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Psychometric Properties of the Recovery Experiences Questionnaire in Peruvian Teachers of Regular Basic Education

Renzo Felipe Carranza Esteban[1], Oscar Mamani-Benito[2], Dámaris Quinteros Zúñiga[3], Josué Edison Turpo Chaparro[4], Abel Apaza Romero[5] and Walter Murillo[6]*

[1] Grupo de Investigación Avances en Investigación Psicológica, Facultad de Ciencias de la Salud, Universidad San Ignacio de Loyola, Lima, Peru, [2] Facultad de Derecho y Humanidades, Universidad Señor de Sipán, Chiclayo, Peru, [3] Escuela Académico Profesional de Psicología, Universidad Peruana Unión, Tarapoto, Peru, [4] Escuela de Posgrado, Universidad Peruana Unión, Lima, Peru, [5] Facultad de Ciencias Humanas y Educación, Universidad Peruana Unión, Lima, Peru, [6] Facultad de Ciencias Empresariales, Universidad Peruana Unión, Lima, Peru

The objective of this study was to analyze the psychometric properties of the recovery experiences questionnaire in Peruvian teachers of regular basic education. Instrumental design research, with the participation of 740 regular basic education teachers (494 women and 246 men), whose ages were between 21 and 65 years old (M = 40.22, SD = 9.99). Validity evidence based on the internal structure was analyzed using confirmatory factor analysis, based on relation to other variables through correlation analysis, and reliability was calculated using Cronbach's alpha coefficient. The factorial structure of the questionnaire was confirmed (χ^2 = 209.683, degree of freedom (df) = 48, p = 0.000; comparative fit index (CFI) = 0.986; Tucker-Lewis Index (TLI) = 0.981; root mean square error of approximation (RMSEA) = 0.068; standardized residual value mean square (SRMR) = 0.032; Weighted root mean square residual (WRMR) = 0.951); Therefore, the model of 12 items distributed in four factors (Distancing, Relaxation, Seeking challenges, and Control) is satisfactory and the reliability is acceptable, with α values between 0.80 and 0.83. The recovery experiences questionnaire demonstrates validity and reliability for Peruvian regular basic education teachers.

Keywords: validation, reliability, factor analysis, recovery experiences, teachers, Peru

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****Correspondence:***
Renzo Felipe Carranza Esteban
rcarranza@usil.edu.pe

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INTRODUCTION

The COVID-19 pandemic has caused repercussions in different areas, mainly education, affecting the mental health of regular basic education teachers (Pressley and Ha, 2021), who work at the initial, primary, and secondary levels according to the Peruvian Ministry of Education (MINEDU, 2020). These, in an effort to adapt to online education, have faced challenges, such as teleworking, changes in professional lifestyle (Oyedotun, 2020), and job insecurity (Mamani-Benito et al., 2020).

More than a year after the start of the health crisis, this population has been envisioning a return to normality, because along with the economic reactivation, the reopening of educational centers is also planned, thanks to the progress of the vaccination process, which in Peru, to date, has already reached 55% of the immunized population (over 12 years of age with at least one dose) (Diario Gestión, 2021).

Taking this scenario into account, it is to be assumed that the perception of risk of death from coronavirus, work overload, and other concerns will decrease, giving way to a process where recovery experiences will be vital to strengthen the post-pandemic mental health. In this case, recovery experiences are defined as a process of psychophysiological relaxation after having high exposure to stressful situations, that is, a process in which individuals stop facing a demanding situation to regain energy to renew the resources invested in the said situation (Sanz-Vergel et al., 2010). If one does not develop an adequate recovery experience, mental health problems can become prevalent and even worsen due to a lack of intervention (Poulsen et al., 2015).

