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Educators' Perspectives on Teacher Mental Health and Professional Development.

Sybil HW Chan, Western University

Supervisor: Rodger, Susan C., The University of Western Ontario A thesis submitted in partial fulfillment of the requirements for the Master of Arts degree in Education © Sybil HW Chan 2024

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Abstract

Educator wellness is inextricably linked to their ability to teach and support students in the classroom. However, limited research has examined the factors that influence educator mental health in Canada, and the role of mental health-based professional development in these relationships. Therefore, the present mixed-method, multi-phase study examined the current knowledge, understandings, and beliefs about professional development and mental wellness for Canadian teacher candidates and associate teachers. Results from a binomial logistic regression found that higher educator psychological distress was positively correlated with presenteeism, and negatively correlated with workplace psychological safety. A reflexive thematic analysis of twelve semi-structured interviews further revealed a general dissatisfaction towards current professional development by Canadian teachers, with educators desiring more trauma-informed, collaborative, and action-oriented approaches to be utilized. Thus, highlighting the need to enhance current structures designed to support educator wellness and improve upon mental-health based professional development for Canadian teachers.

Keywords: Teacher education, associate teachers, professional development, educator mental health, trauma-and-violence-informed-care.

Summary for Lay Audience

Poor mental health in teachers can impact their ability to educate and support all students – especially those with trauma backgrounds. Yet, limited research has explored the factors that support or hinder the wellness of Canadian educators and their mental health-related professional development. As such, this study looked at what Canadian teachers and teacher candidates know, understand, and think about their professional development and mental health. Two sources of information – surveys and interviews – were used to explore how educator mental health impacts a teacher's ability to work at their job. It was revealed that low levels of educator wellness predicted less productivity in the workplace and feelings of being less supported at work. Interviews also revealed other issues affecting educator well-being, including their beliefs about the job and the challenges that they face. Overall, the study showed that teachers want better, more practical, and more engaging professional development founded on principles related to trauma-and-violence informed care. Thus, highlighting the need to improve upon current systems designed to support educators in Canada.

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"There is no greater source of joy and meaning in our lives than our relationships with others."

– Esther Perel

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Chapter 1: Introduction

Almost 60% of Canadians reported experiencing some form of trauma before they turned 15 years old in 2023 (Statistics Canada, 2023). This may include, but is not limited to, experiences of interpersonal violence (e.g., child maltreatment), collective and structural violence (e.g., war, genocide, discrimination, classism), accidents and injuries (e.g., car accidents, natural disasters), and the death of a loved one (Benjet et al., 2016). These experiences can have substantive impacts on a child's educational experience, as risks for poorer academic achievement, greater disruptive behaviour (i.e., bullying, fighting, etc.), and higher disciplinary violations have been associated with exposure to traumatic events (Sugai et al., 2000; Vanbergeijk & Sarmiento, 2006); however, the expression of trauma may not always be easily identifiable.

Trauma can manifest itself differently across individuals within their school settings, as these trauma-based behaviours may be misunderstood by educators who are unaware of the child's circumstances. For example, one study conducted by Gonzalez et al. (2016) revealed that approximately 25% of elementary school students who experienced at least one traumatic event did not display notable distress symptoms. These findings suggest that not all students respond to trauma in the same 'typical' or 'expected' manner that we might assume. A case-study project by Dods (2013) further supports this point from their work with high school students afflicted by a wide array of traumatic experiences (e.g., sexual and physical abuse, witnessing domestic violence and criminal behaviour, and the death of a sibling). Some students saw school as a 'safe place' which motivated them to excel academically as their "ticket out of the trauma" (pg. 81), contrary to previous evidence on the topic (Dods, 2013). Together, these findings suggest that the

implications of trauma for afflicted youth may be more covert in nature and be less obvious to recognize in school settings.

Children exposed to early cumulative traumatic experiences demonstrate trauma and depressive symptoms comparable to those with experiences of direct victimization (Voith et al., 2014). These early adverse experiences have also been shown to predict greater symptoms of posttraumatic stress disorder, aggression, and anxiety in youth (Mohammad et al., 2015). It is unsurprising, then, that trauma would act as a deterrent to positive school experiences in students, as up to 73% of traumatized youth shared low expectations in their ability to graduate from high school, based on the type of trauma they experienced as a child (Johnson, 2018). Individuals with these histories report severe impairments with their executive functioning (i.e., working memory, attention/focus, problem-solving skills) and lower intelligent quotient (IQ) scores when compared to non-traumatized youth (DePrince et al., 2009; Zou et al., 2013). Other negative outcomes, such as poor academic achievement and school attendance, have also been attributed to experiences of early adversity (Davis et al., 2018; Steele, 2015; Crouch et al., 2019; Duke, 2020). As such, it is important that early interventions designed to support student wellness are implemented early on in their academic careers to promote positive and healthy development in youth. This begins with an examination of the individuals responsible for fostering these critical learning environments, such as teachers.

Teachers play a crucial role in balancing the ever-changing social, emotional, and academic needs of students in their classrooms (Valli & Buese, 2007). However, they are rarely afforded the supports and resources to engage in healthy working conditions that promote efficacious learning environments for youth (Gearhart et al., 2022; Froese-Germain, 2014; Canadian Teachers'

Federation, 2020b). Educators who experience high work-related stress are more likely to predict poorer academic achievement in students (Oberle & Schonert-Reichl, 2016) and less occupational commitment in their role (i.e., less attachment to their profession; Collie & Mansfield, 2022). Teaching requires a high level of emotional capacity, and educators who are unable to cope with the stress of the job may be unable to help their students in the ways that they need (Richards, 2012). Further, as 40% of traumatized students already struggle to form positive relationships with their teachers (Johnson, 2018), it is evident that the discussion of teacher mental health must be prioritized in order to effectively support the mental health needs of students within Canadian schools.

Nearly all children and youth attend school and spend a great deal of time with their teachers (Parindui, 2014). Therefore, educators are often left to take on the responsibility of managing the harmful effects of trauma on children's developmental outcomes using highly sensitive care (R.B-Banks & Meyer, 2017). The buffering role of the teacher-student relationship has been shown to be essential in promoting adaptive adjustment for children's social, emotional, and academic success in school (Spilt et al., 2016; Statman-Weil, 2015). Teachers who have the capacity to establish strong, trusting relationships with their students can further support relational resources that are necessary for rebuilding their pupils' sense of self-worth, control, and safety (McCann & Pearlman, 1992). But what would happen if an educator was not prepared to handle their students' traumatic, life-altering experiences? Where do teachers learn how to manage these signs of adversity in the classroom? And how does this apply to teacher candidates who may lack the experience in handling such matters?

For these reasons, it is critical to examine the effects of trauma on educator mental health and how appropriate and equitable support can be incorporated into current professional development programs for teachers.

Theoretical Frameworks

Effective professional development training for teachers requires an understanding of the psychosocial factors which shape an individual's propensity for growth and learning. As such, two major theoretical frameworks will be used to shape the present study and its research questions, including the Theory of Self-Determination (Ryan & Niemiec, 2009) and the theory of Planned Behaviour (Ajzen, 1991).

Self-Determination Theory

Self-determination theory (SDT) conceptualizes human motivation as an intrinsic strength that leads people towards connection and integration within their environments (Ryan & Deci, 2020). It is a framework that identifies how social contexts may promote or undermine a person's intrinsic or extrinsic motivations towards achieving their desired goals (Ryan & Deci, 2020; Ryan & Niemiec, 2009). Specifically, three basic psychological needs must be supported in order for human motivation to be sustained including a need for autonomy, relatedness, and competency (Ryan et al., 2008).

Autonomy refers to an individual's sense of authenticity and ownership over their actions (Ryan & Deci, 2020). For teachers, the significance of having autonomy in their work have demonstrated higher levels of fulfillment, understanding and capacity for both professional and personal development (Korthagen & Evelein, 2016). The absence of this need has contributed to

the rising rate of attrition and burnout in the field, as many novice and experienced teachers report having little control over their teaching content, methods, and workplaces (Donald et al., 2005).

The second psychological need of relatedness in SDT refers to the experience of belongingness within our social relationships (Ryan & Deci, 2002). Teachers who are able to develop healthy relationships with their peers, students and other school staff can reinforce positive outcomes related to job satisfaction (Evelein, 2005). Additionally, teachers who feel like they 'belong' in their school systems report feeling happier, optimistic and more motivated to work harder in their roles as educators (Gearhart et al., 2022). Those who are unable to fulfill this need for connection are more vulnerable to the stressors related to the profession, resulting in heightened feelings of isolation, withdrawal and depression (Korthagen & Evelein, 2016).

The final component of SDT can be understood as the feeling mastery over one's environment and their ability to manage any adverse outcomes that arise within it (Korthagen & Evelein, 2016). Teachers possess an innate desire to be competent in their roles as mentors for their students. However, when this feeling is threatened, teachers may develop negative mental health outcomes related to low self-esteem, anxiety, and uncertainty (Korthagen & Evelein, 2016; Skinner & Edge, 2002). This is especially true for teacher candidates who are most vulnerable to feelings of work-related insecurity related to the transitional phase of becoming a full-time educator (Evelein et al., 2008). Thus, emphasizing the strong need for encouraging feelings of competency in professional development programs aimed designed for new teachers.

The Theory of Planned Behaviour

The Theory of Planned Behaviour (TPB) provides a theoretical framework for understanding determinants of behaviours (Ajzen, 1991). Within this model, three core

components are believed to shape an individual's behavioural intentions, including their attitudes, subjective norms, and perceived behavioural control (Ajzen, 1991). Empirical studies have long supported the predictive validity of TPB (Ajzen, 2011; Armitage & Conner, 2001). Self-efficacy has emerged as a viable measure of "perceived control" within this theory, and has been used in countless studies examining its role in shaping teacher professional development programs across the globe (Armitage & Conner, 2001; Dunn et al., 2018; Kao et al., 2018). This is supported by findings from Woods (2014), who found that teacher self-efficacy, alongside their knowledge and attitudes of their role, helped shape the quality of their teaching practices towards students exposed to trauma. Additionally, work by MacFarlane and Woolfson (2013) further highlight the effective use of TPB in professional development programs for educators. Teachers who were more positive and held higher self-efficacy scores demonstrated a greater level of employing compassionate inclusive practices to students with exceptionalities. Thus, the Theory of Planned Behaviour will be used to understand the relationship between teacher attitudes, understandings and intended behavioural responses to the online TVIC training module as proposed in this study.

Chapter 2: Literature Review

The Demands on Teachers

Teachers take on a vague and strenuous list of demands at their workplace. On paper, teachers are paid to provide academic instruction, assessment, and curriculum development for their students throughout the school year (Pelletier et al., 2002). However, this often overlooks the stressful interactions involved with these tasks, such as having to manage large classroom sizes, maintaining student discipline, adapting to institutional policy changes, working under time constraints, dealing with difficult colleagues or management and working in poor school environments (Kyriacou, 2001; Pelletier et al. 2002; Powers et al., 2010). Moreover, taking on

these multiple, conflicting demands also makes it challenging for teachers to distinguish their legal responsibilities from their perceived role as care providers (Ekornes, 2017; Isenbarger & Zembylas, 2006). According to Cobble (1999), teachers are described as "knowledge workers engaged in mental labour, but [they] are also service workers engaged in nurturing" (p.23). Thus, many teachers struggle in refining the boundaries of their care work with students, which further contributes to the pressures that they face on a daily basis (Ekornes, 2017).

The relational nature of teaching also lends itself greatly to the emotionally exhaustive demands of the job that are often left unnoticed and unregulated (Edling & Frelin, 2013). As defined by Brotheridge and Lee (2003), emotional labour can be understood as the regulation of one's emotional feelings and expressions to comply with the implicit and explicit organizational rules of a job. This may involve having to suppress or alter their emotions in order to respect the norms of their role as 'professional' educators (Heise & Calhan, 1995; Cain, 2003). Teachers routinely engage in this type of labour when working with students, parents, and other staff members in their schools (Glomb & Tews, 2004; Sutton, 2004). They are expected to be experts in controlling their negative emotions, despite having to manage a myriad of stressful situations on a daily basis (Isenbarger & Zembylas, 2006). For example, teachers tend to report high levels of emotional exhaustion when handling challenging student behaviour and conduct in the classroom (McCarthy, 2019; Lewis et al., 2011). Their feelings of disappointment, hopelessness and anger are often minimized in order to maintain their 'professional image' within schools (Sutton, 2004; Basim et al., 2013; Keller et al., 2014).

Understanding the Outcomes of Teacher Stress

Teacher stress can be defined as the experience of negative emotions (e.g., anxiety, frustration) that stem from the occupational demands of being an educator (Kyriacou, 2001). It

poses lasting negative professional and personal implications, as numerous studies have cited its contribution to rising rates of teacher burnout (Jepson & Forrest, 2006; Betoret, 2009; Beltman et al., 2011) and emotional exhaustion (McCarthy et al., 2009; Skaalvik & Skaalvik, 2010). These psycho-emotional responses to chronic workplace stress leave teachers more likely to report feelings of cynicism, apathy and negative attitudes towards their students and colleagues (Pines & Aronson, 1988). This has been shown to drastically alter the quality of student wellbeing and academic achievement in the classroom, as teachers who are burdened by high levels of stress have limited energy to devote their roles as educators (Kelly, 2021; Oberle & Schonert-Reichl, 2016; Herman et al., 2018). Prolonged levels of teacher stress have also been linked to growing attrition rates, as nearly 30% of Canadian teachers report leaving the profession within the first five years of their career (Thierry & Collin, 2013). This is often complemented by reports citing extreme levels of job dissatisfaction among teachers, regardless of their years in practice (McCarthy et al., 2009; Struyven & Vanthournout, 2014; Kokkinos, 2007; Johnson, 2005).

Implications of Traumatic Stress in the Classroom

Educators who support racialized students living in poverty are at greater risk of developing mental health challenges that may attribute to rising trends of teacher attrition over the years (Carver-Thomas & Darling-Hammond, 2017). These emotional demands include, but are not limited to, reports of over exhaustion, burnout, and compassion fatigue (Christian-Brandt et al., 2020; Maslach, 2003; Schaufeli & Buunk, 2002). Burnout refers feelings of job-related exhaustion, depersonalization and/or cynicism that develops as a result of a chronically stressful work environment (Chan, 2006; Christian-Brandt et al., 2020). Teachers who experience burnout cite both individual (e.g., passion for the profession, expectations of role) and contextual factors (e.g., workload, disruptive student behaviours, unsupportive administration) contributing to their

dysfunctional attitude and behaviours (Beltman et al., 2011; Mojsa-Kaja et al., 2015). Over time, this 'cost of caring' can develop into compassion fatigue, which leaves the emotionally depleted educator vulnerable and unable to fully empathize and/or feel compassion for others – including their students (Figley & Kleber, 1995; Ormiston et al., 2022), thus, placing them at risk for developing stress, anxiety and depression (Agyapong et al., 2022).

Teachers also face great obstacles in accessing adequate administrative support and social resources that may improve their mental wellbeing (Carver-Thomas & Darling-Hammond, 2017). In such circumstances, educators may experience some difficulties in separating their work from their personal lives (Chan, 2006). For example, teachers who reported having more social support systems and coping skills were less likely to experience job-related burnout and depression (Capone & Petrillo, 2020). According to Groskopf (2021), this could further promote positive classroom learning by allocating greater emotional efforts towards student mental health and attunement. Educators who are unable to manage their own psychological well-being are less likely to understand their pupil's mental health problems (Sisask et al., 2014). Thus, they may be less able to identify students that need greater support. This is especially alarming when recognizing that systemically disadvantaged students, like those facing ongoing racial and structural oppression, are more likely to experience trauma on daily basis (Sacks & Murphey, 2018).

