

Psychological Distress and Coping Strategies Among Primary School Teachers in Nsukka Local Government Area, Enugu State

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Abstract

This study investigated psychological distress and coping strategies among primary school teachers in Nsukka LGA, Enugu State. The study adopted a descriptive cross-sectional survey research design. The population for the study comprised all 914 primary school teachers in Nsukka LGA. The sample size for the study was 280 primary school teachers. The study adopted multi-stage sampling procedure to draw the sample for the study. The instruments for data collection were General Health Questionnaire 12 item version (GHQ-12), and Brief Coping Orientation for Problem Experiences (Brief COPE). Data analyses were conducted using the SPSS version 20. Descriptive statistics, simple and multiple linear regressions were tools employed for data analyses. The findings showed that primary school teachers had a high level of psychological distress ($M = 25.9$; $SD = 13.93$), the primary school teachers in Nsukka adopted problem-focused coping strategies ($M = 2.37$; $SD = 1.26$). Age, Gender, and Educational and qualification were significantly related to teachers' psychological distress ($p < 0.05$), as increase in teachers age was associated with decrease in teachers experience of psychological distress, and increase in the teachers' educational qualification is associated with decrease in psychological distress among the teachers. The authors recommended among others that government should provide a conducive working environment, furniture, toilet facility, good offices and classrooms for pupils and primary school teachers.

Key Words: Psychological Distress, Coping Strategies, Teachers, Depression and Anxiety.

Introduction

In developing countries, the teachers' deplorable working conditions are a public health concern. For instance, the Canadian Teachers' Federation (2004) reported that six in ten teachers indicated that their job was more stressful than it had been two years earlier. Dibbon (2004) reported that teachers are experiencing role intensification and its associated stress are negatively impacting teachers' personal lives, health, and their ability to fulfill students' needs in both primary and secondary schools. Naylor and White (2010) asserted that two thirds of teachers in British Columbia State experienced work stress and psychological distress. Also, their health conditions were aggravated by stress, lack of encouragement, and job insecurity while one fifth of the teachers considered leaving the profession because stressful life events have a substantial effect on several mental health outcomes, including psychological distress (Kopala-Sibley et al., 2016). This situation may be worse among Nigerian teachers.

Nigerian teachers are exposed to a higher level of psychological distress and workplace distress. However, they face many challenges that potentially undermine their general wellbeing. Nigerian teachers are facing challenges of poor work conditions, and inadequate resources or financial and material resources (Okopi, 2011). Literature shows that the provision of conducive working conditions for Nigerian teachers is a challenge, and it impairs productive teaching (Osakwe & Osagie, 2010). Primary schools' teachers in Nigeria are short of instructional materials, poor physical structure, inadequate teaching staff, over-crowded classrooms, lack of furniture, and lack of toilet facilities (Raymond, 2009; Wasagu, 2009; Okopi, 2011). Furthermore, the United Nations Educational, Scientific and Cultural Organization (UNESCO) and World Bank report (2015) showed that Nigerian teachers complained of poor working environment, irregular payment of salary, delay in promotion, lack of housing allowance, hardship allowance, and science teachers' allowances are not paid.

Also, a previous study (Okwaraji & Aguwa, 2015) reported that 32.9 per cent of secondary school teachers in Enugu State experienced psychological distress. Thus, deplorable working conditions could be significant risk factors for teachers' psychological distress. Distress has been variously defined in literature. Carstens and Mobery (2000) defined distress as both acute and chronic stress, provided that the body's biological functions are sufficiently altered, and its coping mechanisms overwhelmed. Ofuebe (2015) defined distress as the exposure to extreme stressors in a short time. In this study, distress refers to an exposure to a stressful situation which may affect the individual's ability to function effectively.

