The Effects of Health Locus of Control and Health Behavior on Teacher Stress and Life Satisfaction in Head Start Educators

Adam Blancher, PhD
Michelle Yetman, PhD
Louisiana State University

ABSTRACT

Teacher well-being plays a crucial role in creating effective learning environments for young children. The present study examines the relationship between health locus of control (HLOC), teacher stress, and life satisfaction among Head Start (HS) teachers. Results suggest that teachers with a high Internal HLOC report lower overall stress levels and greater satisfaction compared to those with a low Internal HLOC. In addition, having a high Internal HLOC was also associated with greater overall life satisfaction. We also investigated how health behaviors (e.g., a commitment to healthy eating, exercise) affected stress and life satisfaction. We found that a "health-conscious orientation" was related to lower stress levels and higher life satisfaction. Understanding the dynamics of locus of control, stress, life satisfaction, and teacher health behaviors provides valuable insights for developing comprehensive interventions that benefit the teachers and the children they serve.

KEYWORDS

Teacher stress, health, life satisfaction

The field of early childhood education has become increasingly aware that teacher health and well-being are vital to the academic development of young children (Jeon & Ardeleanu, 2020; Jeon et al., 2019; Whitaker et al., 2015). Head Start (HS) is a specialized educational setting with the mission of supporting the academic, social, nutritional, and psychological development of vulnerable, economically disadvantaged preschool-aged children (Office of Head Start, 2020). Since its establishment, the federal HS program has served over 37 million children and their families (Office of Head Start, 2019). In 2015, the federal HS released an updated policy and performance standard document that specifically required local programs to provide health and wellness information to staff as well as provide routine health education opportunities to include wellness and mental health (U.S. Department of Health and Human Services 2015).

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Contact: Adam Blancher adam.blancher@lsuhs.edu

Due to the emphasis on health and wellness of HS staff, we wished to investigate how specific health-related constructs were related to teacher stress and life satisfaction.

Locus of Control & Health Behaviors

Julian B. Rotter (1954) introduced the social learning theory known as Locus of Control (LOC), which refers to an individual's belief system concerning the origins of their experiences and the factors to which they attribute success or failure. He proposed two dichotomous viewpoints called Internal LOC and External LOC. According to his work, individuals with an Internal LOC credit their achievements to personal effort and abilities. Such individuals are typically more motivated and inclined toward learning, as they anticipate success resulting from their actions. From a health perspective, they may attribute good health to their own healthy lifestyle choices. Conversely, individuals with External LOC may attribute life events to external factors such as luck, fate, others' actions, or influential figures. Those who attribute success to luck or external forces may experience reduced motivation and effort in learning endeavors. Furthermore, individuals with an External LOC are more prone to anxiety due to their perception of lacking control over life events (Gavin et al., 2018). They also may attribute poor health to genetics or circumstances beyond their control, such as a doctor's skill level.

Health, health behaviors, and LOC have received extensive attention within the literature. Health locus of control (HLOC) is an extension of the LOC theory and refers specifically to an individual's belief in their ability to influence and control factors related to their well-being and health outcomes (Wallston et al., 1994) and plays a pivotal role in healthcare (Janowski et al., 2013). Individuals with an Internal HLOC attribute their health outcomes to their own actions, whereas those with an External HLOC believe that their health is determined by external factors such as healthcare providers or chance (Wallston et al., 1994). Kesavayuth et al. (2020) reported that individuals with an Internal LOC tend to report better self-assessed health, as well as improved physical and mental well-being. In addition, individuals with an Internal LOC had a lower reliance on medical care, both preventive and curative. In a systematic review of the relationship between Internal and External HLOC, Dogonchi et al. (2022) found that individuals who scored high on Internal HLOC engaged in positive health behaviors to a significantly higher degree in comparison to individuals who had an External HLOC. The authors reasoned that intervention programs should investigate individuals' perception regarding the impact of internal factors and prioritize enhancing awareness of individuals' capacity to foster healthy behaviors. Health behaviors, which may include tobacco use, alcohol intake, leisure-time physical activity (LTPA), and dietary choices, represent the primary contributors to chronic conditions like cardiovascular diseases and cancer. These behaviors are influenced by factors such as socio-economic status (SES) and various psychosocial and psychological elements. For example, there is ample literature highlighting the relationship between socio-economic factors and smoking, LTPA, and diet (Marmont, 2015). In contrast, psychological factors like HLOC, which can play a significant role in determining health-related behaviors, have been investigated to a lesser degree (Lindstrom & Rosvall, 2020). Furthermore, there is a paucity of research that specifically examines early childhood education teachers and their LOC with respect to health behaviors. Examining HLOC in teachers can provide valuable information when attempting to design health and wellness intervention programs pursuant to HS policy and performance standards.

