

Quality of Life and Stress as Correlate to Mental Health among Teachers: Basis for a Wellness Program

Archie B. Sunga

Polytechnic University of the Philippines

Sta. Mesa, Manila, Philippines

Abstract - *The main purpose of the study is to determine the relationship between quality of life, stress, and mental health among teachers which will be used as a basis for a wellness program. Stratified random sampling was used as the sampling method among full-time private school teachers (n=181) in Malolos, Bulacan. The World Health Organization Quality of Life – BREF (WHOQOL-BREF), Teacher Stress Inventory (TSI) – Revised, and Mental Health Inventory (MHI) were employed as measures of the study. Results revealed that teachers have moderate satisfaction in terms of their physical health, psychological health, and environment. Moreover, high stress was observed with regards to their role and task area. Other findings showed that they have few occurrences of unfavorable symptoms in anxiety and general positive affect. In terms of relationships, significant negative correlations were observed between the domains of quality of life and mental health subscales ranging from $r=-.173$ to $r=-.545$. On the other hand, significant positive correlations were observed between the stress subscales and mental health subscales ranging from $r=.147$ to $r=.405$. It is concluded that there is a significant relationship between quality of life and mental health of the respondents. In addition, there is a significant relationship between stress and mental health of the respondents. Based on the results, a proposed wellness program for the respondents was developed.*

Keywords - quality of life, stress, mental health, teachers

INTRODUCTION

Mental health has been a popular news and issue in the Philippines. It has been widely used and promoted through different advertisements and advocacies. Through these, many citizens had been aware and observant of the current situation of mental health in the country. Moreover, a lot of research have been conducted about the mental health of different groups like students, overseas Filipino workers, health workers, professionals, laborers, and many more.

The Republic Act No. 11036 or most commonly known as the Mental Health Act of 2018 has a goal to create a national mental health policy for enhancing the mental health situation by promoting psychological health services for the Filipino people [1]. To regulate the act, the Department of Health (DOH), together with the National Center for Mental Health (NCMH),

signed the implementing rules and regulations of the act last January 23, 2019 [2]. It highlights the balanced delivery of mental health services (community-based and hospital-based) with more focus on persons with psychiatric, neurologic, and psychosocial health needs, as well as overcoming society's attitudinal challenges that they may live free from stigma and discrimination.

Mental health is the state of well-being where an individual realizes his or her potential, can cope with the normal stresses of life, able to work productively and fruitfully, and has the capacity to contribute to the community [3]. It should be given importance because mental health can have a stronger effect on the physical health of a person [4]. It can be stated that mental health is also important as physical health. A person can function properly if he or she has good

mental health and it can have massive effects on everyday functioning.

On the other hand, a factor that can be related to mental health is quality of life. It is the perception of the position in life of a person with regards to his or her culture and value systems where he or she lives and in relation to the goals, expectations, standards, and concerns [5]. Furthermore, it is a factor that mostly contributes to the functioning and well-being of a person [6]. It was revealed that people who reported having lower quality of life are those with mental health problems [7]. Specifically, it was concluded that the following were factors in lower quality of life that affects people with mental health problems: sense of not being part of society, distress, lack of control, choice and autonomy, low self-esteem and confidence, diminished activity, and sense of hopelessness and demoralization [7].

Another factor that can be related to mental health is stress. It can be a factor that mostly affects the functioning of an individual in his or her academics, relationships, work, and other. It is any uncomfortable emotional experience accompanied by any predictable physiological, behavioral, and biochemical changes [8]. Occupational stress, also known as the stress at work, occurs when there is an imbalance between the demands of the workplace and the ability of an individual to carry out and complete such demands [9]. Stress was also proven to be a predictor of worse mental health [10].

Teachers have many experiences in life which include their quality of life, stress, and mental health. With regards to their quality of life, a study among teachers indicated that they relate the quality of life with their personal and professional satisfaction [11]. Moreover, it is mentioned in the study that their perception of quality of life is not about just having a good salary, stable relationships, owned or rented house but also needs in their workspace, satisfaction and peace in the family environment, accessibility, physical health, resilience, financial peace of mind, and security. These are some factors that teachers have perceived as their needs to have a satisfactory quality of life.

