

Mental Healthy Literacy of Teachers: a Systematic Literature Review

Padmi Dhyah Yulianti
Doctoral Psychology Program,
Psychology Faculty, Airlangga University
Guidance and Counseling, Education Faculty,
PGRI Semarang Univeristy
padmi.dhyah.yulianti-2019@psikologi.unair.ac.id
Padmidyah@upgris.ac.id

Endang R. Surjaningrum
Psychology Faculty Airlangga University
endang.surjaningrum@psikologi.unair.ac.id

DYP. Sugiharto
Guidance and Counseling Education Faculty
Semarang State University
s_dyp@yahoo.com

Nurul Hartini
Psychology Faculty Airlangga University
nurul.hartini@psikologi.unair.ac.id

Abstract

School is a protective factor to improve and promote mental health. Many mental health problems are experienced by school learners. From various interactions with the learners, teachers are expected capable to prevent and identify school learners' mental health problems. Although the human-teacher sources are high, they are not completely used to support learners' mental health problems. This research aims to find out the mental health literacy operational definition and the urgency of the mental health literacy of the teachers. This research applied for a systematic literature review from five *search engines*. They were Spingerlink, Science Direct, Jstor, Eric, and Pubmed. The applied keywords were "mental health literacy", "school", and "teacher". The taken references are from 1997 - 2020. Six hundred and thirty-three articles were obtained from five *search engines*. From the systematic review, seven articles were obtained. An expanding concept of mental health definition was found from the initial concept proposed by Jorm. Clear concept definition influenced the measurement. Teachers must be aware of mental health literacy because they are the first lines to identify mental health problems of the learners, mostly found in 12 - 25 years-old learners. Low teacher literacy at school about mental health problems experienced by learners led to serious impacts for them.

Keywords: Mental health literacy, teacher, systematic, literature review.

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Introduction

Law number 18 the Year 2014 about mental health emphasizes that it is an individual condition to physically, mentally, spiritually, and socially grow so that the individual will realize his capability to overcome stress, to perform productively, and to contribute for their community

(Undang-undang No 18, 2014). If an individual has healthy mentality, it will be a greater investment for him. Healthy mentality is the key to reach social inclusion and equality, universal health, fair access and human right, and sustainable economic development (Votruba et al., 2014).

Mental health has to be owned by every individual, included teenager. Teenagers are the crucial ages. They are in a transition period from a life period to the next period (Ahmed Zaky, 2016). If a younger individual has burdening responsibility, his future will be influenced. A significant continuity occurs inside of his mentality and psychological function, from childhood until adulthood. Although it is not found in all cases, but adult people function optimally when their conditions have been optimal in the previous hoods and vice versa (Masten et al., 2005).

Teenagers are individual aged from 10 until 18 years. However, other resources may define it as individuals aged from 9 until 26 years old ("American Psychological Association," 2003). School learners are the expected generations to contribute for future national development. A strong nation is established from the strong and mentally healthy persons. However, almost all mental health diseases are found in 14 years old individuals while a three-fourth proportion is found in 20 year old individuals (Kessler et al., 2007). Many problems are engaged by teenage learners, such as Fear of missing out (Balta et al., 2020), cyber bullying (Li, 2010), stress (Wironika et al., 2019), anxiety (Lestari et al., 2013), depression (Riastiningsih & Sidarta, 2018), self injury (Ulum et al., 2019), and Nomophobia (Yildirim et al., 2016).

An attempt to minimize the mental health problems suffered by learners is - improving the school roles. School is a protective factor for mental health (Shine & Hydon, 2008). Schools are expected to function as a place to improve and promote mental health and wellbeing (Fazel et al., 2014). They become the center of life for teenagers, hopes, and supports for the graduates. They allow learners to go through psychological problems (Johnson et al., 2011).

