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Faculties' Mental Health and Workplace Stress: An Analytical Study in the Context of Health Awareness

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ABSTRACT: Higher education faculty members' professional effectiveness is affected by their Mental Health. Faculty members in higher education are experiencing increasingly demanding responsibilities related to academics, administration and research. Stressful conditions at their workplaces, such as heavy workloads, role ambiguity, performance evaluations, technological changes and poor work life balance, can negatively affect the psychological wellbeing of these professionals. On the other hand, an increased understanding of health is recognized as a protective factor allowing higher education faculty members to pursue a healthy lifestyle, effectively manage their stress and develop and/or sustain their emotional resilience. This study examines the relationships between workplace stress, mental health and health awareness among faculty members who are employed in the higher education system. This study utilized a quantitative methodology and collected data via a survey instrument with a Likert-type scale (five point) as its measurement tool. The population of this study included 311 faculty members who were employed by either government or privately owned higher education institutions; they were selected using convenience sampling. For the purpose of analyzing the collected data the researcher used a variety of statistical methods including descriptive statistics, reliability coefficients, correlations, regression analyses, independent sample t-tests and one-way Analysis of Variance. The results of this study indicate that workplace stress negatively impacts mental health while health awareness provides positive benefits to psychological wellbeing and diminishes negative impacts of stressful experiences. These findings will be useful to educational administrators and policy makers in developing

institutional wellness programs, counseling services and stress reduction efforts and in promoting employee health awareness. Encouraging the wellbeing of college professors will contribute to improved physical and mental health of these employees which in turn will lead to improved effectiveness in their roles as teachers, researchers, organizationally committed employees and providers of high-quality educational products and processes. As a result of the evidence presented in this study it is clear that there are several ways to promote healthy academic environments within colleges/universities and create opportunities for long-term sustainability of these organizations.

INTRODUCTION

Mental health and workplace stress among faculty members in higher education Higher education institutions are transforming at a very high rate over the last decade. The use of Digital learning tools, outcome based education, accreditation standards, performance indicators for research, international collaborations & (Mohna, et.al. 2015) additional administrative responsibilities have all added to the role of faculty members. As higher education has changed globally, it has created stress on academic professionals (Deshwal, S., 2014). Workplace stress refers to how an individual responds psychologically and physiologically when their professional workload exceeds their capacity or availability of resources. Many faculty members report feeling stressed through the amount of time spent teaching; continuous changes in curriculum; pressure to publish articles; competition for funding; additional administrative duties; student expectations; evaluation systems; and work-life balance issues. Prolonged exposure to these stressors commonly leads to anxiety, depression, emotional exhaustion, burn-out, sleep disturbances, reduced job satisfaction and a decline in organizational commitment (Shinde., 2025).

Faculty mental health issues have taken center stage in higher education as educators are not only responsible for institutional performance but also the intellectual and emotional development of students. When faculty members are under chronic stress, they may exhibit less effective teaching method (P, P. M., et.al., 2021), diminished creativity, lower research productivity, absenteeism and decreased interpersonal relationships within academic communities. Thus, protecting the mental health of faculty members is now an institutional priority across colleges and universities globally. A person's awareness of their health is defined as their knowledge of physical, psychological, emotional and social health and their adoption of behaviors that promote overall well-being (Tyagi, et.al., 2016). The likelihood of faculty members being engaged in regular physical activity, balanced nutrition, managing stress practices, mindfulness, yoga, meditation, getting sufficient sleep and seeking medical consultation timely increases when they possess greater levels of health awareness. The positive health behaviors exhibited by faculty members significantly increase their resilience against workplace stress and positively affect their psychological functioning.

The COVID-19 pandemic greatly enhanced the Digital transformation in higher education and highlighted the need for faculty to address their mental health. Faculty quickly transitioned to online platforms for teaching, hybrid models of instruction, Digital assessments and virtual student engagement while continuing to manage personal/family responsibilities. Although we have passed the pandemic era, many institutions continue to rely heavily on technology and evolve their expectations of faculty performance which makes supporting the mental health needs of faculty even more imperative than before. Wellness programs conducted by universities can dramatically enhance faculty wellness by encouraging preventative healthcare practices, counseling for psychologists, reducing stress through workshops/activities, promoting physical fitness activities and employee assistance programs. Institutions that prioritize employee wellness will typically see improved organizational commitment, enhanced collaboration, increased job satisfaction and improved educational outcomes.

