study, before administering the questionnaires. They are also provided with proper instructions to respondents to various questionnaires. They were also told that there was no wrong or right response to get right response. Teachers were also instructed not to disclose their identity and further assured that their reply would be kept confidential. No time limit was fixed for filling the questionnaires. Then, different tests were administered individually. After the completion of the process, the answer sheets were collected and scoring performed as per procedures.

10. Statistical Technique Application

The statistical techniques like mean, standard deviation, and t-test were applied to find mean difference on mental health scores of various groups of the teachers as per the need of the study.

6.1 Description Statistics: Mean, Standard Deviation

6.2 Inferential Statistics: t-test

6.3 Diagrams, bar diagrams, Pai Charts,

11. Results and Discussion

The purpose of the study is to know how mental health of teachers is influenced by their areas of mental health status like, intensity of security, neurotic behavior, depression, inferiority, frustration, anxiety, and adjustment [5]. It is a common observation that in secondary education sector the percentage of female teachers are more than male. To know how aforementioned components and variables are influencing their mental health inventory.

The interaction effect of intensity of security, neurotic behavior, depression, inferiority, frustration, anxiety, and adjustment, sub components revealed that on the variable competency, there exists a significant interaction between all these factors. The collected data is processed and analyzed to draw proper inferences by partitioning the whole data into constituent parts as to arrive at meaningful interpretation.

11.1 Mean Difference in Mental Health

To determine the significance of differences between means of different groups, t-test is applied. To test the significance of t-test, the following levels of confidence are established, $LSD_{0.05}$ and $_{LSD0\cdot01}$. $LSD_{0.05}$ is symbolized as * (single star), signifying significant at 5 % and $LSD_{0.01}$ as ** (double star), signifying highly significant values at 1 %.

11.1.1 Gender wise difference on Mental Health Inventory

The difference in mental health scores of male and female teachers is depicted in Table 3

Table 3: Mean difference in mental health scores of male and female teachers

S. No.	Areas	Gender	N	Mean	SD	SEM	t-test	Significance level
1	Security Intensity	Male	50	16.30	2.1020	0.3973	2.449	0.05*
		Female	50	15.00	3.1102	0.4399		
2	Neurotic Behavior	Male	50	15.70	2.0923	0.2969	1.657	0.05*
		Female	50	14.74	3.5214	0.4980		
3	Depression	Male	50	17.82	2.2469	0.3178	2.330	0.05*
		Female	50	16.44	3.5350	0.4999		
4	Inferiority	Male	50	15.16	1.9205	0.2716	1.561	NS
		Female	50	14.42	2.7486	0.3887		
5	Frustration	Male	50	16.00	3.2198	0.4554	0.825	NS
		Female	50	15.34	4.6494	0.6575		
6	Anxiety	Male	50	17.56	2.4757	0.3501	3.298	0.01**
		Female	50	14.88	5.1849	0.7333		
7	Adjustment	Male	50	16.86	2.8715	0.4061	3.077	0.01**
		Female	50	14.16	5.5009	0.7779		
	Total	Male	50	115.04	11.8269	1.6726	2.680	0.01**
		Female	50	104.86	24.1103	3.4097		

N=Number, SD=Standard Deviation, SEM=Standard Error Mean, NS=Non Significant

Value of $LSD_{0.05}$=1.98, $LSD_{0.01}$=2.63 at df=0.98, *=$LSD_{0.05}$, **=$LSD_{0.01}$

From the Table 3, the inference is drawn that significance difference exists between two means of male and female on mental health at both level of significance difference (LSD), 0.05, and 0.01. So the null hypothesis is rejected here with and a significant difference exists between male and female mental health. Mean score of male is higher than female on overall area of mental health inventory. So, male found to be slightly mentally healthy with value 115.04 at $LSD_{0.05}$, as compared to their female counter part, 104.86, as per the study finding, Fig. 1 and 2.

