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Navigating post-pandemic challenges for school teachers in a South Indian city

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Abstract: World Health Organization (WHO) published its first report regarding the COVID-19 pandemic in the year 2020; a heavy disaster was experienced throughout the globe. The unforeseen pandemic due to COVID-19 has influenced the lives of many people. This study examines the challenges teachers in Thanjavur, a South Indian city, face when navigating post-pandemic schools. Using simple random sampling, the study was conducted on 110 school teachers in the Thanjavur District. The DASS-42 scale developed by Lovibond and Lovibond (1995) was employed to collect data. A sudden transformation in the teaching-learning process from "offline to online (during COVID-19) and online to offline" has created serious implications on the psychosocial aspects among school teachers in terms of experiencing mild to extremely severe stress (33.6%), mild to extremely severe anxiety (57.4%), and mild to extremely severe depressive-like symptoms (47.4%). Therefore, the study revealed psychosocial implications on instructors' performance during COVID-19 periods. Educational stakeholders can develop more effective strategies to promote the psychological resilience of teachers and ensure their overall well-being amid challenging circumstances such as the post-COVID-19 pandemic. The conclusion of the study highlights the significant impact of the pandemic on the mental health of teachers, with significant associations between job status, education level, and years of experience with anxiety and stress levels.

Keywords: *Anxiety, COVID-19, Depression, Education, Schoolteachers, Stress.*

1. Introduction

The worldwide spread of the COVID-19 pandemic, initially discovered in December 2019 in Wuhan, China, has impacted nearly all nations and regions [1]. In response, countries globally have advised the public to adopt preventive measures. These preventive strategies involve practices such as regular handwashing, wearing face masks, maintaining physical distance, and avoiding large gatherings [2, 3]. People became alarmed upon hearing about the rising number of diseases and fatalities worldwide [4]. The epidemic has had an impact on students' mental health while teachers have accumulated an increase in high stress levels since the crisis started [5]. Few studies carried out examined the symptoms of stress, anxiety, and depression among teachers during the pandemic; however, those that were done indicate that teachers may experience psychological symptoms, which emphasizes the significance of reopening schools. This crisis has made instructors more susceptible to issues like anxiety, depression, and stress. The psychological issues can hinder their capacity to teach effectively and are frequently associated with pandemic situations [6]. Teaching in private educational establishments was a protective factor for anxiety symptoms. The results suggest that the second COVID-19 wave profoundly affected teachers' mental health therefore urgent interventions are thus needed to aid teachers' mental health [7].

The COVID-19 pandemic has profoundly affected various sectors globally, with the education system being one of the hardest hits. School teachers, as frontline workers in the education sector, have

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faced unprecedented challenges that have significantly impacted their psychosocial well-being. In South India, the abrupt transition from traditional classroom teaching to online education has exacerbated stress levels among teachers due to technological challenges, increased workload, and the need to balance professional responsibilities with personal life [8]. The findings of the pre-and post-tests show a significant improvement in the psychological health and appreciation of the teachers. It was determined that teachers' psychological well-being, gratitude, and mental health might be enhanced by the intervention [9]. Teachers also reported experiencing psychosomatic problems, exhaustion, and heavy workloads in research done in Spain during the start of the pandemic [10]. Further research has revealed that using information and communication technologies (ICT) to work from home can lead to feelings of stress, anxiety, tiredness, and low job satisfaction [11] additionally, during pandemics, these were the only resources available to teachers. The study results assert the benefits of disseminating mental health screening to identify and address mental health concerns before, during, and after an outbreak of infectious diseases [12]. This Research indicates that younger teachers and those with fewer years of teaching experience are more susceptible to stress due to the sudden transition to online teaching. These teachers often lack the technological proficiency required for remote education, which exacerbates their anxiety and stress levels [13]. The teaching profession is becoming more and more difficult due to the numerous interpersonal, organizational, and administrative obstacles that instructors encounter, leading to elevated levels of stress [14].