Head Start Teachers & the Preschool Environment

Because HS programs aim to address the needs of children, researchers predominantly focus their attention toward the child recipients of services, leaving a notable gap in understanding the experiences of teachers employed within the program. Early childhood educators often operate in stressful conditions with inadequate institutional support and low wages (Johnson et al., 2020). Whitaker et al. (2013) discovered that HS teachers were three times more likely to report fair or poor health compared to a national sample of employed women of similar age, education, race/ethnicity, and marital

status. Blancher et al. (2022) found that HS teachers exhibit a greater prevalence of health-related issues compared to the same national sample used in the Whitaker et al. study. In addition, they found racial differences, with Black HS teachers reporting worse physical health in comparison to their white counterparts. Since research demonstrates that the mental and physical well-being of teachers significantly impacts children's development (Glazzard & Rose, 2020), efforts to improve teacher health aids not only teachers but also the children they teach.

Louisiana, like many states in the U.S., has experienced a severe teacher shortage, deemed as a 'crisis' (Canicosa, 2022). Although some improvements in the shortage have occurred (Carmosino, 2024), pre-pandemic research examining the years between 2017 through 2020 highlighted a concerning trend of high turnover rates among early childcare staff (Bassok et al., 2021). The repercussions of teacher burnout, including shortages, disproportionately affect the most vulnerable students, particularly those from low-income backgrounds and racial minorities (Christaian-Brandt et al., 2020).

According to the 2021 State of the U.S. Teacher Supply survey (Steiner & Woo, 2021), roughly 25% of teachers expressed intentions to leave their positions by the conclusion of the 2020-2021 school year, a notable increase compared to the usual 16% pre-pandemic turnover rate. Also noteworthy was the finding that Black or African American educators exhibited a heightened propensity to consider leaving their roles. Finally, a significantly larger proportion of teachers reported experiencing frequent job-related stress and symptoms indicative of depression compared to the general adult population.

Braun et al. (2020) investigated the importance of teachers' emotion regulation skills, occupational health (e.g., burnout), and well-being (e.g., life satisfaction) for students. Teachers' emotional regulation skills and life satisfaction were associated with students well-being. Yetman et al. (2023) examined the health of HS teachers in Louisiana following the pandemic and found they experience high rates of anxiety compared to the state's general population. In 2021, the World Health Organization (WHO) noted that in the first year following the COVID-19 pandemic, there was a 25% increase in global anxiety and depression. Heightened anxiety and stress could serve as an indicator for potential burnout.

Teacher stress can come from many sources, such as the children they teach (e.g., behavioral needs), those children's parents or caregivers (e.g., perceived lack of support), administrative pressures (e.g., lack of independence, curriculum guidelines), and the perceived lack of adequate financial compensation (Pullis, 1992; Haydon, et al., 2018). The present study is unique as it investigated locus of control with respect to health behaviors and the connection with perceived sources of stress and life satisfaction (well-being) for teachers. It also investigated whether a health-conscious orientation was related to stress and life satisfaction. By examining the connection between HLOC, teacher stress, life satisfaction, and health orientation, we hope to provide novel approaches to HS intervention programming. By uncovering these connections, the study aims to inform targeted intervention strategies to support teacher well-being, ultimately benefiting both educators and the children they serve.

