

# **Comprehensive School Health Sustainability and Teacher Stress, Wellness, and Retention**

A Thesis Submitted to the College of Graduate Studies and Research  
In Partial Fulfillment of the Requirements  
For the Degree of Master of Education  
In the Department of Curriculum Studies  
University of Saskatchewan  
Saskatoon, Saskatchewan, Canada

By

Dana Fulwiler

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NAME OF AUTHOR: Dana Fulwiler

FACULTY: College of Graduate Studies and Research  
University of Saskatchewan

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## ABSTRACT

This study explored the extent to which teacher stress management and wellness could be mediated by the comprehensive school health [CSH] model, and in turn, if improvements in staff wellness could strengthen engagement and sustainability in CSH. CSH is a framework for promoting wellbeing within school communities, encouraging lifelong engagement in healthy living practices. The research explored the relationship between decreasing teacher stress, improving teacher wellness, and establishing effective, sustainable CSH.

Grounded theory methodology was used to *explain* phenomena of interest to the researcher (CSH and teacher stress and wellness) through interpretation of the perspective and context of those who experienced it (Birks & Mills, 2011). Grounded in field data collected through constructivist design and focused on participants' perspectives, feelings, and beliefs (McMillan & Schumacher, 2010), in tandem with relevant research literature and researcher memos, an enhanced understanding of CSH and teacher wellness was constructed. Data collection and analysis uncovered the richness of participants' lived experiences and built understanding of CSH implementation and sustainability.

The study suggests that an interdependent relationship exists between CSH and teacher wellness, and emphasizes the importance of relationship building at all stakeholder levels in education. Relationship building encourages shared responsibilities among stakeholders to address challenges and teacher supports, and inspire action to establish effective and sustainable school cultures of wellness. In combination with connections to passion, purpose and ownership, change possibilities and sustainability are enhanced. Healthy stakeholder relationships may be a

prerequisite to not only CSH sustainability, but perhaps the success and staying-power of any change initiative in education.

Considering the reports of teacher workload and stress, and minimal evidence addressing improvement and empowerment through wellness supports, the results provide important suggestions for enhancing CSH and addressing the fundamental building blocks of change and sustainability: establishing trust, cultivating ownership, and building mutually respectful relationships across the hierarchy of education. The study opens the door for longitudinal exploration of a comprehensive approach to CSH, from teacher education to K to 12 initiatives, observing teacher health outcomes, student health outcomes, the interplay between those and learner outcomes, and determinants of effective and sustainable school cultures of wellness.

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## TABLE OF CONTENTS

<b><u>PERMISSION TO USE.....</u></b>	<b><u>I</u></b>
<b>ABSTRACT</b>	<b>II-III</b>
<b>ACKNOWLEDGEMENTS</b>	<b>IV</b>
<b>TABLE OF CONTENTS</b>	<b>V-VII</b>
<b><u>CHAPTER ONE: INTRODUCTION.....</u></b>	<b><u>1</u></b>
<b>TEACHING CONTEXT</b>	<b>1</b>
<b>PURPOSE STATEMENT</b>	<b>3</b>
<b>CONTRIBUTION ON THE RESEARCH</b>	<b>6</b>
<b>RESEARCH INQUIRY</b>	<b>13</b>
<b>ORGANIZATION OF THE THESIS</b>	<b>14</b>
<b>DEFINITION OF TERMS AND ACRONYMS</b>	<b>15</b>
<b><u>CHAPTER TWO: COMPREHENSIVE SCHOOL HEALTH: A HEALTH AND EDUCATION CONNECTION .....</u></b>	<b><u>16</u></b>
<b>LANGUAGE OF WELLNESS</b>	<b>16</b>
<b>COMPREHENSIVE SCHOOL HEALTH</b>	<b>17</b>
<b>HEALTH AND EDUCATION</b>	<b>22</b>
<b>SUMMARY</b>	<b>26</b>
<b><u>CHAPTER THREE: LITERATURE REVIEW &amp; THEORETICAL FRAMEWORK .....</u></b>	<b><u>28</u></b>
<b>LITERATURE REVIEW PROCESS</b>	<b>28</b>

<b>INITIAL REVIEW</b>	<b>32</b>
<b>SUMMARY: THEORETICAL FRAMEWORK</b>	<b>39</b>
<b><u>CHAPTER FOUR: METHODOLOGY RATIONALE AND DESIGN .....</u></b>	<b><u>42</u></b>
<b>QUALITATIVE RESEARCH RATIONALE</b>	<b>42</b>
<b>GROUNDING THEORY RATIONALE</b>	<b>43</b>
<b>PHILOSOPHICAL POSITIONING AND MEMO WRITING</b>	<b>44</b>
<b>SAMPLING STRATEGY</b>	<b>47</b>
<b>DATA COLLECTION</b>	<b>49</b>
<b>DATA ANALYSIS</b>	<b>51</b>
<b>ETHICS</b>	<b>56</b>
<b><u>CHAPTER FIVE: DATA FINDINGS .....</u></b>	<b><u>57</u></b>
<b>CULTURE OF WELLNESS</b>	<b>62</b>
<b>TEACHER ROLES AND SUPPORTS (SUSTAINABILITY)</b>	<b>64</b>
<b>ADDRESSING CHALLENGES (CHANGE POSSIBILITY)</b>	<b>82</b>
<b>INSPIRING ACTION (CHANGE POSSIBILITY AND SUSTAINABILITY)</b>	<b>97</b>
<b>SUMMARY</b>	<b>105</b>
<b><u>CHAPTER SIX: DISCUSSION .....</u></b>	<b><u>108</u></b>
<b>FINAL DISCUSSION OF RELEVANT LITERATURE</b>	<b>109</b>
<b>CONCLUSION: IMPLICATIONS AND FURTHER RESEARCH</b>	<b>123</b>
<b><u>REFERENCES.....</u></b>	<b><u>129</u></b>

**APPENDIX A: CONSENT LETTER ..... 140**

**APPENDIX B: INTERVIEW GUIDE ..... 142**



## **Chapter One**

### **Introduction**

#### **Teaching Context**

Attention to wellness and balance among teachers is critical for maintaining a strong, sustainable workforce in education. Teaching is both honourable and arduous, populated with dedicated, caring educators who likely chose the profession because they believe in creating a promising future by inspiring and empowering youth. This passion often translates into an unconditional commitment to students' learning, wellbeing, and overall school experience – from coaching, to extra one-on-one help, to the implementation of a breakfast program. The complexities of our evolving local and global conditions add to the considerable pressure placed on teachers to keep up with changes and prepare responsible citizens for an uncertain and unpredictable world. While dedicated teachers may also put pressure on themselves, external pressures are growing in scope. Excessive and perhaps unrealistic expectations have been placed upon teachers and schools to ensure students' needs have been met, beyond their learning needs.

When a social or economic concern arises in society, citizens often turn to education as a scapegoat (Apple, 2013). News media play an integral, and at times detrimental, role in persuading public perceptions of education through a neoliberal lens (Goldstein, Macrine & Chesky, 2011). Teachers are impacted by this criticism and by reformation rollout; increases in workload and accountability pressures from both employers and the public are contributing to teacher frustration, fatigue, anxiety, and feelings of inadequacy and resentment (Pickering, 2008). Education, and the K-12 school system in particular, is the foundation of our future and

the vehicle through which the long-term gains of health promotion could be achieved. Teachers, along with communities and governments, are essential players in that success.

