

Research Paper

## Influence of Resilience & Psychological Well-being on Teacher's Self-efficacy to be Mental Health Facilitators

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### ABSTRACT

**Background:** Schools play a vital role in addressing and supporting mental health issues among children and adolescents. As frontline observers, teachers are crucial in identifying and assisting students with mental health concerns. However, limited understanding exists regarding how teachers' psychological well-being and resilience influence their perceived efficacy to function as Mental Health Facilitators (MHFs). **Aim:** This study aimed to assess the psychological well-being and resilience of school teachers and their impact on perceived self-efficacy as MHFs. **Design:** A cross-sectional survey involving 404 primary, middle, and high school teachers was conducted in southern Karnataka, India. Measures included socio-demographic data, Connor-Davidson Resilience Scale (CD-RISC-25), Ryff's Psychological Well-Being Scale-18 (RPWBS-18), and Gatekeeper Behavior Scale (GBS). Correlation and multiple regression analysis were applied to analyze the data. **Results and conclusion:** Results indicated moderate to high levels of psychological well-being and resilience among teachers. Adaptability/flexibility and hardiness components of resilience emerged as significant predictors of teachers' preparedness, likelihood, and perceived self-efficacy as MHFs. Personal Growth and Self-acceptance components of psychological well-being were found to have a significant influence on the overall perceived self-efficacy of teachers to be MHFs. Despite these findings, limitations in the study design and reliance on self-report measures are noted. Implications for policy and practice highlight the need for initiatives to promote teachers' well-being and resilience, integrating mental health literacy training into teacher education programs, and fostering supportive work environments to empower them to be MHFs.

**Keywords:** Resilience, Psychological Well-Being, Teachers' Self-Efficacy, Mental Health Facilitator, School Mental Health

Schools are essential for both prevention and support of mental health issues, as childhood and adolescence are crucial times for mental health development (Weare & Nind, 2011). Schools are in a unique position to address these concerns because of the high rate of mental health problems among youth. Schools may do this by recognizing and helping those in need and encouraging resilience and healthy mental health (Weare & Nind,

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2011). Research highlights the necessity of preventive initiatives aimed at addressing emotional problems in children and adolescents, with a focus on proven treatments for depression, improving coping mechanisms, and addressing addictive behaviours related to the use of technology (Garaigordobil, 2023). Nonetheless, more investigation is necessary to maximize teacher participation in mental health services schools provide by working with mental health specialists.

Teachers have a big impact on kids' and teens' mental health because they are frequently the first to notice changes in behaviour, emotions, and academic achievement (Haugen et al., 2003). They have an important role beyond simple observation; they serve as vital intermediaries between students, parents, and mental health experts, making it easier for them to get the support resources they need (Haugen et al., 2003). High levels of occupational stress and burnout harm teachers' mental health (Corrente et al., 2022). To create a pleasant learning environment and encourage successful outcomes for both teachers and students, these obstacles must be addressed. To carry out the responsibilities of Mental Health Facilitators (MHFs), teachers need to be knowledgeable about mental health concerns and resources as well as have strong psychological well-being and resilience (Cansoy et al., 2020; Li, 2023).

There appears to be a lack of understanding regarding how teachers' psychological well-being, resilience, and self-efficacy can impact their effectiveness as mental health facilitators (MHFs). This is particularly true in the Indian context, despite extensive research. Therefore, this study aims to assess the psychological well-being and resilience of school teachers and their influence on their perceived self-efficacy as MHFs.

### **METHODOLOGY**

#### *Objective*

The study aimed at assessing the level of psychological well-being and resilience among school teachers and their influence on the perceived self-efficacy of the teachers to be mental health facilitators.

#### *Study Design & Sample*

The current investigation employed a cross-sectional survey design. The study employed purposive sampling to recruit 404 primary, middle, and high school teachers from different schools in the three southern districts of Karnataka: Mysore, Mandya, and Chamarajanagar. The study's inclusion requirements included that participants must be male or female full-time teachers between the ages of 25 and 50, currently employed at a school, and have at least 3 years of experience. The study excluded teachers who self-reported having severe medical ailments, as well as those with severe mental disorders.