Hypotheses

1. Teachers with higher Internal HLOC will report lower stress and better overall life satisfaction as compared to teachers with higher External HLOC.
2. Teachers with higher External HLOC will report higher stress and lower overall life satisfaction as compared to teachers with higher External HLOC.
3. Teachers with a higher health-conscious orientation will report less stress and better overall life satisfaction.

Method

Study Design and Participants

A major health sciences center in the southern U.S. partnered with the Mental Health Services Department of Head Start to investigate the relationships between HLOC, teacher stress, life satisfaction, and health orientation. Surveys were distributed to HS staff (N = 181) from 11 centers in a medium sized city in Louisiana. The researchers provided detailed instruction about the questionnaire's contents and invited participants to com-

naire's contents and invited participants to complete the paper and pencil survey and return it to the researchers. No identifying information was requested other than basic demographic variables. Participation was entirely voluntary, and no incentives were offered to avoid any potential coercion or undue influence. Of the 181 surveys distributed, 128 were completed and returned, resulting in a response rate of approximately 70.72%. Individuals who chose not to participate simply did not return the survey. The final sample consisted of 128 females (98.4%) and two males (1.6%). The racial distribution was 93.8% Black, 1.6% white, and 4.6% other (Hispanic, Asian). The average age was nearly 46 years of age, with a range of 19 years to 76 years. Approximately 30% of the sample had four years' experience or less whereas 18.8% reported having five to nine years of service and 46.9% had more than 10 years of service. Finally, the sample consisted of 112 lead teachers and 16 assistant teachers. Table 1 displays the results of demographic variables.

Measures

For the purposes of this study, a questionnaire was constructed that included basic demographic variables (e.g., age, race, gender, marital status, position, and years of teaching) and the measures described below.

Table 1

Demographic Characteristics of the Head Start Teachers

		N = 128	%
Gender	Female	126	98.4
	Male	2	1.6
Race		112	93.8
	Black	2	1.6
	White	6	4.6
	Other		
Age		Mean = 45.79	
		(Range 19-76)	
Year in Service	0-1 years	30	23.4
	2-4 years	9	7.0
	5-9 years	24	18.8
	10+years	60	46.9
Position	Lead Teacher	112	87.5
	Assistant Teacher	16	12.5

Health Locus of Control

The Multidimensional Health Locus of Control (MHLC; Wallston et al., 1978) was used in the present study to assess individuals' beliefs about the extent to which they have control over their health outcomes across multiple dimensions, including internal, external-chance, and external-powerful others. This scale consists of 18 items on a 6-point Likert scale ranging from 1 (strongly disagree) to 6 (strongly agree). Scores are calculated separately for each dimension of HLOC, with higher scores indicating a stronger belief in that particular dimension. The Internal LOC dimension reflects the belief that individuals have control over their health outcomes through their own actions and behaviors. The External-Chance LOC reflects the belief that health outcomes are determined by chance or fate, beyond individual control. The External-Powerful Others LOC dimension reflects the belief that health outcomes are influenced by powerful external forces such as doctors, healthcare professionals, or significant others. Wallston et al. (1994) reported that the instrument demonstrated strong internal consistency and validity and this has been substantiated across various populations and contexts (Moshki et al., 2007).