Schools have now been tasked with improving health outcomes for students, and ultimately the population, in both the short and long-term. To what extent is it possible for schools to achieve this? With increasing pressures and workloads placed upon teachers in recent decades (Dibbon, 2004), how will they be able to sustain their own health and enhance the capacity for progress within the schools? These concerns are echoed among teachers across Canada: 83% of Canadian teachers reported in 2005 that they had a higher workload than in 2001, and 58% indicated a substantial increase in workload (Canadian Teachers' Federation, 2005); 52% of Manitoba teachers in a recent study experienced an increase in workload from one year to the next, 70% reported negative health impacts as a result of teaching, and 73% felt that stress affected their job performance (Dyck-Hacault & Alarie, 2010); only 40% of Alberta teachers recently reported high job satisfaction (Duxbury & Higgins, 2013); and in a pan-Canadian study, 88.6% of teacher respondents stated that their workload had increased in recent years (Kamanzi, Riopel & Lessard, 2007). A recent survey of Saskatchewan teachers (Martin, Dolmage & Sharpe, 2012) presented similar, disturbing results, with a significant number of respondents reporting feeling burnt-out at least a few times each week, to even daily, and that work-related stress was negatively affecting their physical and emotional health, as well as their personal lives. Martin et al. summarized their findings:

The sobering truth is that our findings are entirely consistent with other large-scale investigations of the work life and health of teachers in other Canadian provinces and international jurisdictions. Given these realities, is it really surprising that attrition rates among teachers are high and that concerns regarding recruitment are growing? Generally

speaking, it makes sense to argue that the demands and expectations that are placed upon teachers need to be modified and/or reduced, and that substantial improvements must be made to the supports and resources that are offered to teachers. (p. 28)

The health and wellbeing of teachers is of utmost importance in order for them to build, enhance and sustain their capacity to carry out the increasing demands placed upon them, without such substantial sacrifice of themselves. Teachers contribute in significant ways to the future of a society. Without genuine and adequate value prioritized to teachers' wellbeing, the likelihood of achieving those long-term health goals is limited. For numerous social and economic reasons, these potential limitations should be recognized as relevant and of concern to everyone.

### **Purpose Statement**

My interest in exploring the research topic of teacher stress and wellness through a comprehensive school health lens is deeply rooted in my passion for both education and wellness. My love of teaching is closely matched by my love of learning, which I have found to be a powerful combination when embarking on a research journey. It was my own experience teaching within the health education field that sparked my pursuit of graduate studies. I had observed a devaluing of health as a K to 12 course and of wellness as an important culture of the workplace. Not only is a school a workplace for many, it is a place where we hope to instill and inspire values deemed essential for the growth and prosperity of our children and of our society. In a society that values publicly funded healthcare and education, a meaningful connection between the two is essential to the benefit of both. Education is one of the primary determinants of health (Meili, 2012). After exploring these issues in my graduate courses addressing research methods, motivation and engagement, urban education, stress and wellness, and through conversations with peers and colleagues, it became clear to me that teacher stress was a

significant concern. Examining the issue from a broader perspective, I initially wanted to explore the impact of teacher wellness on students' experiences and the overall culture of a school. However, since I was working in a school attempting to address wellness concerns through a health promotion model called Comprehensive School Health<sup>1</sup> [CSH], the purpose and design of my study shifted. My new focus was on the impact of teachers' wellness on CSH (which ultimately does have an impact on students' experiences and the overall culture of a school), and in turn, the impact of CSH on teachers' wellness. This became a manageable way to explore teachers' impact through the lens of CSH, potentially inviting further research focused on a more direct correlation between teacher wellness and student experience.

As outlined in Chapter 3 in the literature review, the scope and impact of teacher stress and wellness is a growing cause for concern. I became particularly engulfed by this literature during a course I took through the Canadian Institute of Stress. I connected new discoveries relating to the physiological and psychological implications of stress to both my own and my peers' experiences in the teaching profession. Dissatisfaction and uncertainty, and on the other side of the stress spectrum, satisfaction and certainty, are the most influential determinants of stress interpretations and impact (Canadian Institute of Stress, 2012). It became clear to me, both through personal experiences and my studies, just how significant these aspects were in a teacher's daily life. While experiencing both satisfaction and uncertainty on a daily basis is not unique to teaching, I have experienced and observed the impact of a teacher's own attitude and wellbeing to the experiences of students. While I was enrolled in this Masters program, I was

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<sup>1</sup> Comprehensive School Health is an evidence-based framework for establishing a culture of wellness within a school community, building upon four distinct pillars in collaboration with a variety of stakeholders. The CSH model will be outlined in detail in chapter two.

also teaching full time and in the process of implementing the CSH model in my school. This combination generated the perfect storm of ideas and inquiries, igniting a research exploration into the impact and value of creating a culture of wellness within a school setting.

My focus shifted from that of students' experiences, to an inquiry into the potential relationship between creating a culture of wellness within a school, and the wellbeing of its teachers. Much of the CSH literature focused on its impact on students, which is important to establish when promoting a new model for implementation in education. I began to realize the additional value in exploring CSH through the lens of teacher wellbeing, and addressing the widespread concerns of teacher stress, burnout, and attrition. Teacher stress is of concern, particularly since CSH could potentially be perceived as an extra, onerous task for teachers to complete. From my understanding of CSH at the time, this was the opposite of its goals and intention.

CSH is not meant to be a prescriptive initiative with a specific set of guidelines and rules for implementation, but rather a framework through which the culture of a building, a school, could be transformed to promote and inspire lifelong practices of healthy living: “a comprehensive school health approach is not an add-on; it should be the way a school community thinks and operates” (Alberta Healthy School Community Wellness Fund [AB-HSCWF], 2011). The model can be tailored to meet the needs of each school and community context. While ideas and strategies are shared among the educational community, when speaking of the ‘culture’ of any place, it will be unique to each community. Wellness should become embedded in the way the school operates, from its courses to its extra-curricular offerings, to its staff functions and community involvement. Wellness should become a natural presence in

school development and community outreach conversations. Wellness should be awarded value in the decisions affecting the overall school community.

As I prepared to transition out of my school at the time, where I was hoping to generate excitement and embed this culture of wellness, it occurred to me that sustainability of CSH is critical. If one is to create a **culture** of wellness, there must be multiple authentically engaged voices present at a welcoming table. If it is not meant to be just a fad initiative in education, but rather as a way of school life to inspire and exist within students and staff long after they have left the school, then engagement and sustainability are key factors that must be considered at the onset. This study explored the possibility of a cyclical, interdependent relationship between decreasing teacher stress, improving teacher wellness, and establishing effective, sustainable CSH. The purpose of this study was to determine, from a CSH school staff perspective, the extent to which staff stress management and wellness could be mediated by the CSH model, and in turn, if improvements in staff wellness could strengthen engagement and sustainability in CSH.

### **Contribution of the Research**

Issues emerging in our society call for critical conversations about investments in our future, and which investments yield the greatest return for a thriving, healthy, sustainable community. Funding to two sectors in particular, health and education, are important to examine. Leaders from a variety of public sectors are recognizing the role and value of education on our country's overall level of health and wellbeing. A Saskatchewan family physician and wellness advocate, Dr. Ryan Meili, addressed the importance of education in creating that kind of thriving, healthy community in his book entitled, *A Healthy Society: How a Focus on Health can Revive Canadian Democracy* (2012). Meili discussed the role of schools in cultivating the

leaders of tomorrow, empowering a sense of responsibility to engage in local and global issues: “In order to provide this kind of learning environment, we need first to value those who do the front line work” (p. 87). He asked the important question:

If we are committed to the best education for young people, what is needed to make that happen? ... attracting bright, committed people to the teaching profession. This means not only paying them well, but also creating the kind of environment in which they and their students can thrive. (Meili, 2002, p. 87)

Meili also suggested the greatest goal of education is not necessarily the development of a set of skills, but the development of values. If we are hoping to create a society that values healthy living and proactive approaches to healthcare, then education and perhaps the CSH model itself are both critical components of the conversation.