According to several studies, teachers experience more psychological discomfort than other professionals in the general population, having non-specific symptoms of stress, anxiety, and depression [15]. A cross-sectional online survey with 708 school teachers shows that 96% preferred teaching in an offline setting. Several drawbacks of taking lessons online were mentioned, including poor information transfer, poor student-teacher contact, inadequate connectivity, and difficulty focusing. The majority of them stated that their working hours increased and their leisure and quality of life decreased as a result of taking online programs. There was a considerable increase in psychological discomfort among private school instructors, teachers who integrated online and offline instruction, and teachers from lower-income families. It provides a practical perspective by examining the link between post-COVID-19 risk management and the emotional responses of school teachers [16]. This study suggests that having adequate knowledge and a sense of security can help reduce negative emotional reactions. These insights highlight the importance of interventions to boost resilience, enhance well-being, and support teachers during crises [17]. Higher levels of well-being were correlated with more years of teaching experience [18] school staff identified key factors that helped them manage stress and anxiety: adaptability, paying more attention to wellbeing, and leveraging interpersonal relationships [19]. The psychosocial effects of the COVID-19 pandemic Since the start of the COVID-19 epidemic, the vast majority of respondents (97.9%) seeking assistance population in the Philippines have reportedly experienced an increase in mental health difficulties. Respondents noticed a rise in anxiety and depressive disorders in particular [20] suggesting that younger teachers and those with less teaching experience may struggle more with the transition to online teaching compared to their older and more experienced counterparts [21]. Teachers at schools and universities report moderate to low levels of stress, anxiety, and depression [22]. The authors emphasize the critical inclusion of trauma-informed care focus in well-being interventions for teachers during and post-Covid [23] as they prepare lesson plans and classroom materials, conduct lessons, and perform other teaching responsibilities, the authors stress the significance of fostering flow experiences, resulting in long-lasting engagement with teaching practices. These flow experiences may shield teachers from burnout, stress, and attrition [24]. To comprehend the direction of the relationship and the degree to which changing lifestyle behaviors affect teachers' psychological health, further data from lifestyle interventions is necessary [25].

2. Objectives of the Study

The study aims to Navigating post-pandemic challenges for school teachers in the Thanjavur block of Tamil Nadu state, with specific objectives to:

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1. Study the socio-demographic profile of the teachers
2. Study the family environment of the teachers during the pandemic
3. Understand the level of stress, anxiety, and depression experienced post-COVID-19 by the teachers

By addressing these objectives, this research seeks to provide a detailed understanding of the specific challenges encountered by educators in this region.

3. Methodology

The study used a simple random sampling method to select the participants. In the Thanjavur block, 44 Government and Government-aided schools were identified, and 7 schools were selected for the study. From the schools, 16 teachers handling both 10th and +2 students were selected. Two invalid responses were excluded, resulting in a total of 110 high school and higher secondary school teachers participating in the study.

The study employed the DASS-42 (Depression, Anxiety, and Stress Scales) developed by Lovibond and Lovibond [26] to collect data. This scale is a widely used and validated tool for assessing depression, anxiety, and stress levels. Additionally, personal and family details were collected from the participants. The data initiated from the DASS-42 scale was analyzed using non-parametric tests such as the t-test, One-way ANOVA, Chi-square test, and correlation. This allowed for the comparison of the psychological impact of the post-COVID-19 pandemic on teachers across different categories.

The study was designed as a cross-sectional study, which involves collecting data from a sample of participants at a single time. This design is suitable for understanding the prevalence and distribution of a particular phenomenon, such as the psychological impact created post-COVID-19 pandemic on teachers. The primary data was collected using a DASS-42 Scale and structural questionnaire, which allowed for the efficient and convenient collection of data from a large number of participants.