A significant component contributing to mental health at school is teacher (Bentley, 1965). Teachers are the valuable partners for mental health professionals at schools. They could also take crucial roles in mental health intervention program at schools (Ringwalt et al., 2010). Teachers are expected to effectively identify mental health problems of learners and to be the guards and reference of mental health care. (Severson et al., 2007).

Junior and Senior High School teachers frequently interact with more than 100 learners per day (Johnson et al., 2011). However, they still have difficulties to recognize risked-learners (Johnson et al., 2011). Moreover, many teachers are lack of mental health knowledge so that effective training for them to improve their mental health skills and knowledge are needed (Bishop et al., 2005); (Franklin et al., 2012).

The concept of mental health literacy was firstly proposed by Anthony Jorm in 1997. He explained that mental health literacy is science and belief of recognizing problem, management, or prevention. Jorm explained several components in mental health literacy. They were: Jorm explained there were several components in mental health literacy such as 1) specific problem recognition or difference of a psychological distress type, 2) having proper knowledge and belief about certain risk factors and causes, 3) having proper understanding and knowledge about self-help intervention, 4) having knowledge and belief about professional assistance availability, 5) having attitudes to seek accurate assistance, and 6) having knowledge to seek information about mental health (Rosen et al., 2007). Initially, mental health literacy concept appeared in medical education in 1970 in the United States of America. This interest of topic has been increasing since 1990. Health literacy is known as health determinant factor and it becomes a mental health establishment goal (Nutbeam, 1994). Health literacy is a skill to obtain, process, and understand basic health information and health service to make appropriate health decision. It has developed into health status contributor (Nutbeam, 2000).

Several reasons of Jorm to develop mental health literacy concepts were: First, health literacy ignored mental disruption. It made him proposing mental health literacy concept based on the report of the Australia's government in 1993 that determined the target and objective of the national health, including mental health problems (Nutbeam & Wise, 1993). The second reason was mental health field ignored health literacy. At that time, the emphasis was mostly focused on cognitive and psychomotor aspects of primary care, especially for doctors in caring mental health problems. It encouraged Jorm et al to initiate the improvement of community cognition knowledge and skills, including consumers, caregivers, and parents as the priorities of this sector.

Teachers are expected to provide understanding, motivation, and support for learners to grow optimally. They have important roles as partners to prevent, identify, and intervene mental

health problems of children and teenagers (Whitley et al., 2012). Even so, with large resource of teachers, they rarely use the opportunities to provide mental health literacy (Lynn et al., 2003).

Many studies emphasized on the importance of learners' mental health literacy (Skre et al., 2013; McLuckie et al., 2014; Lanfredi et al., 2019; Mamun et al., 2020; Clark et al., 2020). Middle school and a high school teachers interact with more than 100 students per day. But teachers find it difficult to recognize students who are truly at risk (Johnson et al., 2011). This research aims to find out the mental health literacy operational definition and the urgency of mental health literacy of the teachers.

Method

This article is a literature review study. This literature review aims to answer the proposed research questions to be more specific, structured or systematic, planned, and focused. A literature study has functions to: 1) facilitate researchers to be *up to date* with the field of expertise, 2) provide evidence for researchers and other parties concerning with theoretical and practical significance specifically from the conducted research, 3) summarize the related studies for the sake of the conducted research, 4) provide correct and clear start to develop a theory or a guidance for the new research gap, 5) provide summary of the previous studies for other researchers who wanted to support the latest researches, and 6) supervise the research to assess the research output potency (Purnomo, 2018).

This literature review was conducted through identification, synthesis, and assessment of all provided evidence. It was done qualitatively and quantitatively so it could have strong and empirical answers related to the focused research questions (Petrosino et al., 2012). This research applied a systematic literature review from five search engines, Springerlink, Science direct, Jstor, Eric, and Pubmed. This research used PRISMA as the guidance to arrange the article. The applied keywords were "mental health literacy", "school", and "teacher". The taken references are from 1997 - 2020.