Effective implementation of the internationally recognized Health Promoting School [HPS] model has resulted in positive, evidence-based outcomes and has the potential to benefit several facets of the school community. Studies evaluating the effectiveness of HPS programs date back to the 1980s. Connel, Turner and Mason (1985) concluded that more hours of instruction were required to produce significant enhancements to healthy attitudes and practices among students. Over the years, the focus has expanded from achievable health outcomes resulting from classroom curriculum, to the impact of school culture and relationships. Given the multiple factors beyond the scope of the school influencing students' health conditions, it is difficult to demonstrate that the effect of the HPS model can unequivocally be attributed to its programming within a school, rather than external environmental factors involving peers or socioeconomic conditions (West, Sweeting & Leyland, 2004). A Scottish study published by MacBeath, Thomson, Arrowsmith and Forbes (1992) connected school effectiveness to the

physical school environment, student morale, and the quality of teacher-student relationships. The World Health Organization (2002) profiled HPS as a model that extends the traditional curriculum-focused health education role of the school by adopting a more holistic approach involving the hidden curriculum and encouragement/modeling of healthy lifestyles (West et al., 2004). MacBeath et al.'s (1992) indicators are mirrored in the elements of HPS, which also place value on school characteristics including the physical environment, involvement of school community stakeholders, and the development of positive relationships between students, students and teachers, and teachers with each other. Trends emerged across the literature of particular elements considered essential to improving health outcomes within a school community.

Perhaps one of the most comprehensive evaluations of HPS theory and practice at an international level is in a text produced by Stephen Clift and Bjarne Bruun Jensen (2005). *The Health Promoting School: International Advances in Theory, Evaluation and Practice* highlighted three categories of research in HPS, involving concepts and theory, case studies, and comparative studies. From mental health benefits to integrating health and environmental education, the authors establish purpose and potential for the HPS model through evidence from various locations including Finland, Ireland, and Sweden. In a study initiated by the Czech Republic's Ministry of Education, Havlinova and Kolar (2005) questioned whether the social climate of a school is more secure with the HPS model in place demonstrated that HPS schools have a safer social environment in most dimensions than schools in the control group. Havlinova and Kolar showed that HPS seemed to be more successful in improving the teacher-student relationship in the educational process, and significantly more factors protecting students from



bullying were discovered. Through their results, Havlinova and Kolar advocated for systematic implementation of HPS:

If a school strives to understand its own social environment/climate and make them [individuals within the school] safe, it thereby increases the effectiveness of the educational process and has a large positive influence on the quality of life of all its members in the following respects:

- It enhances the motivation and capacity of pupils and teachers to implement tasks important for improving the quality of education
- It promotes positive experiences, reduces risk of stress and anxiety states and in the long run promotes balanced self-confidence and mental resilience in adult life
- It enhances the sincerity and collaboration of pupils, parents, and teachers in school and beyond

(p. 421)

Another study helped to confirm “a positive association between positive perceptions about the school environment and more positive life style health behaviours with respect to tobacco, alcohol and drug use, physical activity, and self-reported health and quality of life” (Omarova, Mikelsone & Kalnins, 2000, p. 442). Clift and Jensen’s book (2005) presented a powerful collection of research generating a strong, evidence-based case for HPS implementation demonstrating positive impacts on students’ perceptions about their school environment and the development of sustainable healthy lifestyle practices.

In Canada, the term widely used to define this model is Comprehensive School Health [CSH]. It is a holistic and strategic framework for supporting improvements in educational

outcomes (Avison, 2009), while encompassing the whole school environment and striving to build health into all aspects of life at school and in the community (World Health Organization [WHO], 2002). A CSH or HPS is constantly strengthening its capacity as a healthy setting for living, learning and working (WHO, 2014). Implementation and sustainability of CSH depends on an integrative teamwork approach, with the engagement and commitment of school staff as a critical component. Addressing health and wellbeing issues of staff is a key principle of any health promoting school (International Union for Health Promotion and Education [IUHPE], 2009).

CSH is a highly regarded framework for promoting health and wellbeing within the school community that encourages lifelong engagement in healthy living practices. Teachers are instrumental in the planning and implementation of CSH, yet consideration of their own perspectives and needs seems to be largely absent from documents outlining steps for implementation. The push for CSH implementation and establishing cultures of wellness within schools, combined with alarming reported rates of teacher stress, burnout and dissatisfaction (Canadian Teachers' Federation, 2005; Duxbury & Higgins, 2013; Kamanzi et al., 2007; Leithwood, 2006; Pickering, 2008; Martin et al., 2012), creates an ironic opposition that demands exploration. Could the CSH model support teachers in their endeavour to realize their full wellness potential, or does it hinder their levels of personal wellbeing by adding to their workload? A detailed outline of the CSH model will be presented in Chapter 2.

While I have provided a brief snapshot of CSH impact from an international perspective, formal evaluation of CSH's longitudinal impact is minimal, as implementation in Canadian schools is still in its early stages (Veugelers & Schwartz, 2010). Further confidence in the effectiveness of CSH can be established when an evaluation confirms implementation, impact,

and positive outcomes (Stewart-Brown, 2006). Through teachers' perspectives, this study sought to understand the impact CSH is having on themselves and their colleagues. The study offers a deeper understanding to emerge regarding the inter-dependence between teacher wellbeing and CSH sustainability, an exploration that is under-represented in current research.

As identified by the Alberta Healthy School Community Wellness Fund ([AB-HSCWF], 2013) sustainability and communication are critical factors in driving successful CSH projects: “in order to sustain any changes made and to embed those changes within the culture of the school, school communities need to consider how to build capacity within their community” (p. 6). The concept of *building capacity* aligns with our functional definition of wellness, *achieving full potential*: “build capacity as a wellness setting for living, learning and working through a comprehensive school health framework” (AB-HSCWF, 2013, p. 6). Administrators, teachers and students are the main bodies controlling the climate of that culture, of course with external factors beyond direct control. As such, a correlation should be explored between CSH sustainability and a purposeful focus on building engagement within those direct-impact, in-school members of the school community.

While the literature represents contributions to the topic of teacher wellness, particularly in addressing a cause for concern, the overall theme is broad. There are clear gaps in the research that have yet to be filled. Generally, the literature highlights the negative aspects of teaching through stress and workload concerns, with minimal evidence addressing improvement and empowerment through wellness supports (within or beyond the CSH model). Grayson and Alvarez (2008) highlighted research by Cano-Garcia et al. (2005) that supported the role of the school environment context in triggering burnout among teachers, “by either facilitating or inhibiting an individual’s emotional or attitudinal characteristics” (p. 1351). In discussing

effective evaluation of CSH and other public health interventions, Veugelers and Schwartz (2010) identified three important areas to explore:

1. To what extent is CSH successfully implemented? Are advances made for each of the four<sup>2</sup> essential elements of CSH?
2. What is the impact of CSH? Has its implementation demonstrated improvements in knowledge, and changes in attitudes and behaviours?
3. What are the improvements in terms of outcomes? Are students eating more healthily, being more active and have they healthier body weights?

(p. 7)

The identified areas imply coverage of the overall school environment, from student achievement to social implications of attitudes and behaviours. While the focus of CSH outcomes seems to centre on students, the questions posed in #2 and #3 could easily apply to teacher outcomes as well. This study *indirectly uncovers* perspectives relevant to the third area focused on student outcomes and physical wellbeing, and more *specifically targets* the first two areas in relation to teacher impact and change.

Quantitative collections of teacher workload, stress, and health perceptions are well-represented in recent literature. Many primary sources reflected Canadian studies that showcased statistical data of teachers' concerns (Dibbon, 2004; Kamanzi et al., 2007; Smaller, Tarc, Antonelli, Clark, Hart & Livingstone, 2005). A limitation to quantitative studies, however, is the

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<sup>2</sup> These are often referred to as the four pillars of CSH. Creating a school climate to support optimal health and learning outcomes can be achieved when the school community addresses priority initiatives within these four inter-related pillars: *teaching and learning, physical and social environment, healthy school policies, and partnerships and services* ([JCSH] Pan-Canadian Joint Consortium for School Health, 2012).

impersonal approach to a very personal and context-dependent topic. This could impact data analysis as elaboration or clarification of responses is impossible. Qualitative methodology is also represented in the literature (Alberta Teachers' Association [ATA], 2012; Younghusband, 2005), but is limited in scope; none of these studies directly explore the capacity to enhance teacher wellness through school-based wellness initiatives, or any other strategic approach. This study has potential to build upon theories of health promoting schools, adding the meaningful component of benefits to teacher wellness and retention. An in-depth synopsis of the reviewed literature will be presented in chapter three.

