**A Correlational Study on Teachers' Readiness in Mental Health Promotion and Senior High School Students' Mental Health Literacy**

**ABSTRACT**

This study explored the relationship between teachers’ readiness to promote mental health and the mental health literacy of senior high school students. Employing a quantitative research design, the study involved 83 senior high school teachers and 342 student-respondents from selected institutions. Teacher readiness was evaluated in terms of their capacity for mental health promotion, focusing on social and emotional learning, resilience, and self-efficacy. Meanwhile, students’ mental health literacy was assessed across four key dimensions: beliefs, knowledge of mental health problems, first aid skills and help-seeking behaviors, and self-help strategies.

The findings indicated that the majority of students demonstrated a high level of mental health literacy, while teachers exhibited a strong readiness to engage in mental health promotion initiatives aligned with the Department of Education’s directives. Correlational analysis revealed significant positive relationships between specific components of teacher readiness and student mental health literacy. In particular, teacher resilience and self-efficacy were strongly associated with students’ beliefs and use of self-help strategies.

These results underscore the pivotal role of teacher readiness in shaping students’ mental health awareness and coping capabilities. The study highlights the necessity of continuous professional development and targeted training programs to enhance teachers’ competence in addressing mental health issues. Strengthening teacher preparedness is vital to creating a supportive and responsive school environment that fosters mental wellness among students.

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Keywords: mental health literacy, readiness of teachers

**INTRODUCTION**

 Mental health awareness has gained global attention, especially after the COVID-19 pandemic, with increased recognition of its crucial role in overall well-being, impacting behavior, learning, relationships, and quality of life (Özparlak et al., 2023; Mboweni et al., 2023).

 Adolescence is a critical period for mental health, as many mental health issues emerge during this time, making it essential to assess adolescents' knowledge, attitudes, and beliefs—collectively known as mental health literacy (Ahmad et al., 2022; Chang et al., 2023).

 Building on this understanding, mental health literacy has garnered growing attention worldwide as a key strategy for promoting psychological well-being and addressing mental health challenges across diverse populations (Xu et al., 2023). Coined by Jorm, mental health literacy encompasses the knowledge and skills necessary to understand, manage and promote mental health. It involves recognizing symptoms, seeking appropriate support, reducing stigma, and fostering proactive help-seeking behaviors. Enhancing mental health literacy empowers individuals to take an active role in maintaining their mental health and supporting others (Abdullah Alhabeeb et al., 2019).

The urgency of improving mental health literacy is underscored by global data. The World Health Organization (2023) reports that one in seven individuals aged 10–19 experiences a mental disorder, contributing to 15% of the global disease burden for this age group. Depression, anxiety, and behavioral disorders are among the leading causes of illness and disability among adolescents. Alarmingly, suicide ranks as the third leading cause of death among individuals aged 15–29.

In the local context of Northern Samar, particularly in the pacific region, recent reports indicate a troubling prevalence of mental health concerns among senior high school students. These concerns are compounded by limited awareness of available mental health services and entrenched cultural beliefs that inhibit help-seeking behavior. These dynamics suggest a significant gap in mental health literacy among students and highlight the critical need to assess and enhance teachers’ readiness to promote mental well-being in this unique socio-cultural setting.

Over time, growing concerns have been directed toward students’ mental health as more young people report experiencing emotional distress. Adolescence, a period of heightened vulnerability, is marked by academic pressures, shifting social expectations, environmental changes, and hormonal fluctuations—all of which can elevate the risk for anxiety, depression, and other psychological difficulties (Patel et al., 2018).

In response to these challenges, mental health has become a key concern across government sectors. Efforts to promote well-being and work-life balance include initiatives such as mental health breaks and wellness programs in schools. Notably, the recent passage of Republic Act No. 12080, known as the Basic Education Mental Health and Well-Being Act, reflects the Philippines’ national commitment to advancing mental health promotion in educational settings.

Despite national efforts, Northern Samar's Pacific Region faces distinct barriers—geographic, resource-related, and cultural—that hinder mental health support, highlighting the importance of evaluating both students' mental health literacy and teachers’ readiness.