According to the assumptions of the resource conservation theory of Hobfoll et al. (2003), the recovery process is considered a psychological mechanism to restore some emotional resources and competencies, such as self-esteem and vigor, which can clearly be worn out in unfavorable work environments, such as what happened during the COVID-19 pandemic. For this reason, it is that workers with high levels of sensation of daily recovery, come to feel less fatigue and greater willingness to face new demands than those workers with poor recovery (Poulsen et al., 2015).

In relation to the above, the scientific literature provides evidence about the impact of recovery experiences on mental and occupational health. For example, a study of hotel employees in South Korea revealed that recovery experiences predicted organizational self-esteem, which in turn had an effect on job dedication, job satisfaction, and life satisfaction (Lee et al., 2016). In addition to this, other research highlights two experiences that are considered a key to recovery, and moderating the relationship between work demands and well-being—psychological detachment and relaxation during free time. However, some researchers warn that the recovery process is often complicated by the number of work stressors, so it is sometimes almost impossible to disconnect from work, exercise, and sleep well (Sonnentag, 2018). This is revealed by a study carried out in Australia with oncology workers, for whom the experiences had a strong negative association with exhaustion and psychological well-being, but not with work commitment (Poulsen et al., 2015).

Changing the scenario but not the topic, in the population of regular basic education teachers, it is important to study the recovery experiences because this population is considered vulnerable to suffering Burnout (Arias et al., 2019); even more so in the context of the COVID-19 pandemic, where they have been exposed to various teaching stressors (Oros et al., 2020). Therefore, having positive recovery experiences becomes the mediator between labor demand and subjective well-being, so insufficient recovery could have a negative impact on work (Geurts and Sonnentag, 2006). Regarding this fact, a study carried out by Gluschkoff et al. (2016) concluded that the poor recovery experiences, in terms of low relaxation during leisure time, partially mediated the relationship between effort-reward and reduced the professional efficacy.

In line with the above, the literature highlights six recovery experiences: detachment, relaxation, control, mastery, meaning, and affiliation. These are related to greater psychological well-being and satisfaction with life in teachers (Virtanen et al., 2020); although, recent studies have tested other types of experiences, such as relaxation through the use of social networks, which according to the study by Cheng and Cho (2021) can serve as a channel for employees to experience recovery and deal with job demands.

Given this evidence, it is important to highlight that regular basic education teachers must experience recovery experiences, not only to protect their mental health but also for the benefit of the employing educational institutions who have the hard work of continuing the teaching process and learning in a virtual context. Although some studies report that basic education teachers are not a particularly stressed group (Hillert et al., 2016), recent reports show that teaching is a very stressful job (Ryan et al., 2017), and coupled with the COVID-19 pandemic it had an increased medium and high levels of stress (Klapproth et al., 2020). Likewise, studies report the special need for recovery that teachers have in the face of stress (Harmsen et al., 2019) and positive or negative characteristics depending on the season of the year (Heidari et al., 2021), which shows an important need to learn about recovery experiences in teachers.

From what has been said up to this point, the evaluation of recovery experiences in regular basic education teachers is more than necessary, however, a review of instruments available in the Peruvian and international scientific literature reveals that valid measures are not available, reliable, and fast to implement; despite the fact that several studies have been carried out on the subject in Latin America (Mardones, 2017; Trógolo et al., 2020).

Taking into account this gap in the literature, the authors of this research consider it convenient to take into account the work of Sanz-Vergel et al. (2010), who translated the English version of The Recovery Experience Questionnaire by Sonnentag and Fritz (2007) into Spanish, corroborating the factorial structure of four recovery experiences: psychological distancing from work, relaxation, seeking challenges, and control over free time; a measure that has also been used for research purposes in countries of the region, such as Argentina (Trógolo et al., 2019), Brazil (Eduardo et al., 2016), Chile (Mardones, 2017), and Spain (Merino-Tejedor et al., 2017).

Due to the aforementioned, the objective of this study is to analyze the psychometric properties of the recovery experiences questionnaire in Peruvian teachers of regular basic education.