Given these contexts, it is understandable that teachers are vulnerable to developing vicarious trauma (also known as secondary traumatic stress) when working with students who experience trauma (Christian-Brandt et al., 2020). Vicarious trauma refers to the development of secondary traumatic symptoms that are experienced after learning about traumatic event(s) experienced by another person (Christian-Brandt et al., 2020). This condition changes the person's

views of themselves and the world, which put them at risk of exhibiting strong emotional reactivity in stressful situations like managing a classroom (Figley & Kleber, 1995). Specifically, teacher vicarious trauma has been shown to be negatively correlated with educator work performance, motivation and involvement in student-centered care (Lawson et al., 2019; Vanbergeijk & Sarmiento, 2006). By understanding this, it is easy to recognize the potential risks of leaving teachers with high vicarious trauma and low self-efficacy with the responsibility of also having to manage their student's mental health needs. The complexities of supporting a student experiencing trauma would require the implementation of a specialized framework that facilitates both teacher-and-student focused care. As such, the need for trauma and violence-informed care (TVIC) within classroom settings may serve as a prospective answer to this problem.

The History of TVIC in Modern-Day Classrooms

TVIC can be understood as an evolved concept of trauma-informed care (TIC) that focuses on the creation of safe environments for individuals who are impacted by systemic, historical, interpersonal and structural violence (Elliott et al., 2005; Wathen et al., 2021). It recognizes how social inequities often place people at greater risk of experiencing challenges in accessing necessary support for their physical and emotional safety (Browne et al., 2015). In reducing the potential for further harm, Ponic et al. (2016) articulates four primary principles of TVIC: (1) understanding the impact of structural/interpersonal experiences of trauma and violence on people's lives and behaviours; (2) creating emotionally, physically and culturally safe spaces for users and providers; (3) fostering ongoing opportunities for choice, collaboration and connection; and (4) promoting a strengths-based approach to support service users (Ponic et al., 2016).

Much of the literature surrounding these practices fail to provide insight on how TVIC can be implemented in the classroom, potentially due to its current infancy in research (Wathen et al., 2021). The discussion of trauma and violence-informed care within classroom settings has only begun to truly emerge within the past two decades (Thomas et al., 2019; Maynard et al., 2019). Currently, only two systematic reviews exist related to the effects of trauma-informed approaches in school (Maynard et al., 2019; Avery et al., 2021). The first article written by Maynard et al. (2019) found no main findings in their review discussing the impacts of trauma-informed approaches in schools in relation to mental health symptoms, academic performance, and student socioemotional functioning across. The authors noted that at the time of their search, no solid evidence was found to highlight the effectiveness of TVIC on these topics. In contrast, the article written by Avery et al. (2021) aimed to investigate the prevalence of on-going training and learning related to TVIC-practices in school settings. However, the review also noted a limited scientific strength. As the many of the articles selected for the analysis did not meet the inclusionary requirements for data synthesis.

However, recent federal movements for TVIC approaches have been called upon to be incorporated in various facets of Canadian social service programs (Public Health Agency of Canada, 2018). However, similar traction cannot be said with regards to its use in public educational curriculums. Specifically, work by Oehlberg (2008) insists that a large barrier to the implementation of TVIC in schools may be attributed to a lack of administrative 'buy-in' or support from necessary stakeholders that have chosen to withhold trauma-informed education for teachers in their professional careers. Unfortunately, efforts to facilitate meaningful TVIC implementation must often succeed a series of structural and bureaucratic barriers that mirror the trajectories seen in health service research (Damschroder et al., 2009; Fixsen et al., 2005).

Resistance towards TVIC implementation in schools further fail to recognize the individual deficits that may emerge from neglecting marginalized perspectives, avoiding the discussion of

educational injustice, and minimizing the experiences of systemic oppression that continuously impact traumatized youth (Thomas et al., 2019). Namely, the isolated effectiveness of traumaspecific interventions may not be enough to fulfill the level of safety needed to support those afflicted by intersecting nuances of race, class, and systemic violence in their lives (Chafouleas et al., 2019). Thus, work by Maynard et al. (2019) suggests that a trauma-informed system requires a radical commitment for change from a whole-system perspective – starting with educator practices.

A clear desire for trauma-informed education is evident amongst educators and teacher candidates across the globe (Brown et al., 2022; Cavanaugh, 2016). A mixed-method study involving 414 school educators found that teachers reported feeling unprepared in dealing with the socio-emotional needs of trauma-affected students (Rahimi et al., 2021). Teachers had reported "rely[ing] primarily on 'sending kids to the counselor' as the[ir] primary classroom intervention", despite wanting to know how to help their students on their own accord (Rahimi et al., 2021 p. 81). Research by Alisic et al. (2012) further highlights this issue in their pivotal report exploring the perspectives of 765 educators in the Netherlands who were providing support to children after instances of trauma. Results from their qualitative work found that only 9% of teachers had received any form of training in the past 3 years, related to supporting students affected by trauma. Similar findings from McClain and colleagues (2021) also supported these deficits; only 13% of teachers (n=15) in their study reported having strategies prepared to support students experiencing trauma. These results suggest that educators lack the knowledge and opportunities for receiving, creating and accessing trauma-informed education in their professional practice. Thus, identifying a gap in the literature pertaining to how TVIC should be shared to educators in modern-day classrooms.

Professional Development for Teachers

Professional development (PD) has traditionally been designed to help improve teachers' knowledge, awareness, and recognition of mental health problems in their students (Roeser et al., 2012; Gilham et al., 2021). For example, one study conducted by Wei and colleagues (2020) examined the effectiveness of a mental health literacy course designed to understand, reduce stigma, and increase help-seeking efficacy for individuals struggling with mental health disorders. One hundred and seventy-six Canadian preservice teachers were recruited in the quasi-experimental study and were assigned to three different demographic groups. The researcher implemented a wide variety of teaching styles in their program, including PowerPoint presentations led by a mental health professional, online discussion opportunities, and a compilation of animated quizzes, video clips and self-reflection opportunities. After examining their pretest, posttest, follow-up test results at the three-month mark, the participants were shown to demonstrate significant, short-term improvement across all three domains. The significance of these findings highlights the equally effective impacts of implementing online PD programs as opposed to in-person courses.

Research conducted by Anderson et al. (2015) also expands upon the range of skills and knowledge that can be explored in a PD program through the implementation of a trauma-informed workshop for 16 university-level classroom staff. The workshop was designed to facilitate discussion-based learning, which encouraged participants to share their thoughts related to trauma and its effects on student wellness. Ultimately, it was found that many participants involved in the project did not recognize their own role in worsening student stress, as individuals believed in fear-based behavioural correction (Anderson et al., 2015). The outcomes of this study help reiterate the Theory of Planned Behaviour, as participants who desired to learn more about trauma were

devoted to engaging in this type of professional development (Ajzen, 1991; Anderson et al., 2015). Thus, further supporting the need for educators to engage in greater, self-reflective professional development centered around educator and student mental health.

As such, the original study for this project was to observe the effectiveness of a TVIC-based learning module created for teacher candidates and associate teachers in a pre-and-post-test design. Participant score across several mental health and teaching-based constructs were planned to be examined prior to, and following the completion of this virtual learning activity. The "Teacher Wellness and Trauma-and-Violence-Informed-Care" online e-module was made public to interested participants during the Summer of 2023 to help teachers and teacher candidates understand how violence and other forms of trauma can affect student mental health and learning behaviour. However, due to its low engagement from prospective participants, the researcher shifted their study aim to understand the current gaps in the realm of mental health-related professional development for Canadian educators and teacher candidates.

Chapter 3: Methodology

This research project investigates modern attitudes toward mental health-related professional development for primary and secondary school level Canadian educators. Specifically, a mixed-method, multi-phase design was conducted to capture the current knowledge, understandings and beliefs of teacher candidates and associate teachers affiliated with a large, Canadian University about the specific topics, modalities, and perceptions of mental health-related professional development for educators.

Procedure

In January of 2023, all teacher candidates and associate teachers were sent a recruitment email inquiring about their interest in participating in a multi-phase project developed by the

Teacher Wellness Team at the University through the Teacher Education Office in the Faculty of Education (see Appendix A & B). The project included two distinct phases: (1) the completion of an online survey that was used as resource development for improving teacher wellness (including the *Teacher Wellness and Trauma-and-Violence-Informed-Care* e-learning program), and (2) online follow-up interviews to determine beliefs regarding educator professional development needs and wellness. The research team requested permission to use responses shared in these studies and received ethical approval from the Research Ethics Board for data dissemination (see Appendix C).

Phase One – Spring 2023 Surveys. Interested participants were emailed a link to complete a 30–45 minute online Qualtrics survey to complete Phase One of the study. This survey gathered information to inform the development of the Teacher Wellness and Trauma-and-Violence-Informed-Care, an online e-learning program developed by the research team which was later launched in September 2023.

Phase Two – Spring 2023 Interviews. Following the completion of Phase One, participants who consented to an online interview were followed-up by members of the research team via email about four-to-six weeks after their surveys were completed (see Appendix D & E). Semi-structured interviews were conducted through Zoom via telephone with a research assistant and ranged from 30 to 60 minutes in length. Recordings of the interviews were saved as MP3 files and sent to an online transcription service during the Summer of 2023. Final copies of the transcripts were then reviewed by members of the research team for coding and dissemination.

Participants

This study used data from an on-going research project created by the Teacher Wellness Team at the University with teacher candidates and associate teachers affiliated with the school's Bachelor of Education (B.Ed.) program. Teacher candidates were defined as students who were currently enrolled in the Bachelor of Education (B.Ed.) program, while associate teachers were defined as graduates of the B.Ed. program working as certified educators at the primary and secondary school level. All participants must have identified as either a teacher candidate or associate teacher at the time of the study and be fluent in English.

In Phase One, 81 (n = 81) teacher candidates (13.6%) and associate teachers (84.8%) were included in the final study (see Table 1 for details). Most participants identified as female (80.2%), with only 13 participants identifying as male (16%). Of the teacher candidates, five participants (45.5%) were preparing to teach at the elementary school level, while six participants were preparing to teach at the secondary school level (54.5%). Associate teachers were evenly divided (50%) in teaching at the primary and secondary-school level, with an average of 18.71 years of experience across that group (see Table 1).

Table 1Sample Demographics (n = 81)

Measure	N	%
Gender		
Female	65	80.2
Male	13	16
Missing	3	3.8
Background		
White	74	91.4
Black	1	1.3
East Asian	1	1.3
South Asian	1	1.3
Other	2	2.5
Mixed	1	1.2
Missing	1	1.2
Educator Status		
Teacher	70	86.4
Teacher Candidate	11	13.6

Current Level of Education Taught		
Elementary	35	50
Secondary	35	50
·		
Preparing to Teach this Level of Education		
Elementary	5	45.5
Secondary	6	54.5

In Phase Two, 18 participants indicated they were interested in being contacted for an interview. Of this sample, only 12 participants were included in the final sample, as two declined to be interviewed, and four did not reply to the researchers' invitation. Most participants identified as associate teachers working at the secondary school level working across Ontario, Canada, with only one participant identified as a teacher candidate.

Materials

Survey. Developed as a part of a broader research project by the Teacher Wellness Team, the survey used in this study collected demographic data, as well as information guided by three validated instruments: the Beliefs about Learning and Teaching Questionnaire (BLTQ-Revised), Kessler Psychological Distress Scale (K6; Kessler et al., 2002) the Attitudes Related to Trauma Informed Care scale (ARTIC-35). Additional questions related to addressing psychological health and safety in the workplace, productivity, and learning needs/preferences for educator professional development were also included in the survey (see Appendix F).

Beliefs about Learning and Teaching Questionnaire-Revised (BLTQ-Revised; Glenn, 2018) is a 20-item self-report instrument that assesses educator's beliefs about teaching and learning within inclusive classrooms (see Appendix H). This measure uses a six-point Likert scale ranging from "strongly disagree" to "strongly agree" and examines answers across four subscales: Teacher-Controlled Instruction, Entity-Increment, Student-Centered Instruction, and Attaining-

Standards. Higher scores on the Teacher-Controlled Instruction subscale reflect the belief that a teacher's role in the classroom is to focus on transmitting information to their students. Higher scores on the Entity-Increment subscale reflect the belief that students' ability to learn is malleable, rather than as a fixed trait. Higher scores on Student-Centered Instruction reflect the belief that the learning process should be directed by teachers' interpretations of their students' needs and participation. Finally, higher scores on the Attaining-Standards subscale reflect the belief that grades, and academic success are the primary motivators for student learning. The reliability α coefficient for each subscale is as follows: .71, .63, .64, and .71, respectively (Glenn, 2018). This is comparable to results found in other large-scale studies using the instrument (Specht et al., 2016). For this project's purposes, only the Entity-Increment and Student-Centered Instruction subscales were used in the final analysis.

Kessler-6 Psychological Distress Scale (K6; Kessler et al., 2002) is a six-item self-report questionnaire that asks individuals to rate the frequency of their nonspecific psychological distress from the past 30 days (see Appendix I). This measure uses a five-point Likert scale which ranges from 0 ('None of the time') to 5 ('All of the time'). Total scores range from 0 to 24, which indicate an individual's level of psychological distress that can be classified as low $(0 \le 4)$, moderate $(5 \le K6 < 13)$ and high $(K6 \ge 13)$, respectively (Prochaska et al., 2012). The scale also showcases strong internal reliability $(\alpha > .80$; Kessler et al., 2002; Kessler et al., 2003; Staples et al., 2019).

Attitudes Related to Trauma-Informed Care Scale-35 Education (ARTIC-35; Baker et al., 2016) is a 35-item measure which assesses educators' attitudes towards trauma-and-violence informed care in the classroom (see Appendix J). This instrument showcases high overall internal consistency (α = .91), and within its five core subscales: Underlying Causes of Problem Behaviour and Symptoms (α = .78), Responses to Problem Behaviour and Symptoms (α = .76), On-the-Job

Behaviour (α = .72), Self-Efficacy at Work (α = .79), and Reactions to Work (α = .71). Higher scores for Underlying Causes of Problem Behaviour and Symptoms indicate a belief that traits related to learning and problematic behaviour are a result of external circumstances that can be changed, rather than as internal, fixed conditions. Higher scores for Reponses to Problem Behaviour and Symptoms emphasize an importance for educators to build healthy and safe relationships with students, rather than ones focused on behaviour management. Higher scores for On-the-Job Behaviour indicate a preference for educators to use empathy-focused over control-focused behaviours in their work with students. Lastly, higher scores for Reactions to Work reflect educators' understanding of vicarious traumatization and an appreciation for its effects through active support-seeking behaviour. Questions are measured on a seven-point Likert scale which ranges from 1 (i.e., unfavourable attitude) to 7 (i.e., favourable attitude). Overall ARTIC scores reflect an average of all five subscales, with high scores indicative of favourable attitudes towards trauma-and-violence informed care. For the purposes of this study, only overall ARTIC scores were used in the final analysis.