Several criteria applied for this research were: a) English-written articles, b) school or education *setting* researches, and c) mental health literacy studies conducted at schools. From the searching process, three hundred and thirty six articles were obtained from Springerlink, 186 articles from Science Direct, 5 articles from Jstore, 17 ERIC articles, 6 Pubmed articles, and 87 Sage Journal articles. The research was done by summarizing articles obtained based on the names of authors, titles, nations, research types, applied conceptual definition, and reasons of the importance for the teachers to have mental health literacy.

Table I
Reference source, keywords, and results

Journal searches	Keywords	Total
Spingerlink	health literacy" AND "teacher" AND "school"	336
Science direct	health literacy" AND "teacher" AND "school"	186
J Stor	health literacy" AND "teacher" AND "school"	5
ERIC	health literacy" AND "teacher" AND "school"	17
Pubmed	health literacy" AND "teacher" AND "school"	6
Sage Journal	health literacy" AND "teacher" AND "school"	87

The researcher conducted several stages in this research, started from listing the research question arrangement and determining the reviewed-research questions. The research questions were about the mental health literacy operational definition and the urgency of mental health literacy of the teachers.

The next sage, the researcher identified several research questions, developed research protocol, and determined the database location of the research results as the research site. Based on the search, the researchers successfully obtained the relevant findings with the research questions. Therefore, 637 articles were found in total. The researchers selected the qualified articles. The articles should be complete (full paper). They should be in line between the abstracts and the contents. The articles also should provide scope of the research. This limitation was done to get novelty of the research. The extracting data from individual study were done to determine the important findings. Four articles were excluded due to duplicated. This research excluded the data due to several reasons: 1) irrelevant research topics, 2)

literature reviews or papers, 3) book reviews, 4) programs for learners or parents, and 4) non-English texted articles.

Result

The numbers of the articles were 633. The researchers selected the qualified articles. The articles should be complete (full paper). They should be in line between the abstracts and the contents. The articles also should provide scope of the research. This limitation was done to get novelty of the research. The extracting data from individual study were done to determine the important findings. The data extraction consisted of title, setting, and the applied sample. There were seven relevant articles with the research questions. The results of those seven articles were summarized as follow.

Tabel 2
Result

No	Authors	Countries	Research Types	Definition	Urgency
1	Pi-Chun Hsu , I-Hsiung Chang and Ru-Si Chen (Hsu et al., 2019)	Taiwan	Quantitative research	Individual knowledge and belief about themselves, mental health problems on other people, and self-subsistent strategy to overcome mental health problems (Campos Dias and Palha, 2018).	
2	Stan Kutcher, Yifeng Wei , Heather Gilberds , OmaryUbuguyu , TasianaNjau , Adena Brown , Norman Sabuni , AyoubMagimba and Kevin Perkins (Kutcher, Wei, Gilberds, et al., 2016)	Tanzania	Experimental Quantitative research	Mental health literacy is defined as: (1) understanding how to maintain and keep positive mental health, (2) understanding about mental health problems and care, (3) decreasing the mental health problem related stigma, (4) improving searching accuracy knowing when and where to get help, and (4) developing competence designed for improving mental health care and self-management skill (Kajawu et al, 2016; Kutcher et al, 2015; and Kutcher, 2016). Mental health literacy is assumed as early hood mental health promotion basis to identify mental disease, intervention, and sustainable	

care (Kutcher, Wei & Weist, 2015).