On the other hand, teacher stress can be differentiated to other types of stress. It is any unpleasant emotions experienced by the teachers such as the following: tension, anxiety, frustration, anger, and depression, resulting from the aspects of their work as teachers [12]. It was reported that this stress can lead to burnout which is related to emotional tension, tendencies to refuse activity in situation of failure, feelings of inefficiency at work, and dissatisfaction with their career growth [13]. With this, the mental health of teachers can be affected. Moreover, stress experienced by teachers can be associated with their work or occupation. It was reported that stress can be one of the factors that affects a teacher, especially their teaching performance to their students [14]. These could be a stress from their management, role in the organization, teaching, etc. The study of stress among teachers have a lot in common, but mostly focused on its effect in their performance.

In their mental health, psychosomatic and mental disorders are very common in teachers as well as fatigue, exhaustion, headache, and tension [15]. Furthermore, teaching was reported to have increased risk of poorer mental health among its practitioners and could lead to mental health problems as compared to other occupations [16].

OBJECTIVES OF THE STUDY

Mental health problems of teachers are issues that need to be addressed since it is vital for the learning of their students. Moreover, it should be a priority since their profession is a very difficult and challenging job. Like others, they cannot function well in their occupation if they have low or poor mental health. This could have a huge effect on their life, specifically their overall well-being as a person which includes their everyday physical, emotional, behavioral, and cognitive functioning.

Factors that have relationships with mental health should be prioritized. To be more specific, quality of life and stress, which were frequent experiences of teachers, can possibly have a relation to their mental health. In this

manner, the focus of this study aims to investigate these factors. In particular, this research paper studies the relationship of quality of life and stress to the mental health of teachers. By so stating, relationships of each variable will be conducted to prove if these are significant. Moreover, the findings will serve as a framework in proposing a wellness program for the teachers.

Malolos, Bulacan. Standardized questionnaires with written permission from the authors were used to obtain the data needed in the study. Participants answered three questionnaires that obtained information on their quality of life, stress, and mental health. Specifically, instruments used in the study were the World Health Organization Quality of Life – BREF [17], the Teacher Stress Inventory Revised by Robert Schutz and Bonita Long [18], and the Mental Health Inventory by Clairice Veit and John Ware [19].

MATERIALS AND METHOD

The method used in the study was the descriptive-correlational design. The sampling method used was the stratified random sampling. This sampling method was used to ensure that every teacher in the subgroups were adequately represented. The respondents of the study were one hundred eighty-one (181) full-time teachers from pre-elementary to the senior high school department from three private schools in

The data was encoded and entered into the computer software Microsoft Office Excel and Statistical Package for the Social Sciences (SPSS). Consultation with the Institute for Data and Statistical Analysis (IDSA) at Polytechnic University of the Philippines, Sta. Mesa, Manila Campus was availed of for the accurateness of the statistical treatment. Mean and Pearson Product-Moment Correlation were used as statistical treatment in the study.

RESULTS AND DISCUSSION

Table 1. Summary Table on the Quality of Life of the Respondents

Quality of Life Domains	Grand Mean	Verbal Interpretation	Rank
Physical Health	3.32	Moderate	2
Psychological Health	2.89	Moderate	4
Social Relationships	3.65	Satisfied	1
Environment	3.27	Moderate	3

Legend: Scale for interpreting the computed mean:
 4.50 – 5.00 = Very satisfied / Extreme amount / Completely
 3.50 – 4.49 = Satisfied / Very much / Mostly
 2.50 – 3.49 = Neutral / Moderate amount / Moderately
 1.50 – 2.49 = Dissatisfied / A little / Seldom
 1.00 – 1.49 = Very dissatisfied / Not at all

Based on the table, social relationships domain was ranked number one among the respondents with the highest mean score of 3.65 which can be interpreted as satisfied. It was followed by moderate satisfaction level from physical health and environment with mean scores of 3.32 and 3.27 respectively. Psychological health was the lowest among the domains in terms of mean score with 2.89,

verbally interpreted as moderately satisfied. Moderate satisfaction can be described as an average amount of satisfaction in a particular domain while satisfied interpretation indicated a good amount of satisfaction among the respondents. Specifically, the respondents have an average amount of satisfaction with their physical health, psychological health, and environment. On the other hand, they have good

satisfaction with their social relationships.