4. Limitations of the Study

The sample size of 110 teachers may be considered small for a comprehensive study, which could limit the generalizability of the findings to the larger population of teachers. The simple random sampling method used in this study may not have captured the diversity of teachers in the Thanjavur block, potentially leading to biased results. The DAS-42 scale used in this study may not have captured the full range of mental health concerns experienced by teachers, potentially leading to incomplete or inaccurate results. The study was conducted during a specific time frame, which may not have captured the full range of mental health concerns experienced by teachers over a longer period. The study relied on self-reported teacher data, which may be subject to biases and inaccuracies. The study's findings may not be generalizable to other regions or countries, due to the specific context and cultural factors of the Thanjavur block.

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5. Results

Table 1.
Frequency and percentage of teacher's Depression, Anxiety, and Stress.

Category	Level	n%
Depression	Normal	59(53.6)
	Mild	12(10.9)
	Moderate	15(13.6)
	Severe	18(16.4)
	Extremely Severe	6(5.5)
Anxiety	Normal	48(43.6)
	Mild	13(11.8)
	Moderate	29(26.4)
	Severe	8(7.3)
	Extremely Severe	12(10.9)
Stress	Normal	73(66.4)
	Mild	17(15.5)
	Moderate	14(12.7)
	Severe	3(2.7)
	Extremely Severe	3(2.7)

Table 1 provides a comprehensive overview of the levels of depression, anxiety, and stress experienced by school teachers surveyed during the COVID-19 pandemic. In terms of depression, the majority of respondents fall within the normal range (53.6%), indicating that a significant portion of teachers have managed to maintain good mental health amidst the challenges brought about by the pandemic. However, notable percentages experience varying degrees of depression, with 10.9% reporting mild depression, 13.6% moderate depression, 16.4% severe depression, and 5.5% experiencing extremely severe depression. These findings highlight the prevalence of depressive symptoms among teachers, underscoring the need for targeted interventions to support their mental well-being. Regarding anxiety levels, the data revealed a similar pattern, with 43.6% of respondents reporting normal anxiety levels. However, a considerable proportion of teachers experience mild (11.8%), moderate (26.4%), severe (7.3%), and extremely severe anxiety (10.9%). The majority of the teachers (66.4%) report normal stress levels, but some of them experience mild, moderate, severe, or extremely severe stress, highlighting the need for comprehensive support mechanisms to address the challenges they face during remote teaching.

Table 2.
Depression, Anxiety, and Stress among the age of the respondents.

Age	Category	Depression	Anxiety	Stress
30-40	Normal	41.7(10)	25.0 (6)	79.2(19)
	Mild	20.8(5)	25.0 (6)	20.8(5)
	Moderate	25.0(6)	50.0 (12)	0
	Severe	12.5(8)	0	0
40-50	Normal	42.1(16)	34.2 (13)	55.3(21)
	Mild	18.4(7)	13.2 (5)	15.8(6)
	Moderate	7.9(3)	23.7 (9)	21.1(8)
	Severe	23.7(9)	21.1(8)	7.9(3)
	Extremely Severe	71.9	7.9 (3)	0
50-60	Normal	68.8(33)	60.4 (9)	68.8(33)
	Mild	0	4.2 (2)	12.5(6)
	Moderate	12.5(6)	16.7 (8)	12.5(6)
	Severe	12.5(6)	0	0
	Extremely Severe	6.3 (3)	18.8 (9)	6.3 (3)

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Table 2 presents a detailed breakdown of depression, anxiety, and stress levels among school teachers categorized by age groups. The data shows that 41.7% of respondents aged 30-40 experience normal depression, with varying levels of anxiety and stress, with 79.2% reporting normal levels and 20.8% experiencing mild stress.

The study reveals that teachers in the 40-50 age group experience moderate levels of depression and anxiety, with stress being a prevalent issue. Despite a majority experiencing normal levels of depression (42.1%) and anxiety (34.2%), severe depression (23.7%) and moderate anxiety (23.7%) are more prevalent. Stress levels vary, with a significant percentage experiencing moderate and severe stress (7.9%).