#### *Instruments*

Four measures were used in this study,

- 1. Sociodemographic data sheet:** A customized semi-structured questionnaire was developed to collect information on socio-demographic variables including age, gender, educational institution, level of teaching, economic status, domicile, teaching experience, and any previous medical diagnoses of physical or mental conditions.
- 2. Connor-Davidson Resilience Scale (CD- RISC-25):** The CD-RISC contains 25 items, all of which carry a 5-point range of responses, as follows: not true at all (0), rarely true (1), sometimes true (2), often true (3), and true nearly all of the time (4).

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The scale is rated based on how the subject has felt over the past month. The total score ranges from 0–100, with higher scores reflecting greater resilience. The Connor Davidson Resilience Scale measures several components of resilience: 1) The ability to adapt to change. 2) The ability to deal with what comes along. 3) The ability to cope with stress. 4) The ability to stay focused and think clearly. 5) The ability to not get discouraged in the face of failure. 6) The ability to handle unpleasant feelings such as anger, pain or sadness (Connor & Davidson, 2003). High internal consistency reliability is reported with Cronbach  $\alpha$  0.93 for the 25-item version.

3. **Ryff's Psychological Well-Being Scale – 18 (RPWBS-18):** Ryff's Scales of Psychological Well-Being (RPWB) – a widely- used instrument designed to measure six dimensions of psychological well-being. Developed by psychologist Carol D. Ryff, the 42-item Psychological Wellbeing (PWB) Scale measures six aspects of wellbeing and happiness: autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance (Ryff et al., 2007). Respondents rate how strongly they agree or disagree with 42 statements using a 7-point scale (1 = strongly agree; 7 = strongly disagree) (Ryff & Singer, 1996). Cronbach's alpha and ordinal theta coefficients for the total scale were in acceptable range.
4. **Gatekeeper Behaviour Scale (GBS):** GBS is a unique 11 item scale developed by Albright et.al (2016) assess gatekeeper skills that predict behaviour. It has been based on the three-factor model based on the subscales of preparedness, likelihood, and self-efficacy. It has five- and four-point Likert scale which enables the individuals to gauge their self-efficacy, preparedness and likelihood to be a gatekeeper/ mental health facilitator. The internal consistency of the GBS was very strong ( $\alpha= 0.93$ ). Criterion related validity and convergence validity has also been established.

### ***Procedure***

The study received permission from the scientific and ethics committees of the institute. Surveys were carried out at 45 schools across the three southern districts in Karnataka to seek consent from school administrators. Subsequently, the researchers approached the instructors at each school to present the research, request their involvement, and get their contact details. The instruments were translated into Kannada and then translated back. The Participant Information document, Socio-demographic data sheet, and study instruments were posted onto Google Forms in both English and Kannada versions. The forms were distributed to the teachers, enabling participants to read the information sheet and an informed consent page by clicking on the provided link. Individuals who were willing to participate could give their consent and then could fill out the remaining forms. A total of 404 forms that were completed successfully and fulfilled the inclusion criteria were considered for further analysis.

### ***Ethical Considerations***

The study underwent evaluation for scientific and ethical issues and received approval from the doctorate advisory committee of the Department of Studies in Psychology at the University of Mysore. The participants provided their informed consent. Strict adherence to confidentiality and anonymity was upheld.

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### *Analysis of Data*

The data were analysed using the Statistical Package for Social Sciences (SPSS), Version 26.0. Armonk, New York: IBM Corp. The data was analysed using statistical approaches such as correlation and stepwise multiple regression analysis. The reporting criteria of STROBE (Von Elm et.al., 2007) were adhered to.

## **RESULTS**

Table 1 shows the socio-demographic characteristics of the teachers who participated in the study (N = 404). The sample consisted of 231 male and 173 female teachers with mean age of  $41.17 \pm 6.12$ . The sample comprised of 60% post-graduation qualified teachers (60.9%) and 53.2% them were from rural areas with mean years of teaching years of experience of  $14.80 \pm 6.07$ .

