

A Two-Continua Examination of Music Teachers' Mental Health

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Introduction

An Implicit Assumption

Music education researchers have increasingly examined teacher well-being and mental illness (Miksza et al., 2022; Payne & Royston, 2025; Roseth, 2024)

The two are often implied to sit on a single spectrum (e.g., depression to flourishing); however, the presence of well-being $\neq$ the absence of mental illness

Well-being can co-occur with a diagnosed mental illness

Introduction

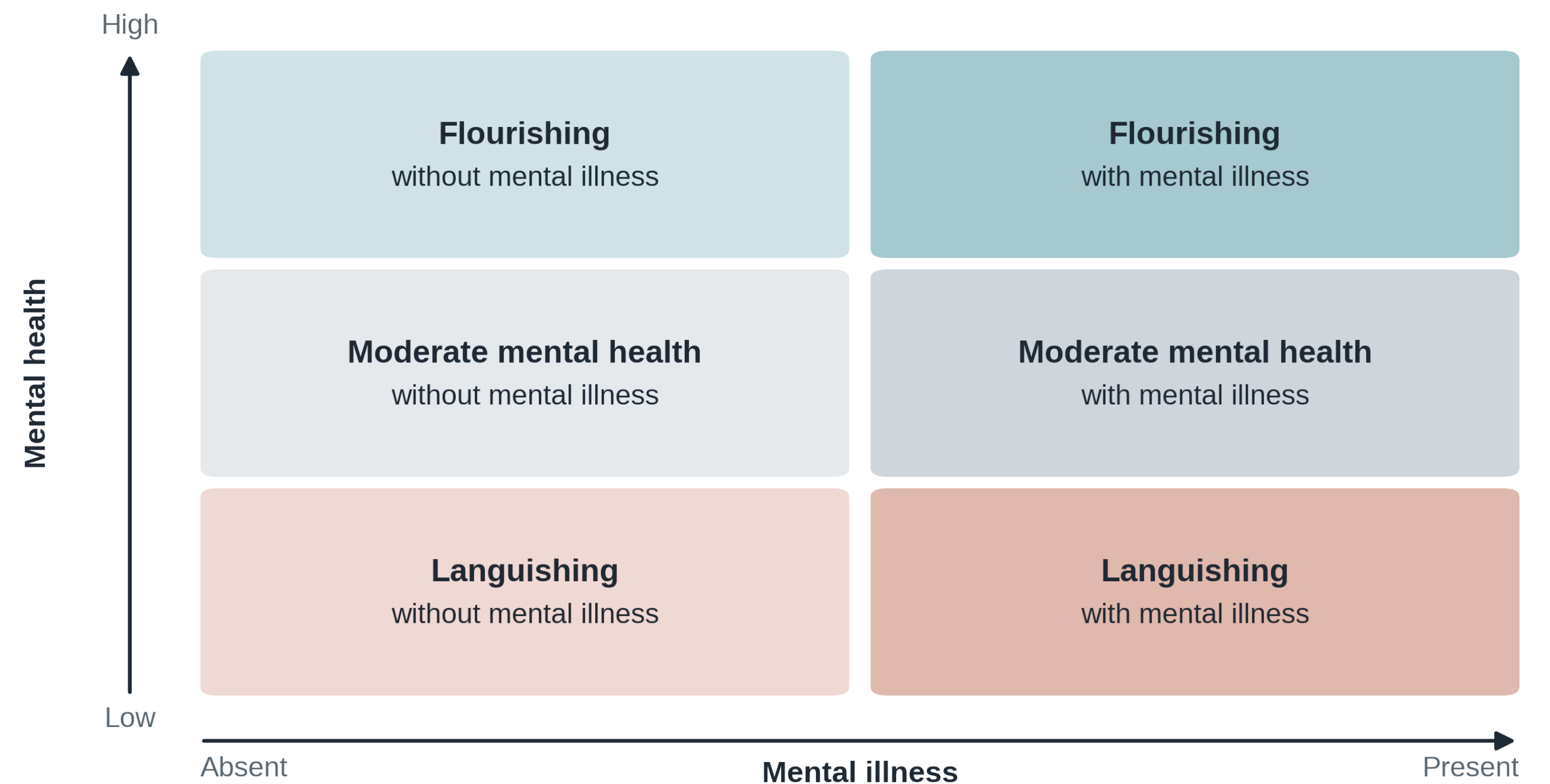
The Two-Continua Model (Westerhof & Keyes, 2010)

Mental health continuum:
languishing → flourishing

- emotional, psychological, and social well-being

Mental illness continuum:
“normal” → extremely severe

- anxiety, depression, stress



Note. Adapted from Westerhof and Keyes (2010).

Introduction

Why Languishing Matters

Languishing is linked to higher risk of depression, anxiety, PTSD, relapse, reduced productivity, inflammation, and premature death (Keyes, 2024)

60% of languishing and moderately healthy adults without illness were at substantial risk of developing one

Teachers in other countries:

- Italy: 8% languishing / 53% moderate / 39% flourishing (Capone & Petrillo, 2020)
- Rural China: 10% / 61% / 29% (Cui et al., 2022)

Languishing teachers reported lower job satisfaction and efficacy, higher burnout, and the highest risk of leaving

Literature

Music Teacher Well-Being

Predictors of well-being:

- Competence and relatedness (Kang & Yoo, 2019)
- Adaptability (Roseth & Blackwell, 2022)
- Physical classroom environment (Roseth, 2024)

PERMA studies:

- Lower positive emotion than norms (Miksza et al., 2022; Roseth, 2024)
- Higher meaning than norms in both studies