 The current study seeks to explore students’ mental health literacy and teacher readiness within this region, motivated by observed gaps in mental health resources and the impact of cultural beliefs, aiming to empower both groups through education and support.

 Cultural narratives and superstitions uniquely shape mental health perceptions in Northern Samar, and addressing these is essential for reducing stigma and promoting healthier behaviors among students.

 There is a clear and urgent need to assess students’ mental health literacy and teachers' readiness to support mental well-being in the region. The study aims to guide context-specific interventions and provide insights for stakeholders seeking to improve youth mental health in underserved communities.

**OBJECTIVES OF THE STUDY**

 This study aimed to assess the level of readiness among teachers in promoting mental health within the school setting. Specifically, it evaluated teachers’ preparedness across key dimensions of mental health promotion, including social and emotional learning, resilience, and self-efficacy. Additionally, the study sought to determine the level of mental health literacy among senior high school students by examining their beliefs about mental health, knowledge of mental health problems, first aid skills and help-seeking behaviors, and the self-help strategies they employ. Finally, the study aimed to investigate the relationship between teachers’ readiness and students’ mental health literacy, exploring how various aspects of teacher preparedness may influence or correlate with students’ understanding, attitudes, and ability to manage mental health effectively.

**METHODOLOGY**

The study was conducted during the Academic Year 2024–2025 in selected senior high schools situated in the Pacific Area of the Second District, Division of Northern Samar. The participating institutions included Laoang National Technical High School in Laoang, Sumoroy Agro-Industrial School in Palapag, Mapanas Agro-Industrial School in Mapanas, Gamay National High School in Gamay, and Lorenzo S. Menzon Agro-Industrial School in Lapinig. These schools were purposefully selected based on their high senior high school enrollment, representing the largest student populations in their respective municipalities within the Pacific Area.

A descriptive-correlational research design was employed to comprehensively examine the phenomena under investigation. The descriptive component aimed to determine the levels of teacher readiness in promoting mental health, as well as the mental health literacy of students. Meanwhile, the correlational aspect sought to explore the strength and direction of the relationship between the independent variables—teacher-related factors, specifically readiness in mental health promotion (encompassing social and emotional learning, resilience, and self-efficacy)—and the dependent variable, which was the level of mental health literacy among students. Student mental health literacy was measured across four domains: beliefs about mental health, knowledge of mental health problems, first aid skills and help-seeking behaviors, and self-help strategies.

The respondents consisted of 342 senior high school students (173 from Grade 11 and 169 from Grade 12) and 83 senior high school teachers drawn from the five participating schools. Data were gathered using structured questionnaires designed to quantitatively capture both teacher readiness and student mental health literacy. The collected data were analyzed using both descriptive and inferential statistical methods. Descriptive statistics, particularly means, were utilized to summarize the levels of teacher readiness and student literacy. To determine the relationship between teacher readiness and student mental health literacy, Pearson’s correlation coefficient (r) was applied.

This methodological framework enabled the study to yield comprehensive insights into the extent to which teacher preparedness in mental health promotion may influence or be associated with students’ awareness, attitudes, and mental health management strategies in the Pacific Area of Northern Samar.

**RESULTS AND DISCUSSION**

**Level of Readiness of Teachers in Mental Health Promotion**

*Social and Emotional Learning.* Table 1 shows the readiness level of teachers in promoting mental health through social and emotional learning. The data indicates a strong preparedness across all indicators, with mean scores ranging from 4.48 to 4.75, falling within the "Very Much Ready" category.

Teachers' ability to recognize and respect the emotions of others garnered the highest mean score of 4.75, reflecting teachers’ strong emotional intelligence and empathy.

The grand mean of 4.62, interpreted as "Very Much Ready," underscores the overall preparedness of teachers in integrating social and emotional learning into their professional practices.