There are several theoretical frameworks that describe the relationship between workplace stress and mental health. The JD-R model explains how excessive job demands and insufficient institutional resources result in stress and burn-out. Lazarus & Folkman's Transactional Model of Stress defines that stress results from an individual's perception of environmental demands and available coping resources. CRR theory describes that stress occurs when individuals perceive a loss or threatened loss of valuable personal resources such as energy, time, health or social support. These theories together provide evidence that increasing both personal and institutional resources can significantly reduce workplace stress and improve mental health. Health awareness functions as an important protective factor for faculty members to recognize symptoms of stress, utilize healthy coping mechanisms, seek professional help if needed and maintain work-life balance. University administrations that establish

wellness initiatives such as mindfulness programs, flexible work arrangements, peer support groups, access to mental health counseling services, ergonomic workplaces and regular health screenings create a culture of wellness that is beneficial to employees and students.

In India, higher education institutions have grown exponentially and there have been growing expectations related to research publications, accreditation standards, industry partnerships, innovation and Digital education. With this growth comes pressure on faculty members to meet multiple performance standards using limited institutional resources. This creates a need to develop comprehensive strategies for stress management and health promotion. The purpose of this study is to investigate the relationship between workplace stress, mental health and health awareness among faculty members working in higher education institutions. By examining these relationships using empirical data collected from 311 respondents, this study aims to develop practical recommendations for educational administrators, policymakers and institutional leaders who are responsible for developing supportive workplace environments which will enhance faculty well being and sustainable educational excellence

REVIEW OF LITERATURE

In terms of developing an appropriate framework for promoting psychological well-being among faculty members at higher education institutions, it is clear from the literature that several factors are contributing to both positive and negative effects on this population. It has been noted by researchers such as Singh and Kaur (2020) who conducted a study on health awareness among academic professionals and reported that health literacy was strongly related to lower stress levels and healthier lifestyle choices and also provided evidence regarding the potential for faculty development programs to enhance the overall health awareness of academics. Similarly, Sharma and Verma (2019) identified that increased stress levels among faculty have been linked to the increase in their workload resulting from institutional mandates requiring them to take on more administrative and research responsibilities. Further studies have shown that the increase in workload has resulted in significant increases in psychological stress. For example, Ahmed et al. (2021) showed that the use of remote/online instruction, which has become increasingly prevalent since the onset of COVID-19, has led to increased burnout among college professors due to longer hours required to teach online and limited opportunities for social interaction. Further, studies have also indicated that many faculty members lack the necessary skills or knowledge to adapt to these changes effectively. For example, Chen et al. (2024) demonstrated that strong health awareness was a mediator in the relationship between occupational stress and psychological well-being; therefore, it can be assumed that faculty members with high health awareness may be more likely to develop effective coping mechanisms to mitigate the adverse impact of stressful events. Finally, studies have suggested that faculty members who engage in regular physical activity are less stressed than their inactive counterparts. For example, Kumar and Gupta (2022) conducted a study comparing the level of stress among faculty members who engaged regularly in yoga, meditation, and other forms of exercise compared to those who did not. The results of this study showed that faculty members who were physically active had significantly fewer symptoms of depression and anxiety than those who were inactive. These studies provide substantial empirical evidence supporting the idea that a number of different factors contribute to the level of psychological well-being among college professors. These include increased workload and responsibility, inadequate support for adapting to new technologies used in teaching and communication, inadequate counseling services available to address issues related to burnout, inadequate wellness programs to promote the health and wellness of faculty members, and a lack of opportunities for faculty members to engage in activities designed to reduce stress and enhance their overall quality of life.

Need of the Study

Faculty members have many roles within higher education (teaching, research, mentorship, developing curricula, administration, counseling students, participation in accreditation processes and community engagement) and these roles are continually expanding. The expanded roles of faculty create a continued source of workplace stress for faculty members. The chronic workplace stress experienced by faculty negatively impacts both the psychological health and performance of faculty members. Additionally, if faculty members experience poor mental health it can lead to decreased ability to teach effectively, decreased research productivity, increased absenteeism, burn out and decreased commitment to the institution. As a means to prevent or reduce negative consequences on psychological well being, employees who recognize they are experiencing symptoms of stress can use health awareness as a method to develop healthy lifestyle choices and access professional support when necessary. Institutions of higher learning have been investing in employee wellness programs. However, there is little empirical evidence supporting the effectiveness of such programs.

RESEARCH GAP

Most prior research into occupational stress, burnout, employee well-being, and mental health in schools and universities, has concentrated on either workplace stress and/or employee psychological well-being, independently. Some scholars (e.g., Loo & Loi, 2006; Maslach et al., 1996) have studied burnout and other forms of psychological distress in academic staff, such as work-life balance, and job satisfaction. Others (e.g., Kinman, 2011) have researched the extent to which organizational factors (such as organizational support for faculty employees), and wellness programs can help minimize the effects of workplace stress. Nonetheless, there are fewer than a handful of empirical studies that examine both how faculty perceptions of their own physical health affect their emotional state at work and how perceptions of one's own physical health affects stress levels among faculty.