Notably, languishing not operationalized or examined in extant music education research

Literature

Music Teacher Distress

Anxiety: 33% with elevated levels; higher than the general population (Payne & Royston, 2025)

Depression: only 23% had no symptoms in December 2020 (Parkes et al., 2021)

Stress: 72% with elevated levels (Hedden, 2005)

- Sources: role conflict, role overload, and resource inadequacy (Scheib, 2003; Taft, 2023)

Burnout:

- Moderate emotional exhaustion and depersonalization (McLain, 2005)
- Higher among younger teachers and multi-level teachers (Bernhard, 2016)

Method

Purpose and Research Questions

Apply the two-continua model to K–12 music teachers in the U.S to examine:

1. How are the participants in the study distributed across languishing, moderate mental health, and flourishing categories?
2. What is the prevalence and severity of depression, anxiety, stress, and burnout among the participants in the study?
3. How do mental health and mental illness categories co-occur?
4. Does the two-continua structure hold (i.e., mental health and mental illness as related but distinct constructs)?

Method

Instruments

Mental Health Continuum–Short Form (MHC-SF)

- 14 items, past month, 0–5 scale
- Categorical classification: languishing / moderate / flourishing
- Emotional ($\alpha = .86$), psychological ($\alpha = .84$), and social ($\alpha = .81$) well-being subscales ($\alpha = .92$ overall)

Depression, Anxiety, and Stress Scale (DASS-21)

- 21 items, past week, 0–3 scale
- Categorical classification: “normal” → extremely severe
- Depression ($\alpha = .89$), anxiety ($\alpha = .78$), and stress ($\alpha = .86$) subscales ($\alpha = .92$ overall)

Single-Item Burnout (SIB)

- 1–5 scale; a score of 3 or higher indicates mild to severe burnout

Diagnostic item: ever diagnosed with or treated for a mental illness by a professional?

Method

Procedure and Participants

Qualtrics survey sent through NAFME Research Survey Assistance, October 2025

- Follow-up invitation at 11 days; open for 4 weeks
- About 26,826 contacted; 13,755 opened
- $N = 457$ usable (about 3% of those who opened)

66% women, 32% men, 1% non-binary; 89% white

15 years ($SD = 10.3$) of experience

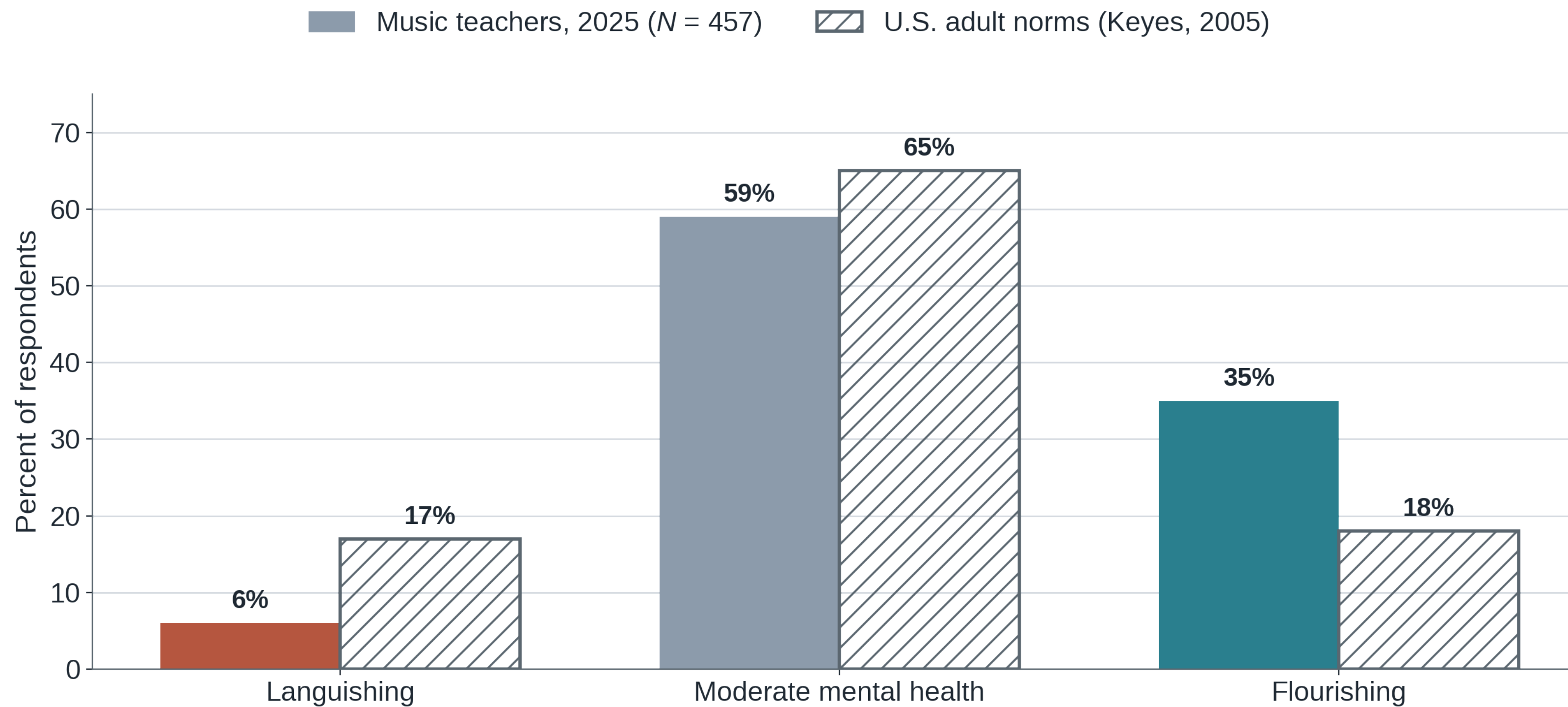
61% master's, 33% bachelor's, 5% doctorate

33% general music, 28% band, 16% choir, 7% orchestra, 16% other areas

52% suburban, 30% rural, 16% urban; 85% public schools

Results: Distributions

Mental Health Continuum



Note. $\chi^2(2, N = 457) = 106.62, p < .001$, Cohen's $w = .48$. Teacher bars are colored by category.