However, when distress affects the mental health status, and behavioural response to life events or challenges, it is termed psychological distress. Potter (2007) defined psychological distress as an affective cognitive and behavioural response to a crisis precipitating event perceived as threatening. It is manifested by anxiety and depressive symptoms. Lahey (2009) asserted that psychological distress is a form of anxiety, sadness, irritability, self-consciousness, and emotion. Lahey further asserted that psychological distress leads to vulnerability. Vulnerability is strongly related with physical morbidity, reduced quality, and duration of life, and increase use of health services. Drapeau, Marchand and Beaulieu-Prevost (2012) defined psychological distress as a state of emotional suffering characterized by depressive and anxious symptoms. From the above definitions, it is plausible to infer that psychological distress is an indicator of poor mental health outcomes. Contextually, psychological distress refers to an emotional disturbance or upset that affects general health characterized by depression and anxiety symptoms.

Psychological distress is a continuum with mental health and mental illness at opposing ends. As people continue to experience different things, they travel back and forth on the continuum at different time throughout their lives (World Health Organization [WHO], 2016). Psychological distress occurs when external events or stressors place demands upon persons who are unable to cope with it. Exposure to job stress, adverse working conditions and maladaptive behaviours of school children or pupils may trigger psychological distress among teachers with adverse health outcomes (Le Maistre & Pare, 2010). The symptoms of psychological distress include: weight gain, anger management problems, obsessive thoughts or compulsions, psychical symptoms not explained by a medical condition, decreased pleasure in sexual activities, hallucinations, delusions, reckless acts, that is, excessive shopping sprees, the belief that others can hear one's thoughts, strange or unusual behaviours, such as: wearing dressing (WHO, 2016). Also, it is associated with sickness and absenteeism among workers including teachers (Furukawa, Kessler, Slade & Andrews, 2003; Van Hoffen, Joling, Heymans, Twisk & Roelen, 2015).

Psychological distress can interfere with work performance. For example, a teacher may find it harder to concentrate or easily be distracted while working. Teachers who experience psychological distress may find it hard to focus on their work or in class, especially if they are experiencing hallucination or delusions. Literature (Potter, 2007; Lahey, 2009; Drapeau, Marchand & Beaulieu-Prevost, 2012) indicates that psychological distress is characterized by depressive and anxiety symptoms. Therefore, psychological distress could trigger other mental health problems in the general population.

Psychological distress encompasses both physical and mental health problems that should be addressed in diverse workplaces including elementary or primary school setting. In addition, literature indicates that one of the most effective ways of addressing psychological distress is the adoption of effective coping strategies by the affected persons. Appropriate coping strategies for psychological distress seem to contribute to improved mental health outcomes (Rahnama, Shahdadim, Bagheri, Moghadam & Absalan, 2017).

Various definitions and theoretical positions exist regarding coping. According to Lazarus and Folkman (1999), coping can be defined as constantly changing cognitive and behavioural efforts to manage specific external and or internal demands that are appraised as tasking or exceeding the resources of the person. An individual's appraisal or perception of a situation determines the distress or stress associated with it and the behaviours directed at managing the situation. Psychological distress occurs when an individual appraises an event as tasking or exceeding resources and endangering well-being. Lazarus (1999) assumed a process of appraisal to occur between the stressors and effect. The appraisal process consists of the primary appraisal, where the individual appraises the internal and external environment in terms of harm/loss, threat or challenge and which is shaped by

the individual's beliefs, values and goals; the secondary appraisal, which refers to a cognitive-evaluative process, focusing on what can be done about a stressful person-environment relationship; and the reappraisal, where the efficacy of the coping strategies is evaluated. Reappraisal may influence stress, emotion and give new meaning. Hence, coping is a process not a trait (Lazarus, 1999). Antecedent conditions of primary appraisal such as time in the life circle and experiences in life, together with personal and social resources, are woven into the primary appraising process. This study adopted Lazarus and Folkman's definition of coping as its operational definition.