Psychological Safety in the Workplace. Adapted from the article, "Psychological health and safety in the workplace — Prevention, promotion, and guidance to staged implementation" (Canadian Standards Association, 2019), developed in collaborative effort with the Mental Health Commission of Canada, five items were created by the researchers to assess the psychological safety and wellness of educator workplaces based on this standard (see Appendix K). These questions address the notion that workplaces hold a responsibility to prevent harm and promote worker psychological health through planned, active measures endorsed by management that is subject to review, evaluation, and corrective action wherever appropriate. Responses were measured on a five-point scale which ranged from 1 ("Not at all") to 5 ("Definitely"). An aggregate

score was calculated using the average of all five items, with higher scores indicating higher levels of workplace psychological safety. Inter-item reliability was measured using Cronbach's alpha, and the scale demonstrated strong levels of internal consistency ($\alpha > .90$). The items are as followed:

- Our workplace offers services or benefits that adequately address employee psychological and mental health.
- 2. Our supervisors would say or do something helpful if an employee looked distressed while at work.
- 3. Employees feel supported in our workplace when they are dealing with personal or family issues.
- 4. Our workplace supports employees who are returning to work after time off due to a mental health condition.
- People in our workplace have a good understanding of the importance of employee mental health.

Productivity in the Workplace. Two additional post-hoc items were added as an extension of the K6 scale to address the impact of educator psychological health on workplace productivity (see Appendix K). Absenteeism and presenteeism were selected as variables of interest, as previous studies have highlighted several occupational and psychological factors that contribute to the productivity and attendance of Canadian teachers at work (Corrente et al., 2022; Ferguson et al., 2022). For this investigation, absenteeism was defined as the inability to carry out workplace-related tasks measured by the number of days impacted because of psychological health in the past month ("During the past 30 days, how many days out of 30 were you totally unable to work or carry out your normal activities because of these feelings? Please enter a number between 0 and 30"). Presenteeism was defined as a reduction of workplace productivity due to psychological

distress. This was operationalized by the number of days impacted by participants' psychological health in the past month, ("Not counting the days you reported in response to the previous question, how many days in the past 30 were you able to do only half or less of what you would normally have been able to do, because of these feelings? Please enter a number between 0 and 30.")

Semi-Structured Interview. An interview prompts guide was created by the Teacher Wellness Team to help facilitate questions related to topics concerning teacher wellness and inclusion (see Appendix L). As such, the following three questions were of particular interest to this study, including: "What would you like to tell us about your wellness?", "What kinds of professional development and/or resources would support your wellness? For example, information on how to stay relaxed in a chaotic classroom" and "Have you ever done any professional development or teacher education on trauma (defined as experiencing stress that outstrips your ability to cope with the negative effects) and how it can affect working (for teachers) and learning (for students) in schools? If so, can you describe it briefly?"

Analyses Plan

Phase One. The overall objective of this project was to explore the current attitudes of Canadian educators on topics related to teacher mental health and professional development. As such, Phase One aimed to examine the impact of various individual and workplace-related factors that influence an educators' mental health and attitudes to provide trauma-informed care using the following research questions:

- 1. Is there a relationship between educator mental health, beliefs about teaching and learning, presenteeism, absenteeism and beliefs about trauma-informed care?
- 2. Does educator mental health, beliefs about teaching and learning, presenteeism and absenteeism influence beliefs about trauma-informed care?

Phase Two. Reflexive thematic analysis (RTA) was used to interpret the interview data of the current study. This six-phase method highlights patterns that emerge across a qualitative dataset through thoughtful, reflexive phases of coding, thematic development and subjective review (Braun & Clarke, 2019; Braun & Clarke, 2021). This constructionistic approach to research eschews the notion of knowledge as positivistic, which aligns well with the aims of the current research and knowledge mobilization plan (Braun & Clarke, 2019; Braun & Clarke, 2021). That being, understanding how the reception of current educator professional development can be used to as a guide to further develop practical and relevant trauma-informed training for teachers in the future.

To address the objectives of Phase Two, interview content related to professional development and teacher wellness were extracted from the transcripts. I familiarized myself with the data by re-reading the content several times and adding brief comments to notable quotes which served as initial codes for different thematic categories. This helped discern the organization of different, potential themes of the data. These codes were then compiled onto a comprehensive list which was then reviewed and grouped into distinct subthemes. Overall, four themes were created: Beliefs Toward Teaching, Educator Mental Health, Blurred Expectations and Boundaries of Educators, and Professional Development Needs of Educators with a total of 8 subthemes (see Table 2).

Table 2Overview of Themes, Subthemes and Examples of Associated Codes

Master theme	Subtheme	Associated codes
Beliefs Toward Teaching	The alignment of professional and personal values	Passion towards job
		Gratification in work Caution

Shifting public perception of COVID-19 teachers Poor public perception Lack of societal recognition Educator Mental Health Labour needs outweigh time Demands of the job **Burnout** Emotional exhaustion Self-care/Coping Leave of absence/temporary leave Figures of support Loneliness Collegial support Friends Criticisms towards the Lack of trust towards educational institution ministry Lack of leadership Resentment Lack of autonomy Devalued Blurred Expectations and Unclear role expectations **Boundaries of Educators** Professional Development Current beliefs about Irrelevant to the needs of Needs of Educators professional development teachers Disengaging No time for PD Ministry propaganda Desired topics of professional Behaviour management development Conflict resolution with students Supporting educator health Suicide prevention Grief and bereavement support Desired modalities of Online courses professional development Self-directed PD Videos Action-oriented

Researcher reflexivity and positionality. I am a second-generation, Chinese-Canadian cisgendered women in my final year of the Counselling Psychology program at Western University. I am currently training to become a psychotherapist through an internship at a local community mental-health agency in London, Ontario. My responsibility in this role is to help support and counsel adults of all ages and backgrounds.

I first became interested in learning more about caregiver mental health from my work as a Montessori teaching assistant during my first year of undergraduate studies. I saw how quickly my fellow colleagues became emotionally impacted by the demands of their job, as these responsibilities were commonly underappreciated by the parents of my students. My interest in this topic further developed when I continued to pursue work in other professional, caregiving roles involving special needs children. Through these experiences, I understood some of the unique challenges faced by professionals working with youth and children. I fell victim to the extreme burnout and compassion fatigue commonly experienced by those involved with these careers. This ultimately led to my decision to leave these professions, which unfortunately reflects a growing pattern of attrition and short staff turnovers in these careers. As such, I believe that my past experiences and intersecting identities will help support the trajectory of this research and produce quality work that will inform future research and resource development for educators.

Chapter 4: Results

Phase One – Quantitative Data

Data cleaning and assumption checking. Prior to the analyses, data checking was performed across the entire sample to ensure that no data entry error existed. Missing data was found for each of the variables being tested, and a pairwise deletion for entries with less than an 80% completion rate across each variable was conducted. Therefore, a reduction of the original sample size from n = 126 to n = 81 was observed. For variables that met this criterion, but still contained missing values, person-mean imputations were used to calculate the summary scores of participants with incomplete data. All assumptions for binomial logistic regression were met in this sample.

Descriptive statistics. The range, mean and standard deviations of each variable of interest were calculated (see Table 3).

Table 3Descriptive Statistics

Measure	n	M	Min	Max	SD
Age	81	42.77	22	64	9.75
Years of Experience	70	18.71	4	37	7.20
Attitudes Toward Trauma-Informed	81	5.24	3.54	6.54	.66
Care-35 (ARTIC-35)					
Kessler-6 Psychological Distress	81	6.80	0	20	5.23
Scale (K6)					
Beliefs about Learning and Teaching	81	5.15	2.5	6	.66
Questionnaire Entity-Increment					
Subscale (BLTQ-EI)					
Beliefs about Learning and Teaching	81	4.50	2.5	6	.75
Questionnaire Student-Centered					
Instruction Subscale (BLTQ-SC)					
Absenteeism	74	.55	0	8	1.27
Presenteeism	74	4.20	0	30	5.93
Workplace Psychological Safety	75	3.18	1	5	1.14

Bivariate Pearson correlations. Correlational analyses were conducted to further examine the associations these measures (see Table 4 for details). Significant, positive correlations between beliefs about trauma-and-violence informed, entity-increment learning [r(79) = .39, p < .001], student-centered instruction [r(79) = .49, p < .001], and workplace psychological safety [r(73) = .31, p = .006] was observed. Educator psychological distress was significantly positively correlated with presenteeism [r(72) = .53, p < .001], but negatively correlated with workplace psychological safety [r(73) = -.41, p < .001]. Scores for absenteeism demonstrated a positive, significant relationship with presenteeism [r(72) = .37, p = .001], while workplace psychological safety showed a negative, significant correlation with presenteeism [r(67) = -.27, p = .03].

Table 4Bivariate Pearson Correlations

Measure	n	1	2	3	4	5	6	7
1. Attitudes Toward Trauma-	81							
Informed Care-35 (ARTIC-								
35)								
2. Kessler-6 Psychological	81	48**						
Distress Scale (K6)								
3. Beliefs about Learning and	81	.38**	.03					
Teaching Questionnaire								
Entity-Increment Subscale								
(BLTQ-EI)								
4. Beliefs about Learning and	81	.49**	17	.19				
Teaching Questionnaire								
Student-Centered Instruction								
Subscale (BLTQ-SC)								
5. Absenteeism	74	10	.22	.002	02			
6. Presenteeism	74	20	.53**	.02	01	.37*		
7. Workplace Psychological	75	.31**	41**	02	.16	.06	27	
Safety								

^{**}p < .001 level. *p < .05 level.

Binomial Logistic Regression. To address the second research question of Phase one, a binomial logistic regression was conducted to examine whether presenteeism, absenteeism,

workplace psychological safety, beliefs toward teaching and learning, and attitudes toward traumaand-violence informed can predict levels of educator psychological distress. Previous work examining the use of the Kessler-6 Psychological Distress Scale on community samples demonstrated a lower cutoff score of 10 for higher sensitivity and classification accuracy (Lace et al., 2020). Therefore, low $(0 \le 9)$ and high $(K6 \ge 10)$ psychological distress was dichotomized by establishing a median split score of the data for maximum accuracy.

The results of the logistic regression model were found to be statistically significant, $\chi^2(6)$ = 30.93, p < .001 (see Table 5). The model explained 53.7% (Nagelkerke R²) of variance in high scores of educator psychological distress, and correctly classified 85.5% of cases. Presenteeism (χ^1 = 6.99, p = .008) and workplace psychological safety (χ^1 = 4.55, p = .03) were found to be statistically significant in predicting high scores of psychological distress in educators. Therefore, an increase of days associated with presenteeism increased the likelihood of educators scoring high psychological distress, while greater scores for workplace safety increased the likelihood of educators scoring low psychological distress.

Table 5
Binomial Logistic Regression Results

Measure						95% CI for OR			
	β	β S.E.	df	p	OR	Lower	Upper		
Constant	9.16								
ARTIC-35	99	.83	1	.24	.37	.07	1.90		
BLTQ-EI	01	.78	1	.99	.99	.22	4.54		
BLTQ-SC	90	.70	1	.20	.41	.10	1.60		
Absenteeism	.10	.25	1	.68	1.11	.67	1.83		
Presenteeism	.22	.08	1	.01	1.25	1.06	1.47		
Workplace Psychological Safety	87	.41	1	.03	.42	.19	.93		

 $R^2 = .54$ (Nagelkerke). Model $\chi^2(6) = 30.93$, p < .001.

Phase Two – Qualitative Data

Theme 1: Beliefs Toward Teaching

The first theme explored why teachers decide to become involved in the profession, and the various personal, societal and professional factors that conflict with these beliefs. Responses were summarized into two distinct subthemes, including: (1) The alignment of professional and personal values, and (2) Shifting public perception of teachers. The first section reflected how personal and professional values related to the pedagogy of teaching and care helped motivate educators in their work with students. Following this, the perceived treatment of teachers was explored to understand the impact of societal attitudes towards educators and the changes they experienced.

Alignment of professional and personal values. It was clear that all respondents entered the profession with a deep desire to positively shape, guide, and support young people through the education system. Participants shared that they enjoyed working closely with youth and felt proud of their efforts in helping children navigate the world with a critical, conscious lens. Teachers also expressed gratitude towards their roles as educators, with some having described their career choice as a 'lucky' alignment of their personal and professional values, as highlighted by Participant 3,

"I believe that, you know, it's a privilege to be a teacher, it's such—Like, I couldn't see myself doing anything else because that's so fundamental to who I am and it's a way that I can see that I can practice compassion in my own life."

But although these sentiments were overwhelmingly positive, they were often supported warnings about entering the profession. For example, teachers often used hyperbolic language to demonstrate their dedication to the role,

"I love my job, I love it, I do, and I'm lucky with that. Some people—I don't know how you would go through a teaching career and not love it, you would die" (Participant 11).

Similar sentiments were shared by other educators as well, and were commonly observed in the responses of teachers with decades of experience. These participants cautioned new teacher candidates to be vigilant of the consequences associated with the profession, such as its impact on the mental health of educators and their families:

"I think that it's really important for teacher candidates to be aware of the wellness factor of getting into this profession. Cause I always say, like, I would never, there's nothing else I could imagine myself doing, but I don't know that it's a career that I would suggest to people choosing their careers because it really takes a toll on your family and your mental health" (Participant 9).

Shifting public perception of educators. In general, teachers felt overwhelmingly undervalued by those outside of the profession. Teachers believed that assumptions made by the public about the responsibility of teachers failed to acknowledge the physical, emotional and psychological demands of the job. In one quote, Participant 11 said,

"[...] the rest of society doesn't really [...] understand the emotional weight that we carry, right? They see teachers as just going in and giving a curriculum and that's it. So, it's, that's probably the easiest part is doing that, right? Giving out the curriculum and having them—it's all the other stuff that comes with it, which is the hardest [...]"

These beliefs fostered a general attitude of resentment directed towards the public, according to many participants. It seemed that teachers internalized these criticisms as a personal attack on their professional capability. These feelings of betrayal were best described by Participant 6, who spoke about their experience as akin to a 'losing battle' against the public,

"But proving it to the community—people who hate teachers or hate education, and it just gets to me when people are like, "Oh, you're a teacher", like I'm nothing. That brings me down. You have no idea how much work I put in for my students for you to even have that tone in your voice. It's grating."

Teachers also discussed how COVID-19 complicated these feelings even further. Throughout COVID-19, educators were heavily celebrated by the media for their ability to provide educational stability to youth during a time of social unrest. Participants shared that they finally felt heard, seen, and adequately appreciated for their work, but that this joy was short-lived. Following the return of in-person classes, the pendulum of public opinion shifted back towards a negative, critical opinion of teachers. Greater expectations from the public were placed on educators without the recognition that they once received during COVID-19. One teacher noted,

"So that's how we feel, oh yeah, during covid, teachers are amazing, look how much they're doing, they're fantastic, they're going online, they're providing all of this stuff, and then a year later now we're in the dog dung pile 'cause why? So, that's the thing that gets to my mental health" (Participant 6).

Teachers were acclaimed for their ability to quickly adapt and provide effective work for students throughout the pandemic. However, these accolades presented a new expectation for educators to uphold more responsibilities on their own – similarly as they once did during COVID-19.

Understandably, the public's wavering opinion of teachers significantly impacted how educators viewed their work and themselves as professionals in the helping field. Messages propagated by general media were shown to considerably modify the self-confidence of many teachers involved in the project.

But despite these criticisms, some teachers still wanted to portray a 'strong' image of themselves as valiant, resilient professionals in the face of public scrutiny. Educators understand that societal opinions about their work will always be subject to unprompted criticism by others. And without exception, these attitudes will repeatedly echo the outcomes of changes decided by the Ministry of Education, or other governing bodies. As such, participants shared that they would continue to advocate for themselves, irrespective of the status quo towards educators – although, positive support would be greatly appreciated.

"I definitely don't want to come across as like a woe is us or we're not victims. Like, we, I mean, we're adults and we're fully capable of defending ourselves from, you know, criticism – fair or unfair. And we should be held to a high standard, but I just wish that we were judged on what we do on our hardest day as much as we were judged on what we do on our easiest day, kind a thing." (Participant 10).