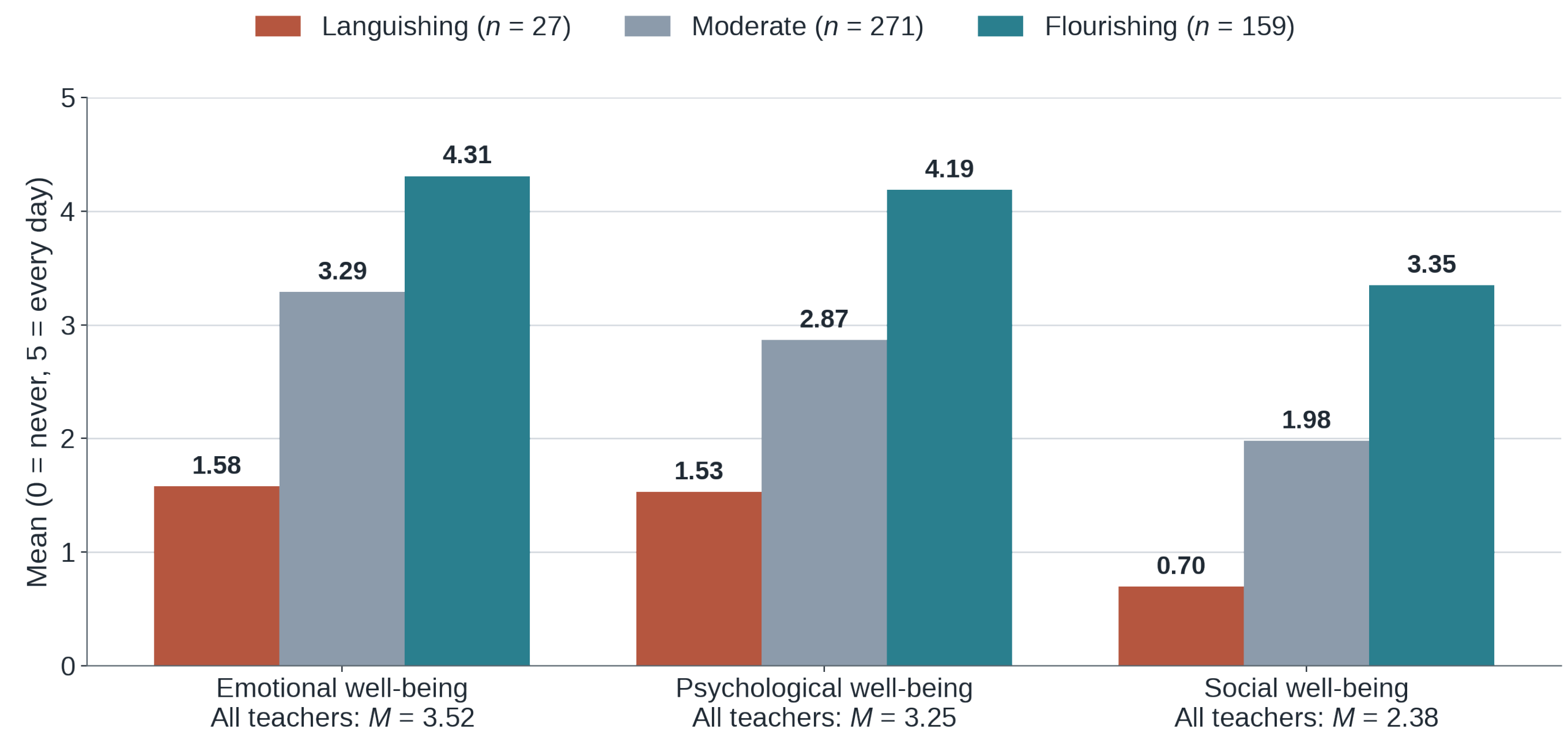
Results: Distributions

Well-Being Subscales

MHC-SF overall: $M = 42.06$ ($SD = 12.57$), possible range 0–70

One-way ANOVAs across the three mental health groups, all significantly different ($p < .001$)