Two major types of coping strategies have been identified in literature. These include problem-focused and emotion-focused coping strategies (Lazarus, 1999; Sharplin, Neil, & Chapman, 2011). Problem-focused coping is behaviour aimed at solving the problem or situations such as obtaining relevant information about what to do. Emotion-focused coping is a behaviour aimed at regulating the emotions related to stress, that is by avoiding thinking about the threat or reappraising it without changing the realities of stressful situations. Emotion-focused coping also covers various defensive and avoidant strategies. Problem-focused coping and emotion-focused coping influence each other throughout a stressful situation – they can both facilitate or impede each other (Lazarus, 1999).

The ability of an individual teacher to effectively adopt coping strategies for psychological distress is determined by some factors. Among the school teachers, the factors have a multifactorial origin, which included individual, work-related physical factors and psychosocial factors (Erick & Smith, 2011; Zamri, Moy, & Hoe, 2017; Mudallal, Othman, & Al Hassan, 2017). The individual factors include age, gender, marital status, educational qualification, and income level or salary grade. These factors have been found to be positively associated with psychological distress. Meanwhile, poor postures, inappropriate workstations, lifting and carrying heavy objects were the common work-related physical factors. The work-related psychosocial factors were identified as high psychological job demands, low job control and low social support. However, this study focused on individual and work-related psychosocial factors. The above factors have been identified to predominantly influence teachers' psychological distress.

Evidence suggests that age can predict psychological distress among workers including teachers. Yue, Liu, and Li (2012) reported that younger teachers were more susceptible to psychological distress compared to older teachers. Cardoso, Ribeiro, Araujo, Carvalho, and Reis (2009) reported that younger teachers might face greater work demands as they are given more tasks at the beginning of their career. This may result in psychological distress among younger teachers than older teachers. In addition, Chiu and Lam (2007) asserted that younger teachers might not be adapting well to the new working environment, and this eventually increases their physical and psychological distress that might affect work productivity.

There is evidence of gender differences in coping with stress. Tamres, Janicki and Helgeson (2002) suggested a sex difference in the behavioural response to stress; although both men and women have a physiological experience of fight or flight, it is more typical of women to have a behavioural experience of 'tend and befriend', for example, engage in nurturing activities designed to protect the self and offspring, and maintenance of social networks. The sex difference is likely to be related to effect of hormones such as oxytocin and oestrogen, and in parenting requirements. A meta-analysis (Tamres et al., 2002) found that women were more likely than men to use coping strategies that were emotion-focused (that alter a response to a stressor) as opposed to problem-focused (which are aimed at altering the stressor). For example, it was found that women tend to cope with stress by talking about their feelings more than men do. Educational qualification influences teacher's experience of psychological distress. Demjaha, Bishimovska, and Mijakoshi (2015) opined that the higher the teacher qualification and years of experience, the lower their level of psychological distress.

Research evidence indicates that Nigerian teachers operate in work environments with the highest risk of stress-related disorders. For instance, Okwaraji and Aguwa reported that the prevalence of psychological distress was 32.9% among secondary school teachers in Enugu city. Research on psychological distress and coping strategies among primary school teachers is relatively sparse in southeast Nigeria. For instance, to date only one study has examined prevalence of burnout and psychological distress among secondary school teachers in Enugu State. However, the study excluded the primary school teachers and did not examine their coping strategies. Thus, the present study

investigated psychological distress and coping strategies among primary school teachers in Nsukka LGA, Enugu State.

Purpose of the Study

The purpose of this study was to investigate psychological distress and coping strategies among primary school teachers in Nsukka LGA, Enugu State. Specifically, the study sought to determine:

1. level of psychological distress among primary school teachers; and
2. coping strategies adopted by primary school teachers for psychological distress.

Hypotheses

Demographic factors of age, gender, educational qualification, marital status, and income level are not significantly related to primary school teachers' psychological distress in Nsukka LGA, Enugu State ($p < 0.05$)

Method

A descriptive cross-sectional survey research design was employed. A cross-sectional research design is one that produces a snap-shot of a population at a particular point in time Seibt, Spitzer, Druschke, Scheuch, and Hinz (2013). The most profound attribute of a cross-sectional study is the collection of information on a representative sample of the population consisting of individuals of different demographic characteristics such as age occupation, income levels and location on the same day or particular point in time (Cohen, Manion, & Morrison, 2011).