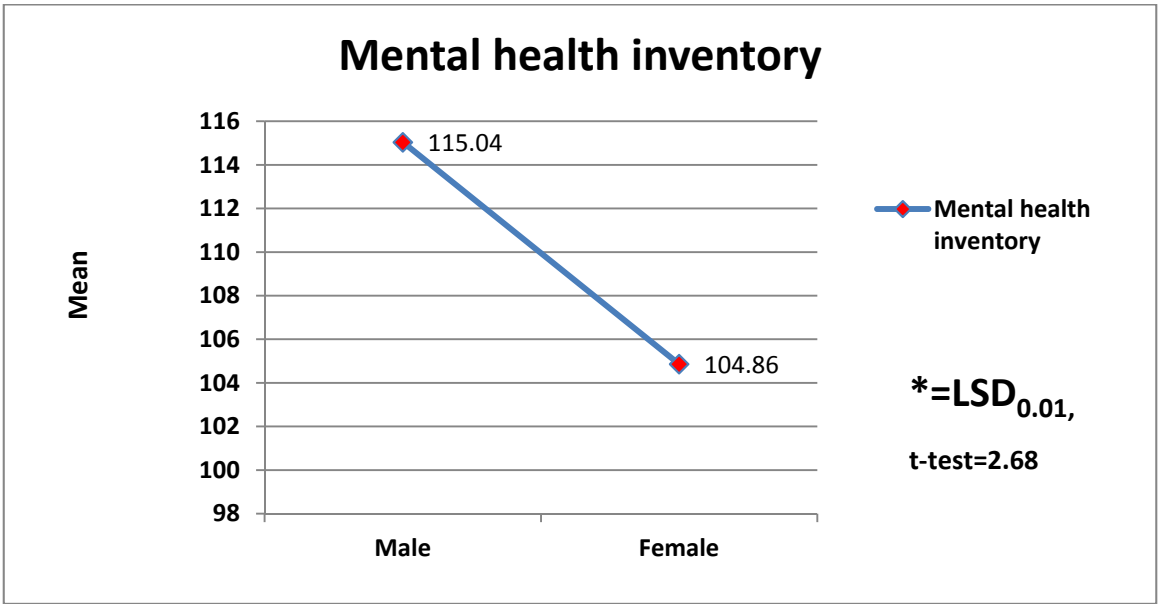

Fig 1: Mean Difference of Mental Health in Male and Female teachers

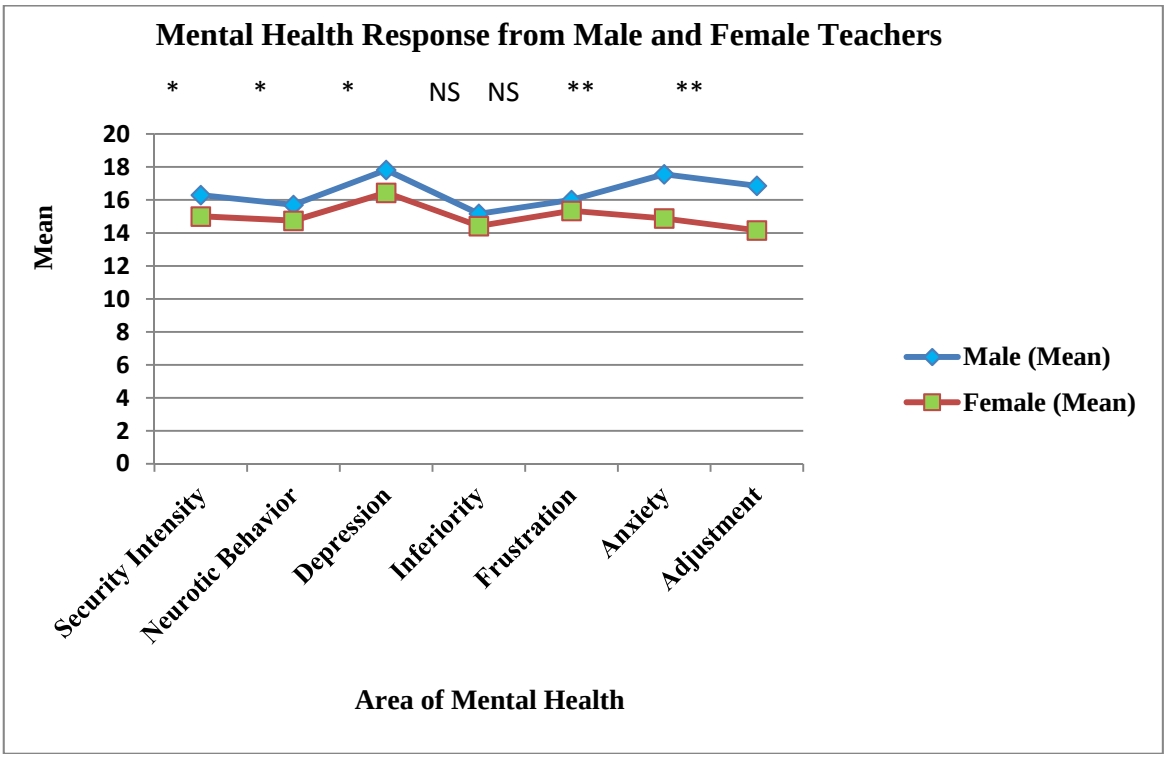

Fig 2: Mental Health Response in different areas from Male and Female Teachers

According to Table 3, and Fig. 2, Males feel more secure with higher mean value of mental health (16.30), as compared to female counterpart (15.00) at LSD $_{0.05}$. Neurotic behavior, male with mean value 15.70, and female teacher with mean value 14.74 at LSD $_{0.05}$. Depression, male with mean value 17.82 and female with 16.44 at LSD $_{0.05}$, inferiority component, male with 15.16, and female with 14.42 and found NS, frustration, male with mean value 16.00 and female with 15.34 but found NS, anxiety, male with mean value 17.56 and female 14.88 LSD $_{0.01}$. Adjustment component of mental health is better in male with mean value 16.85 and female counterpart with lower value of 14.16 at LSD $_{0.01}$. Overall, Males teachers found to have slightly better edge over their female counterpart in all areas of mental health performance, as depicted in present study, Fig 1, 2. After viewing results of different areas of mental health, it has been evidenced that males rated higher in comparison to female on security intensity, neurotic behavior, depression, anxiety, and Adjustment scoring [6]. The areas of inferiority and frustration have been found inconclusive with no difference (NS), Fig. 3.