Life Satisfaction

The Satisfaction with Life Scale (SWLS) was utilized in the study to measure respondents' overall satisfaction with their lives (Diener et al., 1985). The SWLS consists of five statements that assess individuals' subjective evaluations of their life circumstances. Respondents are asked to indicate the extent to which they agree or disagree with each statement using a 7-point Likert scale, ranging from "strongly disagree" to "strongly agree." The items are 1) In most ways, my life is close to my ideal; 2) The conditions of my life are excellent; 3) I am satisfied with my life; 4) So far, I have gotten the important things I want in life; and 5) If I could live my life over, I would change almost nothing. The SWLS yields a total score that ranges from 5 to 35, with higher scores indicating greater life satisfaction. Adequate validity and reliability estimates have been well documented and research suggests that SWLS scores are positively correlated with indicators of psychological well-being, happiness, and positive affect, and negatively correlated with indicators of depression, anxiety, and negative affect (Pavot & Diener, 2009).

Teacher Stress

To assess various causes of teacher stress, Part I of the Pullis Stress Inventory (1992) was incorporated into the study questionnaire. The Sources of Stress portion of the scale assess factors such as school/setting (e.g., school policies, administrators, resources, colleagues), career (i.e., advancement, occupational status), workload (e.g., size of workload, time required, paperwork), and student characteristics (e.g., negative characteristics of students). The responses are scored on a 4-point Likert-type scale ranging from "not anxious at all" to "extremely anxious," where higher ratings indicate greater perceived stress associated with each stressor. Respondents' individual ratings are summed to obtain a total score reflecting their overall perceived stress level. In addition, each individual factor can be averaged to obtain a total score. According to Pullis (1992), school/setting factors have been noted to be the most stressing, followed by career, workload, and student characteristics and the inventory was noted to have adequate reliability and validity.

Health-Conscious Orientation

To estimate each respondent's level of self-rated health behaviors (named Health-Conscious Orientation), the following questions were asked: 1) I feel very healthy, both physically and mentally; 2) I consistently prioritize healthy eating and consume fruits and vegetables in almost all of my meals; 3) I exercise consistently, almost daily or multiple times a week. Respondents were asked to indicate the extent to which they agree or disagree with each statement using a 5-point Likert scale, ranging from "strongly disagree" to "uncertain" to "strongly agree." These questions were utilized to analyze whether a health orientation was related to teacher stress and life satisfaction.

Ethics

The study was reviewed and approved by the

University's Institutional Review Board (IRB). All respondents were provided a consent letter and completion of the study questionnaire was considered written consent. Information regarding the purpose, benefits, and risks was provided to the participants in both written and verbal form. All data was collected and managed in a confidential manner. No identifying information was collected other than demographic variables such as age, ethnicity, gender, etc. To enhance anonymity, each completed survey was assigned a code for analysis purposes.

Data Analysis

Responses to the study questionnaire were recorded and input into The Statistical Package for Social Science (SPSS) version 28.0 and Microsoft Excel. These programs were used to obtain descriptive statistics and percentages and compute necessary hypothesis testing. As noted above, some data transformations were necessary to create the various independent groups (HLOC and Health-Conscious Orientation). For analysis purposes, respondent scores on the MHLC were transformed to create a dichotomous variable (high or low) for each dimension (i.e., internal, external-chance, and external-power). Specifically, scores between 6 – 21 were considered to fall in the "low" range and scores falling between 22-36 were considered to fall in the "high" range. This categorization was based on a logical division of the scoring range, where the bottom half of the possible range (6–21) reflects relatively lower endorsement of the corresponding belief dimension, and the upper half (22–36) reflects relatively stronger endorsement. This approach allows for a simplified interpretation of the results while maintaining alignment with the theoretical constructs of the scale. The division is consistent with the scale's equal-interval scoring design. To investigate whether a HLOC was related to stress and life satisfaction scores, separate one-way analysis of variance analyses (ANOVA) were conducted to compare the effect of HLOC on stress and life satisfaction. Each analysis was conducted for each dimension of HLOC (internal, external-chance, external-power), total stress, and the individual sources of stress (student, career/teaching, school, and workload).