This study was conducted in Nsukka local government Area (LGA), Enugu State. Nsukka LGA is one of the 17 LGAs in Enugu State. It is located in Enugu North Senatorial District. Nsukka LGA has boundary with Udenu LGA in the North, Kogi State on the west, Igbo-Etiti LGA on the east and Igbo-Eze South LGA on the south. There are three development centers in Nsukka LGA, namely: Nsukka Central, Nsukka East and Nsukka West. Nsukka LGA is made up of 14 communities. The inhabitants consist of predominantly Igbo ethnic origin. However, there people from different ethnic groups in Nigeria. The main occupations include farming, trading and entrepreneurship. Also, substantial proportion of the population is made up of civil servants, such as primary school teachers.

Nsukka LGA has 114 public primary schools in the rural and urban areas (Enugu State Universal Basic Education Board [ESUBEB] Nsukka Local Government Education Authority Office, 2018) which includes sustaining education system, do not rest on his or her professional competency alone, but on the entire features of the school climate. But public primary schools which are owned by government and are predominantly facing challenges of educational sub-standard, a hectic and busy schedule for teachers, low operational quality and absence of required facilities to cater for teachers and pupils, high rate of bullying, dominant acts of indiscipline, lack of adequate resources, and pupils' habitual disruptive behaviours. Research has shown that there is a relationship between teachers' exposure to these factors and onset of mental health problems. These factors also influence the success or failure of education of teachers and students. The enormous tasks, dysfunctional work conditions and poor school climate have the potential to cause psychological distress in primary school teachers in Nsukka LGA. Although, a few studies (Okwaraji & Aguwa, 2015; Anonmeze et al., 2016) observed high levels of psychological distress among secondary school teachers in Enugu State, none of such studies was conducted among primary school teachers in Nsukka LGA. Thus, there is paucity of data on levels of psychological distress and coping strategies adopted by primary school teachers in Nsukka LGA.

The population for the study comprised 941 primary school teachers in the 114 primary schools in Nsukka LGA. (Enugu State Universal Basic Education Board [ENSUBEB], 2019). There are 44 primary schools in Nsukka West, 50 primary schools in Nsukka Central and 20 primary schools in Nsukka East. This culminates into 114 public primary schools in Nsukka LGA.

A sample of 280 teachers was used for the study. This was arrived at using Taro Yamane's formular for a finit population. This is in line with Uzoagulu (2011), who stated that when the population for a study is finite or known, the sample size can statistically be determined; using Taro

$$\text{Yamane's formula thus } n = \frac{N}{1 + N(e)^2} .$$

The application of Yamane's formula produced 280 teachers.

The researcher adopted multi-stage sampling procedure to draw the sample size for this study. In stage one, simple random sampling technique of balloting without replacement was used to select two development centres in Nsukka LGA. The second stage involved the use of simple random sampling technique of balloting without replacement to select (20) primary schools each from Nsukka West and Nsukka central development Centres. This produce a total of (40) primary schools. The third stage was the used of convenience sampling technique to select seven teachers in each of the selected 40 schools. Therefore, convenience sampling technique was used because only the teachers who indicate interest and gave consent to participate were included in the study. Thus, a total of 280 primary school teachers that comprised male and female teachers were used for the study.

Three standardized instruments were used for data collection for this study. These include: the 12-item General Health Questionnaire (GHQ-12) developed by Goldberg and Williams (1988), and the Brief Coping Orientation (Brief COPE) questionnaire developed by Carver (1997). The preliminary section of the instruments collected information on the socio-demographic characteristics of the respondents such as age, gender, income level, marital status, educational qualification, and school type. The respondents were asked to place a tick (✓) against the options that best describe them.