**Table 1 Level of Readiness of Teachers in Mental Health Promotion in Terms of Social and Emotional Learning**

|  |  |  |
| --- | --- | --- |
| **Indicators** | **Mean** | **Interpretation** |
| **Social and Emotional Learning** |  |  |
| I am able to recognize and respect the emotions of others. | 4.75 | Very Much Ready |
| I am comfortable working collaboratively in group settings. | 4.65 | Very Much Ready |
| I can maintain healthy and rewarding relationships with others. | 4.64 | Very Much Ready |
| I feel confident in my ability to understand and manage my emotions. | 4.59 | Very Much Ready |
| I can effectively communicate my thoughts and feelings to others. | 4.48 | Very Much Ready |
| **Grand Mean** | **4.62** | **Very Much Ready** |

*Resilience.* Table .2 presents teachers' readiness level in promoting mental health through resilience, showcasing strong adaptive capabilities across all indicators. The data reflect a consistently high level of preparedness, with mean scores ranging from 4.47 to 4.71, falling within the "Very Much Ready" category.

 Teachers' perspective on challenges as opportunities for growth and maintaining a positive outlook even in difficult times obtained the highest mean scores of 4.71. These highlight a constructive mindset that fosters personal and professional development and further reinforces the emotional fortitude of the teachers.

The grand mean of 4.59, classified as "Very Much Ready," underscores a high degree of resilience among educators, demonstrating their ability to handle stress, adjust to challenges, and provide consistent support for students' well-being.

**Table 2 Level of Readiness of Teachers in Mental Health Promotion in Terms of Resilience**

|  |  |  |
| --- | --- | --- |
| **Indicators** | **Mean** | **Interpretation** |
| I view challenges as opportunities for personal growth. | 4.71 | Very Much Ready |
| I have a positive outlook on life, even in difficult times. | 4.71 | Very Much Ready |
| I am able to adapt to changing circumstances and challenges. | 4.59 | Very Much Ready |
| I can stay calm and focused under pressure. | 4.49 | Very Much Ready |
| I can bounce back quickly from setbacks or difficulties. | 4.47 | Very Much Ready |
| **Grand Mean** | **4.59** | **Very Much Ready** |

 *Self-Efficacy*. Table 3 highlights the level of readiness of teachers in mental health promotion through self-efficacy, highlighting a strong sense of capability across all indicators. The data reflect a consistently high level of preparedness through self-efficacy, with mean scores ranging from 4.55 to 4.75, falling within the "Very Much Ready" category.

 The statement, which suggests that teachers exhibit high confidence in their ability to set and achieve both personal and professional goals, achieved the highest mean score of 4.75, reinforcing their motivation and determination in various aspects of their lives.

The grand mean of 4.62, categorized as "Very Much Ready," indicates a high level of self-efficacy among teachers, suggesting that they possess the confidence and determination necessary to address difficulties, maintain focus, and support mental health initiatives within their educational roles.

**Table.3 Level of Readiness of Teachers in Mental Health Promotion in Terms of Self-Efficacy**

|  |  |  |
| --- | --- | --- |
| **Indicators** | **Mean** | **Interpretation** |
| I believe in my ability to achieve my personal and professional goals. | 4.75 | Very Much Ready |
| I feel capable of overcoming obstacles that come my way. | 4.65 | Very Much Ready |
| I can effectively manage my time and prioritize tasks. | 4.58 | Very Much Ready |
| I am confident in my problem-solving skills. | 4.55 | Very Much Ready |
| I am proactive in seeking solutions when faced with challenges. | 4.55 | Very Much Ready |
| **Grand Mean** | **4.62** | **Very Much Ready** |

**Mental Health Literacy**

*Beliefs.* Table 4 presents data on respondents’ level of mental health literacy in terms of beliefs. The grand mean of 3.97, interpreted as "Much literate," indicates that, overall, students possess a good understanding of mental health concepts and hold generally positive and accurate beliefs about mental health.

The highest mean scores were recorded for the statements “Only adults have mental disorders” (Mean = 4.31), “If a friend of mine developed a mental disorder, I would listen to her/him without judging or criticizing” (Mean = 4.29), and “Mental disorders do not affect people’s behaviors” (Mean = 4.23), all interpreted as “Very much literate.” These findings suggest that respondents are well aware that mental disorders can affect individuals of all ages, are capable of demonstrating empathy and non-judgmental support toward friends with mental health conditions, and understand that mental health issues may impact behaviors and feelings.

