International Journal of Research in Social Sciences

Vol. 7 Issue 9, September 2017,

ISSN: 2249-2496 Impact Factor: 7.081

Journal Homepage: http://www.ijmra.us, Email: editorijmie@gmail.com

Double-Blind Peer Reviewed Refereed Open Access International Journal - Included in the International Serial Directories Indexed & Listed at: Ulrich's Periodicals Directory ©, U.S.A., Open J-Gage as well as in Cabell's

Directories of Publishing Opportunities, U.S.A

MENTAL HEALTH'S EFFECTON PRIVATE B.ED. COLLEGE-TEACHERS' TEACHING EFFECTIVENESS IN MURSHIDABAD DISTRICTOF WEST BENGAL, INDIA

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Abstract

Keywords:

Teaching effectiveness;

Mental health;

Private B.Ed. colleges;

Gender;

Locale.

Teacher's training program at the Bachelor of Education i.e., B.Ed. level - is a scheme to develop the functional skills of the teacher-trainees to attain the teaching objectives which, in turn, are directly associated with the educational aims of the society to assure all round development of the students in schools. Now, the norm based term 'teaching effectiveness' represents the quality of teaching in general. There have been so many aspects by which teaching effectiveness gets influenced. Sound mental health is one of such important and desirable aspects to make any sort of teaching effective. In the present study, on the bases of the sampled teachers' responses, it was intended to characterise the significant effects of the mental health of the teachers of private B.Ed. colleges on their teaching effectiveness, with special reference to the Murshidabad district of West Bengal, India. A quantitative descriptive research design had been developed and properly utilised for this purpose.

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1. Introduction

The private education system is one of the many modalities of B.Ed. [i.e., Bachelor of Education] training programs which ultimately aim to develop the functional skills of the traineeteachers to attain their teaching objectives. Teaching objectives, in turn, are directly associated with the educational aims to assure the efforts of all round development of the students. Better quality of a teacher is a desirable aspect for effective teaching. 'Teaching Effectiveness' is a norm based term representing the quality of teaching. Teaching

effectiveness does not occur by chance by a teacher. "Effective teaching refuses to take its effects on students for granted. It sees the relation between teaching and learning as problematic, uncertain and relative. Good teaching is open to change: it involves constantly trying to find out what the effects of instruction are on learning, and modifying the instruction in the light of evidence collected" (Ramsden,1992)¹.According to McKeachie (1997)², "Effective teaching is dependent on the coordination of several components: the objectives, the student, the content and the teacher". There are many factors by which it gets influenced under different circumstances. Mental health is one such factor which is the capacity of an individual to form harmonious adjustment to his social and physical environments. Bettermental health is a state of well-being in which an individual realizes his or her own abilities and coping with the normal stresses of life - can work productively and truthfully to make a contribution to his or her community. Thus, better mental health is a state of complete physical, mental and social well-being and not merely the absence of disease or uniformity.

Literature review

Someof the pertinentliteraturerelated to the selected study, as being reported here, had been reviewed before conducting the study. Rayand Yadava (1993) found that mental health is