Psychological distress was measured by the General Health Questionnaire (GHQ-12) which is used to screen for non-specific psychiatric morbidity. The GHQ-12 is the most extensively used screening instrument for common mental disorders, in addition to being a more general measure of psychiatric well-being. The GHQ-12 consists of 12 items, each one assessing the severity of a mental problem over the past few weeks using a 4-point Likert-type scale (from 0 – 3). Six of the GHQ-12 items are positively phrased (PP items, labelled items p1 - p6) and six negatively phrased (NP items, labelled n1 - n6). The positively worded items are arranged from 0 (always) through 3 (never) and the negatively worded items are reversed from 3 (always) to 0 (never). The GHQ-12 has a total score ranging from 0 – 36. High scores indicate worse health.

The coping strategies of primary school teachers were measured using the Brief Coping Orientation to Problems Experienced (Brief COPE) questionnaire. The Brief COPE is a 28-item questionnaire that measures 14 dimensions of coping (self-distraction, active coping, denial, substance use, emotional, instruments, disengagement, venting, reframing, blaming, humor, acceptance, religion, and self-blaming). Each item is rated using a 4-point Likert scale as follows: “I haven’t been doing this at all” (1 point); “I’ve been doing this a little bit” (2 points); “I’ve been doing this a moderate amount” (3 points); and “I’ve been doing this a lot” (4 points). The Brief COPE ranges (1–4); higher score indicated higher use of coping strategy. The Brief COPE has been validated in many settings and is one of the most frequently used self-reported measures of coping strategies.

To determine the reliability indices of the instrument, 20 copies of the instruments were administered to primary school teachers in Igbo-Etiti LGA that were not included in the study. Subsequently, the internal consistency reliability of the instruments was determined using Cronbach's alpha. In this study the reliability coefficients of .60 and .91 were obtained for the GHQ-12 and the BRIEF COPE questionnaires. Nworgu (2005) asserted that a reliability coefficient about .60 and above is high enough for use.

The researchers collected an introductory letter duly signed by the head, Department of Human Kinetics and Health Education, University of Nigeria, Nsukka. The letter helped the researcher gained access to the headmistresses/headmasters of the sampled schools in Nsukka L.G.A the researcher administered the instrument to the respondents and collected the instrument within two weeks, out of the 280 copies of questionnaire administered, 253 representing 90 per cent were correctly filled and used for the analysis. Data were analyzed using the Statistical Package for the Social Sciences (IBM SPSS Batch System version 20).

Results

Table 1: Level of Psychological Distress among Primary School Teachers in Nsukka LGA (n = 253)

Psychological Distress Items	GHQ-12 Mean ± SD
In the past 6 months, have you:	
1. Been able to concentrate	3.10 +1.12
2. Lost much sleep over worry	1.70 + 1.10
3. Felt that you were playing a useful part in things	3.17 +1.09
4. Felt capable of making decisions	3.23 +1.11
5. Felt constantly under strain	1.20 +1.04
6. Felt you could not overcome difficulties	1.42 +1.26
7. Been able to enjoy normal activities	3.16 + 1.10
8. Been able to face up to problems	2.81 +1.12
9. Been feeling unhappy and depressed	1.17 +1.02
10. Been losing confidence	0.88 +1.09
11. Been thinking of yourself as worthless	1.37 + 1.31
12. Been feeling reasonably happy	3.25 + 1.10
Cluster	25.93 +13.46

Note. Scoring protocol for GHQ-12, 0-5 = low level of psychological distress, 10-19 = moderate level of psychological distress; > 20 = high level of psychological distress.

Results in Table 1 showed that overall, primary school teachers had a high level of psychological distress (25.9; SD = 13.46).