Theme 2: Educator Mental Health

The second theme that was created for this study reflects the different factors that impact the mental health of educators. This theme summarized different aspects that affect educators at-and-outside of their workplace, which was then divided into three subthemes: (1) Demands of the job, (2) Figures of support, and (3) Criticisms towards the educational institution. The first subtheme focused on understanding teachers' reactions to the responsibilities of their role. This later informed the use of various strategies created by educators to subvert the negative, mental-health related effects of the job that was explored in the second subtheme of this section. Lastly, educators' beliefs toward the education system were explored to understand how structural barriers and expectations further impacted the promotion of positive mental wellness in educators.

Demands of the job. Unanimously, teachers reported that the ever-growing demands of their work significantly impacted their mental health and wellness. Teachers shared that they were constantly overwhelmed and stressed from having to uphold the 'endless' amount of clerical, relational and physical labor associated with their job. This included tasks like responding to parent emails, preparing lesson plans, and managing classroom behaviours all while having to model 'good' behaviour for their students – even if they did not have the mental capacity to do so.

Burnout and poor work-life balance were noted as common outcomes to the high demands of teachers, as many participants believed that there was simply 'not enough time' to execute all these responsibilities. Experienced teachers considered these conditions as expected consequences of the profession. Beliefs related to the provision of 'optimal' care for students were typically associated with the 'necessary' sacrifice of one's own mental wellness and general functioning.

Educators burdened by the effects of burnout and poor work-life balance struggled to sustain healthy relationships with their families. Described by Participant 9,

"The work-life balance is really difficult, and just that feeling of always having a lot to do and never quite enough time, balancing, like, the needs of my, like, own kids at home and then myself and the kids here. Like, it's just a lot. Like, feeling like you're kind of constantly taking care of other people and then you kind of forget to take care of yourself sometimes".

Similar comments were made by another educator, who also interpreted their personal wellness as a secondary concern in exchange for the provision of 'high quality' care for their students,

"I put a great deal of energy into my work because I feel my best when I can leave at the end of the day feeling like my students have gone, "I got it", and so at the end of the day I'm exhausted, I will have my nap, I sometimes have energy for my dog [...] my kids, my husband

gets a little less, and then I get nothing left at the end. So, I am definitely the worst person to ask how you balance [work and a personal life], 'cause I don't' (Participant 6).

Although, the negative impacts of these high demands inspired some teachers to take proactive action to protect their mental health, including the choice to temporarily leave the profession. Short-term leaves were regarded as a 'growing' trend among experienced teachers, especially for those who worked in lower socio-economic schools. Participants shared that these 'breaks' offered opportunities for teachers to re-evaluate the values that inspired them to pursue this career and often strengthened their motivations to work harder upon their return. Educators considered this practice as a 'last resort' in salvaging any hope of staying in the profession. As shared by Participant 7, he said,

"[...] I had been fed up for months before [deciding to leave], and it was kind of like, everything was just annoying me, and I'm not somebody to make rash decisions, so, you know, I could have just said I'm going to resign from teaching and find work somewhere else [...]"

Educators shared other forms of coping and self-care to maintain their mental fitness throughout the school year. Activities such as exercise, yoga, and mindfulness were among the most popular strategies described. Psychotherapy and other types of mental health treatment (like medication) were also discussed as well. Although, these options were usually financed by the educators themselves, rather than through their workplace benefits (i.e., Employee Assistance Plan) due to insufficient funding.

Figures of support. Educators also identified their social networks as vital to the maintenance of their mental wellbeing. Social support was regarded as a universal protective factor to combat the negative effects of burnout for teachers. Participants were able to seek more balance in their work and personal lives when they had understanding friends and family, as opportunities

for relaxation, play, and support with completing domestic work. Those involved in such unions were allowed more flexibility in their daily lives, which was invaluable to sustaining positive mental health in educators. This was especially true for participants who also shared the identity of a caretaker for others, such as in the case of Participant 3,

"I'm very fortunate that my wife is able to manage things at home, 'cause we have two kids, right? [...] I know there's lots of teachers who have to leave right after school, not because they don't want to, they wouldn't otherwise want to be here, but they have childcare responsibilities, right? Or whatever the case may be, or maybe parent care responsibilities, you know. So, I know that I'm very fortunate to be able to do that and have a suitable kind of workfamily situation, and right now my wife's comfortable with how things go, so..."

Collegial support offered by other educators also granted participants the ability to openly share their frustrations and seek advice from professionals who fully understood the profession's demands. Teachers often sought support from their colleagues throughout their work schedule, such as during lunch breaks, before/after school, and even during classes. These conversations were typically unscheduled and carried out informally, as participants shared that their schools and work schedules often lacked timely, regulated periods for collaboration. Examples of these spaces include school hallways, printer rooms, and occasionally, the school staff room. The spontaneity of this support-seeking behaviour was best exemplified by Participant 8's experience of this process as a teacher candidate:

"[During our] 40-minute lunch break, usually we'd have teachers kind of like touching base with each other, trying to be, like, oh, like, 'We gotta work on this play. Can I steal them from you for this time? Or, I gotta do this other thing. Any chance you could look after my students during this time instead?' [...] it's kind of like, somebody [will] walk-in and be like, 'My kid threw

a chair today, and I don't know what to do. Or so and so's going to do this' and like, [another teacher] might suggest something, like doing a circle practice, somebody else might suggest doing something that's like, 'Oh, have you tried doing x, y, z?'"

Similar processes of collegial support were shared by other, more experienced educators in the project. This may indicate that the procedures involved in seeking help from other teachers tend to be less regulated, and more casual in nature, regardless of a teacher's years of experience. As such, educators are encouraged to rely on their colleagues for aid, as these working relationships play an integral role in providing relevant, well-informed support for teachers in the workplace.

Criticisms towards the educational institution. Educators were very vocal about the role that poor administration, management, and changes made by political bodies such as the ministry of education played on the impact of educator mental health. Participants believed that these parties did not care about the mental health of teachers and did not make decisions related to the wellness of educators with them in mind. Instead, "[...] it's always about what the Ministry decides is important for us" (Participant 2). Many teachers felt that the rhetoric of promoting educator wellness was simply a ruse to foster a false sense of 'support' from management and the ministry. Beliefs about this were highlighted in a response made by Participant 4, as...

"[...] the system's becoming less and less oriented toward education and more about slogans, like 'wellness."

Teachers were frustrated by the contradictions made by their management, and the lack of accountability taken by these structures. In one quote, Participant 5 shared her interpretation of these opposing messages,

"[...] everything is about your students in your classroom and the culture in your classroom, but there's not a lot of teacher wellness. It's more of a 'we're going to tell you that you should be well, and you should take time to be well; however, we're not going to give you the time or the resources, but you should figure it out and you should definitely make sure that you take wellness into your own hands".

This was especially true for teachers impacted by the effects of vicarious trauma. Participants shared that they were often exposed to traumatic events at their workplaces, including instances of school-based violence, tragic losses due to student suicide or car-related incidents, and working with at-risk youth impacted by ongoing abuse, homelessness and poverty. For some, the challenges in upholding this illusion of the 'perfectly regulated' educator in seemed to be impossible, as...,

"[...] there's not a lot of time to process [traumatic events] at work. It's, I mean, you're basically on stage for six hours a day, right? So, you have to be able to compartmentalize that stuff and it's not always easy, right?" (Participant 10).

Participants inflicted by the emotional damages of vicarious trauma usually did not receive substantive support from their management to cope with these issues. Instead, educators were expected to work through these issues on their own whilst still being 'effective' in their role. Thus, further placing extreme strains on the mental health of teachers due to these insufficient resources.

Theme 3: Blurred Expectations and Boundaries of Educators

The third theme of this project explored educators' feelings toward the transitory nature of their responsibilities as teachers. This theme captured the distinct attitudes held by educators about the ever-evolving role of 'being' a teacher in Canada. It explores the obstacles and approaches that educators used to effectively work in their job.

Educators spoke openly about their ambivalence towards the hazy nature of their professional roles and responsibilities when providing 'appropriate' support for at-risk students. Many participants expressed how 'lost' they felt when navigating how to best support students involved in excruciating circumstances, like those in dysfunctional homes, violent social circles or even students experiencing traumatic grief. Some teachers attributed these 'blurred' expectations of their role to the lack of clear, standardized procedures or sufficient resources offered by their school districts to tackle these types of situations. Therefore, placing additional pressures on teachers to take on responsibilities outside of their professional scope.

For instance, one participant shared how her responsibilities as an educator had gradually adopted the role of a social worker as well in her two decades of teaching. She stated that this development added,

"[...] a lot of pressure, the fact that [teachers] have to no longer just teach but be social workers as well in more of a way than I ever have been [...]" (Participant 11).

Other participants also shared similar sentiments to Participant 11, as expectations of the 'ideal' educator seemed to also require knowledge related to connecting students and families with appropriate community services. Those who were unable to carry out these desired tasks communicated feelings of guilt and disappointment in themselves, despite understanding that it was a necessary boundary to be honored. This was exceptionally difficult for educators who believed that they were the only person able to help their student through these challenges.

Eventually, teachers learn to accept the limitations of their role. The naivete of this desire diminishes over time, as educators begin to adopt a healthier approach to supporting their students. This was demonstrated in a response provided by Participant 9, a teacher with nearly fifteen years of experience.

"[...] it's really easy to take responsibility for, I mean, 20 kids' lives, right? And think that [...] you should be able to fix all their problems [...] I wouldn't say I'm there, but [I'm] on the journey of, like, realizing that we can only control so much...that was definitely, like, one of the biggest things that I had to learn from the time I was a teacher candidate until now [...] and you can only control what you can and not to, like, shoulder the actions of the kids because there's so much more to their lives than what we can control in the classroom [...]"

Theme 4: Professional Development Needs of Educators

The final theme observed in the research pertains to the professional development needs of teachers and teacher candidates. This theme examined educators' current attitudes towards professional learning opportunities presented at their workplaces, and the structural factors that impact their ability to engage in such activities. As such, three subthemes were created: (1) Current beliefs about professional development, (2) Desired topics of professional development, and (3) Desired modalities of professional development.

Current beliefs about professional development. In general, educators believed that current opportunities for professional development were not reflective of the needs of teachers working in modern classrooms. Many participants felt infantilized by their school boards for creating learning opportunities that were unhelpful and overly simplistic for educators. Teachers commented that most professional development was conducted in school classrooms and were presented using PowerPoints led by speakers who typically did not have any experience with teaching. Some teachers expressed frustration with this format, and shared their criticisms toward the ministry for their lack of faith in teachers,

"I think a lot of our professional development, we utilize individuals who aren't teachers and don't understand what the workload might be, or how to manage that workload [...] We know

what we want, we know what we think is important [...] but we feel like we're not trusted to do that professional development [...]" (Participant 2).

"I wish there was more trust in teachers to share what they learn, what they think works, what they have trouble with so that we can genuinely help one another and help the students—that's why we're there" (Participant 4)

Another criticism highlighted by teachers about current professional development programs included the inflexibility of 'scripted', manufactured content. Participants interpreted these meetings as propaganda developed by their school boards to 'push' a certain agenda on them. Participant 4 described this procedure as "anti-wellness", which is best supported by a comment made by Participant 3,

"So, the [school] board has said to the administrators, 'Here's your script, do this script', and that's what we get, we get scripted, and we have no opportunity within that, or very limited opportunity and very, very structured in order to have really any kind of open discussion about the efficacy of what we're doing"

This further reflected the challenges experienced by teachers when attempting to provide feedback to management about their professional development experiences. Participants shared that they typically did not know and were uninformed about the specific people who managed and led these professional development presentations. Some schools designated support staff to lead these presentations, while others appointed this role to several high-level members of administration. Unsurprisingly, this led to some participants describing their reservations about voicing their opinions in fear of being reprimanded,

"The feeling that you can't express your true opinions and feelings about your job for fear of reprisal [...] that kind of really limits the room for [...] a lot of people for growth, for professional growth" (Participant 3).

The same participant also shared their doubts about whether this input would even lead to substantive changes,

"[administration would] pass it down, top down, in a very scripted way which does not allow, in fact [...] any kind of feedback from the teachers back up" (Participant 3)

Desired topics of professional development. Overall, educators wanted to see more trauma-informed professional development centered around how to better support the mental health of educators, students and information related to the roles of their fellow colleagues/other staff members. Participants expressed a great desire for their schools to provide formal training on specific topics related to student safety, such as "ASIST Suicide Prevention Training", "SafeTalk", or "Mental Health First Aid". Teachers believed that the incentive of receiving a certificate for their efforts would act as a positive motivator to sign up for these events.

Other topics of interest also focused on 'how' to implement specific skills in practice, such as in conflict resolution, behaviour management, and when supporting students experiencing grief. This was further supported by interest in learning more about the science of different mental health conditions (like depression and anxiety), and the 'warning signs' of these disorders.

Desired modalities of professional development. An overwhelming number of teachers desired more action-oriented professional development that was offered in small-group, in-person settings. Many participants believed that teacher-led, discussion-based approaches supplemented by quick 'takeaway' digital guides were the most effective in strengthening collegial bonds and diverse learning. Within these in-person, teacher-led sessions, educators wanted opportunities to

ask questions, do role-play, and receive feedback from their peers on whether they could accurately apply the knowledge they were learning. They also wanted other school staff members to be involved with these training courses and to strengthen their workplace relationships with other departments. Integrations for movement and creativity were further highlighted as important facets increasing participant involvement.

Other desired forms of professional development also included asynchronous forms of learning, such as through online learning modules, podcasts, videos, and premade digital 'guides' created by teachers on specific skills or topics. Teachers shared that the option for online learning was helpful for individuals who could not afford to attend in-person sessions. However, these individuals underlined the need for these options to be quick, simple and practical for use. Educators preferred for these resources to be offered on one, centralized site, to reduce the influx of mail entering their inboxes.

Chapter 5: Discussion

The present study aimed to investigate the current knowledge, understandings, and beliefs of professional development and mental wellness for Canadian teacher candidates and associate teachers. The purpose of this research was to 1) determine the barriers and protective factors that impact educator mental health; and 2) identify methods to enhance mental-health-related professional development to support teacher wellness. With the understanding that 70% of Canadian teachers report struggling with mental health issues (Canadian Teachers' Federation, 2020a), the importance of addressing these concerns is essential for the future trajectory of teachers, and subsequently, the quality of Canadian education.

Expectations of Sustaining Wellness in Educational Spaces

Results from the data revealed that teachers who scored higher in psychological distress were more likely to work more days at a reduced level of productivity. This suggests that teachers with poorer mental health may be underperforming in their roles due to increased psychological demand. Kidger et al.'s (2016) study found similar findings, as poor teacher wellness was associated with a 60% or greater reduction in self-reported productivity. The implications of this relationship become more salient when understanding the negative effects that teacher mental health and teacher presenteeism could have on student mental health outcomes. For example, work by Harding et al. (2019) showed that associations between teacher presenteeism, student wellbeing and psychological difficulties existed in a sample of 4398 combined secondary-school students and educators across the United Kingdom. And although no causal relationships were found in this study, other researchers have speculated that teacher presenteeism may play a mediating role between teacher and student mental health (Harding et al., 2019; Oberle & Schonert-Reichl, 2016). These findings further support the theory of planned behaviour as a framework for understanding how teacher self-efficacy intersects with their mental health and productivity at the workplace, as educators who are unwell are less likely to feel confident and capable of providing optimal care for their students (Hellmich et al., 2019; Capone & Petrillo, 2020).