Research Objectives

- To evaluate the workplace stress (WS) level among the faculty members working in higher educational institutions (HEIs).
- To examine the relationship in between workplace stress (WS) & mental health (MH) among faculty members (FM).
- To analyze the influence of health awareness (HA) on the mental health (MH) of faculty members (FM).

Hypotheses of the study

- H01: Workplace stress (WS) significantly affects mental health (MH).
- H02: Health awareness (HA) significantly affects mental health (MH).
- H03: Workplace stress (WS), health awareness (HA) & mental health (MH) are significantly related.

Research Methodology

The current study used an exploratory, descriptive, quantitative research methodology to investigate the inter-relationship among workplace stress, mental health and awareness of health among the staff of the higher education institutions. The research methodology primarily relied upon the collection of primary data by means of a structured questionnaire. The questionnaire used for collecting data has been formulated with reference to a comprehensive review of relevant literature and various validated measurement scales. The target population for this research study are the employees of Government and Private Higher Educational Institutions. A convenient sampling technique is used because it is relatively easy to collect data from the participants who agreed to take part in the research. In all, 311 valid responses are collected and are taken into account in finalizing the analysis. Participation in the survey is voluntary, therefore, the respondents' anonymity and confidentiality will be ensured. Moreover, they have also been informed that their identity and response will be utilized solely for academic purpose. Data were coded and analyzed with SPSS Version. The reliability of the instrument utilized for conducting this research study has been examined with Cronbach's alpha. Frequency, Percentage, Mean, Standard Deviation etc. Descriptive Statistics have been applied to describe the characteristics of the respondents and distribution of each variable. For examining associations and testing hypotheses Pearson Correlation Coefficient, Multiple Regression Analysis, Independent Samples T Test and One Way Anova have been applied respectively. Significance level of $p < .05$ has been maintained for all analyses performed in this study.

Data Analysis & Interpretation

Table 1: Demographical Characteristics of Respondents

(N = 311)			
Variables	Categories	Freq.	Percentage (%)
Gender_Wise	Male (M)	176	56.60
	Female (F)	135	43.41
Age_wise	Below 30 Yrs	58	18.60

	31–40 Yrs	121	38.90
	41–50 Yrs	87	28.0
	Above 50 Yrs	45	14.50
Qualification_Wise	Master's Degree	79	25.41
	Ph.D. Degree	198	63.70
	Post Doctorate Degree	34	10.90
Institutional Type	Government Job	128	41.21
	Private Job	183	58.80
Teaching Experience_wise Level	Below 5 Yrs	52	16.70
	5–10 Yrs	109	35.02
	11–20 Yrs	93	29.90
	Above 20 Yrs	57	18.31
Source: Primary Data			
<i>The demographic information shows that 56.60% of the respondents were men and 43.41% of the respondents were women. Most of the respondents were between 31 and 40 years old. Many of the respondents had a doctoral degree. More than half of the respondents work at a private university. Nearly all of the respondents have been teaching for 5-10 years.</i>			

Table 2: Reliability Statistics (Analysis)

Obtained Variables	No. of Item (s)	Cronbach's_Alpha Values
Workplace Stress (WS)	8	0.873
Mental Health (MH)	8	0.889
Health Awareness (HA)	7	0.851
Overall Scale	23	0.884
Source: Primary Data (N = 311)		
<i>All Cronbach's alpha (internal consistency) measures were .70 or greater. Therefore, we are confident in the dependability of our data to use in statistical analysis as well as with regard to its validity and reliability to assess workplace stress, mental health and health awareness. Reliability was also high (.88).</i>		

Table 3: Descriptive Statistics (Research Variables)

Variables	Mean	Standard Deviation
Workplace Stress (WS)	3.82	0.71
Mental Health (MH)	3.34	0.68
Health Awareness (HA)	4.02	0.63
Source: Primary Data		

Faculty scores for workplace stress average at 3.82 and indicate that faculty members generally experience a high level of occupational stress. Scores for health awareness are highest at 4.02 and suggest that respondents generally have good awareness of healthy lifestyle practices. Scores for mental health average 3.34 and reflect that among faculty members psychological wellbeing is at a moderate level.