### **Research Inquiry**

In this study investigating teacher perspectives, the specific research questions include:

1. From a CSH school staff perspective, to what extent and in what ways could staff stress-management and wellness be mediated by the CSH model?
2. In turn, could improvements in staff wellness strengthen engagement and sustainability in CSH?
3. What perspectives do teachers and administrators hold regarding roles of responsibility?
4. How effective are various avenues for supporting teacher wellness and decreasing distress, attrition, and absentee rates?

While my voice and perspectives are inevitably embedded into the research questions and the data analysis and the discussions that follow, I have been diligent in ensuring the voices of my participants are heard and the representations and interpretations are authentic to their own experiences. Data collection involved three individual interviews and a focus group, each involving stakeholders with varied participation in their school's CSH implementation. Two

teachers and an administrator of a CSH school participated in the individual interviews, and the focus group comprised active wellness team members within a CSH school. The grounded theory methods used to help with the data collection and analysis process are outlined in chapter four, as is the context of the participants and schools.

### **Organization of the Thesis**

Chapter 1 introduces the intentions of my study, establishing purpose and value in exploring the topic of teacher wellness through the lens of CSH. Chapter 2 will set a meaningful context for the study by providing an overview of the CSH model and current issues and concerns in the teaching profession, after first establishing criteria for interpreting the language of wellness. Important considerations concerning the study's relevance to sustainable wellness education will also be identified. Chapter 3 introduces the literature informing the theoretical foundations of the study, followed by a summary of the initial review, and finally the literature accessed throughout the concurrent data generation and analysis process. This chapter will expand upon the grounded theory methods employed and the decisions made throughout the data collection and analysis processes, as the data collection provoked further review of the literature. Chapter 4 outlines the research methodology of my study, starting with a description of grounded theory and progressing to specific sampling, collection and analysis strategies employed throughout my research process. Chapter 5 presents the research findings with snapshots of relevant participant responses and the final theoretical framework that emerged out of the process. Finally, Chapter 6 provides a culminating discussion drawing connections between and across all data, including the literature, and recommendations for further research.

## Definition of Terms and Acronyms

Table 1

*List of Acronyms*

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AB-HSCWF	Alberta Healthy School Community Wellness Fund
APPLE Schools	Alberta Project Promoting active Living and healthy Eating
ASEBP	Alberta School Employee Benefit Plan
ATA	Alberta Teachers Association
CSH	Comprehensive School Health: <i>described in detail in Chapter two</i>
DPA	Daily Physical Activity
HPS	Health Promoting Schools: <i>an internationally recognized model for school health promotion – described in detail in Chapter two</i>
IUHPE	International Union for Health Promotion and Education
JCSH	Pan-Canadian Joint Consortium for School Health
PISA	Programme for International Student Assessment
WHO	World Health Organization

Table 2

*Definition of terms*

---

Comprehensive School Health (CSH): an evidence-based framework for establishing a culture of wellness within a school community, building upon four distinct yet related pillars. The four pillars of the framework are: teaching and learning, physical and social environment, healthy school policies, and partnerships and services.

Distress: mobilized energy. From the Latin root “dis”, meaning bad, stress perceived as negative (distress) occurs when the person feels uncertain, ambivalent, or powerless.

Eustress: mobilized energy. From the Greek root “eu”, meaning “well/good”), stress perceived as positive (eustress) accompanied by a low level of uncertainty and a high degree of choice (ex: choosing to skydive).

Health Promoting School (HPS): an internationally recognized school health promotion model with intentions to: enhance wellbeing and learning outcomes of students, provide a safe, supportive, empowering school environment that addresses health issues of staff and students in collaboration with parents and the local community, and involves continuous evaluation and goal-setting in accordance with evidence-based practices relevant and adaptable to each school context.

Stress: an involuntary physical response to external stimuli experienced by all living things; stressors stimulate physiological changes and adaptation energy manifests itself in fight, flight or freeze responses, most commonly recognized in distress situations.

Wellness: for the purposes of this study, which examines the interplay between all things wellness in a school setting, the working definition of wellness will be: a holistic approach to realizing the full potential of individuals within the school, and the school environment itself.

## Chapter Two

### Comprehensive School Health: A Health and Education Connection

#### Language of Wellness

Wellness and balance hold multiple definitions and their development is unique to each individual. Of the existing and most recent definitions within leading health organizations, consistencies include wellness as a holistic, multi-dimensional, self-directed process of achieving an individual or group's *full health potential* (National Wellness Institute, 2013; World Health Organization, 2009). I believe that self-directed elements are an important characteristic of promoting wellness through CSH, as will be highlighted later in the study. Self-directed implies that individuals within the building need to be authentically engaged and feel ownership and pride in the initiatives, rather than implementing a prescriptive, generic model that does not account for context. However, as will be discussed in subsequent chapters, that engagement may also depend on systematic supports.

The World Health Organization ([WHO], 2009) identified two wellness categories that are both applicable to the intentions of this study: “the *realization of the fullest potential* of an individual physically, psychologically, socially, spiritually, and economically, and the fulfillment of one's role expectations in the family, community, workplace, and other settings” (p. 5). By investigating teachers' perceptions of roles and benefits resulting from CSH implementation, this study will indirectly explore the interplay between teachers realizing their full wellness potential as individuals and fulfilling role expectations at school – both of which may have a significant impact on the sustainability of CSH – a model that may cycle back and result in positive outcomes on teacher retention and stress management.



The proposed K-12 Wellness Education Curriculum Framework from Alberta Education (2009) identifies five dimensions of wellness: emotional, intellectual, physical, social, and spiritual. In collaboration with education stakeholders, they drafted the following definition of wellness: “Wellness is a balanced state of emotional, intellectual, physical, social, and spiritual well-being that enables students to *reach their full potential* in the school community. Personal wellness occurs with commitment to lifestyle choices based on healthy attitudes and actions” (Alberta Education, 2009, p. 5). The common theme across the language used by the National Wellness Institute (2013), the WHO (2009), and Alberta Education, is the concept of **realizing one’s full potential**. The dimensions of wellness are interrelated; when one’s physical health is suffering, it may in turn impact that individual’s emotional and social dimensions. For the purposes of this study, which examines the interplay between all things related to wellness in a school setting, the working definition of wellness will be: a holistic approach to realizing the full potential of individuals within the school and the school environment itself.

### **Comprehensive School Health**

While similar approaches to CSH may be termed ‘Health Promoting School’ or ‘Coordinated School Health’, the purpose and foundational values are the same, and are based on the World Health Organization’s 1986 Ottawa Charter for Health Promotion (Pan-Canadian Joint Consortium for School Health [JCSH], 2008). The Charter outlined the importance of strengthening community action, developing personal skills, enabling, mediating, advocating, and creating supportive environments (WHO, 1986, as cited in JCSH, 2008). Similarly, the International Union for Health Promotion and Education [IUHPE] presents 11 key principles of health promoting schools:

A Health Promoting School:

1. Promotes the health and well-being of students
2. Enhances the learning outcomes of students
3. Upholds social justice and equity concepts
4. Provides a safe and supportive environment
5. Involves student participation and empowerment
6. Links health and education issues and systems
7. *Addresses the health and well-being issues of all school staff*
8. Collaborates with parents and the local community
9. Integrates health into school's ongoing activities, curriculum, and assessment standards
10. Sets realistic goals through accurate data and sound scientific evidence
11. Seeks continuous improvement through ongoing monitoring and evaluation

(IUHPE, 2008, p. 2)

While many of the above principles may surface throughout the data collection process, the seventh principle (italics added to draw attention to this principle) involving the health and wellbeing of all school staff will be targeted in this study.

The curriculum that students experience extends far beyond the classroom, and Canadian CSH is a model that recognizes that fact. Schools are natural institutions to become instruments of societal change, and health is a growing concern in our society. The Joint Consortium for School Health [JCSH] was established by provincial, territorial and federal governments to build cooperative and collaborative relationships between the health and education sectors (JCSH, 2012). The focus is on providing information and support to member governments, building capacity for promoting health through school-based and school-linked programs, and being a catalyst for collaborative activities and actions (JCSH, 2012). The creation of the JCSH and

implementation of school nutrition policies and Alberta government mandated DPA (Daily Physical Activity) demonstrate health promotion as a priority among our federal and provincial governments.

