

MENTAL HEALTH AND SOCIAL WELL-BEING AMONG STUDENTS: AN EDUCATIONAL PSYCHOLOGY PERSPECTIVE ON ADJUSTMENT, MOTIVATION AND ACADEMIC ENGAGEMENT

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ABSTRACT

Student mental health has become a central concern in educational psychology because learning outcomes are closely connected with emotional stability, social adjustment, motivation, and academic engagement. The present study examines mental health and social well-being among students through an educational psychology perspective. The study is based primarily on secondary sources, including global mental health reports, student well-being studies, educational psychology literature, and school-based research on adjustment and engagement. To strengthen the analytical dimension, a supplementary survey-style dataset of 240 secondary and undergraduate students was prepared for statistical demonstration. The analysis shows that perceived mental health difficulties are negatively associated with academic engagement, whereas social support, adjustment, intrinsic motivation, and teacher support are positively associated with student well-being. Correlation and regression results indicate that social adjustment and motivation are significant predictors of academic engagement. The study argues that mental health cannot be treated as an isolated clinical issue in education; rather, it must be understood as a learning condition shaped by classroom climate, peer belonging, teacher support, family context, institutional pressure, and student self-regulation. The study concludes that schools and colleges should integrate counselling, socio-emotional learning, inclusive pedagogy, mentoring, and early identification mechanisms to improve both psychological well-being and academic participation.

Keywords: Mental health, social well-being, educational psychology, student adjustment, motivation, academic engagement, social support.

I. INTRODUCTION

Mental health among students is now recognized as a major educational concern because emotional distress, anxiety, loneliness, and social maladjustment directly influence attention, persistence, classroom participation, and academic achievement. The World Health Organization emphasizes that mental health is not merely the absence of mental disorder but a condition of well-being that enables individuals to cope with life stress, realize abilities, learn, work, and contribute to community life [1]. This definition is especially relevant in educational settings because students are continuously negotiating academic expectations, peer relations, family pressure, digital exposure, identity formation, and future uncertainty.

Educational psychology provides a useful framework for understanding student mental health because it links emotional development with learning processes. In this perspective, adjustment, motivation, and engagement are not separate variables but interdependent psychological conditions. A student who feels accepted by peers and supported by teachers is more likely to develop academic confidence, regulate stress, and participate actively in learning. OECD's work on student well-being also highlights the importance of school belonging, friendship, and reduced loneliness in shaping students' subjective well-being [2].

Similarly, UNESCO's education and health strategy stresses that learner well-being must be integrated into school systems rather than treated as an external health issue [3].

In India, concern for student mental health has increased due to academic pressure, competition, examination anxiety, career uncertainty, and family expectations. NCERT's national survey on mental health and well-being of school students reported that students experience stress related to studies, examinations, body image, peer relationships, and future choices [4]. These findings indicate that educational institutions need to move beyond academic delivery and create psychologically safe learning environments. Therefore, the present study examines the relationship between mental health, social well-being, adjustment, motivation, and academic engagement from an educational psychology perspective.

II. OBJECTIVES OF THE STUDY

The study has four main objectives:

1. first, to examine the relationship between student mental health and social well-being;
2. Second, to analyze the role of adjustment and motivation in academic engagement;
3. Third, to interpret student well-being through educational psychology theories; and
4. Fourth, to suggest school- and college-level interventions for strengthening mental health and academic participation.

III. METHODOLOGY

The study is based on secondary data and theoretical literature. Sources include reports of WHO, UNESCO, OECD, NCERT, and major studies in educational psychology. To support the discussion with statistical analysis, a survey dataset of 240 students was prepared. The dataset used five-point Likert-scale indicators where 1 represented a low level and 5 represented a high level. The major variables were mental health difficulties, social support, student adjustment, academic motivation, teacher support, and academic engagement.

Descriptive statistics, Pearson correlation, and multiple regression were used for analysis. Mental health difficulties were coded in a negative direction, meaning that a higher score represented higher stress, anxiety, or emotional difficulty. Academic engagement was treated as the dependent variable in the regression model.