METHODOLOGY

Design

According to the taxonomy of research designs proposed by Ato et al. (2013), the study is about instrumental design and cross-sectional study, given that a measurement scale was validated by analyzing its main psychometric properties.

Participants

A sample size calculation was performed using the G*Power program (Faul et al., 2009), considering a small effect size ($f2 = 0.15$), $\alpha = 0.05$, and power = 0.80, reporting that 104

participants were sufficient. There was the participation of 740 regular basic education teachers of both sexes (494 women and 246 men), of Peruvian nationality and whose ages ranged between 21 and 65 years (M = 40.22, SD = 9.99). Of which 57.3% worked in private schools in northern Peru and 42.7% in the South. The participants were selected through a non-probabilistic sampling of intentional type.

Instrument

The Recovery Experiences questionnaire by Sonnentag and Fritz (2007) validated by Sanz-Vergel et al. (2010) in its original form has 16 items. The scale in its Spanish version has 12 items distributed in four dimensions called: distancing, relaxation, search for challenges, and control. This questionnaire assesses psychological distance in relation to phenomena, such as workplace bullying or work-family conflict. Each item is rated on a Likert-type response scale with scores ranging from 1 (totally disagree) to 5 (totally agree). The original version was used in a sample of workers from public and private organizations and the Spanish validation was carried out on workers from the security sector, showing adequate psychometric properties.

Two contrast instruments were also used to assess concurrent validity; first, the generalized anxiety disorder scale (GAD-7), composed of 7 items distributed in a single factor, with four response options ranging from none = 0 to almost every day = 3. In the version validated for the Peruvian population (14), it showed high reliability (Cronbach's alpha = 0.89) and construct validity was verified through exploratory and confirmatory factor analysis. Second, the General Well-being Index [World Health Organization Well-Being Index (WHO-5) WBI], composed of 5 items distributed in a single factor, with 4 Likert-type response options (0 = never, 1 = sometimes, 2 = often, and 3 = always). In the version validated in Peru, (15) it demonstrated reliability through the omega coefficient (ω = 0.758) and corroborated construct validity through confirmatory factor analysis.

Procedure

The study was approved by the ethics committee of the Universidad Peruana Unión with reference number 2021-CEUPeU-0039. Due to the emergency caused by the COVID-19 pandemic, a virtual format was created through Google forms, which was enabled between 20 May and 16 July 2021. The questionnaire was sent to teachers through institutional emails and social networks. Before starting the questionnaire, the participants gave their approval through an informed consent in which they were informed of the purpose of the study, emphasizing that participation was voluntary, anonymous, and confidential.

Data Analysis

In the first instance, the mean, standard deviation, asymmetry, and kurtosis of the questionnaire items were analyzed. In the second instance, the internal structure of the instrument was analyzed by applying a confirmatory factor analysis (CFA). In this case, the robust weighted least squares (WLSMV) method was used to perform the estimation. Goodness-of-fit measures were also applied through structural equation modeling (SEM) taking into account the proposals of Hu and Bentler (1999), who state that the value of the Tucker-Lewis Index (TLI), the index comparative fit (CFI) must report values above 0.90, the root mean square error of approximation (RMSEA) is less than 0.08, the standardized residual value mean square (SRMR) is less than 0.06, and the weighted root mean square residual is less to 1 for an ideal fit of the model. In the third instance, validity based on other variables was analyzed and Pearson's correlation coefficient was used. Fourth, reliability was calculated using Cronbach's alpha coefficient and their respective confidence intervals (Domínguez-Lara and Merino-Soto, 2015).

Descriptive statistics were analyzed using the FACTOR Analysis version 10.1 program. For the CFA, the free access R program was used, in its RStudio environment. Finally, the correlation and reliability analysis was developed with the statistical program IBM SPSS version 25.0.