Results

Health Locus of Control and Stress and Satisfaction

For Internal HLOC, there was a significant effect on total stress, $F(1, 126) = 4.27$, $p = 0.041$, and career/school stress, $F(1, 126) = 13.07$, $p < 0.001$. The respondents who reported high Internal HLOC were significantly more likely to have lower overall stress (M = 39.58) than those who reported low Internal LOC (M = 45.77). Those who reported high Internal HLOC were significantly more likely to have lower teaching stress (M = 7.35) than those who reported low Internal HLOC (M = 10.09). No statistically significant differences were found for Internal HLOC and remaining types of occupational stressors. Means, standard deviation, and results of the analysis of variance are presented in Tables 2.

Table 2

Means, Standard Deviations, and One-Way Analyses of Variance for Internal HLOC and Stress

Measure	High		Low		$F(1, 126)$	p	η^2
	M	*SD*	*M*	*SD*			
Total Stress	**39.58**	**16.73**	**45.77**	**14.76**	**4.27**	**.041**	**.033**
Student Stress	10.87	5.024	12.14	5.59	1.70	.195	.013
Teaching Stress	**7.35**	**4.12**	**10.09**	**3.95**	**13.07**	**<.001**	**.095**
School Stress	11.36	6.59	13.09	6.05	2.09	.151	.016
Workload Stress	10.00	5.47	10.45	5.36	.20	.654	.002

Note. Bold text indicates significance

For External-Chance HLOC, there was a significant effect on total stress, F(1, 126) = 4.76, p = 0.031 and student stress, F(1, 126) = 22.77, p < .001. Respondents who reported high External-Chance HLOC were significantly more likely to have higher total stress (M = 46.38) than those who reported low External-Chance HLOC (M = 39.66). Those respondents who reported high External-Chance HLOC were significantly more likely to have higher student stress (M = 14.38), than those who reported low External-Chance HLOC (M = 9.94). Means, standard deviation, and results of the analysis of variance are presented in Table 3.

There was not a statistically significant difference for External-Power HLOC and total stress. However, there was a statistically significant difference for those with high External-Power HLOC and student stress, F(1, 126) = 7.09, p = .009. Those that reported high External-Power HLOC were significantly more likely to have higher student stress (M = 12.74) than those who reported low External-Chance HLOC (M = 10.28). Table 4 displays the means, standard deviation, and results of the analysis of variance.

Table 3

Means, Standard Deviations, and One-Way Analyses of Variance for External-Chance HLOC & Stress

Measure	High		Low		*F*(1, 126)	P	η^2
	M	*SD*	*M*	*SD*			
Total Stress	**46.38**	**15.84**	**39.66**	**16.13**	**4.76**	**.031**	**.037**
Student Stress	**14.38**	**4.31**	**9.94**	**5.05**	**22.77**	**<.001**	**.154**
Teaching Stress	9.10	4.30	7.94	4.214	2.01	.158	.016
School Stress	12.10	6.43	11.90	6.48	.027	.869	.000
Workload Stress	10.79	5.41	9.88	5.15	.779	.379	.006

Note. Bold text indicates significance

Table 4

Means, Standard Deviations, and One-Way Analyses of Variance for External Power HLOC & Stress

Measure	High		Low		*F*(1, 126)	*p*	η^2
	M	*SD*	*M*	*SD*			
Total Stress	44.23	18.59	39.93	14.28	2.17	.144	.017
Student Stress	**12.74**	**5.64**	**10.28**	**4.71**	**7.09**	**.009**	**.054**
Teaching Stress	8.64	4.65	8.05	3.97	.586	.445	.005
School Stress	11.70	7.21	12.15	5.87	.150	.699	.001
Workload Stress	11.15	6.28	9.45	4.61	3.11	.080	.024

Note. Bold text indicates significance

To investigate the effect of HLOC on life satisfaction, separate ANOVAs were conducted. Table 5 displays the means, standard deviations, and ANOVA results. The results of the ANOVA suggest a statistically significant difference among those with high Internal HLOC and life satisfaction, F(1, 127) = 8.66, p = .004. Respondents who reported high Internal HLOC were significantly more likely to report higher life satisfaction (M = 25.72) than those who reported low Internal LOC (M = 21.91). There was not a statistically significant difference for External-Chance HLOC or External-Power HLOC and life satisfaction ratings.