The JCSH has identified four distinct pillars upon which a quality CSH program builds. These essential elements are: 1) teaching and learning; 2) social and physical environments; 3) healthy school policy; and 4) partnerships and services (JCSH, 2008). The *teaching and learning* pillar draws attention to the specific resources, activities, and curriculum students are exposed to that provide educational experiences to improve their health and wellbeing; *social and physical environments* refer to the quality of relationships within the building, emotional wellbeing, and the state of the physical environment/facility; *healthy school policy* builds a decision-making process, procedures and policies at the school and district level to promote wellbeing and shape a positive school environment; *partnerships and services* help to build connections within the building, between school and families and community organizations in addition to providing in-school health services (JCSH, 2008). For CSH to be fully realized, it is essential that elements of each pillar be implemented (Veugelers & Schwartz, 2010). When this happens and the pillars are harmonized, students are supported to realize their full potential as learners and as productive members of society (Avison, 2009).

The Alberta Health School Community Wellness Fund [AB-HSCWF] is a partnership between Alberta Education, Alberta Health Services, the Centre for Health Promotion Studies, and the Alberta Coalition for Healthy School Communities. The figure below was produced by the AB-HSCWF to illustrate the interdependent relationship between the pillars of CSH model:



Figure 1. Comprehensive School Health Model (AB-HSCWF, 2011)

The AB-HSCWF invited schools to submit applications for funding to advance their CSH projects. Established by the University of Alberta’s School of Public Health – Centre for Health Promotion Studies, the AB-HSCWF combined the CSH model with another internationally recognized community development process to generate a six-step cycle to help design and implement a CSH initiative. AB-HSCWF’s (2011) six steps include: *prepare* (identify health champions and form a wellness committee); *create a shared vision* (establish what a healthy school community looks like); *determine the priority issues* (assess the school community’s unique needs); *develop an action plan* (identify goals, roles and strategies to move the vision forward); *implement and monitor* (launch, communicate, and track progress); *reflect, evaluate and celebrate* (review goals and action plan, revisit four pillars of CSH, identify areas for growth and celebrate successes). The final stages, *implement, monitor, reflect, evaluate and celebrate*, are ongoing and should be revisited throughout the CSH implementation and growth process (AB-HSCWF, 2011). As mentioned above, the AB-HSCWF (2011) emphasized the importance of sustainability and communication in driving successful CSH projects. A diagram was developed to illustrate the six-step process and the importance of engaging key stakeholders in establishing sustainability:

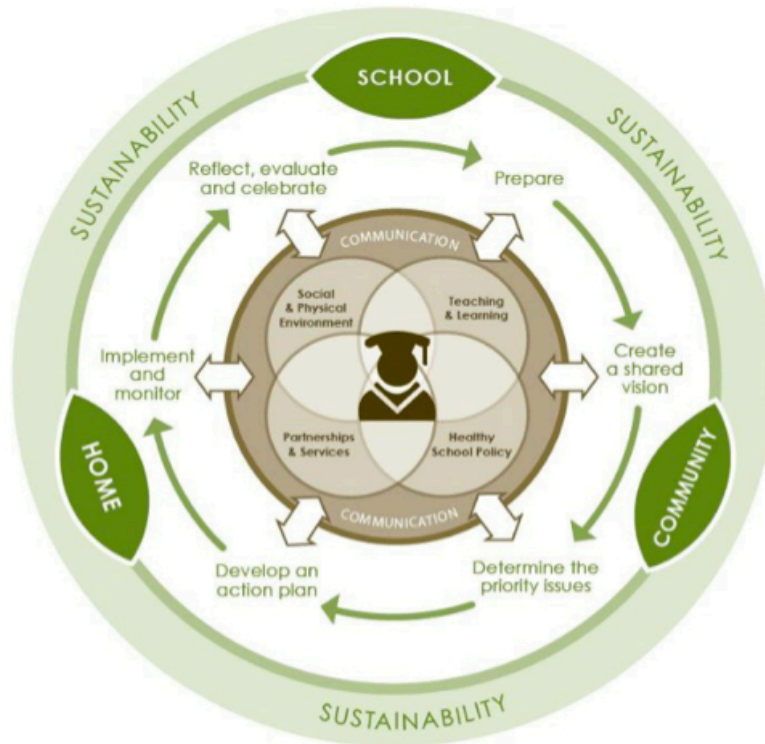


Figure 2. A Process for Developing Healthy School Communities (AB- HSCWF, 2011)

A similar cyclical illustration was used to represent the data findings of the study's resultant theory. The circle in both figures represents the process of establishing and sustaining CSH as ongoing and interrelated.

From both a moral and economic perspective, it makes sense to promote healthy and active living values and skills. First exploring the moral perspective, according to the UN Charter of Rights and Freedoms every human being has the right to Health and Well-being (Article 25), to Education that strengthens respect for human rights and fundamental freedoms (Article 26), and to Rest and Leisure, including reasonable limitation of working hours (Article 24) (UN Publications, 2013). All three of these rights are manifested in school communities.

Economically, provincial governments are projecting that health care costs will spiral to the point where entire provincial budgets will be swallowed up by the health sector (Dukowski, 2009). A positive feedback loop and powerful economic driver is in the creation of an educated, healthy

populace (Meili, 2012). The logic is simple and backed by evidence: “healthy, educated people are better able to contribute to a society that produces healthy, educated people” (Meili, 2012, p. 85). Attention to proactive strategies that *enhance* wellbeing rather than *react* to illness would have economic benefits to both the public education and public healthcare sectors. The long-term economic benefits connected to inspiring youth to live healthy lives, including reduced healthcare costs, would be one thing – but we could also see cost benefits within education spending. Teacher absence rates have increased over the last decade (Statistics Canada, 2011) and research has shown the significant costs of teacher attrition (Barnes, 2007). Cause for concern should be heeded by both public sectors, as well as by the public in general.

### **Health and Education**

Schools are looked to as the main institutions with the capacity to promote healthy societal change, and school staff are relied upon to make it happen (Dukowski, 2009). The teamwork approach of CSH is crucial to alleviate this pressure and share responsibility of the important change objectives with community partners. Nonetheless, Dukowski presented CSH as an inevitable demand on teachers, who are already deluged with competing demands. Teacher wellness could be woven into the current CSH model through each of the pillars, but it also has potential to be lost in the process.

Public health care and public education are inextricably linked and mutually dependent. Commissioner Romanow’s report (2002) discussed health promotion as an area requiring attention:

Despite numerous studies highlighting the merits of wellness and prevention in improving the health of individuals, organizations have yet to devote sufficient resources to make health promotion a priority. *A centre for health innovation focusing on health*

*promotion would support the development of programs aimed at improving individuals' physical and mental health as well as targeting prevention efforts and services in the Canadian population.* (Romanow, 2002, p. 88, italics added for emphasis)

Although there is no mention of education in this section of the report, the italicized portion of the above excerpt could easily be describing a school community, and perhaps it should be. The cost of implementing manageable, meaningful health promotion initiatives in schools would be substantially less than building the proposed “Centres for Health Innovation” at \$20 million, and a “modest cost of \$5 million for each Centre per year” (Romanow, 2002, p. 87). However, this would also require an investment in teacher education and in-school support systems in order to establish an effective and sustainable avenue for health promotion. An investment of this nature would directly align with the teaching and learning pillar of CSH, providing “opportunities for staff to build knowledge and develop skills to support and influence change that improves the health and wellbeing of the school community” (AB-HSCWF, 2014, p. 1). Would this be a direction in which provincial governments are prepared to invest? Despite the probable long-term benefits and cost savings, neoliberal governments (which we are currently experiencing in Canadian society) seem to be less likely to fund such initiatives (Orlowski, 2011).