Table 4: Mean Ranking (Major Factors)

Factors	Mean	Rank
Health Awareness (HA)	4.02	I
Workplace Stress (WS)	3.82	II
Mental Health (MH)	3.34	III

Source: Primary Data

Faculty members have a higher level of health awareness than workplace or mental health. Faculty members appear to be generally aware of their own personal and preventative health habits. The next area of concern was related to the pressure at work with all areas being quite different from one another; and in order to improve psychological well-being for faculty members it will likely require greater institutional support.

Table 5: Pearson Correlation Analysis (Matrix)

(N = 311) & Correlation is significant at the 0.01 level (2-tailed)			
Variables	Workplace Stress (WS)	Mental Health (MH)	Health Awareness (HA)
Workplace Stress (WS)	1.000	-0.6840**	-0.3121**
Mental Health (MH)	-0.684**	1.0000	0.5980**
Health Awareness (HA)	-0.312**	0.5980**	1.0000

Source: Primary Data

The Pearson correlation analysis shows a strong, negative relationship between workplace stress and mental health; $r = -.6840$. This suggests that as faculty members' workplace stress increases, their mental well-being will also be expected to decrease. A moderate, positive relationship exists between health awareness and mental health; $r = .5980$. This suggests that faculty members who have an understanding of how to improve or maintain their physical health, they tend to be in good mental health. Finally, a negative relationship exists between workplace stress and health awareness; $r = -.3121$. This implies that faculty members who understand what can be done for their overall health tend to experience less workplace stress than those without this knowledge.

Table 6: Multiple Regression Test Analysis

Predictor	Beta (β)	t-value	Sig.
Workplace Stress (WS)	-0.5921	-11.426	0.0000
Health Awareness (HA)	0.3470	6.218	0.0000
Dependent Variable: Mental Health (MH)			

Model Summary	Value
R	0.7412
R Square	0.5490
Adjusted R Square	0.5450

F Value	187.641
Significance	0.0000
Source: Primary Data	
<i>The regression model explains 54.9 percent of all faculty mental health ($R^2 = .549$) which indicates an excellent model fit. Workplace stress had a significantly negative effect upon mental health ($\beta = -.5921$; $p < .001$), while health awareness had a significantly positive impact upon it ($\beta = .3470$; $p < .001$). Overall, there was a statistical significance to this model ($F = 187.641$; $p < .001$); therefore, these two predictor variables have meaningful predictive capability for faculty mental health.</i>	

Table 7: Independent Sample t-Test (Gender-wise Differences in Mental Health)

Gender_Wise	Mean Values	S.D.	T-value	Sig. level
Male (M)	3.412	0.662	2.2831	0.0230
Female (F)	3.241	0.690		
Source: Primary Data				
<i>The Independent Sample t-test indicated a statistically-significant ($p=0.023$) difference in the Mental Health Scores of Faculty Members by Gender ($t = 2.2831$). On Average, Men reported Slightly Higher Mental Health Scores compared to Women. The Difference found here may be due to Different Occupational Responsibilities, Work-Life Balance Challenges, or Coping Strategies used by different gender Groups.</i>				

Table 8: One-Way ANOVA (Teaching Experience & Workplace Stress)

Sources	Sum of Squares	df	Mean_Square	F Value	Sig. Level
Between the Groups	7.864	2	2.6212	4.9123	0.0030
Within the Groups	163.748	308	0.5331		
Total	171.612	310			
Source: Primary Data					
<i>The ANOVA data show there is a statistical difference regarding the level of work place stress for faculty members based on their years of teaching experience ($p < .01$; $F = 4.9132$). It would appear that, as a result of this variance in experience, occupational stressors vary in accordance with an individual's career level.</i>					

Table 9: Health Awareness Level among the Faculty Members

Health Awareness (HA) Level	Freq.	Percentage (%)
Low Level	42	13.50
Moderate Level	96	30.90
High Level	173	55.60
Total	311	100.00
Source: Primary Data		

More respondents show high health awareness (55.6%). Roughly one third show moderate awareness. Only 13.5% faculty members score low for health awareness. Results suggest that while awareness of healthy lifestyle practices is high, there are opportunities to strengthen preventive health education among all faculty members.

Table 10: Hypothesis Testing Results

Hypothesis Statements	Statistical Test Applied	Results	Decision Status
H01: Workplace stress (WS) significantly affects mental health (MH).	Regression test	$p = 0.0000$	Accepted
H02: Health awareness (HA) significantly affects mental health (MH).	Regression Test	$p = 0.0000$	Accepted
H03: Workplace stress (WS), health awareness (HA) & mental health (MH) are significantly related.	Correlation Test	$p = 0.0000$	Accepted

Source: Computed from Primary Data

The hypothesis testing confirms that all three proposed hypotheses are statistically supported. Workplace stress significantly reduces faculty mental health, while health awareness positively contributes to psychological well-being. There is significant relationships exist among the study variables reinforce the importance of integrating health promotion initiatives into institutional management practices.