11.1.2 Residential Status Impact on Mental Health Inventory

The difference in mental health scores of rural and urban background teachers, both male and female is depicted in Table 4 and Fig. 3 and 4.

Table 4: Mean values in Rural and Urban Mental Health Areas of Male and Female Teachers

S. No.	Areas	Residential Status	N	Mean	SD	SEM	t-Test	Significance level
1	Security Intensity	Rural	50	15.8163	2.5631	03662	0.597	NS
		Urban	50	15.4902	2.8801	04033		
2	Neurotic Behavior	Rural	50	15.6122	2.7600	03943	1.321	NS
		Urban	50	14.8431	3.0488	04269		
3	Depression	Rural	50	17.5918	2.6054	03722	1.505	NS
		Urban	50	16.6863	3.3496	04690		
4	Inferiority	Rural	50	15.1429	2.1115	03016	1.456	NS
		Urban	50	14.4510	2.6024	03644		
5	Frustration	Rural	50	15.8980	3.1901	04557	0.558	0.05*
		Urban	50	15.4510	4.6575	06522		
6	Anxiety	Rural	50	17.3061	3.3116	04731	2.568	NS
		Urban	50	15.1765	4.8113	06737		
7	Adjustment	Rural	50	16.3265	3.6136	05162	1.769	0.05*
		Urban	50	14.7255	5.2501	07352		
	Total	Rural	50	113.0612	16.4132	23447	1.570	NS
		Urban	50	106.9608	21.9399	30722		

N=Number of male and female, SD=Standard Deviation, SEM=Standard Error Mean, NS=Non significant, *==$LSD_{0.05}$