The result was different from the result of a study where respondents reported lower satisfaction in psychological health, physical health, environment, and social relationships, [20]. Moreover, results from a previous study among the sample of secondary teachers revealed that social relationships domain was also the highest, followed by physical health. Results

from psychological health and environment domains were different [21]. In addition, teachers-respondents from another study reported negative scores in quality of life [22]. Moreover, a possible reason for having a moderate quality of life of teachers was because they received benefits such as health care, scholarships, trainings and seminars, and housing benefits that could improve their quality of life [23].

Table 2. Summary Table on the Level of Stress of the Respondents

Stress Subscales	Grand Mean	Verbal Interpretation	Rank
Role ambiguity	2.45	Rarely stressed	5
Role stress	3.69	Often stressed	1
Organizational management	2.60	Sometimes stressed	4
Job satisfaction	2.35	Rarely stressed	6
Life satisfaction	2.67	Sometimes stressed	3
Task stress	3.63	Often stressed	2
Supervisory support	2.17	Rarely stressed	7

Legend: Scale for Interpreting the Mean Values:
 1.00 - 1.49 = Never; 1.50 - 2.49 = Rare; 2.50 - 3.49 = Sometimes; 3.50 - 4.49 = Often; 4.50 - 5.00 = Always

Based on the results, role stress has the highest mean score with 3.69 which was verbally interpreted as often stressed. Also, this was the subscale of stress that mostly affects the teachers based on the ranking. It is closely followed by task stress with a mean score of 3.63, interpreted as often stressed. In this manner, the first and second subscale were the highest level of stress that the respondents have experienced. Life satisfaction and organizational management are ranked number 3 and 4, which have mean scores of 2.67 and 2.60 respectively, with a verbal interpretation of sometimes stressed. This infers that these subscales affect the teachers for some of the time. Lastly, role ambiguity, job satisfaction, and supervisory support have mean scores of 2.45, 2.35, and 2.17 respectively, which were interpreted as rarely stressed. The last three

subscales were the least experienced of stress by the respondents.

Different studies observed different results regarding the stress levels of the teachers. The result previous studies stated that teachers experienced an average level of stress [14] [24]. Normal stress level was also observed [25] while some studies concluded that teachers have low stress levels [26] [27]. Contrary to other results, some teachers reported that they were highly stressed [28] [29]. Specifically, the result was different from a previous study where the seven subscales of stress were measured in the study. It was concluded that the highest among the stress subscales were supervisory support and organizational management with mean scores of 3.81 and 3.73 respectively. On the other hand, the lowest were role stress and life satisfaction with mean scores of 3.04 and 3.01 respectively [30].

Table 3. Summary Table on Mental Health Profile of the Respondents

Mental Health Subscales	Grand Mean	Verbal Interpretation	Rank
Anxiety	3.51	Few Occurrences of Unfavorable Symptom	2

Depression	3.00	Few Occurrences of Favorable Symptom	4
Loss of Behavioral or Emotional Control	2.98	Few Occurrences of Favorable Symptom	5
General Positive Affect	3.53	Few Occurrences of Unfavorable Symptom	1
Emotional Ties	3.05	Few Occurrences of Favorable Symptom	3

Legend: Scale for Interpreting the Mean Values:

1.00 to 1.49
1.50 to 2.49
2.50 to 3.49
3.50 to 4.49
4.50 to 5.49
5.50 to 6.00

Frequent Occurrences of Favorable Symptom
Some Occurrences of Favorable Symptom
Few Occurrences of Favorable Symptom
Few Occurrences of Unfavorable Symptom
Some Occurrences of Unfavorable Symptom
Frequent Occurrences of Unfavorable Symptom

