Relationship between self-efficacy and mental health of teachers in special needs education

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1. Problems and Purposes

In recent years, the mental health of teachers has become a serious problem. According to a survey by the Ministry of Education, Culture, Sports, Science and Technology (2013), the number of teachers working at public elementary, middle and high schools and schools for special needs education who took sick leave due to a mental illnesses was 4960, or 0.54% of a total of 920,000 teachers. Mori and Tanaka (2012a) have indicated that 60% of teachers might have some type of mental illness such as melancholia, or suffer from mental health problems. In addition, Takeda and Nakaoka (2010) reported that teachers in special needs schools who consider their work as a heavy burden suffer from exhaustion, or have feelings of emptiness, and tend to avoid communication with coworkers. However, no studies have been conducted on the self-efficacy of teachers, though such studies are a key to developing methods of stress management. Consequently, this research was designed to clarify the relationship between sex, age, and career, as well as mental health and self-efficacy of special needs school teachers.

2. Methods

A questionnaire survey was conducted on 22nd of July, as well as on 8th and 13th of August in 2013 with teachers in charge of students with special needs, but who had not obtained the teachers' license. Of 260 teachers, 223 (85.8%) were available for the questionnaire survey. The first page of the questionnaire inquired respondents' sex, age, and career. Participants also responded to the General Self-Efficacy Scale (GSES; Sakano, Tojo 1986), Stressor Scale (Takagi, Tanaka 2003) Coping Scale (Imada, Uemura 2001) Sense of Coherence (SOC; Yamazaki 1999) and the General Health Questionnaire (GHQ: Nakagawa, Taibo 1985).

3. Results and Considerations

There were no significant sex, age, or career based differences in self-efficacy. Pearson product-moment correlation coefficients showed negative correlations between self-efficacy and subscales of stressors, suggesting that higher self-efficacy decreased stressors. Correlations between "positive behaviors," a subscale of self-efficacy, and subscales of coping indicated that "positive coping behavior" (r=.165, p<.0.1) and "adaptive coping behavior" (r=.160, p<.0.1) were significantly correlated, suggesting higher positive behaviors leads to both types of coping behaviors. The correlation between "social status of ability" and positive coping behaviors was r=286, (p<0.1) and that with suitable coping behavior was r=149, (p<0.5). The correlation between "anxiety about making mistakes," and escape coping behavior. All subscales of the interrelationship between self-efficacy and SOC were positive, which indicated that high self-efficacy results in high stress coping ability. Moreover, all correlations between self-efficacy and GHQ subscales were negative, indicating that high self-efficacy has a positive effect on mental health. It is concluded that maintaining and increasing the self-efficacy of special needs school teachers would result in improvements in their mental health.

	GSES		
	Positive Coping Behavior	Anxiety about failure	Ability of Social Position
Stressor			
Role conflict	-0.139*	-0.255**	-0.128*
Relationship with coworker	-0.164**	-0.237**	-0.068
Organizational climate	-0.154*	-0.328**	-0.191**
Valuation of fear	-0.363**	-0.442**	-0.363**
Coping			
Positive coping behavior	0.165**	0.063	0.286**
Suitable coping behavior	0.160**	0.079	0.149*
Escape coping behavior	-0.023	-0.143*	-0.00
SOC			
Sense of figureable	0.366**	0.456**	0.300**
Sense of prosessable	0.222**	0.349**	0.141*
Sense of meaningful	0.306**	0.362**	0.245**
GHQ			
Somatic symptom	-0.331**	-0.331**	-0.283**
Anxiety and sleeplessness	-0.276**	-0.323**	-0.173**
Disability of social activity	-0.238**	-0.318**	-0.266**
Tendency to depression	-0.200**	-0.296**	-0.188**
* *			*p<.05 **p

[Table 1] Interrelation between GSES and each scales