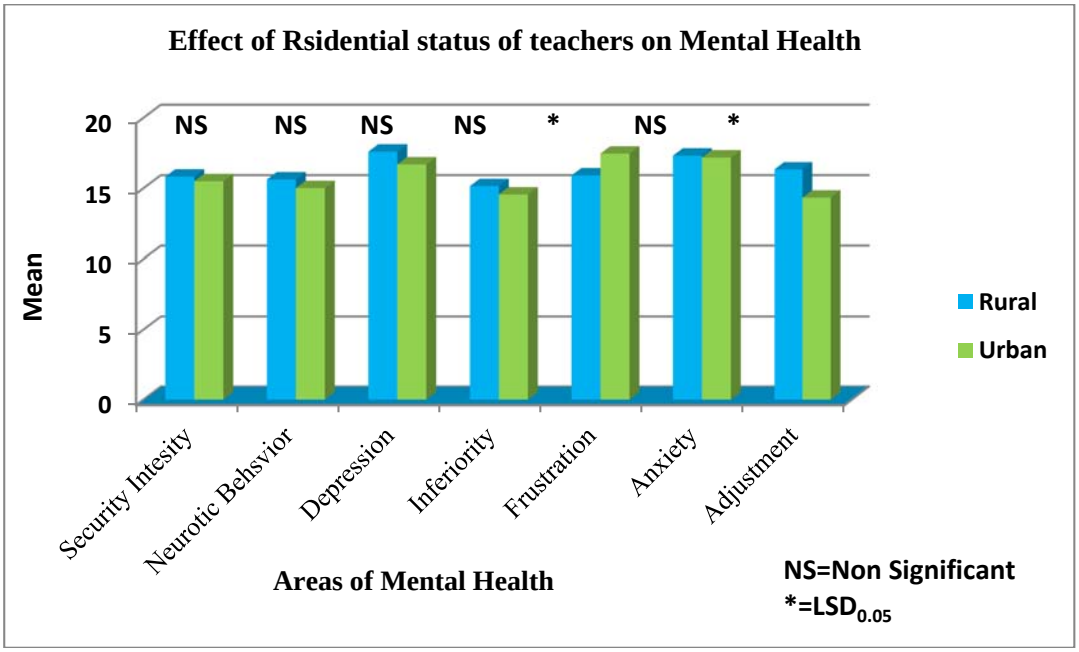

Fig 3: Mental Health Score in relation to Residential status of Respondents

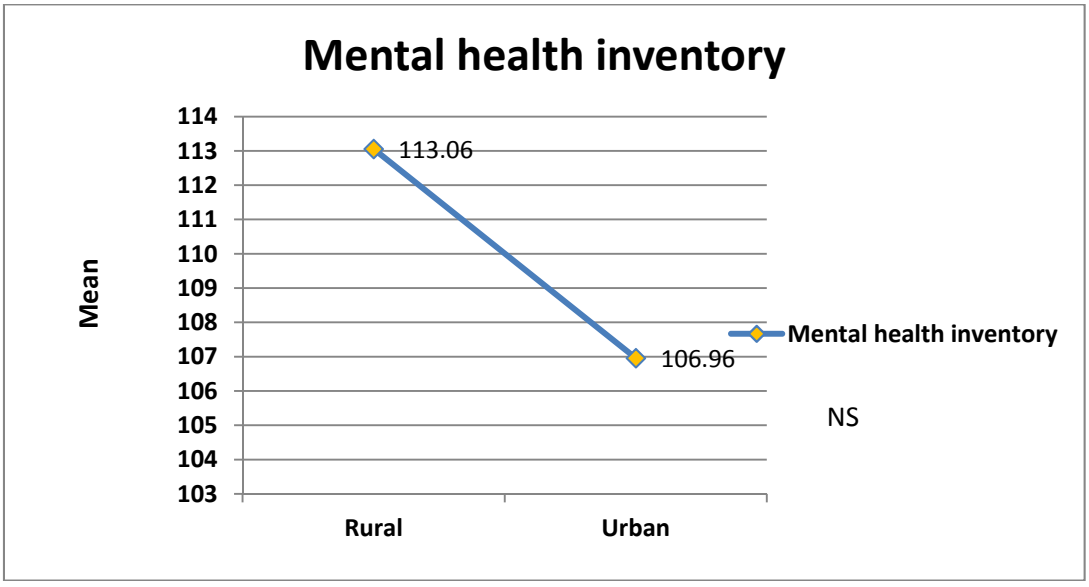

Fig 4: Impact of Residential Status on the Mental Health Status of teachers

According to the results as illustrated in Table 4 and Fig. 3, there is hardly any affect of residential status on the mental health of teachers, whether teacher is from rural or urban background, especially areas like Security intensity, neurotic behavior, depression, inferiority, and anxiety, where significance level is non-significant. As per study results indicated, only frustration and adjustment areas are showing some impact at $LSD_{0.05}$. However, when results are judged at total level, no significant values are obtained, and hence said to be non-significant (Fig. 4).

