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Do teachers have worse mental health? Review of the existing comparative research and results from the Belgian Health Interview Survey



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HIGHLIGHTS

- Review reveals that evidence for worse mental health of teachers is not conclusive.
- New study: Teachers do not report more mental illness than 31 other occupations.
- Jobs for the less educated workers are more likely to have mental illness than teachers.
- No differences were found in the mental illness between different types of teachers.

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ABSTRACT

It is widely believed that teachers have a higher risk of developing mental health problems when compared with other professions. That claim, however, is more often stated as a fact than as the outcome of empirical research. Against that background, we (1) critically review the existing empirical studies on teachers' mental health and (2) use the Belgian Health Interview Survey ($n = 7381$) to compare teachers with 31 other occupations on five mental health indicators: psychological impairment, somatization, depressive, anxiety, and sleeping disorder. The idea that teachers have worse mental health than other professionals is less conclusive than often assumed.

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1. Introduction

It is widely believed among teachers and those studying their behavior that teaching is a highly stressful occupation and teachers suffer from more mental health problems than other professions. Kinman, Wray, and Strange (2011), p. 843 aptly summarize "A body of research indicates that teachers are more vulnerable to work-related stress, psychological distress and burnout than many other occupational groups." This belief is partly based on studies

which indicate that up to 53% of all teachers report teaching to be "stressful" or "extremely stressful" (Borg, 1990; Farber, 1991; Kyriacou & Sutcliffe, 1979; Pithers & Soden, 1998; Smith, Brice, Collins, Matthews, & McNamara, 2000). Occupational stress is not only related to absenteeism, job turnover, and lack of motivation (Bridger, Day, & Morton, 2013), but also to more general mental health problems such as psychological distress, anxiety, sleeping and somatization disorder, clinical depression, bipolar disorder, and burnout (Ahola, Hakonen, Perhoniemi, & Mutanen, 2014; Ganster & Rosen, 2013; Russ et al., 2012).

Already a decade ago, however, Pithers (1995, p. 387) cautioned that generalizations based on much of the available data of the stress levels of teachers should be treated very carefully. He indicates that most of these studies suffer methodological limitations such as different definitions of stress, usage of nonstandardized

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instruments, one-item stress measures, and lack of comparisons with other professions. Especially, the latter is an important problem if we want to assess the *relative* mental health position of teachers as an occupational group. Such a comparison is important. Indeed, substantial differences between teachers and other professionals would provide strong evidence that specific conditions within the teaching profession cause these problems. The absence of such differences, however, would indicate that teachers' mental health problems might not so much be related to the specific features of their profession but rather originate in more common tendencies in (social) professions.

Against that background, our aim is twofold. First, we inventory reasons why teachers as an occupational category would (not) differ from other occupations *and* critically review the existing comparative studies on teachers' mental health both with respect to their conclusions and their methodology. Our central research question in the first part of the study is: does existing comparative research show that teachers have worse mental health when compared to other occupations? This review leads to the conclusion that most of the research is rather outdated, often has methodological problems, and the support for worse mental health among teachers when compared with other professions is not conclusive and further research is warranted. Second, we use the national representative Belgian Health Interview Survey ($n = 7381$) to investigate our second research question: do teachers report worse mental health when compared with 31 other professions including human service professions? We will investigate five mental health indicators: psychological impairment, somatization, depressive disorder, anxiety disorder, and sleeping disorder.

We add to the existing literature in two ways. First, we provide to the best of our knowledge an exhaustive overview of the existing literature which compares the mental health of teachers with other professions. Second, we add high-quality empirical data to this literature, which allows one to compare different aspects of the mental health of teachers with human services and other professions.

2. Teachers' mental health

2.1. What is mental health?

Studies on the mental health of teachers rely on a wide variety of indicators, but they mainly focus on three domains: psychological distress, burnout, and psychiatric disorders like depression, anxiety, and somatization (Kovess-Masféty, Rios-Seidel, & Sevilla-Dedieu, 2007). This variety of measures derives from the complex nature of mental health. The World Health Organization (2004, p. 12) defines mental health 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.” Mental health is thus more than the absence of mental illness.