Table 2: Coping Strategies Adopted by Primary School Teachers

Brief COPE Item Summary	Mean±	SD
Problem-focused coping strategies		
Active coping		
I've been concentrating my efforts on doing something about the situation I'm in	2.29 +	1.21
I've been taking action to try to make the situation better	2.47 +	1.39
Use of instrumental support		
I've been getting help and advice from other people	2.15 +	1.33
I've been trying to get advice or help from other people about what to do.	2.34 +	1.23
Planning		
I've been trying to come up with a strategy about what to do	2.43 +	1.29
I've been thinking hard about what steps to take.	2.54 +	1.10
Cluster	2.37 +	1.26
Emotion-focused coping strategies		
Use of emotional support		
I've been getting emotional support from others	2.18 +	1.11
I've been getting comfort and understanding from someone	2.46 +	1.28
Positive reframing		
I've been trying to see it in a different light, to make it seem more positive	2.09 +	1.17
I've been looking for something good in what is happening	2.58 +	1.38
Acceptance		
I've been accepting the reality of the fact that it has happened	2.20 +	1.18
I've been learning to live with it	2.30 +	1.12
Humor		
I've been making jokes about it	1.84 +	1.10
I've been making fun of the situation	1.94 +	1.24
Religion		
I've been trying to find comfort in my religion or spiritual beliefs	2.45 +	1.34
I've been praying or meditating	2.66 +	1.39
Cluster	2.27 +	1.23

Dysfunctional coping**Venting**

I've been expressing my negative feelings. 2.10 + 1.14

Denial

I've been saying to myself this is not real 2.13 + 1.13

I've been refusing to believe that it has happened 1.84 + 1.04

Self-blame

I've been criticizing myself 1.96 + 1.17

I've been blaming myself for things that happened. 2.30 + 1.29

Substance use

I've been giving alcohol or other drugs to make myself feel better 1.52 + 1.06

I've been using alcohol or other drugs to help me get through it 1.74 + 1.18

Behavioural disengagement

I've been giving up trying to deal with it 1.88 + 1.18

I've been giving up the attempt to cope 2.04 + 1.14

Self-distraction

I've been turning to work or other activities to take my mind off things. 2.24+ 1.35

I've been doing something to think about it less, such as going to movies, watching 2.34 + 1.32

TV, reading, daydreaming, sleeping, or shopping.

Cluster 2.01 + 1.18

Results in Table 2 showed that teachers in Nsukka LGA adopted problem-focused coping strategies ($M = 2.37$; $SD = 1.26$) more than other forms of coping strategies.

Table 3: Summary of Standard Multiple Regression Analysis of Relationship between Psychological Distress and Teachers' Socio-Demographic Factors

Variables	Standardized Coefficient (β)	S. E	t	p-value	95% CI for B	
					Lower bound	Upper bound
Constant	25.736	1.658	15.523	.000	22.470	29.001
Age	-2.715	.638	-4.256	.000	-3.972	-1.459
Gender	3.344	.876	3.803	.000	1.612	5.076
Educational qualification	-1.576	.812	-1.940	.050	-3.176	.024
Marital status	.298	.577	.516	.606	-.838	1.434
Income level	1.676	.638	2.629	.609	.420	2.932
R	.36					
R ²	.13					
F	6.215					
ΔR^2	.13					
Adj R ²	.11					

Key: S.E. = Standard Error of the Estimate; Confidence Interval; ΔR^2 = R square change; Adj R² = Adjusted R Square *Significant $p < .05$

Table 3 shows that the entire model explained only 13 per cent of the variance in the dependent variable (psychological distress), $F(6, 246) = 6.215$, $p < .001$. The table further shows that age ($\beta = -2.715$, $p = .001 < .05$), gender ($\beta = 3.344$, $p = .001 < .05$) and educational qualification ($\beta = -1.576$, $p = .050 < .05$) were statistically significant. This implies that there was significant relationship between teachers' psychological distress and socio-demographic factors of age, gender and educational qualification. The (β sign) indicated that increase in teachers age was associated with decrease in experience of psychological distress, and increase in the teacher educational qualification was associated with decrease in psychological distress.