3	Wendy Carr, Yifeng Wei, Stan Kutcher, and Amy Heffernan. (Carr et al., 2018)	Canada	Experimental Quantitative research	Mental health literacy is defined as the understanding to obtain and maintain proper mental health, understand mental health problems and cares, develop skill to reduce stigma, and develop capacity to improve the assistance search effectiveness (knowing when, where, and how to get assistance [Kutcher, Bagnell, & Wei, 2015; Kutcher, Wei, & Coniglio, 2016]).	Needs of mental health literacy for teachers are important especially for Junior and Senior High Schools because ages from 12 until 25 years old are susceptible to mental health problems. Thus, they would be easily diagnosed. It is also important because mental health problems are greatest disease during this life phase (Kessler et al., 2005; Kirby & Keon, 2006; Kutcher, Bagnell, & Wei, 2015; Smetanindkk., 2011; WHO, 2001) Primary school teachers have to establish appropriate mental health literacy based on the development of various emotional, social, and positive mental health learning (Weare & Nind, 2011). Improved mental health for teachers should
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lead to effective mental health care access for learners. Thus, it could reduce the negative impacts dealing with undiagnosed mental health problems, such as academic achievement, bad vocational achievement, social dysfunction, committing suicide (Gray, Klein, Noyce, Sesselberg, & Cantrill, 2005; Han & Weiss, 2005; Koller & Bertel, 2006; Wei & Kutcher, 2014; WHO, 2001).

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|---|---|--------|--|---|
| 4 | Stan Kutcher,
Yifeng Wei,
Catherine
Morgan.(Kutcher
et al., 2015) | Canada | Experimental
quantitative
research | Knowledge and belief about mental health facilitates introduction, management, and prevention (Jorm AF, Korten AE, Jacomb PA, et al, 1997).

Mental health literacy consists of four components: understanding how to get and maintain proper mental health; understanding about mental health problems and cares; reducing stigma; and improving assistance (knowing when, where, and how to get MHC) (Kutcher S, Wei Y, 2014); (Kutcher S, Bagnell A, |
|---|---|--------|--|---|

Wei Y, 2015); (Kutcher S, 2009).

- 5 Laurie O. Campbell & Jamie Stickl Haugen & Claudia C. Sutter & Glenn W. Lambie (CNN Indonesia) America Research Development

Teachers are the front liner and have important roles in identifying the mental health problems of learners (Ball et al.2016; Rothi et al.2008).The teachers' roles toward learners' mental health are in line with the supportive roles for learners' education. It becomes significant hindering challenges of mental health for learners' achievements and academic success (Ball et al., 2016).

Teachers were mostly found to be the first parties at schools to observe the challenging indications, difficulties, or other mental health problems of the learners.

Teachers are engaged with learners every day and have important roles to identify

6	Justine Bale, Christine Grové, Shane Costello (Bale et al., 2020)	Australia	Quantitative - Descriptive Analysis	The conceptual framework to support mental health program and mental health literacy (Jorm et al., 1997; Riebschleger, Costello, Cavanaugh, & Grové, 2019). The conceptual framework of mental health literacy standard consisted of six cognitive and psychomotor attributes about mental health and mental disease to provide self-assistance and assistance for other people. (Jorm et al., 1997). The six attributes consisted of: Knowledge about mental health problem care, finding assistance and accessing mental health information, causes and risk factors, available assistance and professional care, independent assistance strategy, and general attitudes toward	learners with suicidal risk or self-injuring risk. Unfortunately, many teachers were not ready and lack of knowledge to overcome such cases (Berger et al., 2014; Heath et al. 2011; Mo et al. 2018; Ross dkk. 2017). Teachers are the gates to facilitate individuals accessing mental health services of children (Laletas, Reupert, & Goodyear, 2017). Children spent their live with their teachers who observe them frequently than their peers or parents. Teachers have potentials to identify mental health risk of learners or changing mental health state of them (Trudgen & Lawn, 2011). Teachers and schools have key roles for children's life. The roles are done by applying social and emotional wellbeing learning
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mental health disease (Jorm, 2000; Jorm, 2012; Jorm et al., 1997).

The World Health Organization (WHO) defines positive mental health as “wellbeing condition of individual’s awareness that has personal skills to overcome normal life pressure, to work productively, and to contribute for community” (WHO, 2013, p. 6)

(Murray-Harvey & Slee, 2010).

Mental health literacy program at primary school is needed to promote and normalize the school service access support. It is to reduce the attached associative stigma to see professional individual at school.