Chaudhary (2001)⁴ emphasized significantly correlated to socio-economic status. thatmentalhealth problems,occupationalstress and socio-economic statushave significanteffects varyingdegreesonteachers' burnout.Roul(2004)⁵inhisstudy saidthat and female teachers of autonomous colleges are better than teachers ofnon-autonomous collegesinrelationtoteachingeffectiveness. In this study, it wasfoundthatthecombinedeffectof mentalhealthofteachersfromdifferenttypesofcollegesdid not have any significant impact on teachingeffectiveness.Nayak(2005)⁶ explored that female teachers significantly differ to their male counterparts withrespectto theirmentalhealth. Jeba's (2005)⁷ study, mental healthwas correlated with the teaching competency inregardtogender andgroupdifference. Vijayalakshmi(2005)⁸ showed that both teacher effectiveness andjob satisfaction got influenced by the locality, management and subject of teaching. Kaur (2007) found out thatmentally healthy teacherscancombat the impactof occupationalstress than others. The results of studyalsoexploredthe ofthat existence negative relation between mental health and occupational stress whilemental healthandcoping positivelycorrelated.Khan&Srivastva(2008)¹⁰stated stressissignificantly thatteacherswithlowmentalhealthare more prone toburnoutthanthe teachers with a verage and high mental health. Teachers' responses were obtained on burn out inventory. S rivastava&Asthana (2008)¹¹suggestedthat mentalhealth oflecturers is betterthan school teachers respecttoworkingwomen. Dewanetal. (2009) ¹² explored the effect of gender with onmentalhealth.Female teacherswere found to be withpoorermentalhealthascompared to the male teachers. The effects of religion on mentalhealth was $(2011)^{13}$ stated that studied.Goel teacher also effectiveness get affected genderandlocality. Italsostated that the effects of mental health and jobs at is faction of teachers are notequalin their teachingeffectiveness.Itfurtherrevealedthatteachingeffectivenessispositively correlatedwith the personality, jobsatisfaction and mental health of teachers. Mohana (2013) 14 stated that levels of teaching a ndteaching experience are correlated with mental health of teachers. Chandra & Reddy (2014)¹⁵ shownthatmentalhealthdoeshavesignificantimpactintheteaching attitude, study habits and of academicstress teachers. Barman&Bhattacharyya(2015)¹⁶ showed that teaching effectiveness of teacher educators of GovtaidedB.Ed.Collegeswas found becomparatively betterthanthe to

PrivateB.Ed.Colleges.Gawande(2016)¹⁷showed thatmental health of B.Ed. student-teacherswerecorrelated with their teaching effectiveness. Itals os howed that student teachers with highmental health were better than student teachers with low mental health but their interactional effect, sex and residential backgrounds did not affect their teaching effectiveness. It further showed that male and female student teachers with high mental health were equally good inteaching effectiveness.

butmaleandfemalestudentteachersfromurbanandruralareaswere notequalin their teaching effectiveness.

Emergence of the study

On the backdrop of the reviewed literature, an effort was made in the present study, to analyse the effect of mental health of teachers of private B.Ed. colleges on their teaching effectiveness, with a special reference to the Murshidabad district in West Bengal, India.

Objectives of the study:

Following objectives were formulated for the present study:

- 1. To measure the nature of mental health of the teachers of Private B.Ed. colleges.
- 2. To assess the nature of teaching effectiveness of the teachers of Private B.Ed. colleges.
- 3. To measure the effect of mental health on teaching effectiveness of total teachers of Private B.Ed. colleges.
- 4. To measure the effect of mental health on teaching effectiveness of male teachers of Private B.Ed. colleges.
- 5. To measure the effect of mental health on teaching effectiveness of female teachers of Private B.Ed. colleges.
- 6. To measure the effect of mental health on teaching effectiveness of urban teachers of Private B.Ed. colleges.
- 7. To measure the effect of mental health on teaching effectiveness of rural teachers of Private B.Ed. colleges.

Hypotheses of the study:

On the basis of the above-mentioned objectives, five hypotheses had been designed in this study.

Those hypotheses were as follows:

 $\mathbf{H_01}$: There exists no significant effect of mental health on teaching effectiveness of total

teachers of Private B.Ed. colleges.

 H_02 : There exists no significant effect of mental health on teaching effectiveness of male

teachers of Private B.Ed. colleges.

H₀3: There exists no significant effect of mental health on teaching effectiveness of female

teachers of Private B.Ed. colleges.

H₀4: There exists no significant effect of mental health on teaching effectiveness of urban

teachers of Private B.Ed. colleges.

 H_05 : There exists no significant effect of mental health on teaching effectiveness of rural

teachers of Private B.Ed. colleges.

2. Research Method:

In order to achieve the objectives of the present study, survey method of research was adopted.

Population for the study was all the teachers of private B.Ed. College in the district of

Murshidabad. However, purposive sampling technique was used for the selection of only 100

teachers as samples in the present study. Corresponding responses, after collection, were

converted into data as per thestratification designed for the study of the population.