Discussions

Level of psychological distress among primary school teachers, the findings in Table 1, showed that primary school teachers in Nsukka LGA had high level of psychological distress. However, this finding was expected and therefore not surprising, because this situation could be explained because of lack of conducive school working conditions for primary school teachers, lack of functional libraries, social security is lacking, poor infrastructures, low salaries, some of the pupils were sitting on the floor, some of the classrooms had no proper ventilation for the teachers and pupils, this could be the reasons of the teachers experiencing high level of psychological distress. This finding was in agreement with that of (Osakwe & Osagie, 2010) who found out that the provision of poor conducive school environment for Nigeria teachers was a challenge, and it impaired productive teaching. The present finding was also in agreement with that of Chaplain (2008) who found high level of psychological distress among Scotland teachers. This present finding could be attributed to poor working conditions, lack of furniture, lack of toilet facility and poor environmental condition the teachers were exposed to stressors, which could trigger high psychological distress among them.

Coping strategies adapted by primary school teachers for psychological distress.

The findings in Table 2, showed that primary school teachers in Nsukka LGA adopted problem-focused coping strategies. This finding was expected and therefore not surprising, because of the way the teachers are expressing their feeling about the nature of their poor working conditions, and problem-focused coping is behaviour aimed at solving the problem or situation such as obtaining relevant information about what to do. This finding was in agreement with that of (Lazarus, 1999; Sharplin, Neil, & Chapman, 2011) who found out that the teachers adopted effective problem-focused coping strategies. This adoption of problem-focused coping strategies could be as a result of the teachers speaking or expressing their feelings about the nature of their job, in respect of the poor working environment.

Relationship between teachers' psychological distress and demographic factors

The findings of the study in Table 3, showed that the null hypothesis that there was no statistically significant relationship between teachers' psychological distress and demographic factors was rejected. However, the findings showed that there was a statistically significant relationship between teachers' psychological distress and demographic factors. This finding was expected, because the researcher observed that the younger teachers were having more workload than the old ones, by so doing, the younger teachers faced more of psychological distress than the old teachers. This finding above was in agreement with that of (Erick & Smith, 2011; Zamri, Moy, & Hoe, 2017) who found out that age, gender, work experience, marital status, educational qualification, and income level or salary grade influenced psychological distress among teachers. This could be attributed to poor salary, high workload, dilapidated structure, poor working conditions, lack of leadership support could all influence the relationship between demographic factors and psychological distress. This finding implies that level of psychological distress had significant influence on the demographic factors.

Conclusion

Based on the findings of this study, the researcher concluded that there was high level psychological distress among primary school teachers. Also, the teachers in Nsukka LGA, adopted problem focus coping strategies. Finally, teachers' psychological distress, demographic factors, educational qualification were significant factors negatively associated with psychological distress among primary school teachers in Nsukka LGA. The reason for these findings could be too much exposures to stressor by the teacher as a result of poor working condition, lack of furniture, multiple-lesson note, poor infrastructure, low salaries, lack of social security and poor environmental condition. This can affect the teacher's wellbeing in the classrooms and in the society.

Recommendations

The researcher made the following recommendations based on the findings:

1. Government and NGOs should carry out sensitization among teachers on the importance of psychological distress and health educators should identify those teachers with a high level of psychological distress so as to carry out intervention measures in order for the primary school teachers to find joy in teaching.
2. Government, NGOs and private schools should provide a conducive working environment, furniture, toilet facility, good offices and classrooms for teachers and pupils that will help to reduce the level of psychological distress on the part of teachers.
3. Government and NGOs should provide intervention measures such as training and retraining of teachers for effective coping strategies, this will go a long way in improving teachers' productivity in the classroom and in the society at large.
4. Government and NGOs should carry out awareness and sensitization programmes among teachers to adopt effective coping strategies throughout their period in active service, by so doing there will be a reduction in the number of teachers facing psychological distress.
5. Government, NGOs and private schools should increase teachers' salary, promote teachers as and when due, give them self-loans in order for them to have a befitting house to stay. Also, teachers should familiarize themselves with effective coping strategies in order to reduce the relationship between the demographic factors of age, educational qualification and gender.
6. Teachers should be involved in recreation, exercise, dancing, speaking out to friends when there are problems, take a walk within the street, go for swimming, do what they enjoy doing, attend religious services, by so doing the level of psychological distress will drastically reduce.

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