**Table 1: Shows socio-demographic distribution of the participant teachers (N=404)**

| Demographic factors          | Sub variable          | Gender |        | Total |
|------------------------------|-----------------------|--------|--------|-------|
|                              |                       | Male   | Female |       |
| Age                          | < 30 years            | 8      | 17     | 25    |
|                              | 31 – 40 years         | 61     | 75     | 136   |
|                              | 41 – 50 years         | 162    | 81     | 243   |
| Educational Qualification    | Post Graduate         | 145    | 101    | 246   |
|                              | Undergraduate         | 75     | 58     | 133   |
|                              | Diploma & Others      | 11     | 14     | 25    |
| Domicile                     | Rural                 | 150    | 65     | 215   |
|                              | Semi-urban            | 38     | 22     | 60    |
|                              | Urban                 | 43     | 86     | 129   |
| Years of Teaching experience | < 10 years            | 45     | 72     | 117   |
|                              | 11-20 years           | 135    | 85     | 220   |
|                              | > 20 years            | 51     | 16     | 67    |
| Socio-Economic Status        | Lower                 | 08     | 08     | 16    |
|                              | Lower Middle          | 129    | 62     | 191   |
|                              | Upper Middle          | 86     | 90     | 176   |
|                              | Upper                 | 8      | 13     | 21    |
| Past Experience with PwMI    | Yes                   | 10     | 23     | 33    |
|                              | No                    | 221    | 150    | 371   |
| Grades Teaching              | High School           | 188    | 145    | 333   |
|                              | Higher Primary School | 18     | 8      | 26    |
|                              | Primary School        | 11     | 15     | 26    |
|                              | Multi-Level           | 14     | 5      | 19    |

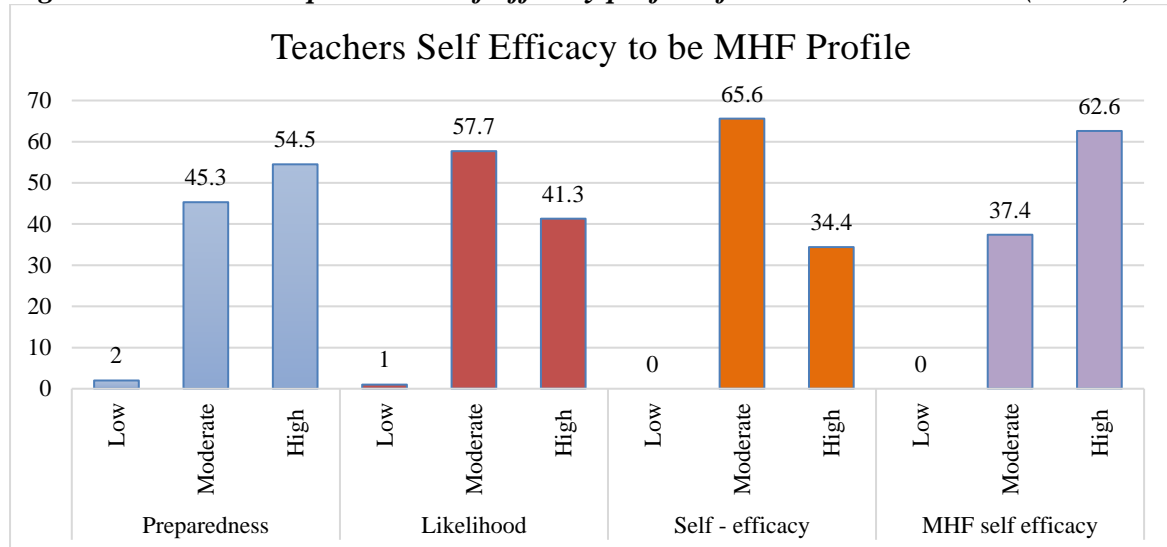
Majority of them (91.8%) reported absence of past experiences with persons with mental illness. About 82.4% of them were high school teachers.