Pressures for educators to adopt the role of mental health supporters, and with little preparation and few resources, were also captured in the qualitative responses found in this study. Participants felt compelled to overexert themselves for their students, despite having limited mental health training and insufficient mental health resources available to them at their schools. Teachers have shown repeated patterns of embracing unofficial roles as mental health workers to bridge the gaps that exist in the education system (Cruz et al., 2021). In the context of rural or low-

income neighborhoods, schools with limited financial resources will often rely on their educators to assume these responsibilities (Bass, 2019). As a result, teachers may feel unable to meet the mental health needs of their students, and instead, internalize these 'failures' as a reflection of professional incompetency. Such feelings of helplessness often harm the quality of care provided by teachers, as their reduced sense of self-efficacy (Betoret, 2009; Brouwers & Tomic, 2000; Davis et al., 2022) and emotional capacity to support students (Ruzek et al., 2016; Rickert & Skinner, 2022) become dwindled. In contrast, teachers who struggle with fewer mental health issues have been shown to be more involved in the academic instruction of their students (McLean et al., 2018) and supportive of their students' academic journeys (Klusmann et al., 2022).

Expectations embedded within the ethical teaching standards of Ontario educators were also found to challenge the professional boundaries of participants. Personal interpretations of these standards fostered a lack of clarity and work-life balance for educators that had no clear 'limits' for their role in the classroom. Thus, creating tension and uncertainty pertaining to the degree of involvement 'needed' by educators in their students' lives. Discussions related to the dissemination of 'care ethics' in Canadian educational contexts were further explored by Langford and Richardson (2017), who found that early childhood educators in Ontario determined 'good' care as only in contrast to the 'absence' of care in educational spaces (i.e., 'bad' care). Under this notion, the virtuous teacher is assumed to be one that puts the care of their students before their own. Consequently, placing unrealistic pressures on teachers to constantly perform in their role. As 81% of Canadian teachers reported to support this sentiment (Canadian Teachers' Federation, 2022), clearer thresholds for the responsibilities of educators must be defined to preserve the sustainability of their work in the profession. Therefore, further supporting the need to prioritize teacher autonomy, social relatedness and professional competency as important markers in the

facilitation of a healthy work environment within educational settings according to the theory of self-determination (Ryan et al., 2008).

Unsurprisingly, teachers become critical of the managerial bodies that govern their profession due to the hardships they endure in their job. A recent study conducted by the Canadian Teachers' Federation (2020a) found that 60% of Canadian teachers did not feel supported by the Ministry of Education, which was echoed in the responses provided by participants of this research. Teachers felt resentful towards the educational system and confused about the messaging they received about their management's role in supporting their mental wellness. In the words of one participant,

"[Management will tell you] 'Oh, you need to be well, but we'll give you nothing" (Participant 5).

This data suggests that positioning teacher wellness within its wider neoliberal context is necessary for understanding the pressures and frustrations that Canadian educators experience in maintaining their wellbeing, as suggested by Simmons et al. (2019). According to Acton & Glasgow (2015), the concept of teacher wellness has become a privatized matter in schools. Educators are expected to be solely responsible for their own wellness, regardless of the various socio-economic factors that commonly prevent access to healthcare, such as the cost for services (Badr, 2022; Acton & Glasgow, 2015; Melanson, 2023). In one example, a teacher candidate shared their experience of trying to access resources during their final year of their training,

"From a student perspective, I remember being very fortunate in the first year where apparently I was making not quite enough money in order for me to actually get some financial aid from the school; however, I had gotten a couple of raises with my job, but then, and then apparently that then put me out of the ballpark for needing any help [...] And so I had to go see a

speech-language pathologist, but speech-language pathology, chiropractor, massage therapy and physiotherapy all count under the same umbrella, so, like, I tapped out of all benefits related to that within a month" (Participant 8).

As demonstrated, challenges related to financial insecurity and insufficient employee benefits can further prevent Canadian teachers from receiving necessary care needed to maintain aspects of their wellness. This is reflective of work conducted by Steele et al. (2007), who discovered that up to 16% of Canadians are unable to access mental health care due to barriers related to accessibility, availability, and acceptability of services.

These factors become even more complicated when considering the social stigma related to accessing mental health care in Canada. Work by Milot (2019) found that up to 23% of Canadians held some degree of stigma towards the use of mental health services offered by their employee assistance plans (EAPs). In the same study, greater mental health stigma and shame related to receiving EAP counselling services predicted a reduced likelihood of EAP use for Canadians (Milot, 2019). Similar outcomes have been reflected from other international studies, as Australian teachers were shown to be avoidant towards utilizing mental health EAP services in fear of seeming incompetent to their peers (Hine et al., 2022). Therefore, it may be beneficial to emphasize less formalized types of mental health support for educators within their workplaces – such as through collegial support.

Relationships with other educators, colleagues and staff members were reported to be an essential resource used by Canadian teachers to manage their wellness in the workplace. Strategies to increase collegial support were identified in various ways, such as sharing common spaces designated for teachers (i.e., staff rooms) and providing general encouragement or advice when others felt overwhelmed. These purposeful, support-seeking behaviours helped teachers increase

their professional knowledge related to teaching (ex. workload management, lesson planning, behaviour management, etc.), foster a greater sense of collaboration in the workplace, and support their confidence in exercising control over aspects of their teaching practice – which are all reflective of the three central tenets of self-determination theory related to competence, relatedness, and autonomy, respectively (Ryan et al., 2008).

Evidence from the literature has supported these findings as well, as the role of strong collegial bonds between educators has been shown to promote wellness across teachers (Hine et al., 2022; Simmons et al., 2019; Hobson & Maxwell, 2017; Johnson et al., 2018). Most support-seeking behaviour occur between teachers of the same role or department, as the similarities of their roles and responsibilities provide instrumental support through these social interactions (Kaihoi et al., 2022). Such social networks have been suggested to predict levels of burnout and stress experienced by individual teachers, as a 'contagion effect' amongst these relationships have been demonstrated in the past (Kaihoi et al., 2022; Kim et al., 2017; Meredith et al., 2020). As such, more opportunities to facilitate greater collegial interactions between teachers should be considered to further support positive educator mental health.

The role of management was further demonstrated to significantly impact educator wellness, as participants who felt more supported by their management in this study were less likely to score highly in psychological distress. Consistent with outcomes found in other projects, supportive leadership has been shown to increase self-efficacy (Aelterman et al., 2007), communication (Dimitropoulos et al., 2022), and wellness in educators (Jerrim et al., 2020). Stronger relationships with administration also encourage more teacher involvement within school climates (Hodges, 2018), as teachers feel more empowered and valued in their work (Ekornes, 2015). This may be demonstrated through offers made by administration to reduce teacher stress,

such as through the facilitation of time and spaces to engage in self-care activities during the school day (Gearhart et al., 2022).

Desired Enhancements to Current Professional Development Practices

Participants of this project voiced their desires for more positive involvement by their management, especially in the facilitation of mental-health-related professional development. Teachers believed that these learning opportunities were not engaging, relevant, or reflective of their needs, as feedback about these events was commonly disregarded. These beliefs reflect Ajzen's (1991) Theory of Perceived Control, as teachers held more negative attitudes toward their professional development opportunities due to a lack of perceived control creation of these activities. Instead, the distanced bureaucratic control over the professional development of teachers restricts the very attributes it seeks to enhance, as educators may feel pressured to 'conform' to the norms of their administration, rather than to rely on their own autonomous beliefs (Sandholtz & Scribner, 2006). In contrast, professional development opportunities that invite equitable coparticipation between leadership and educators encourage greater involvement and investment from both sides toward their shared goals (Song, 2008). As such, it is suggested that teachers and leadership should work together to co-create professional development opportunities that respect the objectives of both perspectives for maximum effectiveness.

A lack of experiential and diverse learning within educator professional development also discourages teachers from wanting to engage in critical thinking, further diminishing the quality of their work with students (Smylie, 1995; McNeil, 2000). Participants from the project shared that they grew tired of the limited forms that current professional development practices were being delivered through, such as via slideshows, email threads and hefty document guides. This passive approach to learning was not effective for many educators, as one person shared,

"[...] for me, personally, reading about my mental health is not helping my mental health. I'm an action-oriented person so for me to have positive mental health it's great for me to talk to people, to do something fun with people, to do something different that is the opposite of work, right?" (Participant 6).

The need for varied styles of professional development would help promote better engagement from educators in the topics explored in these experiences. Both online and offline professional development opportunities have shown similar, positive impacts on educator teaching beliefs and practice measures (Fishman et al., 2013). Affordances provided by each delivery style of professional development have been suggested by Moon et al. (2014) to help absolve barriers related to time (i.e., asynchronous online resources), diverse learning styles (i.e., ability to move at own pace through online activities), collegiality (i.e., in-person opportunities for connection) and varied discussion (i.e., in-person conversations that highlight different viewpoints).

Alternative delivery methods of professional development communicated by participants also included modalities such as: podcasts, instructional videos, interactive webinars, discussion-based panels, brochures, exercise-based learning, and quick strategy sheets with specific phrases and/or phrases to be used across different scenarios with students. The challenge here is that there is currently limited research examining the effectiveness and implementation of these different professional development modalities (Kidd, 2012; Liu, 2010). A systematic review conducted by Bragg et al. (2021) found that online professional development programs led to improvements in teachers' knowledge of content, instructional practice, beliefs about teaching, and overall self-efficacy. Design elements that were most effective for optimizing the learning experience include those that promoted reflective thinking (ex. 'notebook' work), participant engagement (ex. discussion boards), practical learning activities (ex. case-vignettes), and goal-oriented

programming (Bragg et al., 2021). But despite these findings, it must be acknowledged that teachers are usually expected to engage in such modes of professional development outside of work hours and on their own time, thus creating more barriers to their work-life balance (Ministry of Education in Ontario, 2023).

Exploratory work by Lutrick and Szabo (2012) found that five common qualities were necessary for effective in-person professional development, such that these opportunities should be collaborative, ongoing, data-driven, interest-driven in design and interactive. Other studies have revealed similar results, therefore, highlighting the need to be conscious of these factors when designing effective offline professional development opportunities for educators (Darling-Hammon et al., 2009; Beavers, 2009; Ramnarain et al., 2022; Sancar et al., 2021). However, it is important to note that in-person professional development is only offered during three "Professional Development" days to the near 130,000 Ontario teachers in the province, as stated in the Policy/Program Memorandum (PPM) 151 (Ministry of Education in Ontario, 2023). The PPM states that these mandatory PA days will focus on the three priority areas of Literacy and Mathematics, Curriculum Implementation, and Student Well-being, School Safety and Violence Prevention (Ministry of Education in Ontario, 2023). Thus, there is very limited paid time allocated for student mental health and none for teachers' well-being in current PD opportunities for Ontario educators.

Lastly, it was found that teachers wanted professional development that was traumainformed in nature, and promoted attitudes related to inclusive education. Teachers reported
routinely supporting students with experiences of trauma but lacked sufficient knowledge of
mental health resources or solutions to support students through instances of crisis, tragedy and
hardship, despite being able to recognize these symptoms of distress. One teacher reported,

"I think that's a big part of people's mental health in the classroom is that there's not really any consistency on how, like, our [students] that are struggling the most are [...] taken care [of]" (Participant 9).

This is consistent with recent studies reporting a greater need for trauma-informed professional development in modern classrooms (Brunzell et al., 2019; Whitaker et al., 2019). Educators who engage in trauma-informed professional development demonstrate positive improvements related to increased empathy, confidence, teacher leadership, and person-centered approaches to learning and collaboration (Douglass et al., 2021). However, teacher candidates seem to lack adequate training in trauma-informed approaches (Hobbs et al., 2019; Briggs & Potter, 2004; Ko et al., 2008; Phifer et al., 2016; Mckee & Dillenburger, 2009). To date, only one study has observed the effects of an educational course centered around trauma-and-violence-informed-care for teacher candidates (Rodger et al., 2020). Results from this study suggested that targeted instruction on trauma-and-violence-informed-care positively increased the knowledge, attitudes and self-efficacy of teacher candidates in their final year of schooling.

Limitations

While this exploratory study revealed several insights related to the current state of professional development for Canadian educators and teacher candidates, it is important to address its limitations. Firstly, the results of this study may not be generalizable to the experiences or beliefs of other educators and teaching candidates outside of Ontario, Canada. All participants received or were receiving training from a single teacher education program, which may not reflect the challenges or strengths posed in other programs available in Canada related to professional development and learning. An underrepresentation of teacher candidates in this study's final sample further limits the generalizability of these findings to the needs and beliefs of other

preservice educators. This also raises challenges related to the dissemination of the empirical data, as these findings were mainly reflective of ratings from associate teachers during a busy season of the school year. As such, scores for psychological distress, absenteeism, and presenteeism may not be reflective of educators' trait responses on these constructs.

Limited diversity in the ethnic, cultural, and professional experiences of participants further impacts the generalizability of these findings in a broader, Canadian context. Most participants involved in the sample identified as associate teachers who were Caucasian, working in publicly funded secondary schools and had at least a decade of teaching experience. Our investigation's outcomes may then only be representative of educators who worked with these identities and in school spaces typically in large, urban cities, and therefore, providing little information about the experiences of educators and teacher candidates working in smaller, rural towns.

Strengths

Few studies have prioritized teacher wellness as a significant factor in the creation of healthy and supportive school environments (Kidger et al., 2016; Schaufeli & Buunk, 2002; Oberle & Schonert-Reichl, 2016; Sisask et al., 2014), and even fewer have examined the perspectives of teacher candidates in this framework (Kohli et al., 2022; Squires et al., 2022). As such, a predominant strength of the current study revolves around its focus on the wellbeing of educators and teacher candidates themselves, distinct from inquiries solely focused on the welfare of their students. This unique approach helps address gaps in the current literature related to teacher-centric factors that impact the school climate. Additionally, the utilization of both survey instruments and in-depth interviews further strengthens the methodological rigor of this investigation, which allowed for richer and more nuanced data to be gathered from multiple thematic perspectives. Furthermore, the relatively brief data collection period of this project, spanning approximately

eight weeks from start to finish, provided a valuable snapshot of educator mental health during, argumentatively, the most dynamic period of their school year (i.e., end of the school year, transitioning into their summer break). This specific time frame helped enhance the relevance and interpretability of our findings, as it offered a timely and focused understanding of educator wellness during two distinct temporal periods of their job.

Implications and Future Directions

Altogether, the findings presented in the current study reflect the need for improvements to be made in the promotion of educator wellness and mental-health-related professional development within current Canadian schools. Educators were aware of the personal, social, and structural factors that impact their mental health, but lacked the resources and support from their management to make purposeful changes to their wellness. Instead, teachers developed informal strategies to enhance their mental fitness, which included seeking support from colleagues, peers, and family. Psychological workplace safety was also shown to play a prevalent role in educators' mental health. Teachers felt dissatisfied with the insincere messaging around their mental health by the education system, and demanded greater autonomy in creating diverse, trauma-informed professional development for educators. These desired changes for future professional development included the incorporation of varied topics, activities, and modalities to be used for these resources.

With this in mind, future research in the realm of educator wellness and mental-healthrelated professional development within Canadian schools could focus on several key areas of interest. Firstly, more work examining the effectiveness of specific informal strategies adopted by teachers to enhance their mental fitness could provide valuable insights into identifying best practices that could be formally integrated into school policies and programs. Teachers feel most comfortable learning from others with similar lived work experience (Zinsser et al., 2016). Opportunities to increase greater collaboration amongst educators and incorporate these practices into formal policy could lead to increased job satisfaction (Klassen & Anderson, 2009) and serve as a necessary protective factor against rising teacher attrition (Kutsyuruba et al., 2014) as well. This can help promote greater workplace psychological safety and further inform the development of targeted interventions aimed at fostering supportive and conducive work environments.