Rural and urban teachers are equally affected by the changes taking place in present time. Scores of different areas of mental health like frustration and adjustment are higher in rural than urban areas.

11.1.3 Mental Health Status of teachers in Private and Government Schools

The difference in mental health scores of government and private school teachers, both male and female is depicted in Table 5 and Fig. 5 and 6.

Table 5: Mental Health Status of teachers in Government and Private Schools

S. No.	Areas	Types of Schools	N	Mean	SD	SEM	t-Test	Significance level
1	Security Intensity	Private	50	15.3673	2.9418	0.4203	-1.019	NS
		Govt.	50	15.9216	2.4887	0.3485		
2	Neurotic Behavior	Private	50	15.1429	3.3665	0.4809	-0.258	NS
		Govt.	50	15.2941	2.4519	0.3433		
3	Depression	Private	50	16.5306	3.6691	0.5242	-1.969	0.01**
		Govt.	50	177059	2.1288	0.2981		
4	Inferiority	Private	50	14.8367	2.6089	0.3727	-0.191	0.01**
		Govt.	50	14.7451	2.1803	0.3053		
5	Frustration	Private	50	15.0612	4.7802	0.6829	-1.504	NS
		Govt.	50	16.2549	2.9856	0.4181		
6	Anxiety	Private	50	15.6122	5.4115	0.7731	-1.405	0.01**
		Govt.	50	16.8039	2.6685	0.3737		
7	Adjustment	Private	50	14.5510	5.7989	0.8284	-2.091	0.01**
		Govt.	50	16.4314	2.7074	0.3791		
	Total	Private	50	106.9592	25.0940	3.5849	-1.507	0.01**
		Govt.	50	112.8235	11.6991	1.6382		

N=Number of male and female, SD=Standard Deviation, SEM=Standard Error Mean, NS=Non significant, **==$LSD_{0.01}$