Health-Conscious Orientation, Stress, and Satisfaction

To assign a "Health Conscious-Orientation" designation, a separate variable was created based on the answers to the three health conscious questions listed above. If the respondent agreed or strongly agreed to two or more questions, they were assigned a "High Health Conscious" designation. If the respondent answered "Uncertain, Disagree, or Strongly Disagree" to two or more questions they were assigned a "Low Health Conscious" designation. Results indicated that 38.6% of the respondents were considered to have a "Low Health Conscious Orientation" and 56.3% were considered to have a "High Health Conscious Orientation." Table 6 displays the analysis of the health conscious questions.

Table 5

Means, Standard Deviations, and One-Way Analyses of Variance for HLOC and Life Satisfaction

HLOC	High		Low		$F(1, 127)$	p	η^2
	M	*SD*	*M*	*SD*			
Internal	**25.72**	**6.29**	**21.91**	**8.15**	**8.66**	**.004**	**.064**
External – Chance	24.38	8.56	24.39	8.56	.000	.993	.000
External - Power	23.78	8.66	24.82	5.95	.66	.419	.005

Note. Bold text indicates significance

Table 6

Percentages of Responses to the Health Conscious Orientation Questions

		High Health Conscious (%)[a]	Low Health Conscious (%)[b]
Orientation Designation		56.3	38.6
Health Question			
	Feel Healthy	75.2	24.8
	Prioritize Health	61.2	38.8
	Exercise	62	38

[a] includes ratings of agree and strongly agree

[b] includes ratings of uncertain, disagree, and strongly disagree

To investigate whether a health-conscious orientation was related to stress and life satisfaction scores, separate ANOVAs were conducted to compare the effect of Health Conscious on stress and life satisfaction for high Health Conscious Orientation and low Health Conscious Orientation conditions. There was a significant effect of Health Conscious Orientation on stress at the p<.05 level for the two conditions, $F(1, 119) = 6.41$, $p = 0.013$. Respondents who reported a higher Health Conscious Orientation (e.g., feeling healthy, eating right, and exercising) had significantly lower stress levels (M = 38.46) than those that were low Health Conscious Orientation (M = 46.06). Similarly, there was a significant effect of Health Conscious Orientation on life satisfaction at the p <.01 level for the two conditions, $F(1, 119) = 43.65$, $p < 0.001$. Those who had a higher Health Conscious Orientation reported higher life satisfaction (M = 27.51) than those who with low Health Conscious Orientation (M = 20.06). Means, standard deviations, and ANOVA results are presented in Table 7.

Discussion

The well-being of teachers is essential in fostering productive learning atmospheres for young children. Head Start (HS), aimed at aiding vulnerable preschoolers, has developed policy and performance standards aimed at improving the well-being of its workforce (U.S. Department of Health and Human Services, 2015). The current study investigates the connection between HLOC, health behavior, teacher stress, and life satisfaction among a cohort of HS educators in Louisiana.

Health LOC and Stress

The analysis of the relationship between HLOC and stress among HS teachers revealed findings that aligned with our original hypothesis. The results indicate that HS teachers who reported a high Internal HLOC (i.e., belief in their own ability to control their health outcomes) experienced lower overall stress levels and lower career/teaching-related stress compared to those with low Internal HLOC. This suggests that individuals who feel more in control of their health and well-being are better equipped to manage the demands of their career and experience lower levels of stress in their professional lives. This echoes previous findings regarding the Internal LOC's positive effects on well-being (Kesavayuth et al., 2020).