For the present study, the authors had developed a Mental Health Scale and a Teaching

Effectiveness Scale on the basis of some specific dimensions of the selected variables. Both the

scales were properly standardized with the help of some specific normative techniques. Following

dimensions were isolated for the construction of the Mental Health Scale:

i. Overall adjustment

ii. Emotional stability

iii. Intellectual potential

- iv. Autonomy
- v. Self-concept

On the other hand, for the construction of the Teaching Effectiveness Scale, the following dimensions were taken into consideration:

- i. Knowledge of subject matter
- ii. Preparation and planning
- iii. Presentation style
- iv. Communication skills
- v. Classroom management
- vi. Motivating students to learn
- vii. Evaluation and feedback
- viii. Personal qualities

Quantitative descriptive method was used for the data analysis and interpretations.

3. Results and Analysis

Administering corresponding scales - the collected responses were converted into data. Then the datasets were analysed using the IBM SPSS software (version 17.0). The obtained results have been interpreted and discussed below.

3.1Descriptive analysis of Mental Health of Private B.Ed. College teachers of the Murshidabad district in West Bengal, India

A careful glance at the Table1 reveals the different skewness- and kurtosis values. The negative value of skewness (-0.020) for the total teachers suggests that the distribution is skewed to the left, and is approximately symmetric. The excess kurtosis (0.074) is slightly less than 0.263 indicating that the distribution is slightly leptokurtic. The observation thus leads to the conclusion that the mental health scores of the total teachers of the private B.Ed. colleges are normally distributed.

Table 1.Descriptive analysis of mental health of the teachers of the private B.Ed. colleges of themurshidabad district

| Groups | Mean | Median | S.D. | SK | KU |
|----------------------|-------|--------|--------|--------|--------|
| Male (52) | 89.69 | 90 | 9.71 | -0.374 | 0.062 |
| Female (48) | 89.19 | 88 | 10.212 | 0.080 | -0.66 |
| Urban (50) | 88.29 | 88.5 | 9.56 | -0.413 | 0.071 |
| Rural (50) | 90.1 | 88 | 9.89 | 0.110 | -0.725 |
| Total Teachers (100) | 89.44 | 88.5 | 9.6 | -0.020 | 0.074 |

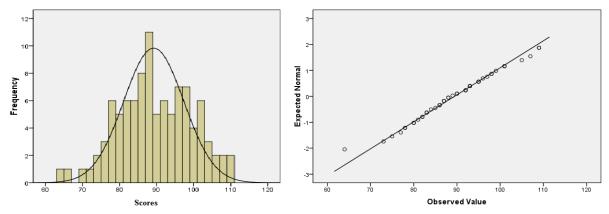


Figure 1. Normal curve and Q-Q plots for Mental Health of the Total Teachers

By observing the Figure 1, corresponding distribution of the total teachers in respect to mental health has been specified. In the Normal Curve shown in the left, most of the frequencies lie within the range of 60 to 100 i.e., majority of the observations are concentrated in the middle of the distribution. Again, by observing the Q-Q Plots in the left, where the corresponding straight line is representing the normal line of the normal distribution and the dots are representing the status of the individual mental health scores in the frequency distribution, it has been cleared that the mental health scores for the total teachers of the private B.Ed. colleges in Murshidabad wasmore or less normal in distribution.

3.2Descriptive analysis of Teaching Effectiveness of Private B.Ed. College teachers of the Murshidabad district in West Bengal, India

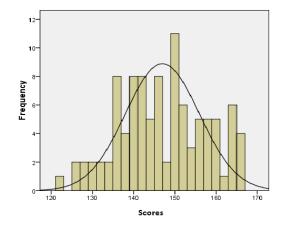
A careful glance at the Table2, reveals the different skewness and kurtosis values.

The negative value of skewness (-0.152) for the total teachers suggests that the distribution is skewed to the left and is approximately symmetric. The excess kurtosis (-0.344) is less than

0.263 indicating that the distribution is leptokurtic. The observation thus leads to the conclusion that the teaching effectiveness scores of the total teachers of the private B.Ed. colleges are normally distributed.