As shown in Fig -1, the teachers showed predominantly moderate to high level of preparedness, likelihood, self-efficacy and overall perceived self-efficacy to be MHFs. Only

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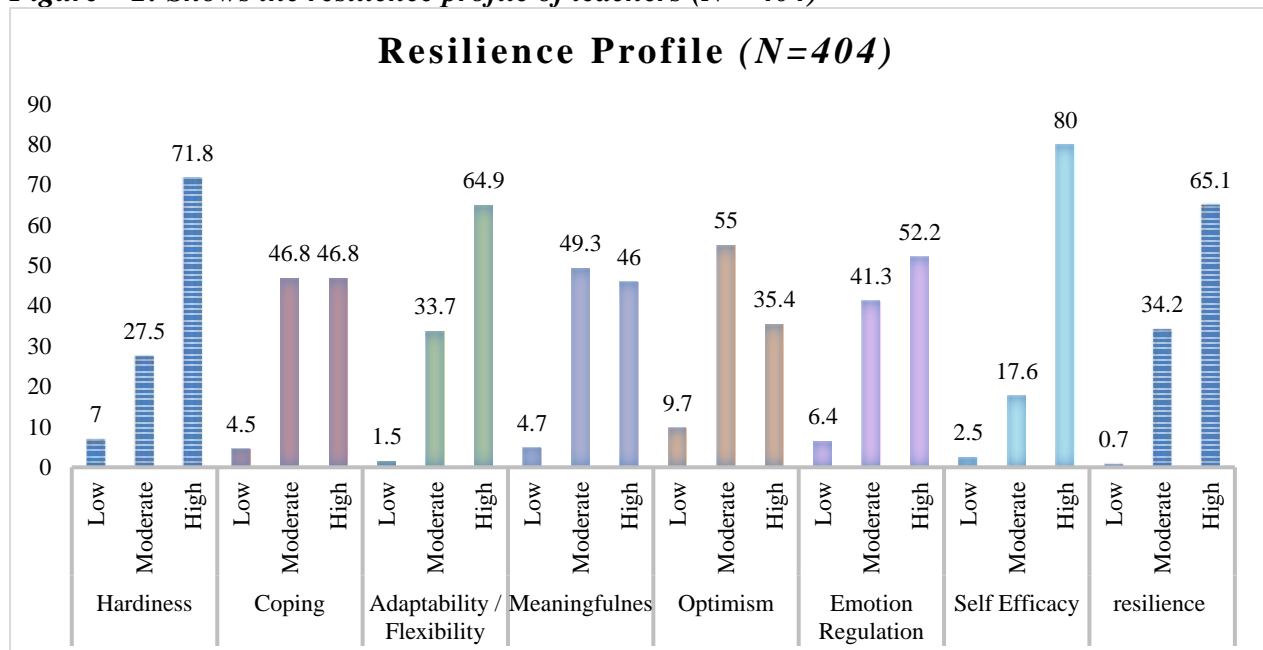
1% of them expressed low likelihood and 2% of them showed low preparedness to be MHFs.

**Figure – 1: Shows the perceived self-efficacy profile of teachers to be MHFs (N=404)**



The figure-2 indicated teachers' predominant moderate to high level of hardiness, coping, adaptability, meaningfulness, optimism, emotion regulation, self-efficacy domains of resilience and also in the overall resilience levels.

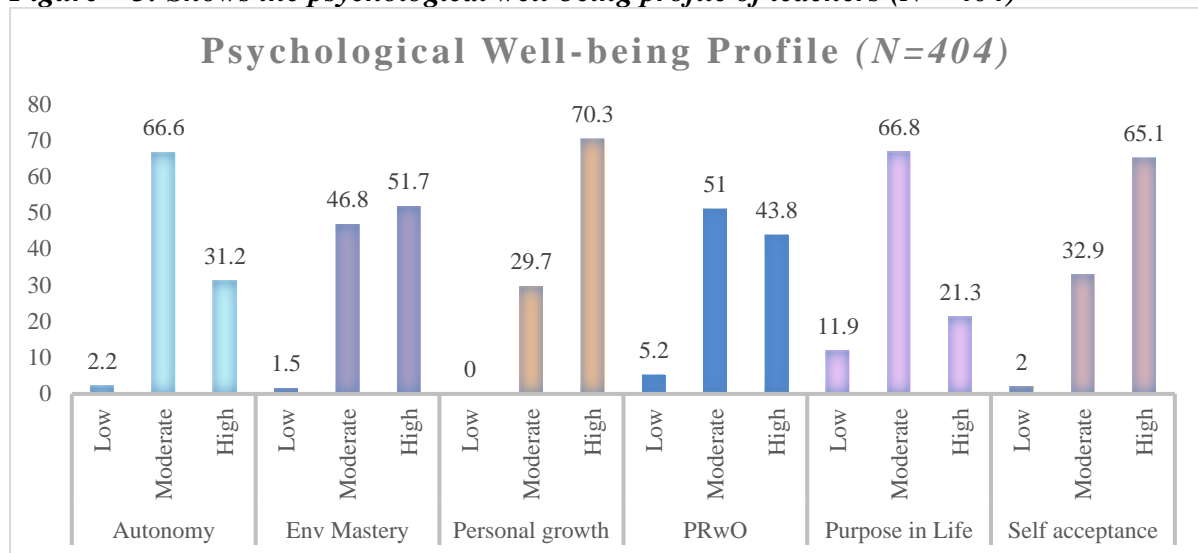
**Figure – 2: Shows the resilience profile of teachers (N = 404)**