RESULTS

Preliminary Analysis of the Items

Table 1 shows the descriptive statistics (mean, standard deviation, asymmetry, and kurtosis) of the twelve items of the recovery experiences questionnaire. It is observed that item 7 has the highest average score (M = 3.75) and item 1 has the highest variability (SD = 1.13). The asymmetry and kurtosis values do not exceed the range ± 1.5 (Pérez and Medrano, 2010). Likewise, it can be seen that the common variance and the corrected correlation coefficient of the item with the total number of elements are greater than 0.30. Thus, the α coefficients also present values greater than 0.70.

Confirmatory Factor Analysis

In the **Table 2**, the CFA of the recovery experiences questionnaire in Peruvian teachers shows that the original factorial structure of 12 items distributed in 4 factors is satisfactory (χ^2 = 209.683,

TABLE 1 | Preliminary analysis of the recovery experiences questionnaire items.

Variable	*M*	DS	A	K	h	r itc	α
Factor 1: Psychological distance							
Item 1	2.703	1.131	0.215	−0.804	0.527	0.490	0.884
Item 2	2.229	1.013	0.822	0.352	0.677	0.508	0.882
Item 3	2.345	1.010	0.591	−0.122	0.648	0.508	0.882
Factor 2: Relaxation							
Item 4	3.595	0.986	−0.786	0.279	0.553	0.633	0.875
Item 5	3.313	1.077	−0.53	−0.539	0.595	0.669	0.873
Item 6	3.409	1.023	−0.579	−0.29	0.755	0.687	0.872
Factor 3: Search of challenges							
Item 7	3.757	0.952	−1.009	1.065	0.629	0.544	0.880
Item 8	3.667	0.930	−0.906	0.775	0.784	0.579	0.878
Item 9	3.605	0.966	−0.788	0.457	0.737	0.580	0.878
Factor 4: Control							
Item 10	3.471	1.014	−0.655	−0.075	0.56	0.640	0.875
Item 11	3.707	0.939	−0.953	0.758	0.632	0.653	0.875
Item 12	3.579	0.937	−0.846	0.561	0.624	0.604	0.877

df = 48, $p < 001$; CFI = 0.986; TLI = 0.981; RMSEA = 0.068; SRMR = 0.032; and Weighted root mean square residual (WRMR) = 0.951).

Validity Based on the Relation With Other Variables

Table 3 shows the calculation of the correlation coefficients between the Recovery experiences questionnaire (CER), WHO-5 WBI, and Generalized Anxiety Disorder (GAD-2) factors. It was found that the CER factors are directly and statistically significantly related to the WHO-5 WBI (<0.01); Likewise, it correlates in an inverse and statistically significant way with the GAD-2 ($p < 0.01$); likewise, they present a small effect size. The findings show evidence of concurrent validity.

Reliability

The reliability of the scale was estimated with Cronbach's α coefficient. For the distancing factor (α = 0.821; 95% CI = 0.77–0.80), relaxation (α = 0.824; 95% CI = 0.77–0.80), seeking challenges (α = 0.876; 95% CI = 0.77–0.80) and for the control factor (α = 0.807; 95% CI = 0.83–0.86); showing that the scale scores are reliable.

DISCUSSION

Faced with stressful situations, people tend to experience less psychological well-being and negative affectivity, which reveals the importance of getting involved in activities and developing strategies that promote recovery, in this case, regular basic education teachers, are no strangers to this problem. In this sense, being able to assess this phenomenon allows us to understand and explain its scope and link with other psychological processes. Therefore, the objective of this study was to analyze the psychometric properties of the Spanish version of the recovery experiences questionnaire in Peruvian teachers of regular basic education.

The original version of the CER is made up of four dimensions: psychological detachment (with four items), relaxation (with four items), seeking challenges (with four items), and control over free time (with four items), however, in the adaptation to Spanish taken for this research the number of items was reduced to 3 per dimension, being made up of 12 reagents (Sanz-Vergel et al., 2010). In the present study, the CFA of the CER in Peruvian teachers showed that the factorial structure of 12 items distributed in 4 factors was satisfactory, also considering the optimal results in the measures of goodness of fit (Hu et al., 2009).