According to the table, the general positive affect and anxiety were the highest mental health subscales among the respondents with mean scores of 3.53 and 3.51 respectively. These were interpreted as having few occurrences of unfavorable symptom. It was followed by emotional ties, depression, and loss of behavioral or emotional control with mean scores of 3.05, 3.00, and 2.98. These were interpreted as having few occurrences of favorable symptom. It was revealed from the results that unfavorable symptoms of anxiety and general positive affect were experienced by the respondents. This explains that the teachers experience feeling nervous and worried as well as having concerns with being calm, happy, and relaxed.

With regards to their mental health, the result was supported by previous studies where teachers have mental health problems [16] [31]. However, it was reported that the worse mental health problem of teachers is not conclusive [32] while other concluded that teachers have good high mental health [33]. It is also comparable to a previous study which concluded that anxiety has high negative state, depression as low negative state, and loss of behavioral or emotional control as low negative state. However, it differs in terms of general positive affect where it was interpreted as moderate positive state and emotional ties as high positive state [34].

Table 4. Correlation Matrix between the Domains of Quality of Life and Mental Health Subscales

Quality of Life Domains	Mental Health Subscales				
	Anxiety	Depression	Loss of Behavioral or Emotional Control	General Positive Affect	Emotional Ties
Physical Health	$r = -.432^{**}$ $p < .000$	$r = -.275^{**}$ $p < .000$	$r = -.173^{*}$ $p < .020$	$r = -.135$ $p < .071$	$r = .070$ $p < .350$
Psychological Health	$r = -.361^{**}$ $p < .000$	$r = -.541^{**}$ $p < .000$	$r = -.545^{**}$ $p < .000$	$r = -.488^{**}$ $p < .000$	$r = -.328^{**}$ $p < .000$
Social Relationships	$r = -.089$ $p < .232$	$r = -.282^{**}$ $p < .000$	$r = -.248^{**}$ $p < .001$	$r = -.255^{**}$ $p < .001$	$r = -.364^{**}$ $p < .000$
Environment	$r = -.300^{**}$ $p < .000$	$r = -.353^{**}$ $p < .000$	$r = -.313^{**}$ $p < .000$	$r = -.224^{**}$ $p < .002$	$r = -.097$ $p < .194$

** Significant at the $p < .01$

* Significant at the $p < .05$

Highlighted are significant correlations

It was revealed that physical health has a moderate negative correlation with anxiety while

weak negative correlations with depression and loss of behavioral or emotional control. This indicates that being dissatisfied with the physical health is related to occurrences of unfavorable symptoms in anxiety, depression, and loss of behavioral or emotional control.

In terms of psychological health, it has negative correlations with all the mental health subscales. Specifically, it has a moderate negative correlation with depression, loss of behavioral or emotional control, and general positive affect while a weak negative correlation with anxiety and emotional ties. It reveals that being dissatisfied with psychological health of the respondents is related to occurrences of unfavorable symptoms in depression, anxiety, loss of behavioral or emotional control, general positive affect, and emotional ties.

Weak negative correlations were also observed between social relationships and depression, loss of behavioral and emotional control, general positive affect, and emotional ties. This indicates that having dissatisfaction with the social relationships of the respondents is related to occurrences of unfavorable symptoms in depression, loss of behavioral or emotional control, general positive affect, and emotional ties.

Lastly, environment domain has weak negative correlations with anxiety, depression, loss of behavioral and emotional control, and general positive affect. This reveals that dissatisfaction in the environment domain of the respondents is related to occurrences of unfavorable symptoms in anxiety, depression, loss of behavioral or emotional control, and general positive affect.

The results were comparable to different studies. In terms of physical health, a study concluded that fatigue manifestation by teachers was correlated with depression [35]. It was also concluded that having poor physical health was associated with depression [36]. Moreover, a study reported that having a good physical health was related to having good mental health [37].