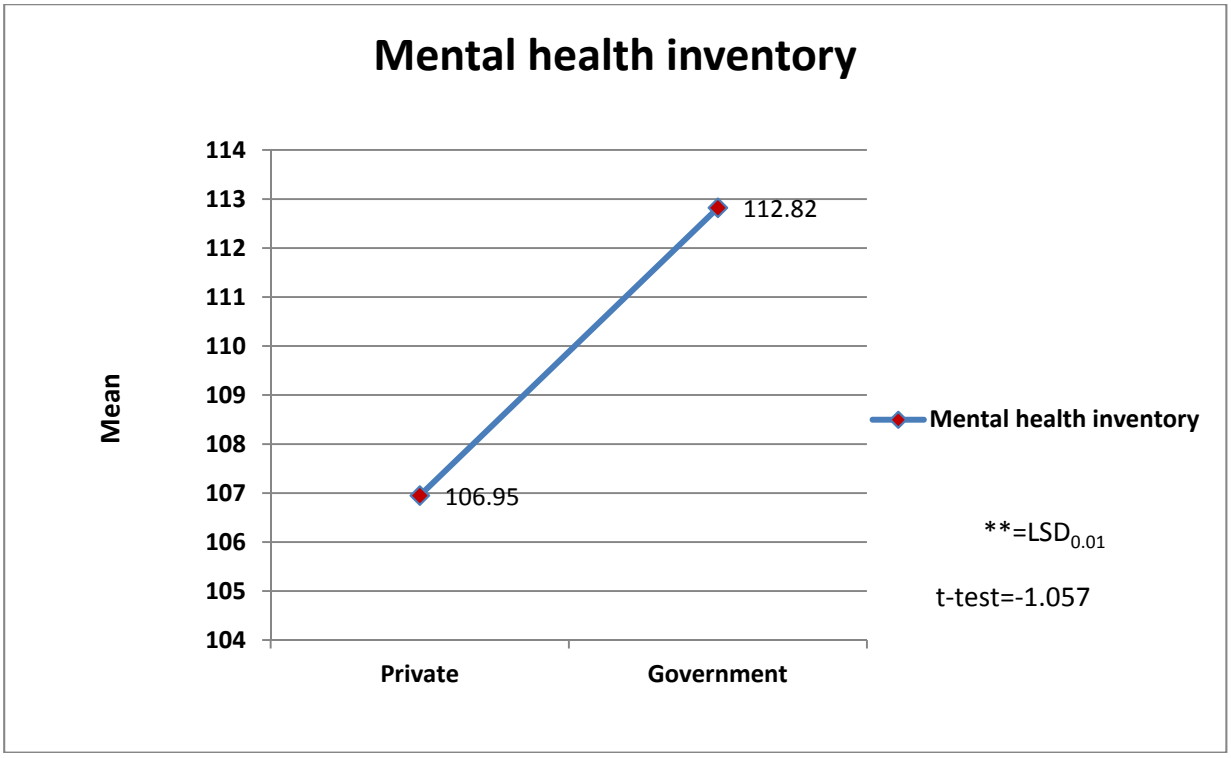

Fig 5: Impact of Type of School on Mental Health Inventory

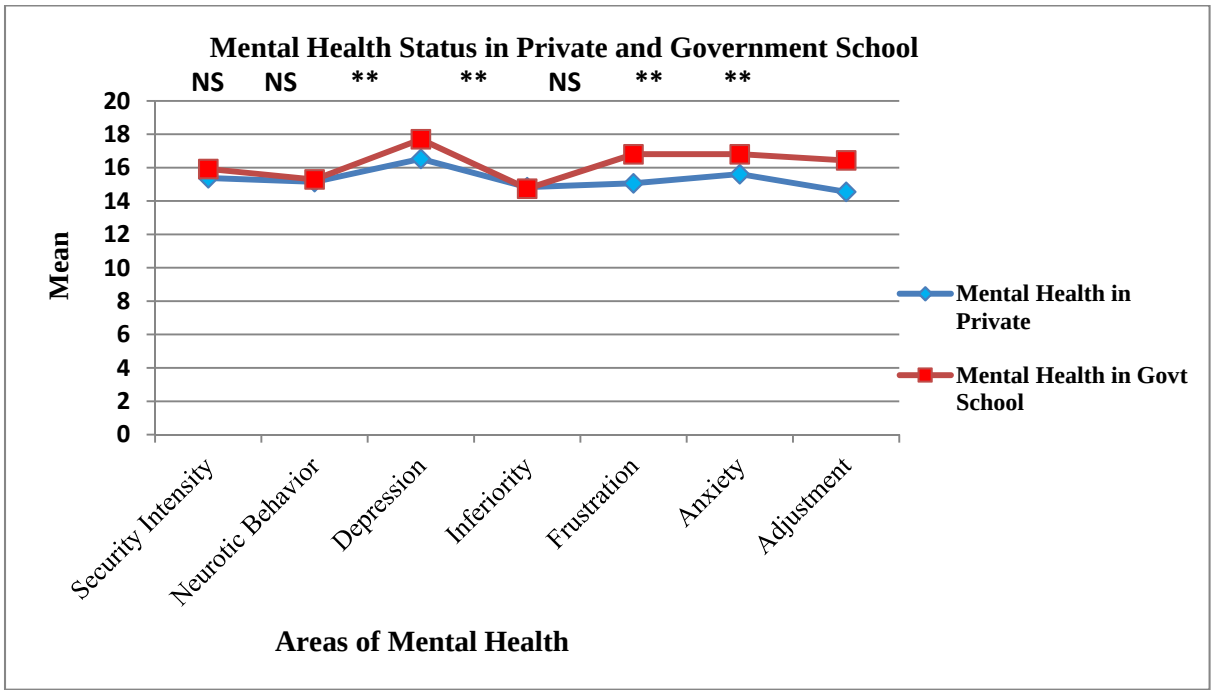

Fig 6: Mental Health Status in Private and Government School

As illustrated in Table 5, Fig. 5 and 6, results reveal that there exists significant difference between two means of schools, government and private school teachers on mental health inventory at both significance levels, *i.e.* $LSD_{0.01}$ and $Lsd_{0.05}$. As per results revelations, government schoolteachers show better mental health inventory scoring in comparison to private school teachers. Different areas of mental health inventory reveal that government schoolteachers are healthier in comparison to private school teachers on areas like depression, inferiority, anxiety, and adjustment. No difference is being drawn in areas like security intensity, neurotic behavior, and frustration.

Presently, teaching faculty works in an environment that requires them to meet multi expectations from students, parents, and the management. They are facing lot of stress and try to achieve target entrusted by the authorities and parents [2]. The issue of mental health of students as well as teachers received considerable attention from various quarters, especially from the management and the parents in private schools.