Statements such as “Depression is not a true mental disorder” (Mean = 4.14) and “If a friend of mine developed a mental disorder, I would not be able to help her/him” (Mean = 4.11) received a rating of “Much literate,” indicating that while some misconceptions may still persist, most respondents correctly identify depression as a legitimate mental disorder and recognize their own potential to support peers.

However, lower mean scores were observed for the statements “If I had a mental disorder, I would seek my friends' help” (Mean = 3.59), “The sooner mental disorders are identified and treated, the better” (Mean = 3.50), and “People with mental disorders come from families with little money” (Mean = 3.39), the latter of which was only interpreted as “Moderately literate.” This finding suggests that some students still hold residual misconceptions about the socioeconomic causes of mental illness and that help-seeking behavior could be further encouraged through education.

**Table 4 Level of Mental Health Literacy in terms of Beliefs**

|  |  |  |
| --- | --- | --- |
| **Indicators** | **Mean** | **Interpretation** |
| Only adults have mental disorders. | 4.31 | Very much literate |
| If a friend of mine developed a mental disorder, I would listen to her/him without judging or criticizing. | 4.29 | Very much literate |
| Mental disorders do not affect people’s behaviors. | 4.23 | Very much literate |
| Mental disorders do not affect people’s feelings. | 4.21 | Very much literate |
| Depression is not a true mental disorder. | 4.14 | Much literate |
| If a friend of mine developed a mental disorder, I would not be able to help her/him. | 4.11 | Much literate |
| If I had a mental disorder, I would seek my friends' help. | 3.59 | Much literate |
| The sooner mental disorders are identified and treated, the better. | 3.50 | Much literate |
| People with mental disorders come from families with little money. | 3.39 | Moderately literate |
| **Grand Mean** | **3.97** | **Much literate** |

*Knowledge on Mental Health Problems.* The results presented in Table 5 indicate that respondents possess a high level of mental health literacy in terms of their knowledge of mental health problems, as reflected by a grand mean of 3.85, interpreted as “Much Literate.” This suggests that students demonstrate a strong understanding of key mental health concepts, symptoms, and risk factors, which is crucial in fostering early recognition, prevention, and appropriate help-seeking behaviors.

Across the indicators, the highest-rated statements include “Mental disorders affect people’s thoughts” (Mean = 4.11) and “Drug addiction may cause mental disorders” (Mean = 4.10), both of which reflect a clear understanding that mental health conditions can influence cognitive processes and that substance use is a significant risk factor for the development of mental health disorders. Similarly, students demonstrated a solid grasp of common symptoms of anxiety and depression, as seen in high mean scores for statements such as “A person with an anxiety disorder may panic in situations that she/he fears” (Mean = 4.09) and “A person with depression feels very miserable” (Mean = 3.97).

Furthermore, the findings suggest that respondents recognize the role of stress and biological factors in the development of mental disorders, as reflected in statements like “Highly stressful situations may cause mental disorders” (Mean = 4.06) and “Brain malfunctioning may cause the development of mental disorders” (Mean = 3.84). This indicates an encouraging understanding of the multifactorial nature of mental health issues.

Respondents also exhibited awareness of specific diagnostic considerations and symptoms, as shown by their responses to statements regarding the duration of symptoms (Mean = 3.64) and symptoms of eating disorders such as bulimia nervosa (Mean = 3.62) and anorexia nervosa (Mean = 3.56). While these indicators received slightly lower mean scores compared to other items, they still fall within the “Much Literate” range, suggesting that while students are knowledgeable, these more nuanced areas of mental health may benefit from further reinforcement through targeted education.