Since this study is focusing on initiatives based in Alberta, the situation in that province will be highlighted. The Alberta Government operating expense for health and wellness increased by 16.6% (\$2.1 billion) in the 2010-2011 budget (Government of Alberta, 2010). The five-year plan committed to a 6% increase *for each year* from 2010-2013, followed by a 4.5% increase for the next two (Government of Alberta, 2010). This does not include the additional \$253 million for physicians, or the \$124 million for “prescription drug assistance, and all other health benefits and services” (Government of Alberta, 2010, p. 19). Operating expenses for

education also increased, by 4.6% total (\$247 million), mainly due to enrolment growth (Government of Alberta, 2010).

The most recent contract negotiations for Alberta teachers started in 2012, and ended in 2013 with the Alberta Government introducing legislation to implement their proposed four-year deal offered to teachers across the province (ATA, 2012). Rejections of offers from both sides took place (The Canadian Press, 2013). The Government of Alberta rejected the Alberta Teachers' Association offer on November 30, 2012, which included a 0% salary grid increase for the first two years, followed by 1% and 3%, in exchange for improved working conditions (ATA, 2012). Advocating for improved student learning, teachers requested a reduction in the “amount of time spent on administrative and bureaucratic tasks, *which have little or no cost* and detract from their ability to focus on student learning” (ATA, 2012, p. 1, italics added for emphasis).

The Government of Alberta's rejection of the 2012 offer may have further degraded and discouraged its teachers. Alberta is not alone in this struggle; teachers across the country have, and are currently, facing an embarrassing fight to earn the respect of their own governments (The Canadian Press, 2013). The new roles teachers are being asked to take on increase the already substantial public pressure, and demand teachers to ‘do more with less’. Debates around merit pay for ‘successful’ teachers based on standardized student achievement results and rigorous teacher certification exams every few years (Clifton, 2013) may contribute to teachers' feelings of pressure. This pressure includes focusing on students achieving scores on selective response tests, rather than participating in extra-curricular sports, or self-fulfillment. An extensive review of literature highlighting the need for a purposeful approach to teacher wellness can be found in Chapter 3.



Curriculum development is an important piece of the puzzle, and also fits into the pillar of teaching and learning. Building the capacity for health promotion within the educators themselves, however, must also be seen as critical to its effectiveness. This would involve professional development for employed educators, but also quality health education programming for pre-service teachers. The University of Ottawa recognized this potential and enrolled a group of pre-service teachers in a specialized CSH cohort (Lloyd, Whitley & Olsen, 2013). Documenting their experiences, the University was able to identify strengths and areas for growth in equipping teacher candidates with the tools to carry the goals of CSH forward in their future schools. The founders of the program shared these challenges, highlights and insights with hopes to “inspire other teacher education programs to not only promote CSH but also introduce it in ways that are authentic, i.e., cultivating the confidence in pre-service teachers to promote physical and mental health through the purposive forming of healthy relationships in their university setting, practicum placements and local community” (p. 15).

Among the lessons learned through the inaugural 2012-2013 CSH cohort was an acknowledgement of the organic and long-term process involved: “we have learned that the prospect of fully preparing educators to be confident, respectful, creative, passionate champions of comprehensive school health is a long-term endeavour, and not one to be considered accomplished within a brief program” (Lloyd et al., 2013, p. 20). While this statement implies that teacher preparation and continual development is multi-faceted and requires long-term engagement (similar to the CSH model itself), imagine the power of creating a succession of support for teachers to build and sustain advocacy and confidence in the vision and processes of CSH – from pre-service training to front lines professional development. CSH would integrate naturally with other effective practices in education, including social and ecological justice.

These programs offer practical ways for teacher preparation programs to help beginning teachers work within their school and local communities in support of positive change.

## **Summary**

This chapter defined important elements and processes of the CSH model and connected the themes of health and education through a snapshot of current issues and innovations, setting a preliminary context to be expanded upon in the formal literature review. The research focus for the study is teacher wellness during implementation of CSH programs. Derived from the internationally recognized term health promoting schools (HPS), CSH involves creating a culture of wellness within a school community, involving multiple stakeholders in a shared vision to support holistic, lifelong healthy practices. The model requires action within four distinct yet unified pillars: 1) teaching and learning; 2) physical and social environment; 3) healthy school policies; and 4) partnerships and services. When relevant action is mobilized within these four areas and reflective of the school communities' unique needs, a community culture begins to take form.

As West et al. (2004) admitted, research designs with intentions to unequivocally illustrate positive, long-term health outcomes resulting from CSH are challenging to carry out. External factors beyond the control or influence of the school inevitably affect teachers and students, including their family lives, socioeconomic conditions, etc. What *has* been established is the correlation between perceived positive physical and social environments and students' school experience and healthy habits (Clift & Jensen, 2005). While my study does not seek to prove long-term CSH impact, longitudinal studies focused on those outcomes are necessary – perhaps as a cross-section from various school contexts and the unique implementation of CSH carried out by each school. The purpose of this study was to attempt to determine the extent and

means by which the CSH model could affect staff stress management and wellness, and in turn, if improvements in staff wellness could strengthen engagement and sustainability in CSH.

## Chapter Three

### Literature Review & Theoretical Framework

#### Literature Review Process

This chapter will outline the literature review process, further illustrating a need to fill the research gaps in this particular topic, and highlight the literature that continuously informed the purpose of the study and data analysis. Inspiration for the framework and study design was obtained from various sources, including a grounded theory case study conducted in Newfoundland by Dr. Linda Younghusband (2005). Her methodology included interviews of 16 teachers from various career stages (10 of whom indicated experiencing high levels of stress). The narratives presented insight into the stressors associated with the teaching profession at various career stages, but did not specifically explore management or coping strategies. Grounded theory is focused on analyzing participant's lived experiences to develop an enhanced understanding of the topic or phenomenon; interviews are a meaningful avenue through which these perspectives can be shared. The initial literature review helped to inform the interview process – from sampling to the generation of interview guides.

The literature review processes were directly informed by the study's grounded theory methodology. Grounded theory was appropriate for this study because it seeks to *explain* phenomena of interest to the researcher (in this case, CSH and teacher stress) through interpretation of the perspective and context of those who experienced it (Birks & Mills, 2011). Through the concurrent literature review, researcher notes, and data collection and analysis of participants' lived experiences, the data become the *grounding* foundation of the evolving theory. The intention of the study was to develop an enhanced understanding of CSH implementation and sustainability through the lens of teacher and administrator participants;

grounded theory helped to ensure that the enhanced understanding was in fact grounded in the data itself (which was built from a variety of data sources). Grounded theory methodology will be thoroughly discussed in Chapter 4.

As a qualitative study, the literature review process was repeated throughout data collection and analysis (McMillan & Schumacher, 2010). Birks and Mills (2011) characterized the literature review in a grounded theory study as useful throughout the research process: to be used as a source of theoretical codes, to support data analysis, and to enhance theoretical sensitivity. Glaser and Strauss (as cited in Birks and Mills, 2011), the founders of grounded theory, did not promote a thorough review of the literature before undertaking a grounded theory study as it may contaminate or constrain the analysis of data with existing codes and concepts. According to Glaser (as cited in Birks & Mills, 2011), to remain as open as possible to emergent theories within the data, a more substantial literature review during analysis and writing can weave that literature into the generated theory without preconceived expectations. Birks and Mills also presented Urquhart's (2007) perspective that reviewing literature is "an effective means of orientating the grounded theorist to the field of study, without necessarily prejudicing them towards existing theoretical concepts" (p. 35). I balanced these perspectives by setting a solid foundation from which the pursuit of my study could be justified, but also engaged in a continuous review of literature relevant to the research topics of CSH, teacher wellness, stress, attrition, and grounded theory methodology throughout the research and analysis processes.