Mental health at the workplace is of growing concern for employers and policymakers as mental health problems are related to job turnover, absenteeism, and rising costs of social security services (World Health Organization, 2003). In this regard, occupational stress plays an important role. Research has indicated that employees who report more occupational stress are more vulnerable to develop anxiety, sleeping, somatization disorder, psychological distress, burnout, clinical depression, bipolar disorder, cardiovascular disease, and higher mortality rates (Ahola et al., 2014; Ganster & Rosen, 2013; Russ et al., 2012).

Some professions seem to have more problems with occupational stress than others. Below, we inventory the reasons why teachers would stand out as a professional group.

2.2. Why would teachers be more likely to report worse mental health?

As mentioned earlier, teachers are thought to have more stress and to be more prone to mental health problems when compared to other professions. One of the reasons is that teachers are part of the human service professions or sometimes called contact professions (e.g., mental health, law enforcement, teachers, nurses). In these occupations, the primary task is physically and/or psychologically helping clients, patients, or students (Dollard, Dormann, Boyd, Winefield, & Winefield, 2003; Ogińska-Bulik, 2005). Client-centered occupational groups involve extensive face-to-face and voice-to-voice interactions and often require human service professionals to hide or suppress one's own (negative) emotions (Hochschild, 2012). Such *emotional labor* has been related to stress and mental health problems (Mann & Cowburn, 2005; Morris & Feldman, 1996). In addition, it is often unpredictable how their clients might behave towards them. Teachers, for example, are sometimes confronted with verbal and physical aggression.

According to some authors (Johnson et al., 2005; Stansfeld, Rasul, Head, & Singleton, 2011; Wieclaw, Agerbo, Mortensen, & Bonde, 2005), the effort-reward imbalance in the human service professions might be responsible for their higher levels of emotional distress. The high expectations of clients and their emotionally demanding work requires a lot of effort and might be perceived to be disproportionate to the available financial rewards, public esteem, and career opportunities.

Wieclaw et al. (2005) suggested that selection effects might further reinforce this general mechanism. Human service professionals are strongly characterized by personality traits such as “overcommitment,” which has been related to mental illness (De Jonge, Bosma, Peter, & Siegrist, 2000; Feldt et al., 2013). Research into motivation regularly reveals that teachers are mainly intrinsically motivated and strongly identify with their profession, making them emotionally more vulnerable for disappointments (Struyven, Jacobs, & Dochy, 2012).

The reasons mentioned so far apply to all human service professions. A compelling question, then, concerns whether there are reasons to expect teachers to stand out within the human service professions. It is important to realize that the reasons why teachers would have worse mental health in comparison with other professions are only looked for in some studies where teachers clearly stand out (e.g., Heus & Diekstra, 1999; Johnson et al., 2005; Travers & Cooper, 1993). In studies where teachers or the human service professions as a group do not stand out, these explanations are usually not searched for (e.g., Bültmann, Kant, van Amelsvoort, van den Brandt, & Kasl, 2001; Eaton, Anthony, Mandel, & Garrison, 1990; Sanne et al., 2003).

In a study by Heus and Diekstra (1999) on burnout, job conditions of teachers and other social professions were compared. Teachers reported lower participation in decision-making, a low level of time control, and less colleague support than other social professionals. The latter factors, however, did not fully explain the differences in burnout between teachers and those in other professions. Some authors (e.g., Johnson et al., 2005; Smith et al., 2000; Travers & Cooper, 1993) suggested that the changes within the teaching profession during the last decades often referred to as “intensification” might be the reason why teachers have more mental health problems. In short, the intensification thesis holds that because of a more economic orientation on education, teachers are increasingly subjected to external pressures from policymakers, supervisors, parents, and experts. This intensification results in an ever-expanding teaching role and increasing accountability demands, which results in a significant increase in administrative workload and a loss of autonomy (for an overview of the

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