Teachers had indicated predominantly moderate to high levels of autonomy, environmental mastery, personal growth, positive relations with others, purpose in life & self-acceptance dimensions of psychological well-being. Unlike the trend there was a mild increase in the percentage of teachers experiencing low purpose in life as shown in figure-3.

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**Figure – 3: Shows the psychological well-being profile of teachers (N = 404)**



*PRwO: Positive Relations with Others.*

**Table 2: Showing the relationship between resilience and self-efficacy to be MHFs among the teachers (N=404)**

| Resilience factors       | Preparedness | Likelihood | Self-Efficacy | GBS total |
|--------------------------|--------------|------------|---------------|-----------|
|                          | <i>r</i>     | <i>r</i>   | <i>r</i>      | <i>r</i>  |
| Hardiness                | .197**       | .158**     | .340**        | .281**    |
| Coping                   | .141**       | .094       | .218**        | .188**    |
| Adaptability/flexibility | .244**       | .143**     | .249**        | .273**    |
| Meaningfulness           | .180**       | .154**     | .197**        | .218**    |
| Optimism                 | .107**       | .080       | .179**        | .150**    |
| Emotion Regulation       | .095         | .091       | .215**        | .157**    |
| Self-efficacy            | .141**       | .093       | .301**        | .218**    |
| Resilience Total         | .208**       | .156**     | .319**        | .280**    |

\*\* Correlation is significant at the 0.01 level (2 tailed)

Significant positive correlations were observed between most of the variables of resilience and teachers' perceived self-efficacy to be MHFs except relationship between optimism and likelihood. Emotion regulation was not significantly related with preparedness & likelihood, however it was positively correlated with Self-efficacy. Further overall Self-efficacy was not associated with likelihood, however it was positively associated with preparedness and perceived self-efficacy to be MHFs.

Further Stepwise multiple regression analysis was performed to find those resilience variables that were independently associated with teachers' perceived self-efficacy to be mental health facilitators. Preparedness of the teachers to be MHFs was found to be positively influenced by Adaptability/Flexibility (b=.244, p = .000). Likelihood of teachers to be carrying out MHF related activities was found to be influenced by their Hardiness (b=.158, p = 001). Perceived Self-Efficacy of Teachers to be MHFs was significantly influenced positively by Hardiness (b= .340; p = 000) Hardiness and Adaptability/Flexibility significantly predicted positively the overall perceived self-efficacy of teachers to be MHFs (b = .281; p=000 & b=.308, p=000).

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**Table 3: Showing the relationship between psychological well-being and self-efficacy to be MHFs among the teachers (N=404)**

| PWB factors                    | Preparedness | Likelihood | Self-Efficacy | GBS total |
|--------------------------------|--------------|------------|---------------|-----------|
|                                | <i>r</i>     | <i>r</i>   | <i>r</i>      | <i>r</i>  |
| Autonomy                       | .072         | .074       | .074          | .068      |
| Environmental Mastery          | .163**       | .101**     | .121**        | .168**    |
| Personal growth                | .202**       | .210**     | .184**        | .239**    |
| Positive relations with Others | .157**       | .074       | .167**        | .175**    |
| Purpose in Life                | -.028        | -.029      | .049          | -.006     |
| Self- Acceptance               | .195**       | .103**     | .168**        | .206**    |

Most of the dimensions of psychological well-being except Autonomy and Purpose in Life had been found to be significantly associated with the overall perceived self-efficacy of teacher's to be MHFs and its sub-domains. Positive relations with others dimension had been positively associated with preparedness, self-efficacy and overall self-efficacy of teachers to be MHFs but no significant relationship was found with likelihood.