**Table 5 Level of Mental Health Literacy in terms of Knowledge on Mental Health Problems**

|  |  |  |
| --- | --- | --- |
| **Indicators** | **Mean** | **Interpretation** |
| Mental disorders affect people's thoughts. | 4.11 | Much literate |
| Drug addiction may cause mental disorders. | 4.10 | Much literate |
| A person with an anxiety disorder may panic in situations that she/he fear. | 4.09 | Much literate |
| Highly stressful situations may cause mental disorders. | 4.06 | Much literate |
| A person with depression feels very miserable. | 3.97 | Much literate |
| One of the symptoms of depression is the loss of interest or pleasure in most things. | 3.92 | Much literate |
| Brain malfunctioning may cause the development of mental disorders. | 3.84 | Much literate |
| A person with anxiety disorder avoids situations that may cause her/his distress. | 3.74 | Much literate |
| The symptoms' length is one of the important aspects to determine whether a person has, or has not a mental disorder. | 3.64 | Much literate |
| In bulimia nervosa, to compensate for overeating and to prevent weight gain, the person is forced to vomit or exercise vigorously, or use laxatives inappropriately. | 3.62 | Much literate |
| Anorexia nervosa is a type of eating disorder that can lead to death. | 3.56 | Much literate |
| Alcohol use may cause mental disorders. | 3.52 | Much literate |
| **Grand Mean** | **3.85** | **Much literate** |

*First Aid Skills and Help-Seeking Behavior.* Table 6 presents data on the respondents’ mental health literacy specifically in the area of first aid skills and help-seeking behavior, with a grand mean of 3.89, interpreted as “Much Literate.” The results suggest that respondents generally demonstrate a high level of competence and readiness in offering initial support to peers with mental health issues and in knowing how and where to seek appropriate help, both for others and for themselves.

The highest-rated item, “If a friend of mine developed a mental disorder, I would encourage her/him to look for a psychologist” (Mean = 4.06), indicates that respondents are aware of the importance of professional mental health services and are prepared to guide their peers toward appropriate care. Similarly, offering emotional support to peers is highly valued, as shown by the nearly equivalent rating for “I would offer her/his support” (Mean = 4.04). These results reflect a compassionate and proactive attitude toward helping friends cope with mental health challenges.

Importantly, respondents also demonstrated an understanding of the need for personal help-seeking, as evidenced by their readiness to seek help from family (Mean = 4.00) and mental health professionals (Mean = 3.97) if they themselves experienced a mental disorder. These findings highlight a growing willingness to reach out and access support networks, both informal (family) and formal (mental health professionals), which is a critical aspect of positive help-seeking behavior.

Similarly, respondents recognized the role of medical professionals, with encouraging a friend to see a doctor also scoring 3.97, reinforcing their understanding that mental health issues require professional attention. However, involving other adults, such as a friend’s parents (Mean = 3.74) or teachers (Mean = 3.47), received relatively lower mean scores, though still within the “Much Literate” range. This suggests that while students value peer support and professional help, they may feel somewhat less comfortable or less certain about engaging other adults in the process of supporting a friend.

**Table 6 Level of Mental Health Literacy in terms of First Aid Skills and Help-Seeking Behavior**

|  |  |  |
| --- | --- | --- |
| **Indicators** | **Mean** | **Interpretation** |
| If a friend of mine developed a mental disorder, I would encourage her/him to look for a psychologist. | 4.06 | Much literate |
| If a friend of mine developed a mental disorder, I would offer her/his support. | 4.04 | Much literate |
| If I had a mental disorder, I would seek my family's help. | 4.00 | Much literate |
| If I had a mental disorder, I would seek mental health professionals. | 3.97 | Much literate |
| If a friend of mine developed a mental disorder, I would encourage her/him to go to a doctor. | 3.97 | Much literate |
| If a friend of mine developed a mental disorder, I would talk to her/his parents. | 3.74 | Much literate |
| If a friend of mine developed a mental disorder, I would talk to the former teacher or another teacher. | 3.47 | Much literate |
| **Grand Mean** | **3.89** | **Much literate** |

*Self-help Strategies.* The results presented in Table 7 show that respondents demonstrate a very high level of mental health literacy regarding self-help strategies, as indicated by a grand mean of 4.36, interpreted as “Very Much Literate.” This suggests that students possess a strong understanding of how personal lifestyle choices and self-care behaviors contribute to mental well-being, which is an essential component of fostering resilience and promoting positive mental health.

The highest-rated statement was “Good sleep helps to improve mental health” (Mean = 4.53), highlighting that respondents are highly aware of the critical role that sleep plays in maintaining emotional balance and cognitive functioning. Given that sleep disturbances are common contributors to mental health issues such as anxiety and depression, this knowledge is particularly valuable in encouraging preventive self-care.