Moreover, longitudinal studies tracking the long-term effects of these interventions could further provide valuable evidence for refining and adapting strategies to better support teacher candidates in Canada (Kane & Francis, 2013). Researchers could observe the effects of these trainings when implemented throughout earlier stages of teacher training. This may provide more nuanced information related to when this information should be introduced to Canadian teacher candidates, and how they should be assessed on these constructs (Hibbert et al., 2022). Previous work by Volante and Fazio (2007) found that Canadian teacher candidates in a four-year undergraduate program reported low levels of self-efficacy related to their teaching ability. These ratings were found to be stable across all participants, regardless of their year in the program (Volante & Fazio, 2007). Another study by Lin and Lin (2015) demonstrated that Canadian teacher candidates understood the theoretical principles of inclusive education, but lacked understanding regarding how these theories could be implemented in practical classroom assessments. These results showcase a troubling pattern observed in current professional development training for Canadian teacher candidates. Thus, educational reforms to the current teaching pedagogy of incoming teacher educators must be explored to improve the outcomes of the future Canadian educational system.

Conclusion

Overall, the results of this study revealed the complex and demanding educational landscape of Canadian teachers and teacher candidates in a post-covid world. It was found that educators desired greater changes to the promotion of their mental wellness and design of their current professional development at their schools. Teachers currently lack the autonomy, trust, and opportunities provided by their management and broader educational system to actively improve their mental and professional competencies at work. It is suggested that educators should be granted more power and freedom within the workplace to collaborate with others to strengthen their resiliency and create more effective learning programs for their own professional training. Teacher candidates who are entering the profession should also be encouraged to seek support from fellow colleagues to gather relevant and effective strategies in responding to the adverse, mental demands of the profession. And by equipping them with these necessary supports, it is possible that a reduction in teacher burnout, early attrition, and compassion fatigue in educators may occur in the future of the Canadian education system.

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Appendix A

Recruitment Email Script for Participants

Subject Line: Invitation to Participate in Research about Teacher Wellness and Professional Development

Hello,

You are being contacted because you are listed as an "Active" Associate Teacher or Teacher Candidate at the Faculty of Education, Western University.

Our research team in the Faculty of Education is exploring different perspectives about teacher wellness, inclusion, and knowledge about supporting students facing difficult experiences. Importantly, we want to hear from you about what your needs are in terms of professional development and the types of resources that would be most useful to you in this context.

The survey will take approximately 30 to 45 minutes to complete. It also does not need to be completed in one sitting. Should you be interrupted while completing it or need to come back to it later, you can exit out and continue from where you left off at any time. You may skip any questions you do not want to answer.

In addition, you will be asked to indicate your interest in participating in an online Zoom interview to be scheduled at a time convenient for you, on these topics. The interview will take approximately 30 to 60 minutes to complete. Again, you may skip any questions you do not want to answer.

If you are interested in learning more, please read the attached Letter of Information and Informed Consent or click on the link below to access the letter of information and the pre-test survey link.

https://uwo.eu.qualtrics.com/jfe/form/SV_9t20dX8ArfKpfkG

If you have any questions about the details of this study, please contact our Principal Investigator, Dr. Susan Rodger at srodger2@uwo.ca.

Thank you,

The Research Team,

Dr. Susan Rodger, Dr. Jacqueline Specht, and Dr. Kathryn Hibbert, Faculty of Education, Western University, -Annie Beatty, Sybil Chan, Lisa Reynolds, Paige Walker, Katherine Reurink, MA & PhD students and Clare Tattersall, Faculty of Education, Western University

Appendix B

Letter of Information and Informed consent for Current Beliefs Survey

Exploring and Attending to the Wellness Needs of Teachers in a Trauma and Violence- Informed Care Framework

The work of teachers is increasingly complex. The effects of this work and current knowledge and attitudes and the possibilities for professional development and support in the areas of teacher wellness, inclusion, and working with students who have difficult experiences are being explored. As an Associate Teacher or Teacher Candidate in the B.Ed. program at Western University, you are being invited to participate in a survey about teacher wellness. The questions asked in this survey will ask you about your wellness and invite you to share what types of professional development related to teacher wellness that you would be interested in receiving (such as specific topics and format). We appreciate your interest in this work. The survey will take approximately 30 to 45 minutes to complete. It also does not need to be completed in one sitting. Should you be interrupted while completing it or need to come back to it later, you can exit out and continue where you left off. You may skip any questions you do not want to answer.

If you decide to withdraw from the study, you may do so at any time by exiting the survey window. Due to the anonymous nature of your data, once your survey responses have been submitted, the researchers will be unable to withdraw your data.

At the end of the survey, you will be asked to indicate your interest in participating in an online Zoom interview to be scheduled at a time convenient for you on these topics. The interview will take 30 to 60 minutes. You may skip any questions you do not want to answer.

You will also have the opportunity to indicate your interest in participating in the consultation group to develop resources for teacher wellness. Your participation in this research is voluntary and will not impact your relationship with the Faculty of Education in any way.

Risks & Benefits

There are no known risks to participating in this study, but some questions may be sensitive in nature. You may decline to answer any or all questions without penalization. Should you feel any level of distress, support is available through Reach Out, a confidential, 24h information, support, and crisis service (1-866-933-2023).

While there are no direct benefits to participating, study data will be utilized to develop and present professional development opportunities to teacher candidates and associate teachers affiliated with the Faculty of Education at Western University. Additionally, free online resources will be available to anyone starting from July 2023 on the Faculty of Education website.

Confidentiality

The information collected will be used for research purposes only, and neither your name nor any identifying information will be used in any publication or presentation of the study results. All survey information collected for the study will be kept confidential in the possession of Western's research; only whole group findings and themes will be shared.

Anonymized survey data will be made available in summary form to the Consultation Group (Associate Teachers and Teacher Candidates who volunteer their time), who will be involved in planning and developing resources to support teacher wellness.

Qualtrics is an online survey tool that will be used to collect responses to the survey questions, The server is located in Ireland, here is the link to the <u>Qualtrics privacy policy</u>. Although Qualtrics operates to the highest standard for data privacy and security, no information shared over the internet is fully guaranteed in terms of confidentiality.

All data will be retained for a minimum of 7 years. Representatives of Western University's Non-Medical Research Ethics Board may require access to your study-related records to monitor the conduct of the research study. The results of the study will be disseminated through publication in a peer reviewed journal and/or through presentation at relevant conferences. You do not waive any legal rights by consenting to this study.

There is no cost to participate in this study.

Compensation

For each component of the study that you are involved in (reading this invitation, participating in the survey, and/or participating in the interview, and/or participating in the consultation group), you will be given the opportunity to enter a draw for one of two iPads as our appreciation of your time and expertise. This draw will take place on June 30th, 2023. We anticipate between 150 and 250 entries in total.

What if I have questions?

If you have any questions about the conduct of this study or your rights as a research participant, you may contact the Office of Human Research Ethics at The University of Western Ontario at 519-661-3036 or ethics@uwo.ca.

If you have any questions about this study, please contact our Primary Investigator, Dr. Susan Rodger (519-661-2111, ext. 88605 or at srodger2@uwo.ca). This letter is yours to keep for future reference.

At the end of the survey, you will be asked to provide your first name and email address if you are interested in being contacted to participate in an interview or in the consultation group. If you wish to be entered in a draw for one of two iPads, submission of the survey indicates your consent to participate in the raffle. Your name and email address will not be associated with the survey data.

We would like to extend our sincerest gratitude for your willingness to consider participating in our research. Thank you.

Sincerely,

The Research Team, Dr. Susan Rodger, Dr. Jacqueline Specht, and Dr. Kathryn Hibbert, Faculty of Education, Western University, Annie Beatty, Sybil Chan, Lisa Reynolds, Paige Walker, Katherine Reurink, MA & PhD students and Clare Tattersall, Faculty of Education, Western University

Click here to access the survey: https://uwo.eu.qualtrics.com/jfe/form/SV_9t20dX8ArfKpfkG

Appendix C Ethics Approval from the Research Ethics Board



Date: 21 April 2023

To: Dr. Susan Rodger

Project ID: 122070

Study Title: Exploring and Attending to the Wellness Needs of Teachers in a Trauma and Violence Informed Care Framework

Short Title: Teacher Wellness

Application Type: NMREB Initial Application

Review Type: Delegated

Full Board Reporting Date: 05/May/2023 Date Approval Issued: 21/Apr/2023 11:14 REB Approval Expiry Date: 21/Apr/2024

Dear Dr. Susan Rodger

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed and approved the WREM application form for the above mentioned study, as of the date noted above. NMREB approval for this study remains valid until the expiry date noted above, conditional to timely submission and acceptance of NMREB Continuing Ethics Review.

This research study is to be conducted by the investigator noted above. All other required institutional approvals and mandated training must also be obtained prior to the conduct of the study.

Documents Approved:

Document Name	Document Type	Document Date	Document Version
Teacher Wellness_Interview Prompts	Interview Guide	23/Feb/2023	1
email invitation _Initial_April 14_rev1_clean	Recruitment Materials	14/Apr/2023	2
Reminder_Email_ Teacher Wellness_April 14_clean	Recruitment Materials	14/Apr/2023	2
Teacher Wellness LOI_April 14_Survey_clean	Implied Consent/Assent	14/Apr/2023	2
verbal consent script -April 14_rev1_clean	Verbal Consent/Assent	14/Apr/2023	2
Teacher_Wellness_Survey_April 14_rev	Online Survey Document	14/Apr/2023	2
Teacher Wellness LOI_April 14_Consultation & Interview_Clean	Implied Consent/Assent	14/Apr/2023	1

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario

Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario. Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are

presented to the REB. The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.

Please do not hesitate to contact us if you have any questions.

Sincerely,

Ms. Katelyn Harris , Research Ethics Officer on behalf of Dr. Randal Graham, NMREB Chair

Note: This correspondence includes an electronic signature (validation and approval via an online system that is compliant with all regulations).

Appendix D Letter of Information and Informed Consent for Interviews

Recruitment Email Script for Interviews

Hello,

Thank you so much for completing the Teacher Wellness Survey and for agreeing to be contacted about an interview. My name is [Research Assistant name here], and I am a Research Assistant on this project.

I would like to find a time for us to meet via Zoom, if you are still interested. At that time, I will go over the Letter of Information and Consent, which will give you all the details about what to expect, your rights as a research participant, and the supports available to you. This will take 5-10 minutes, and I am attaching it here for your review.

If you decide to go ahead with the interview, that will take another 30-60 minutes. Here are some suggested times to get together. Once we find a day and time that works for both of us, I will send you a Zoom link.

I am available anytime from...

- [List availabilities here]
- [List availabilities here]
- [List availabilities here]
- [List availabilities here]

Thanks again for your willingness to consider being interviewed for this project. We really appreciate it, and your participation is valued.

Sincerely,

[Research Assistant name here]
Research Assistant
Teacher Wellness Project

Appendix E Letter of Information and Informed Consent for Interviews

Exploring and Attending to the Wellness Needs of Teachers in a Trauma and Violence- Informed Care Framework

The work of teachers is increasingly complex. The effects of this work and current knowledge and attitudes and the possibilities for professional development and support in the areas of teacher wellness, inclusion, and working with students who have difficult experiences are being explored. As an Associate Teacher or Teacher Candidate in the B.Ed. program at Western University, you are being invited to participate in a survey about teacher wellness. The questions the survey asked you about your wellness and invited you to share what types of professional development related to teacher wellness that you would be interested in receiving (such as specific topics and format).

Now we ask for your interest in participating in an online Zoom interview to be scheduled at a time convenient for you on these topics. The interview will take 30 to 60 minutes. You may skip any questions you do not want to answer.

Your participation in this research is voluntary and will not impact your relationship with the Faculty of Education in any way.

Data collection in the Consultation Group meeting and interview will be limited to written products (physical or digital) that are created during the meeting/interview. These products could include professional development ideas, materials, scheduling and presentation notes, or other materials created by participants.

If you decide to withdraw from the study, you have the right to request (e.g., by phone, email or letter mail) withdrawal of information collected about you. If you wish to have your information removed, please let the researcher know and your information will be destroyed from our records. Once the study has been published, we will not be able to withdraw your information.

It is important to note that a record of your participation must remain with the study, and as such, the researchers may not be able to destroy your signed letter of information and consent, or your name on the master list. However, any data may be withdrawn upon your request.

Risks & Benefits

There are no known risks to participating in this study, but some questions may be sensitive in nature. You may decline to answer any or all questions without penalization. Should you feel any level of distress, support is available through Reach Out, a confidential, 24h information, support, and crisis service (1-866-933-2023).

While there are no direct benefits to participating, study data will be utilized to develop and present professional development opportunities to teacher candidates and associate teachers affiliated with the Faculty of Education at Western University. Additionally, free online resources will be available to anyone starting from July 2023 on the Faculty of Education website.

Confidentiality

The information collected will be used for research purposes only, and neither your name nor any identifying information will be used in any publication or presentation of the study results. All interview information collected for the study will be kept confidential in the possession of Western's research; only whole group findings and themes will be shared.

Qualtrics is an online survey tool that will be used to collect contact information for those who agree to participate in the Consultation Group and the interview, and to facilitate an additional entry to the draw. The server is located in Ireland, and here is the link to the Qualtrics privacy policy. Although Qualtrics operates to the highest standard for data privacy and security, no information shared over the internet is fully guaranteed in terms of confidentiality.

If you complete the interview portion, your consent will be necessary in order to directly quote what you share. All data will be retained for a minimum of 7 years. Representatives of Western University's Non-Medical Research Ethics Board may require access to your study-related records to monitor the conduct of the research study. The results of the study will be disseminated through publication in a peer reviewed journal and/or through presentation at relevant conferences. You do not waive any legal rights by consenting to this study.

Cost

There is no cost to participate in this study.

Compensation

For each component of the study that you are involved in (reading this invitation, participating in the survey, and/or participating in the interview, and/or participating in the consultation group), you will be given the opportunity to enter a draw for one of two iPads as our appreciation of your time and expertise. This draw will take place on June 30th, 2023. We anticipate between 15 and 30 entries from people who agree to participate in the interview, in addition to the 150 and 250 entries from survey participants and about 10 more entries from people who wish to be part of the consultation group, 290 estimated in total.

What if I have questions?

If you have any questions about the conduct of this study or your rights as a research participant, you may contact the Office of Human Research Ethics at The University of Western Ontario at 519-661-3036 or ethics@uwo.ca.

If you have any questions about this study, please contact our Primary Investigator, Dr. Susan Rodger (519-661-2111, ext. 88605 or at srodger2@uwo.ca). This letter is yours to keep for future reference.

At the end of the consent to participate in the Consultation Group, you will be asked to provide your first name and email address if you wish to be entered in a draw for one of two iPads. Your name and email address will not be associated with the survey, interview, or Consultation Group data. We anticipate 10-30 entries from those who agree to be interviewed (in addition to the 150-200 entries resulting from survey participants) for this draw.

We would like to extend our sincerest gratitude for your willingness to consider participating in our research. Thank you.

Sincerely,

The Research Team,

Dr. Susan Rodger, Dr. Jacqueline Specht, and Dr. Kathryn Hibbert, Faculty of Education, Western University,

Annie Beatty, Sybil Chan, Lisa Reynolds, Paige Walker, Katherine Reurink, MA & PhD students and Clare Tattersall, Faculty of Education, Western University

Appendix F Sample of Spring 2023 Qualtrics Survey

TVIC and Teach Wellness Module Evaluation 1

Start of Block: Demographics Q77 Use of Quotes. Sometimes, researchers find it helpful to include content from your responses in a report, presentation or poster. By agreeing, you are consenting to allow the researchers to use your written responses to help support a finding. Any identifying information (i.e., your name, the name of your school) will be removed before they are used. It is important to note that this will not impact your participation in the research or in the modules. I understand the above, and I ALLOW the researchers to use my QUOTATIONS as described (1) I do NOT consent the researchers to use my QUOTATIONS (2) Q1 I am a: O Teacher (1) Teacher Candidate (2) Display This Question: *If Q1 = Teacher* Q2 How many years have you been teaching?