Teachers are potential agents to support mental health promotion development at schools, including mental health intervention program for children.

Schools had been identified as the ideal entrance point to provide mental health care for children since children spent their times at schools (Berzin et al., 2011; Splett & Maras, 2011; Weist, Evans, & Lever, 2014).

Besides that, early prevention and intervention at schools (for examples, positive behavior

7 Jungrim Moon, Anne Williford, Amy Mendenhall (Moon et al., 2017) Midwestern Amerika Online survey The descriptive analysis used to explore educators’ perspectives. The t-test and the Analysis of

Variance (ANOVA) were used to determine the differences of educators' perspectives based on the participants' roles.

teaching) had been admitted important to reduce problematic behaviors in the futures that mostly became the preliminary findings of psychiatrist diagnosis in middle childhood or teenager ages.

Besides that, the promoted mental health programs at schools were effective to serve the unreachable population, such as suburban children or minor ethnicity children (Weist & Albus, 2004).

From the review, seven relevant articles were found. The numbers of each research ranged from 3 until 9 authors. The countries that promoted such research were Taiwan, Tanzania, Canada, America, and Australia. Therefore, the mental health literacy research had been conducted in Asia, Africa, Australia, and America continents.

Table 3
The Research Country Distribution

Countries	Total
	1
	1
	2
	2
	1

From the review, three definitions about mental health literacy were obtained from Jorm (Jorm et al., 1997; Jorm, 2000; Jorm, 2012; Jorm et al., 1997), Kutcher Kutcher et al (2015, 2016), and Dias and Palha (2018). Therefore, from the review, the concept of mental health literacy could be described as follow:

Table 4
Opinions from Jorm, Kutcher, and Palha

Jorm	Kutcher	Dias and Palha
Six cognitive and affective attributes about mental health and mental health disease could facilitate individual and other people (Jorm et al., 1997). The six attributes consisted of: knowledge about mental health problem introduction, seeking assistance and accessing mental health information, causes and risk factors, assistance and available professional care, independent assistance strategy, and general attitude of mental health.	Mental health literacy deals with (1) understanding the way to get and maintain positive mental health, (2) understanding mental health problems, disorders, and cares, (2) attempting to reduce stigma related to mental health, (4) improving seeking help ability (knowing when and when to get help and developing competence to improve personal mental health care and management).	Mental health literacy is an individual knowledge and belief about himself and other people's mental health problems, and strategy to reduce mental health problem.

From the findings, mental health literacy is defined by Jorm and Dias and Palha as cognitive and affective aspect and emphasis on cognitive and belief aspects of individuals. Both definitions discuss mental health and mental health problems to facilitate an individual or other people. On the other hand, Kutcher did not explain the definition about mental health literacy but the emphasized on four mental health literacy aspects and positive mental health importance. Both Jorm and Kutcher explain specifically mental health literacy aspects. Jorm explained six aspects while Kutcher four aspects. However, Dias and Palha did not explain the aspects in detail.

Then, the second research question - why is mental health literacy important for teachers - resulting to these findings. Many 12 - 15 year-old children had been diagnosed suffering mental problems and included into severe disease burden component of this life phase Kessler et al (2015) quoted by Carr, Wei, Kutcher & Heffernan (2018). Teachers are the front line and have important roles to identify the mental health indication of learners (Ball et al., 2016) quoted from Campbell & Haugen, Sutter & Lambie (2019). Thus, mental health literacy is needed by teachers because they are the front lines and have crucial roles to identify the initial symptoms of learners' mental health problems. The reason was 12 - 25 aged children had been diagnosed suffering mental health.

Other findings showed that mental health literacy should be given for primary school learners (Justine Bale, Christine Grové, Shane Costello, 2019). At the present day, mental health literacy researches have been frequently conducted in educational field by promoting qualitative study about the importance of mental health literacy for teachers. Several studies have developed a training program for teachers to have mental health literacy. Thus, there is a need for future research dealing with adding the training program design and effectiveness for educators.