Table 2. Descriptive analysis of teaching effectiveness of the teachers of the studied private B.Ed. colleges

| Groups | Mean | Median | S.D. | SK | KU |
|-------------------|--------|--------|-------|--------|--------|
| Male (52) | 145.94 | 146.5 | 10.71 | 0.009 | -0.595 |
| Female (48) | 147.65 | 147 | 10.86 | -0.178 | -0.815 |
| Urban (50) | 147.33 | 148.5 | 9.78 | -0.313 | -0.193 |
| Rural (50) | 145.63 | 144 | 11.47 | 0.184 | -0.95 |
| Total | | | | | |
| Teachers | 146.04 | 146 | 10.39 | -0.152 | -0.344 |
| (100) | | | | | |



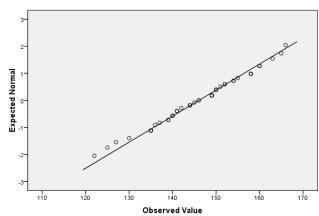


Figure 2. Normal curve and Q-Q plots for teaching effectiveness of the total teachers

Nature of the distribution of the teaching effectiveness scores also shown in the Figure 2 where slight deviation has been found from normality.

3.3 Effect of Mental Health (MH) on Teaching Effectiveness (TE) with respect to Gender and Locality of the teachers

[A] Testing of the hypothesis –

 $\mathbf{H_o1:}$ There exists no significant effects of mental health on teaching effectiveness of total teachers.

From the Table 3, it is found that R has a value of 0.639 and due to only one predictor, this value represents the high correlation between mental health and teaching effectiveness of the total teachers of the private B.Ed. colleges of the Murshidabad district, in West Bengal, India.

Table 3. Model Summary of Correlation when Predictor is Mental Health_{Total}& Dependent Variable

is TeachingEffectiveness_{Total}

| Model | R | \mathbb{R}^2 | Adjusted R Square | Std. error of the | | |
|-------|-------|----------------|-------------------|-------------------|--|--|
| | K | N. | Aujusieu K Square | Estimate | | |
| 1 | 0.639 | 0.409 | 0.403 | 8.184 | | |

The value of R^2 , whichis 0.409, indicates that the mental health of the total teachers can cause 40.9% variation in their teaching effectiveness. Therefore, this null hypothesis $\mathbf{H_01}$ has been rejected and it has been concluded that the mental health of the total teachers has a significant effection their teaching effectiveness.

Table 4.ANOVA when Predictor is Mental Health_{Total} & the Dependent Variable is Teaching Effectiveness_{Total}

| Model | | Sum of Squares | df | Mean Square | F | Sig. |
|-------|------------|----------------|----|-------------|--------|-------|
| | Regression | 4537.721 | 1 | 4537.721 | 67.755 | 0.000 |
| 1 | Residual | 6563.319 | 98 | 66.973 | | |
| | Total | 11101.040 | 99 | | | |

From Table 4, it is seen that the calculated value of F ratio is 67.755 and the p-value is 0.000 which is less than 0.05 i.e., p < 0.05 or, not significant. Therefore, it can be concluded that this regression model results in a significantly better prediction of mental health of total teachers in terms of its influence on their teaching effectiveness.

Table 5.Coefficientswhen Predictor is Mental Health _{Total}&theDependent Variable is Teaching

Effectiveness Total

| Model | | Un-standardi Coefficients | zed | Standardized Coefficients | t | Sig. |
|-------|-----------------------------------|------------------------------|------------|------------------------------|--------|-------|
| | | В | Std. error | Beta | | |
| | Constant | 85.777 | 7.439 | | 11.530 | 0.000 |
| 1 | Mental Health _{Total} | 0.682 | 0.083 | 0.639 | 8.231 | 0.000 |

From the Table 5, it can easily be ascertained that the value of B for Mental Health_{TOTAL} represents the gradient of the regression line which is 0.682. Therefore, if predictor variable is increased by one unit, then this model predicts that 0.682 extra variations may be observed. Here, the unit of measurement was hundred samples. So it can be said that for an increase of a unit of samples of study, the model predicts that 68.2 (i.e., $0.682 \times 100 = 68.2$) extra variations will be observed.