Studies investigating CSH structures have involved qualitative, case study methodology. Since CSH is unique to each school context, data collection that profiles each case and considers participant perspectives results in a richer analysis. For example, the mission of The Alberta Project Promoting active Living and healthy Eating (APPLE Schools) is to empower school

communities to support student health through sustainable changes in school, home, and community environments. The planning and implementation of those changes will be contextual. Storey, Spitters, Cunningham, Schwartz and Veugelers (2011) designed their study on teacher perceptions of implementing CSH through APPLE Schools by using a variety of qualitative methods, including focus groups. According to Stewart-Brown (2006), few of the reviewers investigating the effectiveness of CSH implementation have reported on the quality of interventions: “their results therefore represent the so-called black box approach to health promotion, aiming to identify whether an intervention worked without asking questions about what was actually involved in the intervention” (pg. 15). Suggestions made by Stewart-Brown have been considered in the design of this research.

As the pioneer of stress theory, Dr. Hans Selye’s research helped to shaped our understanding of stress and informed multiple studies of stress’ role in human behaviour and wellbeing. His discoveries connecting human perceptions and satisfaction to how we physically and emotionally experience stress were drawn upon in this study. The theory posits that emotions are inherently involved in stress and adaptation (Lazarus 1999; Youngusband, 2005). Therefore, investigations involving stress and the impact of CSH on managing it must consider the presence and impact of emotion. Interactional theories of stress suggest an interplay exists between an individual’s work and home environment, the nature and intensity of emotional responses to stress, their personality characteristics, and perceptions of coping ability and threats to their wellbeing (Kyriacou & Sutcliffe, 1978; Lazarus, 1999; Trendall, 1989; Youngusband, 2005). These considerations were addressed through grounded theory case study methodology.

The theoretical framework, serving as a structure to guide and inform the implementation of my study (Birks & Mills, 2011), is derived from approaches to wellness support and stress

reduction for teachers. Birks and Mills (2011) discussed Wasserman's claims that grounded theory research begins with the data. Therefore, grounded theory researchers establish and maintain a close relationship with the data, which includes relevant research literature in combination with participant responses (Birks & Mills, 2011). The initial literature review took place before the interviews began to establish purpose, necessity, and create an informed foundation for the study. The concurrent literature review took place during analysis of the interview transcripts, between participant interviews. The literature sought in this stage of the review was provoked by the emerging themes discovered through analysis of the interview transcriptions. In combination, these processes uncovered rich sources of data and played an integral role in grounding the theory in the data itself.

Through this sound yet adaptable structure, I set out to understand CSH as a model for enhancing teacher wellness, versus non-systemic approaches that may offer incentives to individuals but exist separately from school-based initiatives. Theories within the fields of education and health including health-promoting schools, stress, motivation and engagement influenced the abstraction of the data collected. In conducting the preliminary literature review, sources were obtained through the use of scholarly database searches, subject directories, and metasearch engines. Specific topical criteria relating to CSH benefits and teacher stress and wellness perceptions were used during initial searches, and throughout the categorizing process of primary and secondary sources. Specifically, search terms included *comprehensive school health benefits, teacher wellness, stress, attrition, and burnout*. The initial literature review provided a snapshot of the research that was accessed to help inform and construct the flow of the study.

## Initial Review

In the initial literature review, gaps in research focusing on CSH and teacher wellness emerged. While significance of CSH gains momentum and merit in research, so does the value of teacher wellness. Recent quantitative studies conducted across Canada have indicated significant increases in workload, stress, and overall teacher dissatisfaction (British Columbia Teachers' Federation, 2010; Canadian Teachers' Federation, 2005; Dibbon, 2004; Smaller et al., 2005). Why is this surge in teacher workload and dissatisfaction being felt across the country? While governments cut taxes, there is less funding to invest in public education (Orlowski, 2011). These reductions are inevitably felt in the classroom – including larger class sizes (due to teacher cutbacks), and fewer Educational Assistants, to name a few.

Reduced funding may be promoted by what Palmer (1998) has named “teacher bashing” (p. 3). According to Palmer (1998), education and frontline teachers have become the scapegoats “for the problems we cannot solve and the sins we cannot bear” (p. 3), and “teacher-bashing has become a popular sport” (p. 3). The devaluing of teachers and education by North American media outlets is concerning, with the headlines “*Why We Must Fire Bad Teachers: Key to Saving American Education* (Thomas, 2010) and “*How Teachers Unions Lost the Media*” (Whitemire & Rotherham, 2009), which later highlighted a Washington Post editorial about charter schools with the sarcastic headline “Poor children learn. Teachers unions are not pleased” (p. 1). An important conversation needs to occur regarding the positive ripple effect of cultivating a community of respect and appreciation for both teachers and the education system, as opposed to the opposite, if we are hoping to truly reform and improve education:

Teachers make an easy target, for they are such a common species and so powerless to strike back. We blame teachers for being unable to cure social ills that no one knows how



to treat; we insist that they instantly adopt whatever “solution” has most recently been concocted by our national panacea machine; and in the process, we demoralize, even paralyze the very teachers who could help us find our way. (Palmer, 1998, p. 3)

Palmer (1998) started the conversation over a decade ago, warning that even restructuring schools and rewriting curricula cannot reform and improve education until teachers are supported, respected, and free from bureaucratic harassment:

If we continue to demean and dishearten the human resource called the teacher on whom so much depends ... none of that will transform education if we fail to cherish, and challenge, the human heart that is the source of good teaching” (p. 3).

The world observes consistently high student achievement from the Finnish education system, where teachers are revered and valued by the public (Sahlberg, 2011). The potential benefits of such a culture are extensive, including and beyond improved student learning outcomes.

Teacher perceptions of declining personal wellness and work satisfaction were evident in numerous studies (Alberta Teachers’ Association, 2012; Kamanzi et al., 2007; Leithwood, 2006; Storey, et al., 2011; Younghusband, 2005), providing a relevant base from which new research inquiries and connections to CSH can be constructed. Among the current research exploring both the positive outcomes of CSH and enhancing teacher wellness, changes to school environment were identified as particularly critical (Grayson & Alvarez, 2008; IUHPE, 2009; Massey, 1999; Storey, et al., 2011). Recent research indicated that teacher stress levels contribute significantly to the psychological climate within the school (Grayson & Alvarez, 2008). Conversely, the context and school environment, by either facilitating or inhibiting emotional or attitudinal characteristics, triggers burnout reactions among teachers (Grayson & Alvarez, 2008). This supports the suggestion that an interdependent relationship exists between CSH, which directly

involves the school environment, and teacher stress and wellness. Since the work environment of teachers is primarily based at a systems level, developing independent coping strategies may not be as effective (Schwab, 2001). Instead, as Grayson and Alvarez (2008) suggested, a school-wide approach is key and future studies should “test interventions focused on improving teacher relations within the school building in order to promote a sense of connectedness with the goals and values of their occupational expectations, school district leadership, and community of students with whom they work” (p. 1359). This study explored the possibility that CSH could function as one of those interventions. Beyond the school environment is the broader societal culture in which education occurs, which also has a significant and varied impact on teachers as noted by Palmer (1998) and the results of Sahlberg’s (2011, 2008) research in Finland. Although my research did not seek to understand how the surrounding culture and media affected teacher wellness, I was sensitive to any data that suggested this possibility.

Attitudes toward CSH can impact its effective implementation; the model relies on a motivated ‘health champion’ to lead the initiatives (usually a teacher) and dedicated team members. Staff experiencing low levels of work satisfaction may be less likely to respond positively to new school initiatives (Grayson & Alvarez, 2008). According to Pransky (1991, as cited in Massey, 1999), teachers who have participated in school health promotion programs report decreased absenteeism, enhanced morale, improvement in the quality of their teaching, enriched attitudes about their personal health, and a sense of well-being. Additionally beneficial, healthy teachers and staff serve as positive role models for children and their families (Massey, 1999). Referencing research by Burke, Greenglass and Schwarzer (1996) and Leithwood, Menzies, Jantzi and Leithwood (1999), Grayson and Alvarez expanded upon the financial ramifications of teacher stress and burnout: “substantial costs are also incurred by the school,

including increased teacher absenteeism, turnover, career change, mental health and medical claims, deteriorating performance and early retirement” (p. 1350). These concerns are meaningful to this study as they not only put a spotlight on the importance of teacher wellness and demand the attention of districts and governments, but factors involving teacher attrition could become predictors of CSH sustainability.