Similarly, respondents recognized the importance of engaging in enjoyable activities (Mean = 4.42) and physical exercise (Mean = 4.39) as effective self-help strategies. These findings reflect an understanding that positive experiences and regular physical activity can boost mood, reduce stress, and promote overall well-being. Encouragingly, respondents also acknowledged the role of balanced nutrition (Mean = 4.25) in supporting mental health, showing a holistic appreciation for the mind-body connection.

Additionally, respondents rated talking over problems with someone (Mean = 4.23) as a helpful self-help strategy, demonstrating a recognition of the value of social support and open communication in managing mental health challenges. This is a particularly important insight, as fostering a culture where students feel comfortable discussing their problems can lead to early intervention and reduced stigma.

**Table 7 Level of Mental Health Literacy in terms of**

**Self-help Strategies**

|  |  |  |
| --- | --- | --- |
| **Indicators** | **Mean** | **Interpretation** |
| Good sleep helps to improve mental health. | 4.53 | Very much literate |
| Doing something enjoyable helps to improve mental health. | 4.42 | Very much literate |
| Physical exercise helps to improve mental health. | 4.39 | Very much literate |
| Having a balanced diet helps to improve mental health. | 4.25 | Very much literate |
| Talking over problems with someone helps to improve mental health. | 4.23 | Very much literate |
| **Grand Mean** | **4.36** | **Very much literate** |

**Significant Relationship between the Teacher’s Readiness and the Respondents’ Mental Health Literacy Level**

Table 8 presents the Pearson correlation coefficients examining the relationships between teachers' readiness in mental health promotion—specifically Social and Emotional Learning (SEL), Resilience, and Self-Efficacy—and the four components of students’ mental health literacy: Beliefs about Mental Health, Knowledge of Mental Health Problems, First Aid Skills and Help-Seeking Behavior, and Self-Help Strategies.

Among the dimensions of teacher readiness, resilience demonstrated a statistically significant positive correlation with both students’ beliefs about mental health [r(340) = .113, p = .037] and their reported use of self-help strategies [r(340) = .109, p = .043]. These findings suggest that students are more likely to possess positive mental health beliefs and engage in self-help strategies when their teachers exhibit higher levels of resilience.

Similarly, teachers’ self-efficacy was found to be significantly and positively associated with students’ beliefs about mental health [r(340) = .110, p = .043], indicating that greater confidence among teachers in managing mental health-related challenges corresponded with more favorable student beliefs toward mental health.

In contrast, teachers’ social and emotional learning did not show any statistically significant correlation with the mental health literacy dimensions of the student respondents (p > .05 across all domains). This suggests that while SEL is a critical component of teacher readiness, it may not directly influence students' mental health literacy within the context of this study.

**Table 8. Significant Relationship between the Teacher’s Readiness and the Respondents’ Mental Health Literacy Level**

|  |  | **Beliefs** | **Knowledge of Mental Health Problems** | **First Aid Skills and Help-Seeking Behavior** | **Self-help Strategies** |
| --- | --- | --- | --- | --- | --- |
| **Social and Emotional** **Learning** | *Pearson Correlation* | .077 | .036 | -.059 | .079 |
| *Sig. (2-tailed)* | .158 | .512 | .280 | .144 |
| *Interpretation* | NS | NS | NS | NS |
| **Resilience** | *Pearson Correlation* | **.113\*** | .052 | -.093 | **.109\*** |
| *Sig. (2-tailed)* | **.037** | .338 | .087 | **.043** |
| *Interpretation* | **S** | NS | NS | **S** |
| **Self-Efficacy** | *Pearson Correlation* | **.110\*** | .055 | -.054 | .096 |
| *Sig. (2-tailed)* | **.043** | .307 | .319 | .076 |
| *Interpretation* | **S** | NS | NS | NS |

*\*S – Significant*

*NS-Not Significant*

**CONCLUSIONS**

Building on the preceding analyses, the findings reveal that senior high school teachers exhibit a high level of readiness in promoting mental health, particularly in the areas of social and emotional learning, resilience, and self-efficacy. Across all measured indicators, teachers consistently fell within the "Very Much Ready" category, reflecting strong emotional intelligence, adaptability, and confidence in their professional competencies. These results suggest that teachers are well-equipped to recognize and regulate emotions, cultivate supportive relationships, remain resilient in the face of adversity, and adopt proactive, solution-oriented approaches. Such readiness positions them as key contributors to fostering a mentally healthy school environment and actively supporting students' emotional and psychological well-being.