[B] Testing of the hypothesis –

 $\mathbf{H_02}$: There exists no significant effects of mental health on teaching effectiveness of male teachers.

Table 6.Model Summary of Correlation when Predictor is Mental Health $_{Male}$ & Dependent Variable is Teaching Effectiveness $_{Male}$

| | Model | R | R Square | Adjusted R Square | Std. error of | the | |
|--|-------|-------|----------|-------------------|---------------|-----|--|
| | | K | K Square | | Estimate | | |
| | 1 | 0.651 | 0.424 | 0.413 | 7.930 | | |

Here, R has a value of 0.651. As there is only one predictor, this value represents a high correlation between mental health and teaching effectiveness of male teachers considered in the present study. The value of R^2 is 0.424, which conveys that the mental health ofmaleteachers can influence 42.4% variation in teaching effectiveness. From this result, in turn, it can be interpreted that 42.4% variation in teaching effectiveness might be influenced by mental health of the male teachers of the private B.Ed. colleges studied. Therefore, the null hypothesis H_02 is rejected and it is concluded that mental health of male teachers does have an effect to cause avariation in their teaching effectiveness.

Table 7.ANOVAwhen Predictor is Mental Health Male Dependent Variable is Teaching Effectiveness Male

| Model | | Sum of Squares | df | Mean Square | F | Sig. |
|-------|------------|----------------|----|-------------|--------|-------|
| | Regression | 2316.455 | 1 | 2316.455 | 36.837 | 0.000 |
| 1 | Residual | 3144.218 | 50 | 62.884 | | |
| | Total | 5460.673 | 51 | | | |

From Table 7, it is seen that the calculated value of F ratio is 36.837 and the p-value is 0.000 which is less than 0.05 i.e., p < 0.05 or, not significant. Therefore, it can be concluded that this regression model results in a significantly better prediction of mental health of the male teachers in terms of its influence on their teaching effectiveness.

Now, from the Table 8, it can easily be ascertained that the value of B for Mental Health _{MALE} represents the gradient of the regression line which is 0.691. Therefore, if predictor variable is

increased by one unit, then this model predicts that 0.691 extra variations may be observed. Here, the unit of measurement was hundred samples. So it can be said that for an increase of a unit of samples of study, the model predicts that 69.1 ($0.691 \times 100 = 69.1$) extra variations will be observed.

Table 8.Coefficients when Predictor is Mental Health $_{Male}$ &Dependent Variable is Teaching Effectiveness $_{Male}$

| Model | | Un-standardi Coefficients | ized | Standardized Coefficients | t | Sig. |
|-------|----------------------------------|------------------------------|------------|------------------------------|-------|-------|
| | | В | Std. error | Beta | | |
| | Constant | 84.029 | 10.222 | | 8.220 | 0.000 |
| 1 | Mental Health _{Male} | 0.691 | 0.114 | 0.651 | 6.069 | 0.000 |

[C] Testing of the hypothesis –

 $\mathbf{H_o}3$:There exists no significant effect of mental health on teaching effectiveness of female teachers.

Table 9.Model Summary of Correlation when Predictor is Mental Health $_{Female}$ & Dependent Variable is Teaching Effectiveness $_{Female}$

| Model | R | R Square | Adjusted R Square | Std. error of th Estimate |
|-------|-------|----------|-------------------|------------------------------|
| 1 | 0.637 | 0.406 | 0.393 | 8.462 |

Here, R has a value of 0.637.As there is only one predictor, this value represents a high correlation between mental health and teaching effectiveness of female teachers under the present study. The value of R^2 is 0.406, which tells us that mental health offemale teachers can influence 40.6% variation in their teaching effectiveness. Therefore, the null hypothesis H_03 is

rejected and it is concluded that mental health of female teachers does have an effect to cause avariation in their teaching effectiveness.