In the 50-60 age group, a substantial majority report normal levels of depression (68.8%), anxiety (60.4%), and stress (68.8%). However, there is a notable percentage experiencing mild anxiety (4.2%) and moderate stress (16.7%). The prevalence of severe depression and anxiety decreases in this age group compared to younger cohorts. These findings suggest that while teachers in this age group generally maintain good mental health, there are still some who experience mild to moderate levels of anxiety and stress, indicating the need for targeted support interventions.

Table 3.
Frequency and percentages of teachers that suffer from Depression.

Category	Normal	Mild	Moderate	Severe	Extremely Severe	$\chi 2$(df)	P value	N
Job Status								
Permanent	46.3(51)	6.3(7)	10.9(12)	13.6(15)	2.7(3)	8.550a(4)	0.073	110
Temporary	7.2(8)	4.5(5)	2.7(3)	2.7 (3)	2.7(3)			
Education								
PG	0	0	0	0	2.7(3)	118.284a(16)	0.000	110
B.Ed.	30(33)	4.5(5)	10.9(12)	0	0			
M.Ed.	11.8(13)	6.3(7)	2.7(3)	13.6(15)	0			
M.Phil.	10(11)	000	0	0	0			
Ph.D.	1.8(2)	0	0	2.7(3)	2.7(3)			
Years of Experience								
0-5 Years	11.8(13)	4.5(5)	0	2.7(3)	0	45.569a(20)	0.001	110
6-10 Years	13.6(15)	2.7(3)	5.4(6)	5.4(6)	2.7(3)			
11-15 Years	12.7(14)	1.8(2)	2.7(3)	0	0			
16-20 Years	12.7(14)	1.8(2)	2.7(3)	2.7(3)	0			
21-25 Years	0	0	2.7(3)	2.7(3)	2.7(3)			
26Years	2.7(3)		0	2.7(3)	0			

Table 3 provides insights into the frequency and percentages of teachers suffering from depression across different categories, including job status, education level, and years of experience. In terms of job status, permanent teachers exhibit higher percentages across all levels of depression compared to temporary teachers.

The majority of permanent teachers report normal depression levels (46.3%), followed by mild (6.3%), moderate (10.9%), severe (13.6%), and extremely severe (2.7%). Temporary teachers have lower depression levels than regular teachers, with normal levels at 7.2% and mild, moderate, severe, and extremely severe levels ranging from 2.7% to 4.5%. Job status significantly influences depression prevalence among teachers. Teachers with a postgraduate qualification have the highest percentage of extremely severe depression, while those with a Bachelor of Education have lower levels.

The study found a significant association between education level and depression levels among teachers, with the highest normal depression level being 30.0%. This suggests that education level and years of experience may play a crucial role in determining depression severity.

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Table 4.
Frequency and percentages of teachers that suffer from Anxiety.

Category	Normal	Mild	Moderate	Severe	Extremely Severe	χ2(df)	P value	N
Job Status								
Permanent	39.1(43)	8.1(9)	17.2(19)	7.2(8)	8.1(9)	9.687a(4)	0.046	110
Temporary	4.5(5)	3.6(4)	9.0(10)	(0)	2.7(3)			
Education								
PG	0	0	2.7(3)	0	0	77.256a(16)	0.000	110
B.Ed.	31.8(35)	9.0(10)	4.5(5)	0	0			
M.Ed.	7.2(8)	0	14.5(16)	4.5(5)	8.1(9)			
M.Phil.	4.5(5)	2.7(3)	2.7(3)	0	0			
Ph.D.	0	0	1.8(2)	2.7(3)	2.7(3)			
Years of Experience								
0-5 Years	4.5(5)	2.7(3)	11.8(13)	0(0)	0(0)	52.839a(20)	0.000	110
6-10 Years	10.9(12)	(7)	4.5(5)	2.7(3)	5.4(6)			
11-15 Years	12.7(14)	0(0)	2.7(3)	(2)	0(0)			
16-20 Years	10(11)	2.7(3)	4.5(5)	2.7(3)	0(0)			
21-25 Years	2.7(3)	0(0)	2.7(3)	0	2.7(3)			
26-30 Years	2.7(3)	0(0)	0(0)	0	2.7(3)			

Source: (Chi-square test).