Findings of the study

- The questionnaire demonstrates high internal consistency.
- All variables satisfy the recommended reliability criteria.
- The instrument is suitable for further empirical analysis.
- The majority of respondents are Ph.D.-qualified faculty members.
- Private institutions contribute a larger share of participants.
- Most faculty members possess moderate teaching experience, enhancing the reliability of their responses.
- Faculty members experience noticeable workplace stress.
- Health awareness among respondents is relatively high.
- Mental health remains at a moderate level, indicating scope for institutional interventions.
- Health awareness is the strongest measured dimension.
- Workplace stress remains a major concern among faculty members.
- Improving mental health requires strengthening institutional wellness initiatives.
- Workplace stress significantly decreases faculty mental health.
- Health awareness contributes positively to psychological well-being.
- Health awareness may act as a protective factor against occupational stress.
- Workplace stress is the strongest predictor of reduced mental health.

- Health awareness significantly improves faculty mental well-being.
- The regression model demonstrates satisfactory explanatory power.
- Mental health differs significantly across gender.
- Female faculty members appear to experience comparatively greater psychological challenges.
- Gender-sensitive wellness programmes may enhance institutional support.
- Teaching experience significantly influences workplace stress.
- Stress management interventions should be tailored to different career stages.
- Institutional mentoring programmes can support early-career faculty.
- Most faculty members possess high health awareness.
- Preventive health programmes have positively influenced awareness levels.
- Institutions should continue investing in employee wellness initiatives.
- All proposed hypotheses are empirically supported.
- Workplace stress negatively affects faculty well-being.
- Health awareness serves as a valuable protective factor for maintaining positive mental health.

The results show that workplace stress is one of the most important factors influencing the mental health of all faculty staff in Higher Education. All of these are contributing to high levels of occupational stress. The findings from the correlation analysis and regression analysis confirm that workplace stress is negatively correlated to the mental health of faculty staff. Therefore, this supports the first hypothesis. Also, the findings show that health awareness positively influences mental wellbeing. Staff who have an increased awareness of healthy lifestyle habits (eg; stress management) and physical activity (eg; regular exercise), and preventive healthcare practices report improved mental wellbeing. Additionally, there was identified to be significant difference in mental wellbeing by gender and years of experience as a teacher. This highlights the need for targeted support programs. Overall, the results highlight that HEIs should implement measures to improve the wellbeing of their faculty staff by implementing mental health counseling services, providing training in stress management, launching health awareness campaigns and providing a positive workplace environment to promote employees' overall well-being and improve the operational performance of the institution.

CONCLUSION

Faculty play a vital role within all aspects of higher educational institutions and it is imperative that they have good mental health; this will be beneficial to students, improve teaching quality & research productivity, and ultimately impact the overall performance of the institution. This study investigated the relationship between workplace stress (including its effects on mental health), and the level of health awareness of 311 faculty members employed at higher education institutions. The results were very clear; workplace stress has a direct effect on psychological wellbeing of faculty members; however, health awareness was shown to contribute positively to maintaining good mental health. These findings emphasize the urgent need for higher education institutions to develop comprehensive policies for faculty wellness that go beyond routine administrative support. It is recommended by this study that universities & colleges establish counselling centres, organize workshops related to stress management, encourage physical fitness programs, promote mindfulness & yoga sessions, conduct regular health screening camps & provide flexible working arrangements wherever possible. Lastly, leaders of higher education institutions should ensure equitable distribution of workloads, supportive leadership practices, & an organizational culture that values employee well-being. Overall, strengthening health awareness & reducing workplace stress are essential for creating healthier academic environments. Therefore, investment in faculty mental health will not only improve individual educators but also enhance institutional productivity, educational quality, student satisfaction & long-term sustainability of organizations

Research Limitations

- A limited number of participants ($n = 311$) from faculty membership is used to develop this study and could possibly restrict the extension of results for all of higher education.
- The data collected are through the respondents' self-reporting with questionnaires that can have an influence from respondent bias and perception of the individual.
- The study has utilized a cross-sectional methodology of data collection, restricting the investigation of how mental health develops over a time period.
- In addition to examining workplace stress, mental health and health awareness as the major three elements; there are other contributing elements to mental health such as; organizational culture, leadership style, financial stress and family commitments that are not investigated in this study.
- There is no representation of the population studied due to convenience sampling being employed.

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