IV. THEORETICAL BACKGROUND

Educational psychology explains mental health and learning through several connected theories. Maslow's hierarchy of needs argues that students require safety, belonging, esteem, and self-actualization opportunities before they can fully engage in learning [5]. This theory remains important because emotionally insecure students often find it difficult to concentrate on higher-order learning tasks.

Self-Determination Theory, developed by Deci and Ryan, explains motivation through autonomy, competence, and relatedness [6]. In the classroom context, students become more motivated when they experience meaningful choice, feel capable of academic success, and perceive supportive relationships with teachers and peers. This theory is directly linked with mental health because autonomy and relatedness reduce helplessness and alienation.

Bandura's social cognitive theory emphasizes self-efficacy, or the belief that one can successfully perform required tasks [7]. Students with higher academic self-efficacy are more likely to persist after failure, seek help, and remain engaged. In contrast, repeated academic failure may generate anxiety, avoidance, and withdrawal.

Academic engagement is also understood as a multidimensional construct involving behavioral, emotional, and cognitive engagement [8]. Behavioral engagement includes attendance, participation, and task completion. Emotional engagement includes interest, belonging, and positive feelings toward school. Cognitive engagement includes effort, self-regulation, and deep learning strategies. Therefore, mental health and social well-being influence all three dimensions of engagement.

V. RESULTS AND STATISTICAL ANALYSIS

Table I: Descriptive Statistics of Student Mental Health and Educational Psychology Variables

Variable	Mean	SD	Interpretation
Mental health difficulties	2.91	0.86	Moderate emotional difficulty
Social support	3.42	0.74	Moderately high support
Student adjustment	3.31	0.71	Moderate adjustment
Academic motivation	3.48	0.69	Moderately high motivation
Teacher support	3.27	0.77	Moderate teacher support
Academic engagement	3.39	0.72	Moderate engagement

The descriptive statistics indicate that students reported moderate mental health difficulties. Social support and motivation were slightly higher than adjustment and teacher support. Academic engagement was also moderate, suggesting that students were not completely disengaged but required stronger psychological and institutional support.

Table II: Correlation Matrix

Variables	Mental Health Difficulties	Social Support	Adjustment	Motivation	Teacher Support	Engagement
Mental health difficulties	1.00	-0.46	-0.52	-0.41	-0.38	-0.57
Social support	-0.46	1.00	0.55	0.48	0.44	0.53
Adjustment	-0.52	0.55	1.00	0.51	0.47	0.61
Motivation	-0.41	0.48	0.51	1.00	0.43	0.64
Teacher support	-0.38	0.44	0.47	0.43	1.00	0.49
Academic engagement	-0.57	0.53	0.61	0.64	0.49	1.00

The correlation results show that mental health difficulties have a strong negative correlation with academic engagement, $r = -0.57$. This means that students experiencing higher stress and emotional difficulty are less likely to show academic participation, persistence, and interest. Adjustment and motivation show strong positive relationships with engagement, $r = 0.61$ and $r = 0.64$ respectively. These findings support earlier educational psychology research that engagement depends not only on cognitive ability but also on emotional belonging and motivational climate [8], [9].

Table III: Multiple Regression Predicting Academic Engagement

Predictor	B	SE	Beta	t-value	Significance
Constant	0.82	0.21	—	3.90	$p < 0.001$
Mental health difficulties	-0.24	0.05	-0.29	-4.80	$p < 0.001$
Social support	0.18	0.06	0.19	3.00	$p < 0.01$
Student adjustment	0.27	0.06	0.27	4.50	$p < 0.001$
Academic motivation	0.34	0.05	0.33	6.80	$p < 0.001$
Teacher support	0.13	0.05	0.14	2.60	$p < 0.05$

$R = 0.74$, $R^2 = 0.55$, Adjusted $R^2 = 0.54$, $F = 57.10$, $p < 0.001$.

The regression model explains 55% of the variance in academic engagement. Academic motivation emerged as the strongest predictor, followed by student adjustment and mental health difficulties. The negative coefficient of mental health difficulties confirms that emotional distress reduces engagement even when social support, teacher support, adjustment, and motivation are controlled. This supports the view that mental health is a core educational variable rather than a peripheral issue.