Studies concluded that psychological health was given a point of attention among teachers since high level of mental health have

been found [38]. It also concluded that emotional manifestations and depression were correlated with each other while behavioral manifestations and depression were not [35]. A study also concluded that emotion regulation activity was negatively correlated to depression and anxiety [39]. Another study supported the current result where low self-esteem, identity issue, and poor eating habits, which were psychological health items, have congruence with mental health symptoms. These symptoms were excessive fear, strong feelings of anger, worry or anxiety, inability to cope with daily problems and activities, confused thinking, dramatic changes in sleep or eating habits, and depressive feelings [40].

With regards to social relationship, a study concluded that social support was negatively correlated with depression but has no correlation with anxiety [41]. Fewer opportunities to discuss with colleagues is also one of the causes of teacher isolation [42]. Another study concluded that there is positive relationship between good social intelligence, the ability to interact in social functions of daily life, to good mental health [43]. Moreover, a teacher who was isolated have a negative impact on his or her behavior and energy levels which could disturb the mental health [42].

Lastly, it was concluded from other study that good relationship that promoted well-being was found highest [44]. The result in the environment domains was supported by previous study where anxiety and depression were higher among teachers with inadequate salary [45]. Moreover, it reported that benefits could improve the well-being of teachers, which explained the negative correlation [23]. It was also concluded that good leisure time has a relationship with good mental health [37]. It is different from another study where inadequate salary has no correlation with anxiety [44].

There were several significant correlations obtained in the study. These clearly stated that there is a significant relationship between quality of life and mental health of the respondents. It is associated to the result of a previous study where it was reported that long

term dissatisfaction linked with living alone, reduced ability to work, having no children, and

poor health and economic status were associated with poorer mental health [46].

Table 5. Correlation Matrix between Stress Subscales and Mental Health Subscales

Stress Subscales	Mental Health Subscales				
	Anxiety	Depression	Loss of Behavioral or Emotional Control	General Positive Affect	Emotional Ties
Role Ambiguity	$r = .147^*$ $p < .048$	$r = .274^{**}$ $p < .000$	$r = .396^{**}$ $p < .000$	$r = .321^{**}$ $p < .000$	$r = .362^{**}$ $p < .000$
Role Stress	$r = .009$ $p < .910$	$r = .187^*$ $p < .012$	$r = .169^*$ $p < .023$	$r = .142$ $p < .056$	$r = .185^*$ $p < .013$
Organizational Management	$r = .118$ $p < .114$	$r = .011$ $p < .888$	$r = -.048$ $p < .517$	$r = .096$ $p < .196$	$r = -.139$ $p < .062$
Job Satisfaction	$r = .152^*$ $p < .041$	$r = .272^{**}$ $p < .000$	$r = .341^{**}$ $p < .000$	$r = .393^{**}$ $p < .000$	$r = .189^*$ $p < .011$
Life Satisfaction	$r = .202^{**}$ $p < .006$	$r = .385^{**}$ $p < .000$	$r = .383^{**}$ $p < .000$	$r = .405^{**}$ $p < .000$	$r = .329^{**}$ $p < .000$

Continuation of Table 5

Stress Subscales	Mental Health Subscales				
	Anxiety	Depression	Loss of Behavioral or Emotional Control	General Positive Affect	Emotional Ties
Task Stress	$r = .124$ $p < .097$	$r = .332^{**}$ $p < .002$	$r = .318^{**}$ $p < .000$	$r = .320^{**}$ $p < .000$	$r = .317^{**}$ $p < .000$
Supervisory Support	$r = .078$ $p < .298$	$r = .058$ $p < .441$	$r = .072$ $p < .338$	$r = .198^{**}$ $p < .007$	$r = .141$ $p < .058$

** Significant at the $p < .01$

* Significant at the $p < .05$

Highlighted are significant correlations

Weak positive correlations were observed with role ambiguity and all the subscales of mental health of the respondents. This indicates that higher stress in role ambiguity is related to occurrences of unfavorable symptoms in anxiety, depression, loss of behavioral or emotional control, general positive affect, and emotional ties.