Educational institution and university as the places for teaching this are responsible to promote teacher training and provide professional and continuous teaching. They are also responsible to ensure the mental health training as the part of the teachers' core skills. Thus, they will be more confident to promote mental health wellbeing, identify mental health problems, being aware of how to get to special intervention and access, and contribute effectively to support the follow up (Harrap, 2016).

Discussion

The mental health literacy research had been promoted in various continents, such as Asia (Jeon & Furnham, 2017), Africa (Depression, 2017), Australia (Jorm et al., 1997) America (Fortier et al., 2017). Mental health literacy was proved to be significant determinant of mental health in a population (Broöder et al., 2017; Jorm, 2012; Kutcher, Wei, & Coniglio, 2016; Wei, Hayden, Kutcher, Zygmunt, & McGrath, 2013). Thus, mental health literacy studies applied *school* and teacher settings. The settings were not only applied in advance countries but also the growing countries. It made enthusiasm to improve the awareness of mental health literacy for every individual included educators. Education was proven influencing mental health literacy. Low education was correlated to low knowledge prevalence of mental health problems (Von Dem Knesebeck et al., 2013). Gender also influenced mental health literacy of teenagers. Male teenagers tended to get lower mental health scores than the female teenagers (Cotton et al., 2006).

The findings showed three arguments from Jorm, Kutcher, and Dias and Palha. Jorm had referred to mental health literacy aspect or dimension while Kutcher did not explain the definition specifically. He directly explained the aspects. On the other hand, the third argument from Dias and Palha explained the mental health literacy definition but without the aspects. Kutcher actually expanded the concept of John by adding positive mental health literacy instead of focusing on mental health and risk factors of mental health studies. However, he also added educational domain that emphasized mental health literacy as an asset or investment to be maintained. Recently, studies by Kutcher and Yifeng Wei advocated the mental health literacy definition that had been expanded (Kutcher, Wei, & Morgan, 2015, Wei, Mcgrath, Hayden, & Kutcher, 2016; Kutcher et al., 2016; Wei et al., 2015, 2016, 2017). The concept expansion was due to mental health related concept and intervention development applied contextually. It was developed and evaluated independently by using validated measurement. Thus, it was expected able to improve individual mental health and future population (Kutcher, Wei, & Coniglio, 2016). Actually, when it is observed carefully, mental health literacy concept does not have clear concept and it hinders researchers when they will measure. It was due to several findings were from the aspects. Inf act, between operational definition and aspect are separated. Despite of the mental health literacy definition clarity, mental health literacy has been more acknowledged for everyone, including teachers and educators.

Mental health has positive impacts so it should be promoted continuously as an attempt to identify the needs and to improve teachers' mental health (Froese- Bermarn & Riel, 2012). Besides that, it could also minimize the mental health problem rate on 12 - 15 year old children. Thus, it needs mental health literacy effort for primary school learners. It is in line with Weare & Nind (2011) quoted by Carr, Wei, Kutcher & Hefferman (2018). They showed that teachers had to develop mental health literacy for Primary School levels based on the development of various fields, such as socio-emotional and positive mental health aspects. Thus, teachers will have mental health literacy and be more confident to help other people dealing with mental health problems. They could also accurately identify the symptoms and provide immediate care individually or socially (Wright et al., 2007; Coles & Coleman, 2010).

Conclusion

The concept of mental health literacy was firstly proposed by Anthony R. Jorm. However, mental health literacy undergoes conceptual expansion. A clear concept of mental health literacy is needed to accurately measure mental health literacy matters. Teachers must have mental health literacy because they are the front lines to identify the initial symptoms of mental health. Thus, they could direct learners to obtain mental health care access effectively to reduce negative outcomes of undiagnosed mental health. Besides that, children aged 12 - 25 year old had been diagnosed suffering mental health problems and included in great disease burden component during the life phase. Thus, mental health literacy is important for teachers.

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