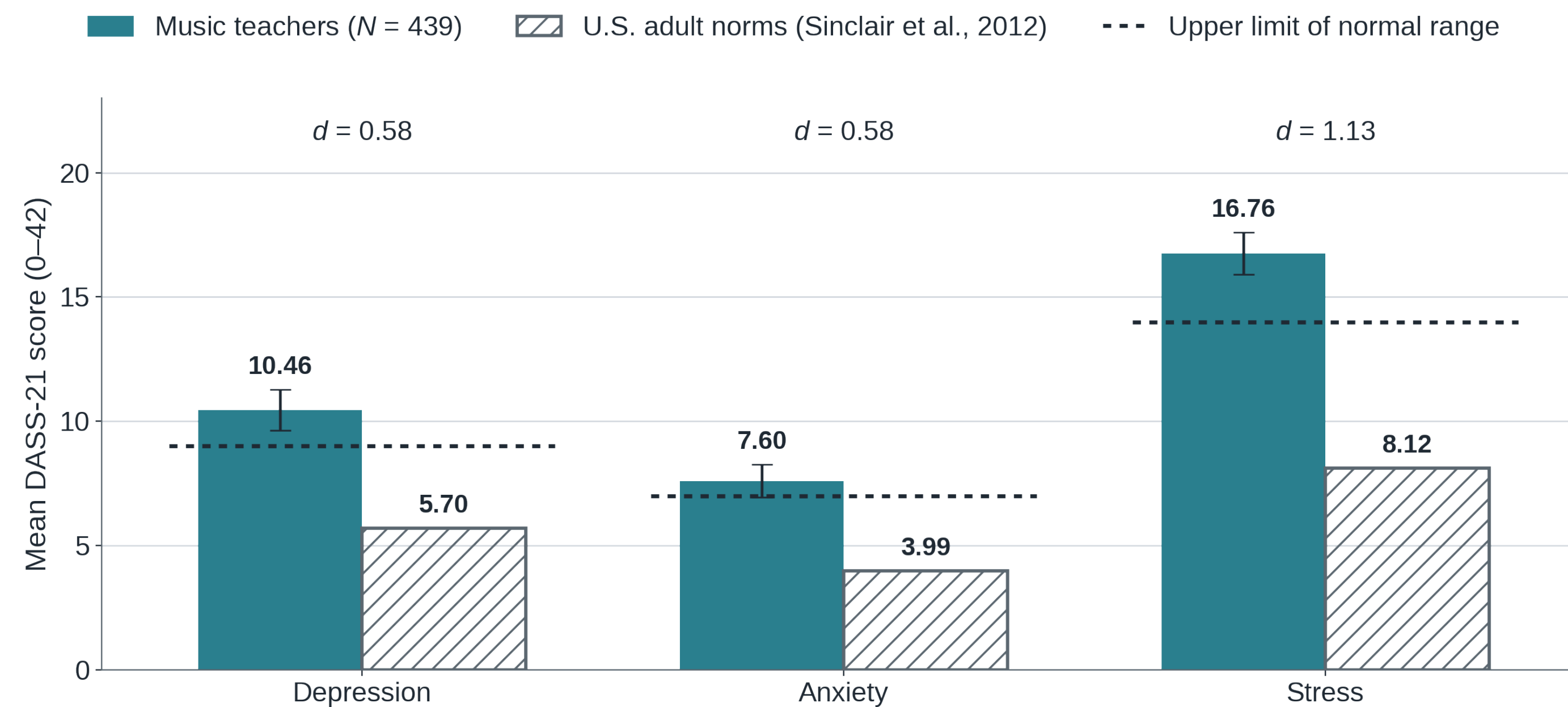
Lowest items: "society is becoming a better place" ($M = 1.40$); "society works and makes sense" ($M = 1.56$)



Note. One-way ANOVAs significant for all three subscales, $p < .001$, $\eta^2 = .51-.62$; all Bonferroni pairwise comparisons $p < .001$.

Results: Prevalence & Severity

Distress Compared With U.S. Norms



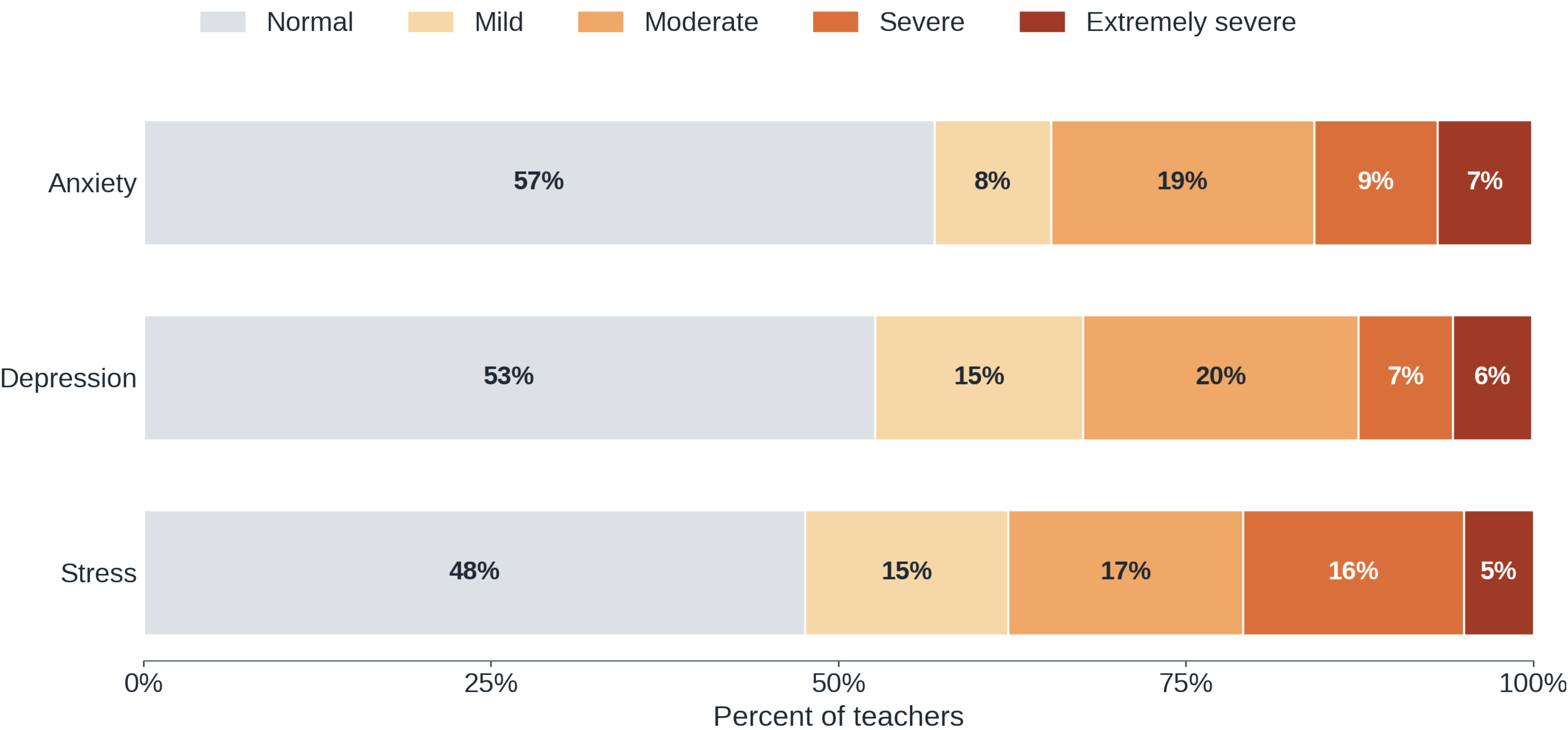
Highest-rated items were all stress items:

- "Found it hard to wind down" ($M = 1.59$)
- "Found myself getting agitated" ($M = 1.44$)
- "Found it difficult to relax" ($M = 1.44$)

Note. Error bars are 95% CIs. All differences $p < .001$; d computed with normative SDs. Normal range: depression ≤ 9 , anxiety ≤ 7 , stress ≤ 14 .

Results: Prevalence & Severity

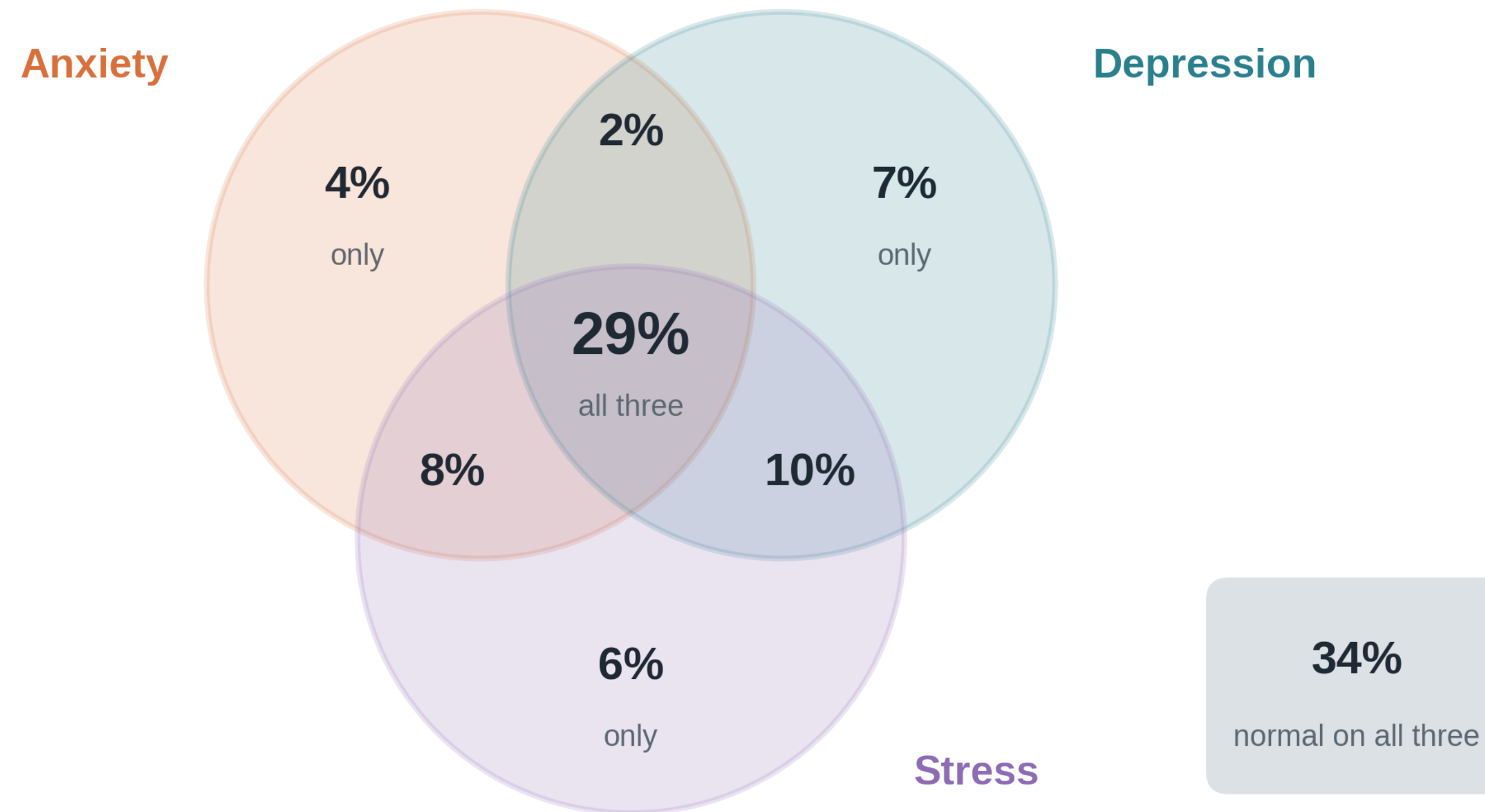
Severity of Distress



Note. N = 439. Severity categories based on DASS-21 cutoffs applied to doubled subscale scores.