A weak positive correlation was also observed in role stress with depression, loss of behavioral or emotional control, and emotional ties. This reveals that higher stress experienced by the respondents in the role stress is related to the occurrence of unfavorable symptoms in

depression, loss of behavioral or emotional control, and emotional ties.

Job satisfaction has weak positive correlation with all the subscales of mental health of the respondents. It indicates that higher stress in job satisfaction is related to the occurrences of unfavorable symptoms in anxiety, depression, loss of behavioral or emotional control, general positive affect, and emotional ties.

In the life satisfaction subscale, there is a weak positive correlation with all the subscales of mental health except in general positive affect, where moderate positive correlation was observed. This reveals that higher stress in life

satisfaction is related to occurrences of unfavorable symptoms in anxiety, depression, loss of behavioral or emotional control, general positive affect, and emotional ties.

Moreover, weak positive correlations were observed between task stress and the subscales of mental health except anxiety. This indicates that a higher stress experience by the respondents is related to occurrences of unfavorable symptoms in depression, loss of behavioral or emotional control, general positive affect, and emotional ties.

Lastly, supervisory support has a weak positive correlation with general positive affect. This describes that higher stress in supervisory support is related to the occurrence of unfavorable symptoms in general positive affect.

The correlations between stress and mental health were comparable to different studies. In role ambiguity, the result was supported by different studies. A study concluded that role ambiguity is related to depression [47]. Another study showed that role ambiguity was positively related to depression and anxiety. It also stated that experiencing emotional states, such as role ambiguity, increases the vulnerability that has the tendency to develop major mental health problems [39].

In terms of role stress, a report concluded that excessive workloads were causes of mental health problems among teachers [31]. On the contrary, the result of the current study was in contrast to the result of previous study where excessive take home work and number of activities have consequences of irritability and anxiety [44].

The result in job satisfaction was supported by a study where it was concluded that highly job satisfied teachers were more stable in

their mental health than the lowly job satisfied [48]. Moreover, it was concluded in another study that teachers who were satisfied with their job had good mental health [49]. A positive correlation between job satisfaction and mental health was also observed [50].

Life satisfaction results were supported where life satisfaction has a significant positive relationship to mental health [51]. Another study revealed that having a high life satisfaction or being satisfied in life can be interpreted as having a positive mental health state [34].

Task stress was correlated to the majority of the subscales of mental health. It means that higher task stress is related to higher unfavorable symptoms of mental health. This is closely related to previous study where student behavior was found to be a predictor of depression [52]. Another study concluded that poor mental health is associated with the job demands of teachers [41].

In support of the result of supervisory support and general positive affect, a study concluded that teachers who were supported by their administrators have experienced happiness and peace [53].

It was clearly shown that there were several significant correlations obtained in the study. These clearly stated that there is a significant relationship between stress and mental health of the respondents. Results were similar from most studies. It is concluded from previous study that high levels of job stress adversely affect the mental health of teachers [54]. It was also concluded that feeling stressed is associated with poorer well-being among teachers [16]. Furthermore, increase in job stress can lead to a decrease of good mental health [49].

Table 6. Proposed Wellness Program

Findings	Objectives	Strategies	Learning Outcomes
Average satisfaction in physical health, psychological health, and environment	To help the teachers achieve satisfaction as well as to prevent dissatisfaction in their physical	Participation in any physical fitness program, facilitation of self-awareness as well as mindfulness seminars, salary increase and added benefits like paid vacation leaves, facilitation of	Increase satisfaction in physical health, psychological health, and environment domains.