Table 10.ANOVA when Predictor is Mental Health Female & Dependent Variable is Teaching Effectiveness Female

| Model | | Sum of Squares | df | Mean Square | F | Sig. |
|-------|------------|----------------|----|-------------|--------|-------|
| | Regression | 2253.187 | 1 | 2253.187 | 31.467 | 0.000 |
| 1 | Residual | 3293.792 | 46 | 71.604 | | |
| | Total | 5546.979 | 47 | | | |

From Table 10, it is seen that the calculated value of F ratio is 31.467 and the p-value is 0.000 which is less than 0.05 i.e., p < 0.05 or, not significant. Therefore, it can be concluded that this regression model results in a significantly better prediction of mental health of female teachers in terms of its influence on their teaching effectiveness.

Table 11. Coefficients when Predictor is Mental Health $_{Female}$ & Dependent Variable is Teaching Effectiveness $_{Female}$

| Model | | Un-standa Coefficient | | Standardized Coefficients | t | Sig. | |
|-------|---------------------------------|--------------------------|-----------------|------------------------------|-------|-------|--|
| | | В | Std. error Beta | | | | |
| 1 | Constant | 87.175 | 10.849 | | 8.035 | 0.000 | |
| 1 | Mental Health _{Female} | 0.678 | 0.121 | 0.637 | 5.610 | 0.000 | |

From the Table 11, it can easily be ascertained that the value of B for Mental Health $_{\rm MALE}$ represents the gradient of the regression line which is 0.678. Therefore, if predictor variable is increased by one unit, then this model predicts that 0.678 extra variations may be observed. Here, the unit of measurement was hundred samples. So it can be said that for an increase of a unit of samples of study, the model predicts that $67.8 \ (0.678 \times 100 = 67.8)$ extra variations will be observed.

[D] Testing of the hypothesis –

 $\mathbf{H_o}$ 4: There exists no significant effects of mental health on teaching effectiveness of urban teachers.

Table 12. Model Summary of Correlation when Predictor is Mental Health _{Urban}& Dependent Variable is TeachingEffectiveness _{Urban}

| Ī | Model | R | R Square | Adjusted R Square | Std. | error | of | the |
|---|-------|-------|----------|-------------------|----------|-------|----|-----|
| | | K | K Square | | Estimate | | | |
| | 1 | 0.693 | 0.480 | 0.469 | 7.194 | | | |

Here, R has a value of 0.693. As there is only one predictor, this value represents a high correlation between mental health and teaching effectiveness of urban teachers under the present study. The value of R^2 is 0.480, which tells us that mental health of urban teachers can influence 48 % variation in their teaching effectiveness. Therefore, the null hypothesis $\mathbf{H_04}$ is rejected and it is concluded that the mental health of the urban teachers does have an effect to cause a variation in their teaching effectiveness.

Table 13. ANOVA when Predictor is Mental Health _{Urban}& Dependent Variable is Teaching Effectiveness _{Urban}

| Model | | Sum of Squares | df | Mean Square | F | Sig. |
|-------|------------|----------------|----|-------------|--------|-------|
| | Regression | 2293.247 | 1 | 2293.247 | 44.307 | 0.000 |
| 1 | Residual | 2484.373 | 48 | 51.758 | | |
| | Total | 4777.620 | 49 | | | |

From the Table 13,it is seen that the calculated value of F ratio is 44.307 and the p-value is 0.000 which is less than 0.05 i.e., p < 0.05 or, not significant. Therefore, it can be concluded that this regression model results in a significantly better prediction of mental health of urban teachers in terms of its influence on their teaching effectiveness.

Table 14.Coefficients when Predictor is Mental Health _{Urban}&Dependent Variable is Teaching Effectiveness _{Urban}

| Model | | Un-standardized Coefficients | | Standardized Coefficients | t | Sig. |
|-------|---------------------|---------------------------------|------------|------------------------------|-------|-------|
| | | В | Std. error | Beta | | |
| 1 | Constant | 86.012 | 9.329 | | 9.220 | 0.000 |
| 1 | Mental Health Urban | 0.694 | 0.104 | 0.693 | 6.656 | 0.000 |

From the Table 14, it can easily be ascertained that the value of B for Mental Health $_{\rm URBAN}$ represents the gradient of the regression line which is 0.694. Therefore, if predictor variable is increased by one unit, then this model predicts that 0.694 extra variations may be observed. Here, the unit of measurement was hundred samples. So it can be said that for an increase of a unit of samples of study, the model predicts that $69.4~(0.694 \times 100 = 69.4)$ extra variations will be observed.