Results: Prevalence & Severity

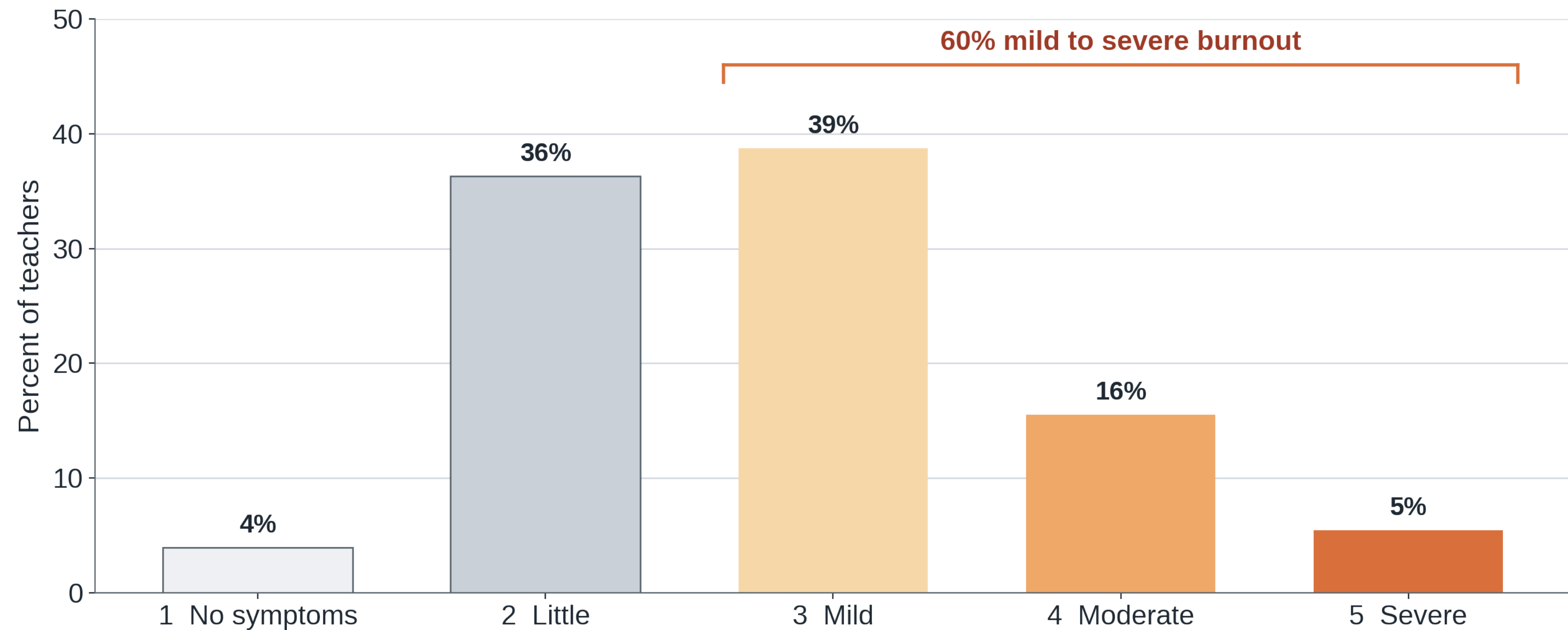
Co-Occurrence of Distress



Note. Percent of teachers ($N = 439$) with symptoms above the normal range. Circle areas are not to scale.