Correspondingly, students demonstrated a high level of mental health literacy across all four assessed domains: beliefs about mental health, knowledge of mental health problems, first aid skills and help-seeking behavior, and self-help strategies. On average, students were rated as “Much Literate,” with particularly strong competencies in self-help strategies and an awareness of the positive influence of healthy lifestyle habits on mental health. They displayed empathy toward peers experiencing mental health issues, recognized the importance of professional mental health services, and expressed a willingness to seek help when needed. Nonetheless, some gaps remain, particularly in understanding specific causes and symptoms of mental disorders and in seeking help from trusted adults such as teachers. These findings underscore the need for ongoing mental health education and the reinforcement of help-seeking norms among adolescents.

Finally, the study identified a significant positive relationship between teachers’ readiness and students’ mental health literacy. Specifically, teacher resilience and self-efficacy were positively correlated with students’ beliefs about mental health and their use of self-help strategies. This suggests that when teachers are resilient and confident in addressing mental health-related challenges, students are more likely to internalize positive beliefs and adopt proactive coping mechanisms. Interestingly, the dimension of social and emotional learning among teachers did not exhibit a statistically significant relationship with any student literacy domains. Despite this, the overall findings emphasize the critical role that well-prepared and mentally resilient teachers play in shaping students' mental health awareness and practices. Continued professional development for teachers, alongside comprehensive student-focused mental health initiatives, remains essential for cultivating a supportive and mentally healthy school environment.

**RECOMMENDATIONS**

 In light of the findings indicating a high level of teacher readiness in promoting mental health—particularly in the areas of resilience and self-efficacy—it is strongly recommended that schools invest further in sustained and targeted professional development programs. Although teachers have demonstrated strong competencies, continuous learning opportunities such as specialized workshops, coaching, and reflective practices should be prioritized to deepen their skills in emotional regulation, relationship-building, and adaptive problem-solving. These initiatives will not only reinforce existing strengths but also ensure long-term effectiveness in supporting student mental well-being.

Given that students also exhibited a generally high level of mental health literacy—especially in the domains of self-help strategies and positive beliefs—there is an opportunity to enhance these outcomes further by integrating comprehensive mental health education into the formal curriculum. This should include structured modules designed to address persistent misconceptions, encourage help-seeking behaviors from trusted adults such as teachers and counselors, and expand students’ understanding of the causes and symptoms of mental health conditions. In addition, peer-led education programs and school-wide mental health awareness campaigns can be effective in reinforcing key concepts and fostering a more empathetic, supportive school climate.

Finally, the study’s finding of a significant positive correlation between teacher readiness and student mental health literacy highlights the critical role of teacher development as a strategic lever for improving student outcomes. School administrators and policymakers should consider aligning teacher capacity-building initiatives with student mental health goals. Collaborative programs—such as mentorship systems, joint intervention planning, and structured teacher-student dialogues—can serve as practical platforms for strengthening this connection. Moreover, the absence of a significant relationship between teachers’ social and emotional learning and student outcomes warrants further investigation. This may involve reevaluating how SEL is taught, modeled, and integrated into classroom practices to maximize its impact on students.

**Disclaimer (Artificial intelligence)**

This research utilized ChatGPT, a language model developed by OpenAI, for paraphrasing paragraphs and checking grammatical errors. The Free ChatGPT App was employed as a tool to enhance the clarity and readability of the text, ensuring that ideas were effectively communicated while maintaining the original meaning. The use of ChatGPT contributed to refining the language and structure of the manuscript.

Details of the AI usage are given below:

1. Used the ChatGPTA for paraphrasing the paragraphs for clarity and readability of text.
2. Used the ChatGPT for checking the language/grammar.

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