Table 4 presents the teachers suffering from different levels of anxiety, categorized by job status, education, and years of experience. The results show that the majority of teachers (39.1%) have a normal level of anxiety, while 8.1% have mild anxiety, 17.2% have moderate anxiety, 7.2% have severe anxiety, and 8.1% have extremely severe anxiety. The $\chi 2$ test indicates significant differences in anxiety levels across job status ($p = 0.046$) and education ($p = 0.000$), but not across years of experience ($p = 0.000$). Permanent teachers experience higher anxiety levels, with higher levels among those with a Postgraduate degree and less than 5 years of experience, indicating a significant job status and education level.

Table 5.
Frequency and percentages of teachers that suffer from Stress.

Category	Normal	Mild	Moderate	Severe	Extremely Severe	χ2(df)	P value	N
Job Status								
Permanent	53.6(59)	10.9(12)	12.7(14)	2.7(3)	0	17.222a(4)	0.001	110
Temporary	12.7(14)	4.5(5)	0	0	2.7(3)			
Education								
PG	0	0	0	2.7(3)	0	206.518a(16)	0.00	110
B.Ed.	45.45(50)	0	0	0	0			
M.Ed.	11.81(13)	10(11)	12.7(14)	0	0			
M.Phil.	7.27(8)	2.7(3)	0	0	0			
Ph.D.	1.81(2)	2.7(3)	0	0	2.7(3)			
Years of Experience								
0-5 Years	13.6(15)	5.85(6)	0	0	0	66.694a(20)	0.000	110
6-10 Years	147.27(19)	7.27(8)	2.7(3)	0	2.7(3)			
11-15 Years	12.72(14)	2.7(3)	1.81 (2)	0	0			
16-20 Years	17.27(19)	0	2.7(3)	0	0			
21-25 Years	2.72 (3)	0	2.7(3)	2.7(3)	0			
26-30 Years	2.72(3)	0	2.7 (3)	0	0			

(Chi-square test)

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Table 5 presents the teachers suffering from different levels of stress, categorized by job status, education, and years of experience. The results show that the majority of teachers (53.6%) with a permanent job status fall into the normal category, while those with temporary jobs are more distributed across categories, with a small portion (2.7%) experiencing extremely severe stress. The $\chi 2$ test indicates significant associations between job status ($p = 0.001$), education level ($p = 0.000$), and years of experience ($p = 0.000$) with the stress levels of teachers. In terms of specific categories, teachers with more years of experience (16-20 years) are more likely to be in the normal category, while newer employees (0-5 years) and mid-career employees (6-10 years) show more variation across categories.
These findings suggest that job status, education level, and years of experience are significant factors in determining the level of stress among teachers, with permanent employees and more experienced teachers generally experiencing lower levels of stress.

Table 6.
Correlation Coefficients between Depression, Anxiety, and Stress among Teachers.

Category	Correlations	Anxiety	Stress	Depression
Anxiety	Pearson Correlation	1	0.908**	0.601**
	Sig. (2-tailed)		0.001	0.000
	N	110	110	110
Stress	Pearson Correlation	0.908**	1	0.806**
	Sig. (2-tailed)	0.000		11.01
	N	110	110	110
Depression	Pearson Correlation	0.601**	0.806**	1
	Sig. (2-tailed)	0.000	0.000	
	N	110	110	110

Source: Correlations are significant at the 0.01 Level (2-tailed).