The association between high Internal HLOC and lower career/teaching stress was somewhat unexpected and suggests that teachers who believe in their own ability to control their health outcomes are also more likely to feel confident in their teaching abilities and competence. This sense of efficacy and self-assurance may buffer against stressors specifically related to teaching tasks, such as lesson planning, classroom management, and interactions with students. The lack of association between Internal HLOC and student, school, or workload stress was also an unexpected outcome. These results suggest that teachers may perceive factors such as student behavior, their school environment, and teacher workload as external stressors beyond their control but also continue to feel confident in their own abilities to manage their health and teaching responsibilities. This may indicate a recognition among teachers that certain stressors are inherent to the educational context and influenced by external factors including student behavior, administrative decisions, and organizational dynamics.

Table 7

Means, Standard Deviations, and One-Way Analyses of Variance for Health Conscious Orientation, Stress and Life Satisfaction

Measure	High Health Conscious		Low Health Conscious		$F(1, 119)$	p	η^2
	M	*SD*	*M*	*SD*			
Stress	**38.46**	**15.43**	**46.06**	**17.11**	**6.41**	**.013**	**.052**
Life Satisfaction	**27.51**	**7.09**	**20.06**	**7.69**	**43.65**	**<.001**	**.268**

Note. Bold text indicates significance

Teachers who reported a high External-Chance HLOC, which indicates a belief that their health outcomes are determined by external factors or chance, experienced higher overall stress levels and higher student-related stress. Teachers in the study who attributed their health outcomes to external factors beyond their control may have felt more vulnerable to stressors, particularly those related to student interactions and classroom dynamics. This finding aligns well with previous research on HLOC (Ganjoo et al., 2021).

Although there was not a significant difference in overall stress levels related to External-Power HLOC, teachers with high External-Power HLOC reported higher student-related stress compared to those with low External-Power HLOC. Individuals who perceive powerful others, such as colleagues or medical providers, as influential in determining their health outcomes may experience heightened stress in the context of student interactions.

Health LOC and Life Satisfaction

The results indicate a significant association between high Internal HLOC and higher life satisfaction among Head Start teachers. In other words, teachers who believe they have control over their health outcomes and take personal responsibility for their well-being are more likely to report greater overall life satisfaction. This finding aligns with previous research highlighting the positive impact of Internal LOC on various aspects of psychological well-being (Kesavayuth et al., 2020). In contrast, there was no significant association between External-Chance HLOC or External-Power HLOC and life satisfaction ratings. This may seem counterintuitive, as one might expect individuals who believe their health outcomes are influenced by external factors or powerful others to experience lower levels of life satisfaction. However, several factors may contribute to this lack of association. First, External HLOC beliefs may not necessarily lead to lower life satisfaction if individuals perceive external factors or powerful others as supportive or conducive to their well-being. For example, teachers with high External-Power HLOC may feel supported by healthcare professionals or social support networks, which could mitigate the negative impact on life satisfaction. Additionally, it is conceivable that religious beliefs, including belief in a higher power like God or a Supreme Being, may also shape perceptions of control. Second, teachers with External HLOC beliefs may have developed adaptive coping strategies to deal with stressors and challenges, leading to resilience and higher levels of life satisfaction despite external influences. For example, they may seek social support or use external resources available to them to navigate health-related issues effectively, thereby limiting the impact of life satisfaction.