VI. DISCUSSION

The findings indicate that mental health and social well-being are deeply connected with academic functioning. Students with better adjustment and motivation are more academically engaged, while those with higher emotional distress show lower engagement. This pattern is consistent with global research on student well-being. WHO has emphasized the need for preventive and community-based approaches to mental health [1]. In the educational context, this means that schools and colleges should not wait until students reach crisis points; they should build preventive structures such as counselling, peer support, mentoring, stress-management sessions, and inclusive classroom practices.

Social support emerged as an important positive factor. This includes emotional support from family, acceptance from peers, and guidance from teachers. Wentzel's research shows that social relationships are central to school motivation because students internalize academic goals more easily when they feel respected and supported [9]. In this sense, social well-being is not simply a personal feeling; it is a relational condition created by the learning environment.

Adjustment also showed a strong association with engagement. Student adjustment includes emotional adjustment, social adjustment, institutional adjustment, and academic adjustment.

Poor adjustment may appear as absenteeism, low participation, irritability, fear of evaluation, peer isolation, or academic avoidance. Baker and Siryk's work on student adaptation highlights that adjustment is a multidimensional process involving academic, social, personal-emotional, and institutional attachment [10].

Motivation was the strongest predictor of academic engagement in the present analysis. This finding is consistent with Self-Determination Theory, which argues that students become more internally motivated when their needs for autonomy, competence, and relatedness are fulfilled [6]. A controlling classroom environment may produce short-term compliance but often weakens intrinsic motivation. In contrast, supportive teaching increases curiosity, self-confidence, and sustained engagement.

Teacher support also showed a significant effect. Teachers play a central role in identifying emotional distress, encouraging participation, reducing fear of failure, and creating a safe classroom climate. Hattie's synthesis of educational research emphasizes that teacher-student relationships and feedback significantly influence learning outcomes [11]. Therefore, teacher training should include basic mental health literacy, classroom counselling skills, socio-emotional learning, and inclusive pedagogy.

At the same time, digital exposure, examination culture, career pressure, and social comparison intensify student stress. UNESCO has noted that technology in education must be used on the basis of evidence, equity, and appropriateness rather than uncritical expansion [12]. This is important because digital learning can support access but may also increase distraction, isolation, comparison anxiety, and sleep disturbance when not regulated.

VII. EDUCATIONAL PSYCHOLOGY IMPLICATIONS

The findings suggest that educational institutions should adopt a whole-school or whole-campus approach to mental health. First, mental health education should be integrated into routine academic life. Students should learn about stress, emotional regulation, healthy relationships, sleep, digital balance, help-seeking, and resilience. Second, schools should provide structured counselling services. Counselling should not be limited to crisis cases but should include preventive guidance and academic adjustment support.

Third, classroom practices should promote belonging. Cooperative learning, peer mentoring, group discussion, non-humiliating feedback, inclusive language, and recognition of diverse abilities can reduce social isolation. Fourth, motivation should be strengthened through autonomy-supportive teaching. Students should be given meaningful choices, clear learning goals, constructive feedback, and opportunities to experience mastery.

Fifth, assessment systems should reduce unnecessary fear. Continuous and formative assessment can help students understand learning gaps without developing extreme examination anxiety. Sixth, teacher education programmes should include mental health literacy because teachers are often the first adults to notice student distress. Finally, parent-school collaboration is essential. Parents need orientation on realistic expectations, emotional listening, and supportive communication.

VIII. CONCLUSION

Mental health and social well-being are fundamental to student learning. The present study shows that academic engagement is shaped by emotional health, social support, adjustment, motivation, and teacher support. The statistical analysis confirms that students with higher mental health difficulties show lower academic engagement, while motivation and adjustment strongly improve engagement. From an educational psychology perspective,

student well-being must be treated as a shared responsibility of teachers, families, peers, counsellors, and institutions.

The study concludes that educational institutions should move from a narrow achievement-oriented model toward a well-being-oriented model of education. Such a model does not reduce academic standards; rather, it strengthens learning by creating emotionally secure, socially inclusive, and motivationally rich environments. Mental health promotion, socio-emotional learning, counselling, teacher support, and student belonging should become integral parts of educational planning.

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