Table 6 presents the correlation coefficients between depression, anxiety, and stress among teachers. The results show that there are strong positive correlations between these variables. Specifically, the correlation between anxiety and stress is 0.908, indicating a very high correlation. Similarly, the correlation between depression and anxiety is 0.601, and the correlation between depression and stress is 0.806. All these correlations are statistically significant at the 0.01 level, indicating that the relationships are not due to chance.

These findings suggest that there is a strong interconnection among depression, anxiety, and stress among teachers. This implies that interventions aimed at reducing anxiety and stress might also help in reducing depression. The high correlations indicate that these variables are closely linked and that addressing one issue can have a positive impact on the others.

Table 7.
Independent sample t-test between Gender and study variables.

Category		N	Mean	Sd	T	Df	P-value	Results
Anxiety	Equal variances assumed	44	-0.152	1.570	-0.096	108	0.923	NS
	Equal variances not assumed	66	-0.152	1.234	-0.089	68.797	0.929	NS
Stress	Equal variances assumed	44	11.02	1.673	-0.403	108	0.688	NS
	Equal variances not assumed	66	11.70	1.884	-0.358	58.076	0.722	NS
Depression	Equal variances assumed	44	12.16	2.456	0.231	107	0.817	NS
	Equal variances not assumed	66	11.59	2.851	0.199	51.929	0.843	NS

Source: (Levene's Test).

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Table 7 presents the results of an independent samples t-test comparing gender differences in anxiety, stress, and depression. The test was conducted under the assumption of equal variances (Levene's test) and without this assumption. The results show that there are no statistically significant differences between males and females in any of the three variables. For anxiety, the mean score for both genders is -0.152, with a standard deviation of 1.570 for the equal variances assumed and 1.694 for the equal variances not assumed. The t-values are -0.096 and -0.089, respectively, with p-values of 0.923 and 0.929, which are not significant at the 0.05 level. The mean scores for stress were 11.02 and 11.70, with standard deviations of 1.673 and 1.884 respectively, and t-values of -0.403 and -0.358, respectively. The study found no significant difference in depression scores between the mean scores of 12.16 and 11.59, with standard deviations of 2.456 and 2.851, respectively. The study reveals no significant differences in anxiety, stress, and depression between males and females, indicating these differences are likely due to chance rather than actual population differences.

6. Discussion

The main findings of the study reveal that a substantial proportion of school teachers are affected by mental health issues during the post-COVID-19 pandemic. Specifically, a significant percentage of teachers experience varying levels of depression, anxiety, and stress. Notably, while a majority of teachers report normal levels of depression (53.6%), anxiety (43.6%), and stress (66.4%), a considerable percentage experience mild to extremely severe symptoms across these mental health indicators.

A Spanish study found that teachers from preschool education to university level had a prevalence of poor mental health (depression 16%, anxiety 29%, stress 19%) and Teachers above 47 years of age indicated the highest level of anxiety, however, it was noted that younger teachers (23 – 35 years) had shown more symptoms of high stress [27]. This might be because teachers have greater rates of stress and anxiety symptoms as a result of higher burnout [28] It was found that elevated levels of psychological distress among teachers, with similar patterns of depression, anxiety, and stress reported [29]. The study highlighted the widespread prevalence of mental health challenges among educational professionals during crises, emphasizing the need for targeted support interventions [30]. Furthermore, the study observed strong correlations between depression, anxiety, and stress that align with existing literature underscoring the interconnected nature of these mental health outcomes [31]. The importance of comprehensive mental health interventions for teachers, encompassing strategies to mitigate stress, anxiety, and depression was emphasized [32].