Display This Question:
If Q1 = Teacher
*
Q72 How many of those years did you have military-connected students in your classroom? If you aren't sure, provide your best estimate.
Display This Question:
If Q1 = Teacher Candidate
Q12 I am in
First year (1)
Second year (2)
Display This Question:
If Q1 = Teacher
Q17 I am teaching primarily in the following system:
C Elementary (1)
Secondary (2)
Display This Question:
If Q1 = Teacher
*
Q74 Over the course of your teaching career, approximately how many military-connected students have you taught?

Display This Question:
If Q1 = Teacher Candidate
Q18 I am preparing to teach primarily in the following system:
O Elementary (1)
O Secondary (2)
Page Break ————————————————————————————————————

Q14 My gend	er is
040.11	
	you define yourself? ose one answer, or more than one
	Black (2)
	East Asian (3)
	Indigenous (1)
	Latin American (4)
	South Asian (5)
	Southeast Asian (6)
	West Asian (7)
	White (8)
	Other, please specify: (9)
JS *	
Q15 I am	_ years old

Q75 Do you have any personal connection to the Canadian Armed Forces OR another country's military forces? If so, briefly describe. (e.g., "I grew up in a military home" or "My partner is a military service member").
Page Break ————————————————————————————————————

Q16 I have end Please select a		le who are diverse	learners in the fo	llowing ways:				
	Self (1)							
	Family member (2)							
	Friend (3)							
	Co-worker/Co-volunteer (4)							
	In a professional role (e.g., teacher, caregiver, advocate) (5)							
	Not at all (6)							
X→								
Q19								
		None at all (0)	A little (1)	Moderate (2)	Extensive (3)			
How much professional experience have you had working with learners who need more support? (1)		0	0	0	0			
How much <i>personal</i> experience have you had with learners who need more support? (2)		0	0	0	0			
End of Block: I	Demographics							

Q102 Please read the following statements and indicate how **strongly** you agree or disagree with each one. All items are to be rated on the 6-point scale ranging from *Strongly Disagree* (1) to *Strongly Agree* (6).

Please complete the following items. If you would prefer not to answer any item, you are permitted to skip it.

	Strongly Disagree 1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	Strongly Agree 6 (6)
Students should rely on the teacher to evaluate their work. (1)	0	0	0	0	0	0
Giving grades on assignments is a good strategy for getting students to work. (2)	0	0	0	0	0	0
The ability to learn is something people have a certain amount of and there isn't much they can do to change it. (3)	0	0	0	0	0	0
Students cannot be counted upon to evaluate their own work accurately. (4)	0	0	0	0	0	0
To assess students' understanding of a core concept, it is important to observe and listen to their conversations as they work. (5)		0	0	0		

The ability to learn is something						
that remains relatively fixed throughout life. (6)	0	0	0	0	0	0
Good teachers give students choices in their learning tasks. (7)	0	0	\circ	\circ	0	0
It is important for teachers, not students, to direct the flow of a lesson. (8)	0	0	\circ	0	0	0
Students who produce correct answers have a good understanding of core concepts. (9)	0	0	0	0	0	0
In core subjects, students should construct many of their own examples. (10)	0	0	0	0	0	0
Good instruction relates learning material to things students are interested in outside of school. (11)	0	0	0	0	0	0

It is important for students to complete assignments exactly as the teacher planned. (12)	0	0	0	0	0	0
There will always be some students who simply won't "get it" no matter what I do. (13)	0	0		0	0	0
Concerns about getting the correct answer are likely to interfere with concept development and learning. (14)	0	0	0	0	0	0
The more students are concerned about grades and performance, the more they learn. (15)	0	0	0	0	0	0
All of my students would do well if they worked hard. (16)	0	0	\circ	0	0	0
In every class I find students to whom I just can't teach core concepts. (17)	0	0	0	0	0	0

There isn't much I can do about how much ability I have in mathematics, science and language arts. (18)	0	0	0	0	0	0
It is important for teachers to maintain complete control over lessons. (19)	0	0	0	0	0	0
It doesn't matter whether students get the right answer as long as they understand the concepts inherent in the problem. (20)						
	eliefs About Learn The K-6 Mental H				(BLTQ)	
Q77 The followi question, please	ng questions ask a e select the numbe e all of the follow	about how you er that best de	ı have been fee scribes how of	eling during the	is feeling.	
Q78 During the	past 30 days, abo	out how often	did you feel			

	All of the time (1)	Most of the time (2)	Some of the time (3)	A little of the time (4)	None of the time (5)
nervous? (1)	0	\circ	0	0	\circ
hopeless? (2)	0	\circ	\circ	\circ	\circ
restless or fidgety? (3)	0	\circ	0	\circ	\circ
so depressed that nothing could cheer you up? (4)	0	\circ	\circ	\circ	0
that everything was an effort? (5)	0	0	\circ	0	0
worthless? (6)	0	\circ	\circ	\circ	\circ

Q79 The last 6 questions asked about feelings that might have occurred during the past 30 days. Taking them altogether, did these feelings occur <u>more often</u> in **the past 30 days** than is usual for you, <u>about the same</u> as usual, or <u>less often</u> than usual?

If you <u>never</u> have any of these feelings, select the associated option.

	A little more often than usual (1)	A bit more often than usual (2)	A lot more often than usual (3)	About the same as usual (4)	A little less often than usual (5)	A bit less often than usual (6)	A lot less often than ususal (7)	None of the time (8)
These feelings have occurred (1)	0	0	0	0	0	0	0	0

End of Block: The K-6 Mental Health Screening Tool - 6 item
Start of Block: The K-6 Mental Health Screening Tool (part 2) - branched
Q80 The next few questions are about how these feelings may have affected you in the past 30 days .
*
Q81 During the past 30 days , how many days out of 30 were you <u>totally unable</u> to work or carry out your normal activities because of these feelings? Please enter a number between 0 and 30.
*
Q82 Not counting the days you reported in response to the previous question, how many days in the past 30 were you able to do only half or less of what you would normally have been able to do, because of these feelings? Please enter a number between 0 and 30.
*
Q83 During the past 30 days , how many times did you see a doctor or other health professional about these feelings? Please enter a numerical value. If you have not seen a doctor or other health professional, please enter "0" in the box below.

Q84

	All of the time (1)	Most of the time (2)	Some of the time (3)	A little of the time (4)	None of the time (5)
During the past 30 days, how often have physical health problems been the main cause of these feelings? (1)		0	0	0	
IOTE: Please do ame, school nam	any additional con not include any id ne, city of residend	entifiable inform	ation in the respo	onse box below (i.e	e., first/last
NOTE: Please do ame, school nan	not include any id	entifiable inform	ation in the respo	onse box below (i.e	e., first/last
NOTE: Please do	not include any id	entifiable inform	ation in the respo	onse box below (i.e	e., first/last
NOTE: Please do ame, school nammpty.	not include any id	entifiable inform	ation in the respo	onse box below (i.e	e., first/last

Q1 People who work in education, health care, human services, and related fields have a wide variety of beliefs about their students, their jobs, and themselves. The term "student" is interchangeable with "client," "person," "resident," "patient," or other terms to describe the person being served in a particular setting. **Trauma-informed care** is an approach to engaging people with trauma histories in education, human services, and related fields that recognizes and acknowledges the impact of trauma

on their lives. For each item, select the circle along the dimension between the two options that best represents your personal belief during the past two months at your workplace.

Please complete the following items. If you would prefer not to answer any item, you are permitted to skip it.

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Students' learning and behavior problems are rooted in their behavioural or mental health condition.	0				0	0		Students' learning and behavior problems are rooted in their history of difficult life events.

Display This Question:

If Q1 = Teacher Candidate

Q100 People who work in education, health care, human services, and related fields have a wide variety of beliefs about their students, their jobs, and themselves. The term "student" is interchangeable with "client," "person," "resident," "patient," or other terms to describe the person being served in a particular setting. **Trauma-informed care** is an approach to engaging people with trauma histories in education, human services, and related fields that recognizes and acknowledges the impact of trauma on their lives. For each item, select the circle along the dimension between the two options that best represents your personal belief during the last two months of your last practicum.

Please complete the following items. If you would prefer not to answer any item, you are permitted to skip it.

1 2 3 4 5 6 7

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Students' learning and behavior problems are rooted in their behavioural or mental health condition.				0	0			Students' learning and behavior problems are rooted in their history of difficult life events.

Q2 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Focusing on developing healthy, healing relationships is the best approach when working with people with trauma histories.	0	0	0	0	0	0	0	Rules and consequences are the best approach when working with people with trauma histories.

Q3 Click to write the question text

1 2 3 4 5 6 7

Being very upset is normal for many of the students I serve.	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	It reflects badly on me if my students are very upset
Q4 Click to v	vrite the quantum 1	estion text 2 2 (2)	3 (3)	4 4 (4)	5 5 (5)	6 (6)	7 7 (7)	
I don't have what it takes to help my students.	0	0	0	0	0	0	0	I have what it takes to help my students.
Q5 Click to v	vrite the qu	estion text 2	3	4	5	6	7	

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
It's best not to tell others if I have strong feelings about the work because they will think I am not cut out for this job.		0	0	0	0			It's best if I talk with others about my strong feelings about the work so I don't have to hold it alone.

Q6 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
The students were raised this way, so there's not much I can do about it now.	0		0				0	The students were raised this way, so they don't yet know how to do what I'm asking them to do.

Q7 Click to write the question text

•	•						
	1	2	3	4	5	6	7

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Students need to experience real life consequences in order to function in the real world.	0	0	0	0	0	0	0	Students need to experience healing relationships in order to function in the real world.

Q8 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
If students say or do disrespectful things to me, it makes me look like a fool in front of others.	0	0	0	0	0	0	0	If students say or do disrespectful things to me, it doesn't reflect badly on me.

Q9 Click to	write the	question text
-------------	-----------	---------------

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
I have the skills to help my students.	0	0	0	0	0	0	0	I do not have the skills to help my students.

Q10 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
The best way to deal with feeling burnt out at work is to seek support.	0	0	0	0	0	0	0	The best way to deal with feeling burnt out at work is not to dwell on it and it will pass.

Q11 Click to write the question text

						1
1	2	3	4	5	6	7

Many students just don't	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	All students
want to change or learn.	0	0	0	0	0	0	0	want to change or learn.
Q12 Click to	write the qu	uestion text 2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Students are often not yet able or ready to take responsibility for their actions. They need to be treated	t y y	0	0	0	0	0	0	Students need to be held accountable for their actions.
flexibly and as individuals.								
flexibly and as		lestion text						

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
I realize that my students may not be able to apologize to me after they act out.			0	0	0	0		If students don't apologize to me after they act out, I look like a fool in front of others.
Q14 Click to	1	2	3	4	5	6	7	
Each day is uniquely stressful in this job.	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	Each day is new and interesting in this job.

The fact that I'm	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	Sometimes I think I'm
impacted by my work means that I care.	0	0	0	0	0	0	0	too sensitive to do this kind of work.
Q16 Click to								I
	1	2 (2)	3	4	5	6	7	
Students have had to learn how to trick or mislead others to get their needs met.	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	Students are manipulative so you need to always question what they say.

Page Break —

Q17 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Helping a student feel safe and cared about is the best way to eliminate undesirable behaviours.	0	0		0	0	0	0	Administering punitive consequences is the best way to eliminate undesirable behaviours.

Q18 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
When I make mistakes with students, it is best to move on and pretend it didn't happen.	0	0	0	0	0	0	0	When I make mistakes with students, it is best to own up to my mistakes.

Q19 Click to write the question text

1	2	3	4	5	6	7

The ups and downs are part of the work so I don't take it personally.	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)		The inpredictability and intensity of the work makes me think I'm not fit for this job.
Q20 Click to	write the q	uestion tex	t					
	1	2	3	4	5	6	7	
The most effective helpers find ways to toughen up, to screen out the pain, and not care so much about the work.	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	The most effective helpers allow themselves to be affected by the work, to feel and manage the pain, and to keep caring about the work.
Q21 Click to	write the q	uestion tex 2	at 3	4	5	6	7	

Students could act better if they really wanted to.	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	Students are doing the best they can with the skills they have.
Q22 Click to	write the q 1 1 (1)	uestion text	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
students with respect and kindness from the start so they know I care.	0	0	0	0	0	0	0	It's best to be very strict at first so students learn they can't take advantage of me.
Q23 Click to	write the q	uestion text	t t	4	5	6	7	

Healthy relationships with students are	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	People will think I have poor boundaries
the way to good student outcomes.	0	0	0	0	0	0	0	if I build relationships with my students.
24 Click to v								
24 Click to v	vrite the qu 1 1 (1)	uestion text 2 2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	

Q25 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
It's because I am good at my job that the work is affecting me so much.	0	0	0	0	0	0	0	If I were better at my job, the work wouldn't affect me so much.

Q26 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Students do the right thing one day but not the next. This shows that they are doing the best they can at any particular time.								Students do the right thing one day but not the next. This shows that they could control their behaviour if they really wanted to.

Q27 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
When managing a crisis, enforcement of rules is the most important thing.	0	0	0	0	0	0	0	When managing a crisis, flexibility is the most important thing.

Q28 Click to write the question text

	1	2	3	4	5	6	7	
If I don't control students' behaviour, bad things will happen to property.	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	As long as everyone is safe, it is ok for students to become really upset, even if they cause
								some property damage.

Display This Question:

If Q1 = Teacher Candidate

Q29 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
I dread going to my placement because it's just too hard and intense.	0						0	Even when my placement is hard and intense, I know it's part of the work and it's ok.

Display This Question:

If Q1 = Teacher

Q108 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
I dread going to my job because it's just too hard and intense.	0	0	0	0	0	0	0	Even when my job is hard and intense, I know it's part of the work and it's ok.

Q30 Click to write the question text

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
How I am doing personally is unrelated to whether I can help my students.	0	0	0	0	0	0	0	I have to take care of myself personally in order to take care of my students.
Q31 Click to	write the q	uestion text	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
If things aren't going well, it is because the students are not doing what they need to do.	0					0	0	If things aren't going well, it is because I need to shift what I'm doing.
Q32 Click to	write the q	uestion text	 t					

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
I am most effective as a helper when I focus on a student's strengths.	0	0	0	0	0	0	0	I am most effective as a helper when I focus on a student's problem behaviours.

Page Break -

Q33 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Being upset doesn't mean that students will hurt others.	0	0	0	0	0	0	0	If I don't control students' behaviour, other students will get hurt.

Display This Question:

If Q1 = Teacher Candidate

Q34 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
If I told my colleagues how hard my placement is, they would support me.	0			0	0	0		If I told my colleagues how hard my placement is, they would think I wasn't cut out for the job.

Display This Question:

If Q1 = Teacher

Q110 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
If I told my colleagues how hard my classroom is, they would support me.	0			0		0	0	If I told my colleagues how hard my classroom is, they would think I wasn't cut our for the job.

Q35 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
When I feel myself "taking my work home," it's best to bring it up with my colleagues and/or supervisor(s).	0	0	0	0	0	0	0	When I feel myself "taking my work home," it's best to keep it to myself.

Q36 Click to write the question text

1	2	3	4	5	6	7

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
It's important that I ask students about basic resources that affect their wellbeing, such as food, clothing, or shelter.		0	0	0		0		Students' personal situation is their own business.