Results: Prevalence & Severity

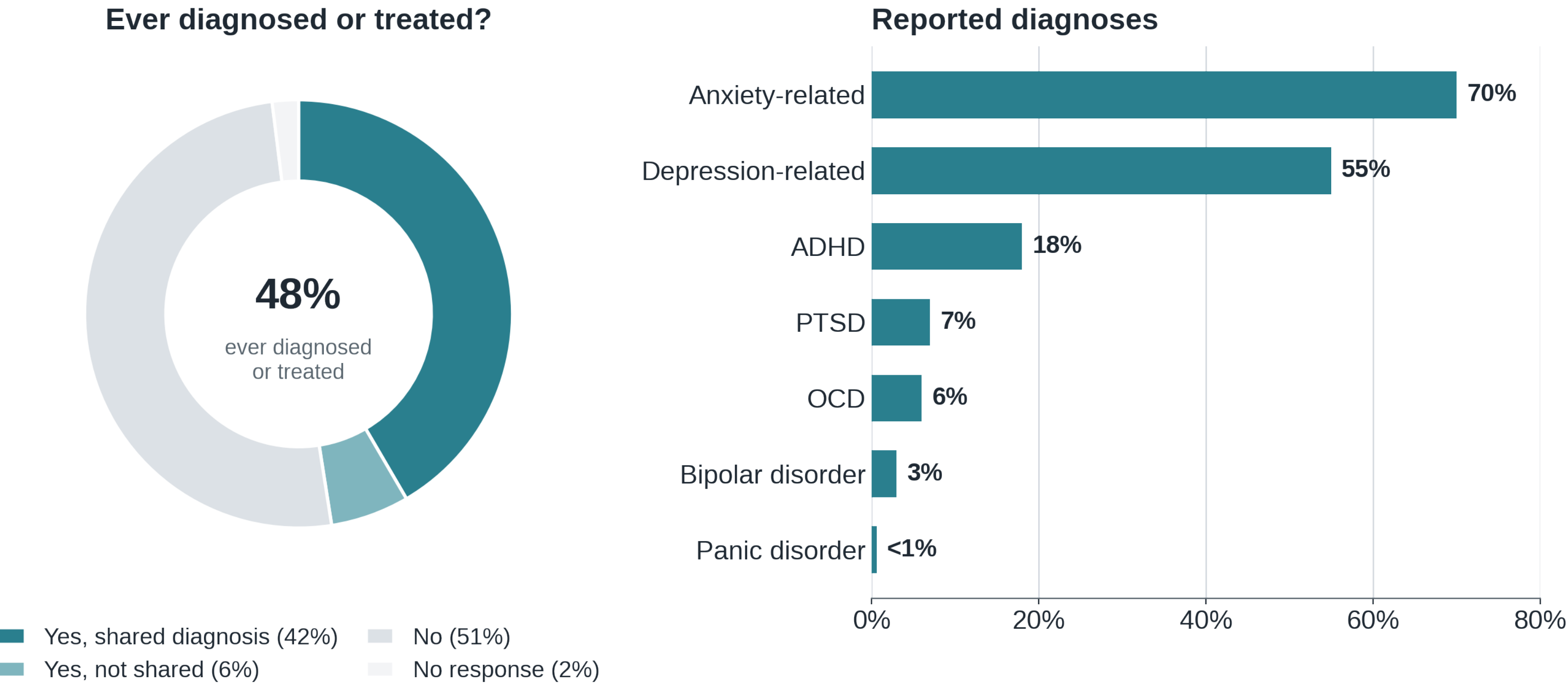
Burnout



Note. Single-Item Burnout measure, $N = 457$, $M = 2.82$, $SD = 0.93$.

Results: Prevalence & Severity

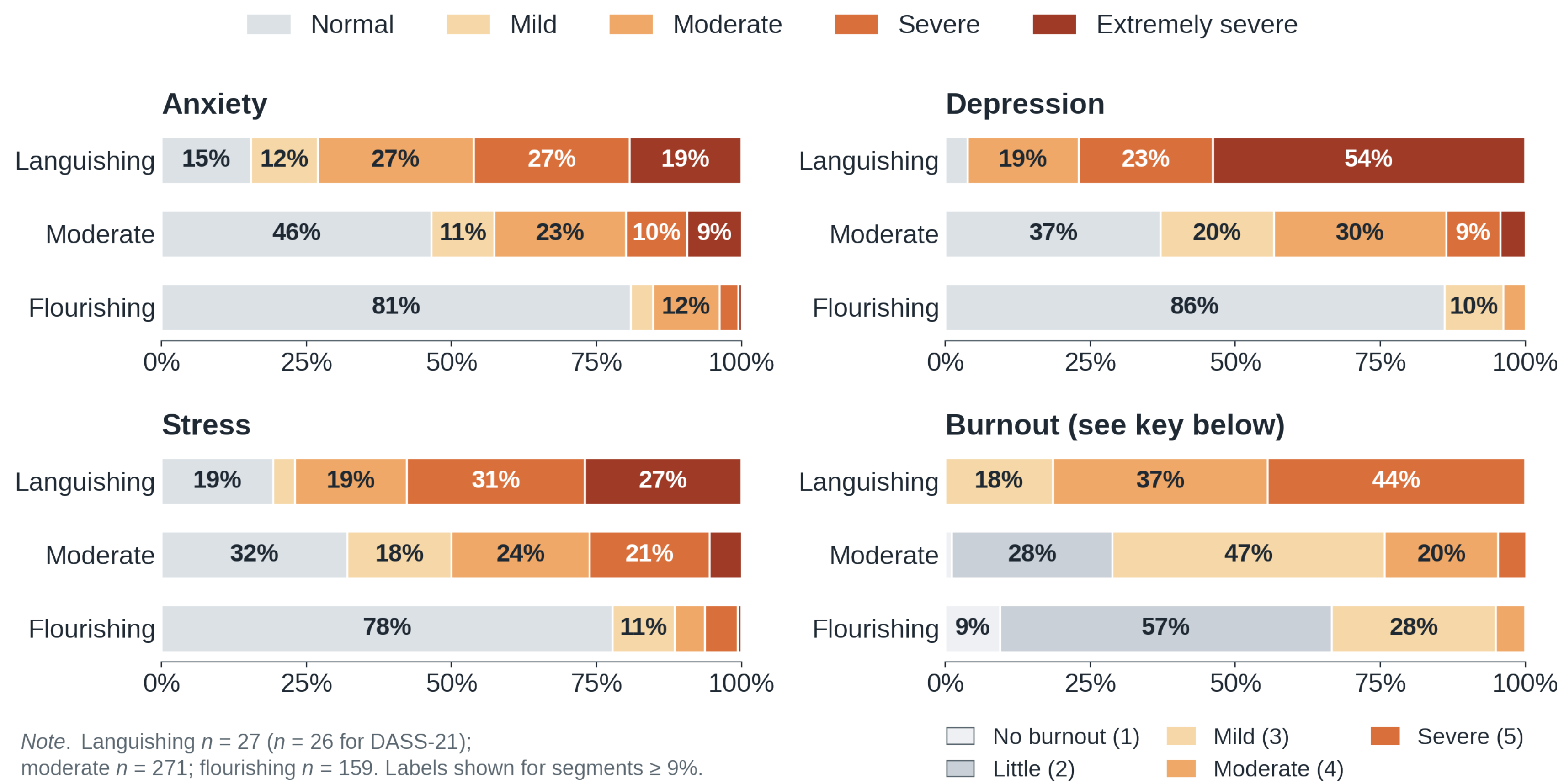
Diagnoses



Note. $N = 457$. Diagnoses are among teachers who shared one ($n = 182$); 48% of them listed more than one.