11.1.4 Marital Status of Teachers to Impact Mental Health Inventory

Table 6: Marital Status of teachers to Impact Mental Health Status of School Teachers

S. No.	Areas	Marital Status	N	Mean	SD	SEM	t-Test	Significance level
1	Security Intensity	Married	50	15.4375	3.0729	0.4435	-0.749	NS
		Unmarried	50	15.8462	2.3630	0.3277		
2	Neurotic Behavior	Married	50	14.6458	3.4977	0.5048	-1.913	0.05*
		Unmarried	50	15.7500	2.1682	0.3007		
3	Depression	Married	50	16.2708	3.6539	0.5274	-2.821	0.05*
		Unmarried	50	17.9231	2.0374	0.2825		
4	Inferiority	Married	50	14.5000	2.7599	0.3984	-1.169	0.01**
		Unmarried	50	15.0577	1.9745	0.2738		
5	Frustration	Married	50	14.9583	4.5427	0.6557	-1.730	NS
		Unmarried	50	16.3269	3.3179	0.4601		
6	Anxiety	Married	50	15.2292	5.5169	0.7963	-2.281	0.01**
		Unmarried	50	171346	2.3266	0.3226		
7	Adjustment	Married	50	14.3125	5.9148	0.8537	-2.588	0.01**
		Unmarried	50	16.6154	2.3941	0.3320		
	Total	Married	50	104.8333	24.5021	3.5366	-2.582	0.01**
		Unmarried	50	114.6731	11.9603	1.6586		

N=Number of male and female, SD=Standard Deviation, SEM=Standard Error Mean, NS=Non significant, **=$LSD_{0.01,}$ *=$LSD_{0.05}$