Furthermore, the study's observation of strong correlations between depression, anxiety, and stress aligns with existing literature underscoring the interconnected nature of these mental health outcomes. The survey done during the pandemic in three Chinese cities revealed that anxiety was common among teachers, accounting for 13.67% of the instructors; older teachers exhibited greater levels of symptoms, and women reported higher anxiety levels than men [27, 28]. emphasized the importance of comprehensive mental health interventions for teachers, encompassing strategies to mitigate stress, anxiety, and depression simultaneously [29]. Overall, the study's findings underscore the critical importance of prioritizing teachers' mental well-being and implementing evidence-based support mechanisms tailored to their unique needs. By integrating insights from existing literature, policymakers and educational stakeholders can develop more effective strategies to promote the psychological resilience of teachers and ensure their overall well-being amid challenging circumstances such as the post-COVID-19 pandemic.

7. Social Work Interventions

Counseling and Therapy: School teachers, who are primary caregivers for children, require counselling and therapy services to manage their mental health and well-being, including individual and group sessions and online support groups.

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Community Engagement: Social workers must engage with the community to raise awareness about mental health and self-care during the pandemic. This includes organizing community events, workshops, and support groups.

Family Support: Teachers often have family responsibilities, and social workers must provide support to families by offering counseling services, home visits, and other forms of assistance.

School-Based Interventions: Schools have to implement school-based interventions such as stress management workshops, mindfulness exercises, and peer support groups to help teachers cope with the pandemic.

Online Support: Social workers are required to volunteer to offer online support services, including counseling and therapy sessions, to teachers who may not have access to in-person services.

Collaboration with Healthcare Providers: Social workers should collaborate with healthcare providers to ensure that teachers receive appropriate medical care and mental health support.

Policy Advocacy: Social workers must advocate for policies that support teachers' mental health, including mental health services, flexible work arrangements, and employee assistance programs.

8. Policy-Level Promotions

Mental Health Services: Governments can provide mental health services, such as counseling and therapy, to teachers and other frontline workers.

Employee Assistance Programs: Employers have to implement employee assistance programs (EAPs) that provide mental health support and resources to teachers.

Flexible Work Arrangements: Governments and employers should come forward to offer flexible work arrangements, such as telecommuting or flexible hours, to help teachers manage their workload and reduce stress.

Public Awareness Campaigns: Governments and health organizations have to jointly launch public awareness campaigns to educate the public about mental health and the importance of self-care during the pandemic.

Community Resources: Governments and non-profit organizations should provide community resources, such as food banks and other forms of support, to help teachers and their families cope with the pandemic.

Research and Monitoring: Governments and health organizations can conduct research and monitoring to better understand the psychosocial impact of the pandemic on teachers and other frontline workers, and to develop effective interventions and policies.

Collaboration with Educational Institutions: Governments and health organizations can jointly collaborate with educational institutions to develop and implement mental health programs and policies that support teachers and students

9. Conclusion

The study on the psychosocial impact of the post-COVID-19 pandemic on high school and higher secondary school teachers in the Thanjavur block of a Tamil Nadu state in South Indian city has provided valuable insights into the mental health concerns of this vulnerable population. The findings of the study highlight the significant impact of the pandemic on the mental health of teachers, with significant associations between job status, education level, and years of experience with anxiety and stress levels.

The COVID-19 pandemic has significantly impacted the mental health of teachers, with a significant proportion experiencing high levels of anxiety and stress. Factors such as job status, education level, and years of experience significantly influence these levels. Permanent teachers are more likely to experience anxiety and stress, while those with higher education levels are more likely to experience it.

The study's findings have important implications for the development of targeted interventions and policies to support the mental health and well-being of teachers. The results suggest that interventions aimed at reducing anxiety and stress among teachers should be tailored to the specific needs and

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circumstances of each teacher, taking into account factors such as job status, education level, and years of experience. Additionally, the study's findings highlight the need for policymakers to prioritize the mental health and well-being of teachers, recognizing the critical role that they play in the education system.

Transparency:

The authors confirm that the manuscript is an honest, accurate, and transparent account of the study; that no vital features of the study have been omitted; and that any discrepancies from the study as planned have been explained. This study followed all ethical practices during writing.

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