Further Stepwise multiple regression analysis was performed to find those psychological well-being variables that were independently associated with teachers' perceived self-efficacy to be mental health facilitators. Preparedness of the teachers to be MHFs was found to be positively influenced by Personal Self Growth (b=.202, p = .000) & Self-Acceptance (b = .234, p = .000). Likelihood of teachers to be carrying out MHF related activities was found to be influenced by their Personal Growth (b=.210, p = 000). Perceived Self-Efficacy of Teachers to be MHFs was significantly influenced positively by Personal Growth (b = .184; p = 000) and Self- Acceptance (b=.208; p = 000) variables of psychological well-being. Personal Growth & Self-Acceptance significantly predicted positively the overall perceived self-efficacy of teachers to be MHFs (b = .239; p=000 & b=.263, p=000).

**Major Findings**

- The participant teachers exhibited moderate to high levels of psychological well-being, resilience and self-efficacy to become MHFs.
- Adaptability/flexibility and hardiness factors of resilience emerged as significant predictors of teachers' preparedness, likelihood, and perceived self-efficacy as MHFs.
- Personal Growth and Self-acceptance components of psychological well-being were found to have significant influence on overall perceived self-efficacy of teachers to be MHFs.

**DISCUSSION**

Schools hold great responsibility in addressing and supporting mental health issues among the youth, given their unique position and the high prevalence of such issues. Teachers who have close and frequent interactions with their students are typically among the first to identify changes in behavior and academic performance that may signal underlying mental health concerns (Weare & Nind, 2011; Haugen et al., 2003). Teachers need to have the necessary resources and skills to effectively address the challenges that exist. This requires a careful assessment of their psychological resources and ability to endure and succeed in the face of difficulties. It's also important to consider interventions that can strengthen these

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resources to ensure that they continue to thrive. The present study aimed to investigate the psychological well-being and resilience of school teachers and how these factors relate to their perceived self-efficacy as Mental Health Facilitators (MHFs).

The study revealed that teachers exhibited predominantly moderate to high psychological well-being and resilience levels. This is consistent with prior research indicating that teachers' well-being can influence their effectiveness in the classroom (Corrente et al., 2022). However, it is noteworthy that there was a mild increase in the percentage of teachers experiencing low purpose in life, suggesting a potential area of concern that warrants further exploration and support. The findings suggest a positive relationship between teachers' psychological well-being, resilience, and their perceived self-efficacy as MHFs. Specifically, adaptability/flexibility and hardiness emerged as significant predictors of teachers' preparedness, likelihood, and perceived self-efficacy to be MHFs. This highlights the importance of enhancing teachers' resilience and psychological well-being to empower them in their role as mental health facilitators (Cansoy et al., 2020; Li, 2023).

Despite the valuable insights provided by this study, several limitations should be acknowledged. Firstly, the cross-sectional design limits the ability to establish causal relationships between variables. Longitudinal studies would offer a more comprehensive understanding of the dynamics between teachers' psychological well-being, resilience, and their efficacy as MHFs. Additionally, the reliance on self-report measures may introduce response bias, and future research could benefit from multi-method approaches to validate the findings. The findings have important implications for policy and practice in education and mental health support. Schools should prioritize initiatives aimed at promoting teachers' psychological well-being and resilience through professional development programs and supportive work environments. Moreover, integrating mental health literacy training into teacher education programs can better equip educators to recognize and respond to students' mental health needs effectively.

### **CONCLUSION**

In conclusion, this study sheds light on the psychological well-being and resilience of teachers and their influence on their perceived self-efficacy as MHFs. The findings underscore the importance of supporting teachers' mental health to enhance their capacity to address the growing mental health needs of students. Schools can play a pivotal role in promoting positive mental health outcomes among children and adolescents by fostering a resilient and well-supported teaching workforce.

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### **Conflict of Interest**

The author declared no conflict of interest.

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