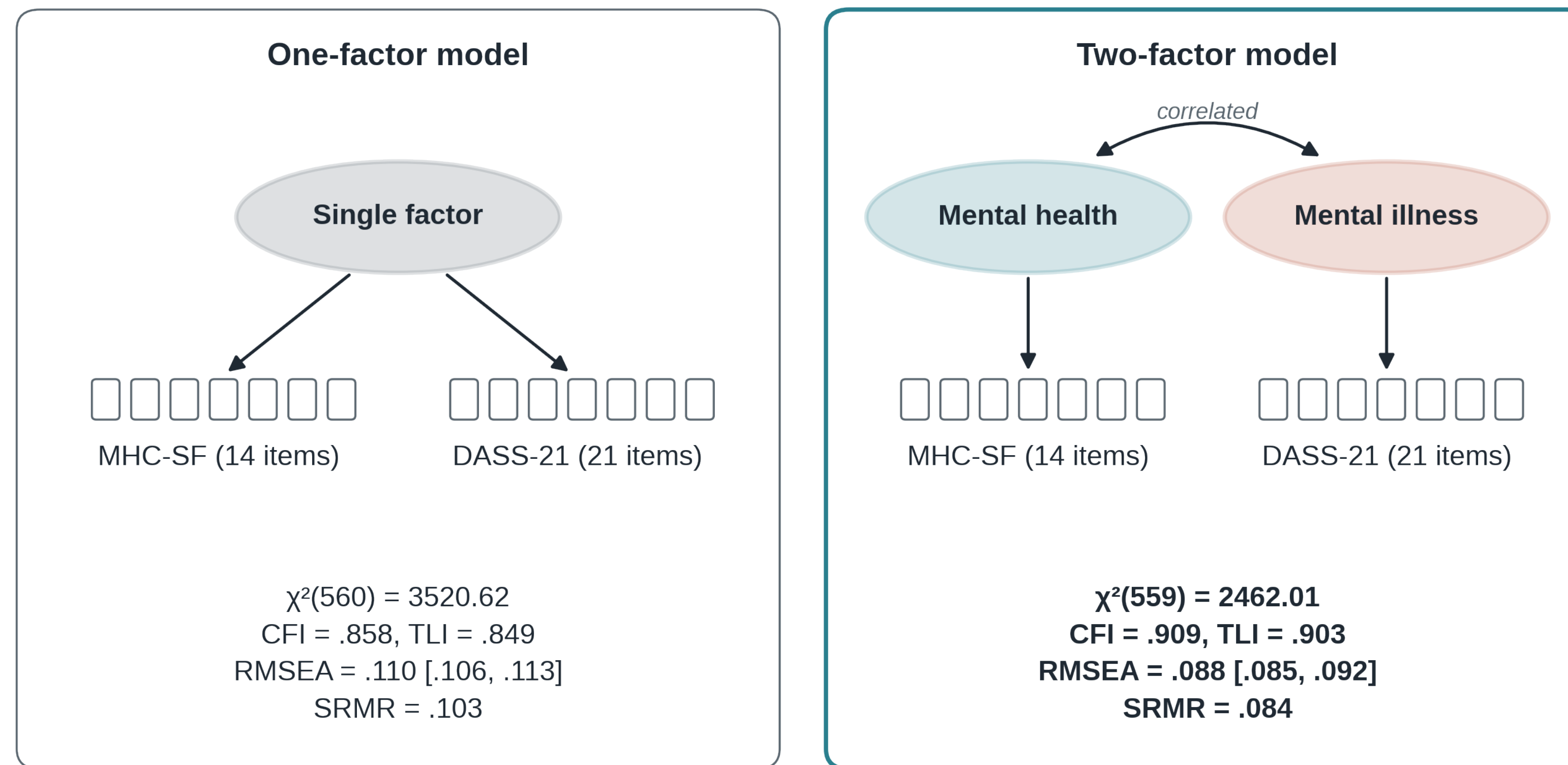
Results: Co-Occurrences

How Mental Health and Mental Illness Co-Occur



Results: Two Factor Structure

Does the Two-Continua Structure Hold?



Note. Scaled $\Delta\chi^2(1) = 201.25$, $p < .001$; the two-factor model fit significantly better. DWLS estimation with Satorra-Bentler scaling.

Discussion

Overview

The distribution resembles teachers internationally, with more flourishing and less languishing than U.S. norms

Social well-being is the weakest area in teacher well-being, especially teachers' views of society

Distress is elevated: only 34% were normal across all three subscales, and stress had the largest effect

Depression: 53% normal now, compared with about 23% during the pandemic (Parkes et al., 2021)

The two-continua model appears supported: mental health and mental illness are related but distinct

Discussion

Implications

For schools and the profession:

- Teachers who appear to be thriving aren't necessarily free of distress
- Reducing distress symptoms alone won't produce flourishing teachers
- Support well-being, especially social well-being (belonging, community, contribution)
- Also provide access to mental health resources and address chronic stressors and burnout

For researchers:

- Operationalize languishing as its own construct
- Avoid (implicit) single-spectrum framing (e.g., depression ↔ flourishing)
- Measure both continua, if appropriate

Discussion

Limitations and Future Directions

The DASS-21 plus one self-report item gives a limited, non-diagnostic view of mental illness

Self-selection and non-response bias:

- About 3% participation

Comparison norms are dated (2005, 2012)

Independently developed instruments likely affected CFA fit

Future research:

- More comprehensive distress measures
- Combined or purpose-built two-continua instruments
- Predictors of languishing
- Longitudinal designs

Thank you!

Questions?

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