[E] Testing of the hypothesis –

 H_05 : There exists no significant effect of mental health on teaching effectiveness of rural teachers.

Table 15.Model Summary of Correlation when Predictor isMental Health _{Rural}& Dependent Variable is Teaching Effectiveness _{Rural}

| Model | R | R Square | Adjusted R Square | Std. error of the Estimate |
|-------|-------|----------|-------------------|-------------------------------|
| 1 | 0.609 | 0.371 | 0.357 | 9.019 |

Here, R has a value of 0.609. As there is only one predictor, this value represents a high correlation between mental health and teaching effectiveness of rural teachers under the present study. The value of R^2 is 0.371, which tells us that mental health of rural teachers can influence 37.1 % variation in their teaching effectiveness. Therefore, the null hypothesis H_05 is rejected

and it is concluded that the mental health of the rural teachers does have an effect to cause a variation in their teaching effectiveness.

Table 16. ANOVA when Predictor is Mental Health _{Rural} & Dependent Variable is Teaching Effectiveness _{Rural}

| Model | | Sum of Squares | df | Mean Square | F | Sig. |
|-------|------------|----------------|----|-------------|--------|-------|
| | Regression | 2298.020 | 1 | 2298.020 | 28.251 | 0.000 |
| 1 | Residual | 3904.400 | 48 | 81.342 | | |
| | Total | 6202.420 | 49 | | | |

From the Table 16, it is seen that the calculated value of F ratio is 28.251 and the p-value is 0.000 which is less than 0.05 i.e., p < 0.05 or, not significant. Therefore, it can be concluded that this regression model results in a significantly better prediction of mental health of rural teachers in terms of its influence on their teaching effectiveness.

Table 17.Coefficients when Predictor is Mental Health _{Urban}& Dependent Variable is Teaching Effectiveness _{Urban}

| Model | | | | Standardized Coefficients | t | Sig. |
|-------|-----------------------------------|--------|------------|------------------------------|-------|-------|
| | | В | Std. error | Beta | | |
| | Constant | 84.742 | 11.509 | | 7.363 | 0.000 |
| 1 | Mental Health _{Rural} | 0.679 | 0.128 | 0.609 | 5.315 | 0.000 |

From the Table 17, it can easily be ascertained that the value of B for Mental Health _{RURAL} represents the gradient of the regression line which is 0.679. Therefore, if predictor variable is increased by one unit, then this model predicts that 0.679 extra variations may be observed. Here, the unit of measurement was hundred samples. So it can be said that for an increase of a

unit of samples of study, the model predicts that $67.9 (0.679 \times 100 = 67.9)$ extra variations will be observed.

4. Conclusion

Analysis of the collected data through the different statistical tests brought to light certain interesting facts about the variables studied in the research. The findings have been presented as follows:

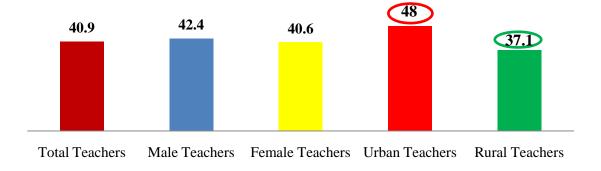


Figure 3.Effects of Mental Health in Teaching effectiveness of the teachers in private B.Ed. colleges in Murshidabaddistrict of the state of West Bengal, India with respect to their gender and locale (*Percentage Values*)

From the Figure 3, it appears that the Urban Teachers constitute the most affected group with respect to the effects of Mental Health on their Teaching effectiveness and along the same dimension, the Rural Teachers constitute the least affected group. Studies of the socio-economic and other important parameters, which have the potential to influence Teaching effectiveness of the Teachers in private B.Ed. colleges in the district of Murshidabad of the state of West Bengal in India—may corroborate further these findings from this particular study.

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