	health, psychological health, and environment domains	recreational activities or team building seminars, career enrichment such as continuing professional development programs or scholarship grants, and insurance policies can be alternatives	
High stress in workloads, duties, and functions of teachers	To lessen and prevent stresses in the role and task area	Facilitation of time management, stress management, and coping mechanism seminar for teachers, lessening the teaching loads and they should be given teaching loads based on their specializations, and avoidance of excessive activities unrelated to their duties and functions	Minimize experiences of stress specifically in role and task area among the teachers
Few occurrences of unfavorable symptoms in anxiety and general positive affect	To lessen the occurrences of unfavorable symptoms in anxiety and general positive affect of teachers.	Facilitation of relaxation techniques, anger management seminar, and mental health awareness seminar as well as consultation with a mental health professional such as a psychologist to address mental health issues experienced by teachers	Less occurrences of unfavorable symptoms in anxiety and general positive affect
Findings	Objectives	Strategies	Learning Outcomes
Negative significant relationship between quality of life and mental health	To prevent the occurrence of mental health problems by satisfying the quality of life of the teachers	Quarterly or annual teacher's evaluation that will address the needs and concerns of teachers and scheduled individual or group counseling specifically existential therapy should be facilitated by any qualified professional	Satisfaction of quality of life and prevention of unfavorable symptoms of mental health
Positive significant relationship between stress and mental health	To prevent the occurrence of mental health problems by lessening the stress levels of the respondents.	Identifying the stressors experienced by teachers through consultations quarterly or as needed and scheduled individual or group counseling specifically cognitive-behavioral therapy should be facilitated by any qualified professional	Minimize experiences of stress and prevention of unfavorable symptoms of mental health

CONCLUSION AND RECOMMENDATION

Based on findings, the researcher concludes that the quality of life of the respondents is moderately satisfied in terms of their physical health, psychological health, and

environment domains. This indicates that they have an average satisfaction with the mentioned domains of their quality of life. Moreover, the stress level of the respondents is highest in terms of role stress and task stress which are interpreted

as often stressed. This suggests that teachers have higher stress experiences with regards to their workload and specific tasks in their teaching duties. Furthermore, the mental health of the respondents indicates that there are few occurrences of unfavorable symptoms in terms of anxiety and general positive affect. This implies that teachers experience symptoms of being nervous and worried as well as the absence of calmness, happiness, and relaxation. In addition, there is a significant negative relationship between quality of life and mental health of the respondents. This indicates that a dissatisfied quality of life relates to higher mental health problems. Lastly, there is a significant positive relationship between stress and mental health of the respondents. This indicates that a higher stress relates to higher mental health problems.

It is recommended that school administrators should value their teachers by providing them enough compensation and benefits necessary to maintain a satisfied quality of life. Specifically, additional compensation and benefits such as vacation leaves, professional developments, and the likes will prevent them from a dissatisfied quality of life. In addition, teaching loads of teachers should be lessened to minimize the stress experiences, and reduce the number of additional work-loads that are unnecessary to their profession to avoid additional stressors. Stricter implementation of the 8-hour per day work and limit the extended meetings and extra works that require the teachers to work beyond regular hours. Moreover, to lessen the occurrences of unfavorable symptoms in anxiety and general positive affect, school administrators should include programs regarding mental health awareness for teachers. This will inform them of the causes and effects of a particular mental health problem. In addition, continuous follow-ups and prevention guidelines can help them attain a better mental health and well-being. The quality of life of teachers should be satisfied to prevent any mental health problems from occurring. Any dissatisfaction should be addressed as soon as possible to prevent any problems from worsening. School administrators

should provide additional benefits based on the needs of the teachers. Furthermore, availability of services intended for teachers should be consistent. Also, concerns of teachers regarding stresses in their workplace shall be properly addressed to lessen any conflicts from occurring. They should feel that their school is a supportive workplace environment that is always ready to listen to their needs and concerns. If possible, psychological consultation may be included as one of the benefits given to them. For future researchers, it is recommended to include demographic data as a variable. Moreover, a qualitative research or a mixed-method analysis can be conducted to have an in-depth analysis of the variable and respondents. Lastly, a nationwide study, if possible, may be implemented to have a larger scope and to enable teachers from every region to have an equal chances or representations.

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