Health Conscious Orientation

The results of the health-conscious orientation analysis suggest that a health-conscious orientation, as defined by respondents' self-reported health behaviors and perceptions, positively impacts both stress levels and life satisfaction among HS teachers. The findings suggest that HS teachers who have a High Health Conscious Orientation reported significantly lower levels of stress compared to those who were classified as Low Health Conscious Orientation. This suggests that teachers who prioritize healthy behaviors such as feeling healthy, eating right, and exercising regularly may perceive fewer stressors and/or possess better coping mechanisms to manage stress effectively. This aligns with existing literature that highlights the beneficial effects of health-conscious behaviors on stress reduction and overall well-being (Kesavayuth et al., 2020). The analysis also revealed a significant association between a Health Conscious Orientation and life satisfaction. A High Health Conscious Orientation was related to significantly higher levels of life satisfaction compared to those classified as Low Health Conscious Orientation. In other words, teachers who prioritize health-conscious behaviors may experience greater overall satisfaction with their lives, possibly due to the positive impact of healthy habits on physical health, mental well-being, and overall quality of life. The findings presented here underscore the importance of promoting health-conscious orientations and behaviors among HS teachers.

This finding provides further empirical support for policy and performance standards. By emphasizing health programs and initiatives aimed at enhancing health conscious behavior, HS admin-

istration can potentially contribute to reducing stress levels and improving life satisfaction among teachers. Investing in programs that promote healthy eating, regular exercise, stress management, and overall well-being may not only benefit individual teachers but also contribute to a positive work environment, increased job satisfaction, and ultimately, improved outcomes for both teachers and students.

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Practical Implications

The findings regarding the effects of Health Conscious Orientation and HLOC on stress and life satisfaction among HS teachers have significant implications for school officials and administrators. Understanding the factors that influence teacher well-being, such as health behaviors and beliefs about control over health outcomes, can inform the development of targeted supports and training initiatives at the administrative level. For example, recognizing the positive impact of health-conscious orientation on stress reduction and life satisfaction suggests that HS administrators could prioritize and invest in health promotion programs and resources for teachers. These findings have some support in the literature. For example, Yetman et al. (2020) designed a ten-month health education health promotion and disease prevention program for HS teachers. The results noted an increase in more positive attitudes toward a "culture of wellness" as rated by the teachers. The relationship between Internal HLOC and lower stress levels highlights the importance of developing a sense of internal control and empowerment among teachers. Individual HS teachers can support their own Internal HLOC by engaging in professional development opportunities that enhance self-efficacy, such as stress management training or workshops on building resilience. Additionally, adopting health-conscious behaviors—such as regular exercise, mindfulness practices, and maintaining a balanced diet—can empower teachers to take proactive control over their health and well-being, thereby reducing stress and enhancing life satisfaction. Furthermore, school officials can support teachers by providing opportunities for professional development that enhance autonomy and resilience in managing job-related stressors. By implementing comprehensive supports and training initiatives that address both health behaviors and beliefs about control, school officials can create a supportive work environment that promotes teacher well-being and life satisfaction while also enhancing overall student success.

Future Directions

Further research is warranted to explore the complex interplay between Internal HLOC and various sources of stress among teachers. Investigating how teachers perceive and cope with different stressors, and how these perceptions influence their well-being and job satisfaction, can provide valuable insights for designing comprehensive stress management programs and promoting teacher resilience in the educational setting. The significant association between Internal HLOC and life satisfaction highlights the importance of promoting beliefs in personal control and self-efficacy for enhancing overall well-being among HS teachers. Future research could explore the underlying mechanisms through which Internal and External LOC beliefs influence life satisfaction and examine potential moderators or mediators of this relationship.

Study Limitations

The study relied on self-report measures to assess HLOC, stress, life satisfaction, and health-conscious orientation. Self-report measures are subject to biases, such as social desirability bias or recall

bias, which may impact the accuracy and reliability of the data collected (Domino & Domino, 2006). There is a possibility of response bias, as teachers who chose to participate in the study may have different characteristics or experiences compared to non-participants, which could affect the representativeness of the sample. In addition, the study did not assess a strong spiritual belief, which is known to be a mitigating factor for people who have an External LOC (Boyd & Wilcox, 2020). It is conceivable that religious beliefs, including belief in a higher power like God or a Supreme Being, could potentially shape perceptions of control and reduce stress and improve life satisfaction.

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