Q37 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Students are a product of their environment and background so I can expect certain students to behave a certain way.							0	It's important to get to know each student to understand their context and how it might shape their behaviour.

Q38 Click to write the question text

1							
1	2	3	4	5	6	7	

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
l encourage students to come and see me when they need to.	0	0	0	0	0	0	0	Students need to be self- reliant and solve their own problems.

Q39 Click to write the question text

	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
When offering to help a student, I always explain various options and what might happen.	0	0	0	0	0	0	0	Students should do what they're asked to do, with no explanation required.

End of Block: ARTIC 35 - Teacher Survey

Start of Block: Psychological Safety in the Workplace

Display This Question:

If Q1 = Teacher

Q20 Please respond to the question below thinking about **your** workplace. A workplace with good **Psychological Support** would be able to state that:

	No (1)	Not really (2)	Somewhat (3)	Quite a bit (4)	Definitely (5)
Our workplace offers services or benefits that adequately address employee psychological and mental health. (1)	0	0	0	0	0
Our supervisors would say or do something helpful if an employee looked distressed while at work. (2)	0	0	0		
Employees feel supported in our workplace when they are dealing with personal or family issues. (3)	0	0	0	0	0
Our workplace supports employees who are returning to work after time off due to a mental health condition. (4)	0	0	0		
People in our workplace have a good understanding of the importance of employee mental health. (5)	0	0			

Display This Question:

If Q1 = Teacher Candidate

Q22 Please respond to the question below thinking about Western University. A professional education program with good **Psychological Support** would be able to state that:

	No (1)	Not really (2)	Somewhat (3)	Quite a bit (4)	Definitely (5)
Our program offers services or benefits that adequately address student psychological and mental health. (1)	0	0	0	0	0
Our professors/supervisors would say or do something helpful if a student looked distressed while at school. (2)	0		0	0	0
Students feel supported in our program when they are dealing with personal or family issues. (3)	0	\circ	0	0	0
Our program supports students who are returning to school after time off due to a mental health condition. (4)	0	0	0	0	0
People in our program have a good understanding of the importance of student mental health. (5)	0	\circ	0	0	0

End of Block: Psychological Safety in the Workplace

Appendix H Beliefs about Learning and Teaching Questionnaire-Revised

Instructions. Please read the following statements and indicate how strongly you agree or disagree with each one. All items are to be rated on the 6-point scale ranging from Strongly Disagree (1) to Strongly Agree (6).

Please complete the following items. If you would prefer not to answer any item, you are permitted to skip it.

	Strongly Disagree 1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	Strongly Agree 6 (6)
Students should rely on the teacher to evaluate their work. (1)	0	0	0	0	0	0
Giving grades on assignments is a good strategy for getting students to work. (2)	0	0	0	0	0	0
The ability to learn is something people have a certain amount of and there isn't much they can do to change it. (3)	0	0	0	0	0	0
Students cannot be counted upon to evaluate their own work accurately. (4)	0	0	0	0	0	0
To assess students' understanding of a core concept, it is important to observe and listen to their conversations as they work. (5)	0	0	0	0	0	

The ability to learn is something that remains relatively fixed throughout life. (6)	0	0	0	0	0	0
Good teachers give students choices in their learning tasks. (7)	0	0	0	0	0	0
It is important for teachers, not students, to direct the flow of a lesson. (8)	0	0	0	0	0	0
Students who produce correct answers have a good understanding of core concepts. (9)	0	0	0	0	0	0
In core subjects, students should construct many of their own examples. (10)	0	0	0	0	0	0
Good instruction relates learning material to things students are interested in outside of school. (11)	0	0	0	0	0	0

It is important for students to complete assignments exactly as the teacher planned. (12)	0	0	0	0	0	0
There will always be some students who simply won't "get it" no matter what I do. (13)	0	0	0	0	0	0
Concerns about getting the correct answer are likely to interfere with concept development and learning. (14)	0	0	0	0	0	0
The more students are concerned about grades and performance, the more they learn. (15)	0	0	0	0	0	0
All of my students would do well if they worked hard. (16)	0	0	0	\circ	\circ	0
In every class I find students to whom I just can't teach core concepts. (17)	0	0	0	0	0	0

There isn't much I can do about how much ability I have in mathematics, science and language arts. (18)	0	0	0	0	0	0
It is important for teachers to maintain complete control over lessons. (19)	0	0	0	\circ	\circ	0
It doesn't matter whether students get the right answer as long as they understand the concepts inherent in the problem. (20)	0					

Appendix I The Kessler Psychological Distress Scale (K6)

Instructions: The following questions ask about how you have been feeling during the <u>past 30</u> <u>days</u>. For each question, please select the number that best describes how often you had this feeling.

Please complete the **all** of the following items. If you would prefer not to answer any item, you are permitted to skip it.

During the past 30 days, about how often did you feel...

	All of the time (1)	Most of the time (2)	Some of the time (3)	A little of the time (4)	None of the time (5)
nervous? (Q1)	0	\circ	\circ	\circ	\circ
hopeless? (Q2)	0	\circ	\circ	\circ	\circ
restless or fidgety? (Q3)	0	\circ	\circ	\circ	\circ
so depressed that nothing could cheer you up? (Q4)	0	\circ	0	0	0
that everything was an effort? (Q5)	0	\circ	\circ	\circ	\circ
worthless? (Q6)	0	\circ	\circ	\circ	\circ

The last 6 questions asked about feelings that might have occurred during the past 30 days. Taking them altogether, did these feelings occur <u>more often</u> in **the past 30 days** than is usual for you, <u>about the same</u> as usual, or <u>less often</u> than usual?

If you <u>never</u> have any of these feelings, select the associated option.

	A little more often than usual (1)	A bit more often than usual (2)	A lot more often than usual (3)	About the same as usual (4)	A little less often than usual (5)	A bit less often than usual (6)	A lot less often than ususal (7)	None of the time (8)
These feelings have occurred (Q7)	0	0	0	0	0	0	0	0

Appendix J
Attitudes Related to Trauma-Informed Care Scale (ARTIC)

Instruction: For each item, select the circle along the dimension between the two options that best represents your personal belief during the past two months at your job or in your last practicum.

Q1	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Students' learning and behavior problems are rooted in their behavioural or mental health condition.	0	0	0	0	0	0	0	Students' learning and behavior problems are rooted in their history of difficult life events.
Q2								
	1	2	3	4	5	6	7	

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Focusing on developing healthy, healing relationships is the best approach when working with people with trauma histories.	9	0	0	0	0	0		Rules and consequences are the best approach when working with people with trauma histories.
	1	2	3	4	5	6	7	
Being very	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	It reflects
upset is normal for many of the students I serve.	0	0	0	0	0	0	C	badly on me if my students are very upset
Q4								
	1	2	3	4	5	6	7	
I don't have what it takes to help my students.	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	I have what it takes to help my students.
Q5								
	1	2	3	4	5	6	7	

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
It's best not to tell others if I have strong feelings about the work because they will think I am not cut out for this job.								It's best if I talk with others about my strong feelings about the work so I don't have to hold it alone.
Q6								
	1	2	3	4	5	6	7	
				4	3	O	,	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
The students were raised this way, so there's not much I can do about it now.	1 (1)	2 (2)						The students were raised this way, so they don't yet know how to do what I'm asking them to do.
students were raised this way, so there's not much I can do about it	1 (1)	2 (2)						students were raised this way, so they don't yet know how to do what I'm asking them to

Students need to experience real life consequence in order to function in the real world.	es	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	Students need to experience healing relationships in order to function in the real world.
Q8	1						1	
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
If students say or do disrespectfu things to me, it makes me look like a fool in front of others.		0		0	0			If students say or do disrespectful things to me, it doesn't reflect badly on me.
Q9								
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
I have the skills to help my students.	0	0	\circ	\circ	0	0	0	I do not have the skills to help my students.
Q10								
	1	2	3	4	5	6	7	

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
The best way to deal with feeling burnt out at work is to seek support.	0	0	0	0	0	0	0	The best way to deal with feeling burnt out at work is not to dwell on it and it will pass.
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Many students just don't want to change or learn.	0	0	0	0	0	0	0	All students want to change or learn.
Q12								
	1	2	3	4	5	6	7	
Students ar often not ye able or read to take responsibility for their	et ly	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	Students need to be held
actions. The need to be treated flexibly and as individuals	e d	0	0	0	0	0	0	accountable for their actions.
Q13								
	1	2	3	4	5	6	7	

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
I realize that my students may not be able to apologize to me after they act out.		0	0	0	0	0		If students don't apologize to me after they act out, I look like a fool in front of others.
Q14								
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Each day is uniquely stressful in this job.	0	0	0	0	0	0	0	Each day is new and interesting in this job.
Q15								
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
The fact that I'm impacted by my work means that I care.		0	0	0	0	0	0	Sometimes I think I'm too sensitive to do this kind of work.
Q16								
	1	2	3	4	5	6	7	

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Students have had to learn how to trick or mislead others to get their needs met.	0		0	0	0	0	0	Students are manipulative so you need to always question what they say.
Q17								
	1	2	3	4	5	6	7	
Helping a student feel safe and cared about is the best way to eliminate undesirable behaviours.	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	Administering punitive consequences is the best way to eliminate undesirable behaviours.
Q18								ı
	1 (1)	2 (2)	3	4	5	6	7	
When I make mistakes with students, it is best to move on and pretend it didn't happen.	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	When I make mistakes with students, it is best to own up to my mistakes.
Q13	1	2	3	4	5	6	7	
	1		ა 	+	J	U	,	

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
The ups and downs are part of the work so I don't take it personally.	0	0	0	0	0	0	o and thi	The predictability of the work makes me nk I'm not fit or this job.
Q20								
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
The most effective helpers find ways to toughen up-to screen out the pain-and not care so much about the work.	0	0	0	0	0		0	The most effective helpers allow themselves to be affected by the work-to feel and manage the pain-and to keep caring about the work.
Q21								
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Students could act better if they really wanted to.	0	0	0	0	0	0	0	Students are doing the best they can with the skills they have.
Q22	I							I
	1	2	3	4	5	6	7	

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
It's best to treat students with respect and kindness from the start so they know I care.			0	0	0	0	0	It's best to be very strict at first so students learn they can't take advantage of me.
Q23								
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Healthy relationships with students are the way to good		0	0	\circ	\circ	0	0	People will think I have poor boundaries if I build relationships

Q24

	1	2	3	4	5	6	7	
I feel able	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	I'm just
to do my best each day to help my students.	0	0	0	0	0	0	0	not up to helping my students anymore.
Q25								
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
It's because I am good at my job that the work is affecting me so much.	0	0	0	0	0	0	0	If I were better at my job, the work wouldn't affect me so much.
Q26								I
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Students do the right thing one day but not the next. This shows that they are doing the best they can at any particular time.								Students do the right thing one day but not the next. This shows that they could control their behaviour if they really wanted to.

Q27

Q27								
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
When managing a crisis, enforcement of rules is the most important thing.	0	0	0	0	0	0	0	When managing a crisis, flexibility is the most important thing.
Q28								I
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
If I don't control students' behaviour, bad things will happen to property.			0	0	0		0	As long as everyone is safe, it is ok for students to become really upset, even if they cause some property damage.
Q29								I
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
I dread going to my job because it's just too hard and intense.	0	0	0	0	0	0	0	Even when my job is hard and intense, I know it's part of the work and it's ok.

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	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
How I am doing personally is unrelated to whether I can help my students.		0	0		0	0	0	I have to take care of myself personally in order to take care of my students.
Q31								
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
If things aren't going well, it is because the students are not doing what they need to do.							0	If things aren't going well, it is because I need to shift what I'm doing.
Q32								
	1	2	3	4	5	6	7	

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
I am most effective as a helper when I focus on a student's strengths.	0	0	0	0	0	0	0	I am most effective as a helper when I focus on a student's problem behaviours.
Q33								
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
Being upset doesn't mean that students will hurt others.	0	0	0	0	0	0	0	If I don't control students' behaviour, other students will get hurt.
Q34								
	1	2	3	4	5	6	7	
	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
If I told my colleagues how hard my job is, they would support me.	0		0	0	0	0		If I told my colleagues how hard my job is, they would think I wasn't cut out for the job.
Q35	1	2	3	4	5	6	7	

	1 (1)	2 (2)	3 (3)	4 (4)	5 (5)	6 (6)	7 (7)	
When I feel myself "taking my work home", it's best to bring it up to my colleagues and/or supervisor(s).	0	0	0	0	0	0	0	When I feel myself "taking my work home", it's best to keep it to myself.

Appendix K Psychological Safety in the Workplace Questionnaire

Instruction: Please respond to the question below thinking about **your** workplace. A workplace with good **Psychological Support** would be able to state that:

	No (1)	Not really (2)	Somewhat (3)	Quite a bit (4)	Definitely (5)
Our workplace offers services or benefits that adequately address employee psychological and mental health. (1)	0	0	0	0	0
Our supervisors would say or do something helpful if an employee looked distressed while at work. (2)	0	0		0	0
Employees feel supported in our workplace when they are dealing with personal or family issues. (3)	0	0	0	0	0
Our workplace supports employees who are returning to work after time off due to a mental health condition. (4)	0	0	0	0	0
People in our workplace have a good understanding of the importance of	0	0	0	0	0

employee					
mental health.					
(5)					

Appendix K Productivity in the Workplace Questions

Instruction. Answer the following questions according to how these feelings may have affected you in **the past 30 days**.

Q81 During **the past 30 days**, how many days out of 30 were you <u>totally unable</u> to work or carry out your normal activities because of these feelings?

Please enter a number between 0 and 30.

9.) Not counting the days you reported in response to the previous question, how many days in the past 30 were you able to do only <u>half or less</u> of what you would normally have been able to do, because of these feelings?

Please enter a number between 0 and 30.

Appendix L Interview Guide Questions

The core questions are in bold below with potential probing questions as bullet points below each core question. Interviews should flow naturally around the core questions based on each individual response from each participant.

This study concerns teacher wellness and inclusion, and we are exploring what we can do to support your wellness and understand more about your process (that is, knowledge and beliefs) about inclusion and how you manage that every day in your classroom.

For Associate Teachers: How long have you been teaching? For Teacher Candidates: What year are you in?

What would you like to tell us about your wellness?

Does your wellness at work affect your wellness outside of work? If so, how?

How do you know when you are experiencing high levels of wellness? Low levels of wellness?

What kinds of professional development and/or resources would support your wellness? For example, information on how to stay relaxed in a chaotic classroom.

What format would these be best presented in (e.g., website, paper, podcasts, etc.)

Have you ever done any professional development or teacher education on trauma (defined as experiencing stress that outstrips your ability to cope with the negative effects) and how it can affect working (for teachers) and learning (for students) in schools? If so, can you describe it briefly?

What is your daily work like in terms of inclusive education?

How much do your beliefs and values agree or disagree with the current practice of inclusion (i.e., including children with exceptionalities in one classroom, having immigrant students in the classroom.) - This could also be a great prompt for the current first question in the guide.

What are some benefits and challenges for you as a teacher in promoting, advocating and executing an inclusive classroom?

How do inclusive education practices and policies influence your daily work and wellness?

Would you be interested in an online learning opportunity on these topics? Why or why not?

If this sounds of interest to you, what features would you like to see? (e.g., a toolkit you could download and use later that includes things like strategies and resources, interviews or presentations from experienced teachers, from mental health professionals, or other experts?)

How do you think this resource could be helpful to you? What might be your goal in taking part in it?

What would be the ideal length of time it would take to go through the material?

Is there anything else you would like to share about what we've been discussing?

Thank you so much for your time.

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