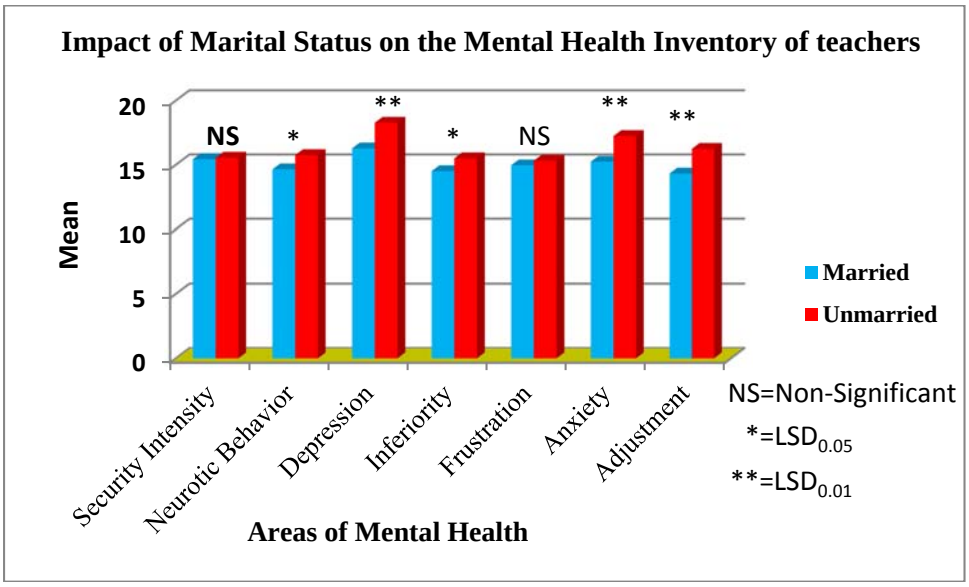

Fig 7: Impact of Marital Status on Mental Health Inventory of School Teachers

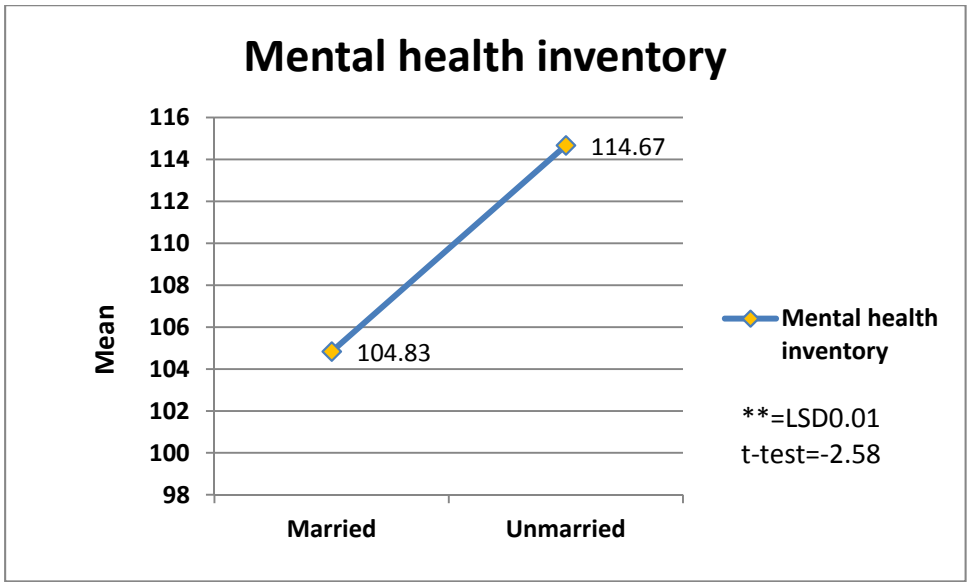

Fig 8: Impact of Marital Status on Mental Health Inventory of School Teachers

There exists significant difference in mental health problems of married and unmarried teachers. The study reveals that married teachers have more mental health problems as compared to unmarried counterpart, Table 6 and Fig.7. Critical study of different areas of mental health inventory as illustrated in Table 6, security intensity and frustration seem to be non-significant, whereas, neurotic behavior and inferiority like areas have been found significant at $LSD_{0.05}$, and depression, anxiety and adjustment being highly significant at $LSD_{0.01}$.

12. Conclusion

1. Study reveals that both male and female teachers have some level of mental health problems. However, when we compare the results, male teachers are found to be healthier than female counterpart is. There are reasons like women bear dual responsibility of discharging duties at family front and professional commitment. To perform both responsibilities successfully and efficiently, may lead to some element of stress and tension, affecting mental health inventory adversely. Stress, which is a general term used for pressure that people are exposed to in life (9) may be defined as the individual harmony effort that the person displays against a stimulant, which has excessive psychological and physical pressure on the person.
2. The study also reveals that the unmarried teachers score higher on mental health inventory scale than married one. This implies that after marriage, teachers bear more family responsibility in addition to professional duties.
3. The study results also reveal that the teachers in government schools feel healthier and safe as compared to counterpart in private schools. To meet multi expectation levels from students, parents, and the management may be the reason. Being under lot of pressure, they are experiencing lot of stress and anxiety due to implementation of target-oriented set up in private schools.
4. The study also reveals that rural and urban schoolteachers face the same level of mental health problems, and no significant difference is visible. There are little facilities in rural areas schools, whereas, urban schools have other reasons for stress, therefore, equally facing mental health problems.

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