Although these results converge with the proposal by Sanz-Vergel et al. (2010), studies carried out in other contexts have confirmed the structure of 16 elements; for example, the Argentine version for public and private sector workers (Trógolo et al., 2020), the Nepali format developed with nurses from university hospitals (Panthee et al., 2020), the version for Spanish university students (Merino-Tejedor et al., 2017) and the version for Japanese employees, although in the latter, a structure adjusted to 3 factors was initially identified, where psychological detachment and relaxation were condensed into a single factor (Shimazu et al., 2012).

The reliability of the scale was estimated with Cronbach's α coefficient, showing scores above 0.80 for the three dimensions, confirming that the scale scores constitute a reliable measure of the construct (Nunnally and Bernstein, 1994). These results are compatible with the reliability values obtained in the original study by Sonnentag and Fritz (2007), with the adaptation to Spanish by Sanz-Vergel et al. (2010), and with the adaptation by Shimazu et al. (2012).

Regarding concurrent validity, the correlation analysis with other constructs is interesting. In the present adaptation to the context of Peruvian teachers, it was found that the recovery experience was directly related to well-being and inversely to anxiety, data that correspond to the results of Sanz-Vergel et al. (2010) and Panthee et al. (2020), who identified that the four recovery experiences were inversely linked with somatic symptoms, anxiety, insomnia, social dysfunction, depression, and psychological distress, while they were positively associated with health happiness, job performance, and job satisfaction. These results are interesting considering that anxiety disorder is associated with greater psychophysiological reactivity to stressors, which would alter the recovery and relaxation process in the face of a stressful experience (Tolin et al., 2021). This is consistent with the current pandemic and post-pandemic context since the feeling of work overload perceived by teachers has generated anxiety, job exhaustion, and stress, situations that have also been shared by other groups of professionals, such as health personnel (Gutiérrez, 2020; Wu et al., 2020). At this point, a field is opened for the development of future research, considering the importance of evaluating

TABLE 2 | Fit indices of the model evaluated by confirmatory factor analysis (CFA) of the study instrument.

Model	χ^2	df	CFI	TLI	RMSEA		SRMR	WRMR
					Value	IC [90%]		
12 items	209.683	48	0.986	0.981	0.068	[0.058, 0.077]	0.032	0.951

df, degree of freedom; CFI, comparative fit index; TLI, Tucker-Lewis Index; RMSEA, root mean square error of approximation; CI, confidence interval.

TABLE 3 | Means, standard deviations, and correlations between the Recovery experiences questionnaire (CER), Generalized Anxiety Disorder (GAD-2), and World Health Organization Well-Being Index (WHO-5) scales.

Variable	*M*	DS	1	2	3	4	5
1. Psychological distance	7.29	2.70					
2. Relaxation	10.33	2.64	0.492**				
3. Search of challenges	11.04	2.52	0.215**	0.495**			
4. Control	10.77	2.43	0.405**	0.634**	0.541**		
5. WHO-5 WBI	1.26	1.38	0.153**	0.378**	0.350**	0.370**	
6. GAD-2	14.41	3.35	−0.34**	−0.360**	−0.293	−0.356**	−0.430**

***Statistical significance.*

recovery from anxiety and acute stress, experienced in times of COVID-19.

In reference to well-being and recovery, it has been identified that the restoration of the sense of belonging, and the strengthening of ties and social networks, favor resilience and recovery capacity in the face of traumatic events, such as natural disasters (Prayag et al., 2021). It is added that the strengthening of well-being as a positive component of mental health would be relevant for patients with anxiety disorders, favoring the recovery of patients with mood disorders (Schotanus-Dijkstra et al., 2019). Clearly, recovery from a critical situation involving serious demand and depletion of cognitive and emotional resources can prevent complications in overall health and psychological well-being, and job performance. In this sense, the ability of people to recover their psychological and physiological balance, to renew their personal resources through activities, such as disconnecting from work and taking time to relax or decide how to use free time, are beneficial for the continuous coping with labor demands and other kinds (Fritz et al., 2010; Colombo and Cifre Gallego, 2012).

It should be noted that in the initial work by Sonnentag and Fritz (2007) work stress and control over work were considered as contrast variables, identifying the inverse relationship between time pressure and recovery experience; as well as between role ambiguity and situational limitations with psychological detachment and control over free time, and between overtime compliance with psychological detachment and relaxation. In other works, the recovery construct was inversely associated with negative affectivity and exhaustion and was positively associated with vigor, self-regulation, commitment, coping strategies, and certain personality dimensions (Merino-Tejedor et al., 2017; Trógolo et al., 2020).

In Peru, as a result of the COVID-19 pandemic, the symptoms of stress and anxiety increased to higher levels (Quispe and Garcia, 2020) and that together with work overload, fear of contagion and adaptation to the virtual system (Robinet-Serrano and Pérez-Azahuanche, 2020) shows the need to have instruments that measure recovery experiences and allow the creation of mitigation strategies and programs.

On the other hand, it is important to test the psychometric properties of the instruments with a population in the same language, but with a different context (Parola et al., 2022). Especially in countries that have different characteristics, such as Peru (Caycho-Rodriíguez et al., 2018) and to get closer to a bias-free measurement (Pendergast et al., 2017).

CONCLUSION

The recovery experiences scale, adapted for Peruvian regular basic education teachers, has adequate psychometric properties, similar to those obtained by Sanz-Vergel et al. (2010). The results of this study show that it is a scale made up of 12 items, valid and reliable to indicate levels of recovery in terms of psychological detachment, relaxation, seeking challenges, and control over free time. In addition, the CER scores were positively correlated with well-being and inversely with anxiety, results that were consistent with the background found in the literature review.

Considering that in Peru there are no antecedents of the adaptation of the CER, the measure analyzed will allow the development of studies that grant a greater understanding of the phenomenon both in the workplace and in the educational, clinical, and community fields, favoring knowledge and identification, components that intervene in recovery from crises and stress, consequently, the possibility of implementing strategies focused on health care and the control of factors that facilitate recovery.

Within the limitations, it can be pointed out that the results and the scale obtained are applicable to the specific population of Peruvian teachers of regular basic education, which leaves the challenge of having a scale applicable to the adult population in general, and of course, to other age groups. Second, the data obtained is based on self-reported responses to surveys in virtual format, which could generate a bias; thus, subsequent studies will allow replicating or complementing the results presented here. Thirdly, the correlation analyses presented, although they are instructive, do not indicate an influence or causal relationship, an aspect that should continue to be deepened in subsequent research.

It is recommended to continue expanding the fields of application of the CER, considering that it is a brief scale with a simple and agile application. Future versions could be developed in groups of health professionals from various areas, people who were infected with COVID-19, workers in remote mode or in the process of face-to-face employment in the context of the pandemic, adolescents, schoolchildren, students and university students, among others. Likewise, cross-sectional and longitudinal studies of correlational and explanatory analyzes could be considered considering constructs, such as job commitment and satisfaction, locus of control, and life satisfaction.

DATA AVAILABILITY STATEMENT

The raw data supporting the conclusions of this article will be made available by the authors, without undue reservation.

ETHICS STATEMENT

The studies involving human participants were reviewed and approved by the Universidad Peruana Unión. The patients/participants provided their written informed consent to participate in this study.

AUTHOR CONTRIBUTIONS

RC, OM-B, and JT conceived and designed the experiments, performed the experiments, analyzed and interpreted the data, and wrote the manuscript. DZ, AR, and WM contributed to reagents, materials, analysis tools, or data, and wrote the manuscript. All authors contributed to the article and approved the submitted version.

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