A critical component for sustainability of CSH is having a motivated and engaged school wellness team who advocates for initiatives and monitors implementation. If, even with CSH, teacher stress and wellness is not addressed, the foundation for CSH is compromised. The IUHPE (2009) identifies issues that may inhibit the development and sustainability of CSH, including “the necessity to convince the education sector about the advantages that CSH can offer schools” (p. 5) – advantages that are not limited to educational and health outcomes, but include teacher retention and potential financial gains for both health and education. This study will contribute to decreasing the research gap regarding teachers’ perspectives of quality CSH implementation, its challenges, and meaningful recommendations regarding stress and wellness.

Selye is considered a pioneer of stress theory, conducting research that has shaped our understanding of stress and informed multiple studies of stress’ role in human behaviour and wellbeing. His writing in *The Nature of Stress* (1976) provided important initial thought regarding the common misconceptions of stress. Selye explained that stress is in fact tangible, concrete, and evident through measureable changes within the body. He coined two different categories of stress: eustress and distress. Both eustress (from the Greek root “eu”, meaning “well/good”) and distress (from the Latin root “dis”, meaning bad) mobilize energy. Stress perceived as positive would be accompanied by a low level of uncertainty and a high degree of choice (ex: choosing to skydive); whereas stress that is perceived as negative occurs when the

person feels uncertain, ambivalent, undervalued, or powerless (Canadian Institute of Stress, 2012).

Selye and Tache (as cited in Hill-Rice, 2012) defined coping with stress as adapting to stressful situations “by removing stressors from our lives, by not allowing certain neutral events to become stressors, by developing a proficiency in dealing with conditions we do not want to avoid, and by seeking relaxation or diversion from the demand” (p. 26). The above strategies appear to lie on the shoulders of each individual. Implied in Selye’s writing and explicit in his programming through the Canadian Institute of Stress (2012), satisfaction plays a key role in one’s ability to manage distress. This connection parallels findings in Grayson and Alvarez’ (2008) study where “teacher satisfaction significantly mediated the relationship between school climate and both emotional exhaustion and depersonalization” (p. 1360). Attention to teacher satisfaction accounts for the unique needs and stressors of each individual – which could be harnessed within the CSH approach. The findings in the Grayson and Alvarez (2008) study showed a noteworthy correlation: as teacher satisfaction levels increase, negative emotional reactions are less likely to occur as a product of school climate factors. This finding opens the door for further exploration of how CSH could mediate satisfaction.

Studies conducted within the past five to 10 years indicate a significant increase in stress and workload. An alarming 80% of Canadian teachers who participated in a 2005 survey perceived their overall level of stress at work to have increased significantly (Smaller et al., 2005). Identified by teachers, multiple role expectations, apathy and increasing burnout among colleagues, time constraints, and personal external factors are among the highest ranked contributors to burnout (Leithwood, 2006). As burnout often manifests itself in the form of decreased psychological and physical wellness (Maslach & Jackson, 1981), supporting the

maintenance of each wellness dimension could assist in its prevention. According to the literature, excessive time commitments required of teachers to fulfill duties further increase levels of stress. In 2005, teachers reported average workweeks totalling 55.6 hours (Canadian Teachers' Federation, 2005). As teaching increases in complexity, attention to teacher wellbeing becomes critical (Dibbon, 2004). These statistics and claims demonstrate the magnitude of change that teachers are experiencing, and why attention to teacher wellness may be more important now than it ever has been in the past. As addressed earlier, the neoliberal push for tax cuts will make it even more challenging for public schools to support staff in maintaining their personal wellbeing, enhance teacher effectiveness, and cultivate job satisfaction, as they are already being asked to do more with less.

The question is raised: is it a shared responsibility between the teachers as *individuals* and education as a *system*, to promote, support, and maintain teacher wellness? Only individuals can take charge of their own lives, their own wellbeing, but employers can make it easier or harder for each employee to reach her/his optimal level of wellness. Workplace wellness programs involving proactive measures to support employee wellness not only result in decreased absences and increased morale, but in financial advantages. In a recent study, Baicker, Cutler and Song (2010) highlighted the return on investment for wellness programs “medical costs fall by about \$3.27 for every dollar spent on wellness programs, and absenteeism costs fall by about \$2.73 for every dollar spent” (p. 2). Justifying this type of preventative spending to taxpayers may be a challenge, but the potential is clear: an additional \$2 invested in proactive wellness programming in schools may actually have double the return (affecting education and health care budgets, with benefits to our children’s experiences in schools). In an environment where essential government-funded programs including education and health care consistently

find themselves on the budget chopping block, perhaps CSH could be a gateway to curb spending and invest in the health of education and sustainability of health-promoting schools.

There are many external factors influencing teacher wellness that CSH alone cannot eliminate, as discussed in a recent study on the New Work of Teachers by the Alberta Teachers' Association (2012). The school system itself, however, does have control over some of these factors and how they are incorporated into teachers' job descriptions. Naylor and White (2010) reported that teachers work 10-20 hours per week outside of regular school hours and are experiencing work intensification, generating stress and exhaustion leading to high rates of absenteeism and burnout. While there are factors beyond an individual school community's control, CSH has the potential to establish a comfortable platform from which individuals within a school setting (from children to adults) can be empowered to take control of, and maintain, holistic wellness throughout their lives. Ideally, education stakeholders (trustees, teacher unions, governments, parents, universities, etc.) should examine these demanding roles and the potential power they have in advocating for a proactive approach to school wellness.

CSH is an effective model to promote stress management by creating a healthy school environment, providing services for the reduction of **distress** – including mental and physical health initiatives, enhancing student and staff knowledge, and connecting with the community (Massey, 1999). In a study of climate factors affecting teacher burnout, emotional exhaustion was closely associated to parent/community relations and student-peer relations (Grayson & Alvarez, 2008), both of which are specifically targeted through the CSH model. Literature also highlights that student stressors exert a critical toll on teachers (Burke & Greenglass, 1995; Burke, Greenglass & Schwarzer, 1996; Grayson & Alvarez, 2008; Kuzman & Schnall, 1987; Split, Koomen & Thijs, 2011). This suggests that if CSH contributes to the reduction of student

stressors, teachers are naturally (and positively) affected.

Emotions impact teacher wellness from both a positive and negative perspective. Feelings of appreciation can create the best experiences and memories for teachers, according to Martin, Dolmage and Sharpe “the emotional salience and lasting impact of instances where students and others expressed their heartfelt thanks and appreciation” (2012, p. 21). On the other hand, feelings of guilt can negatively affect professional feelings of self-efficacy and impede teachers’ wellbeing. These reflections in the literature were mirrored in my participants’ experiences, with additional perspectives and suggested solutions.

### **Summary: Theoretical Framework**

This initial literature review revealed that minimal research has been conducted to date that explores the connection between the CSH model and teacher stress and wellness. This gap in current research provides an ideal opportunity to employ grounded theory methods for data collection and analysis. Birks and Mills (2011) stated “grounded theory results in the generation of new knowledge in the form of a theory; therefore areas where little is known about a particular topic are most deserving of research effort” (p. 16). The resulting theory is generated from, and grounded in, data collected by the researcher (Birks & Mills, 2011). With this in mind, the data for this study were generated from participants’ responses, as well as the literature. Interviews were used in order to connect with the participants’ experiences and to allow opportunities to request elaboration or clarification on new topics or themes. Since qualitative studies are concerned with understanding participants’ perspectives and experiences, interviews are effective in establishing a relationship in which the participant can express their perspectives, tell their stories, with opportunities to clarify and expand. While some participants may be more

hesitant to express themselves as openly and honestly as they would in an anonymous survey, the richness of conversational data outweighs the cons.

The literature provided rich background data relevant to numerous elements within the theoretical framework for this study, including the interplay between the system approach and the independent teacher’s approach to enhancing wellness.

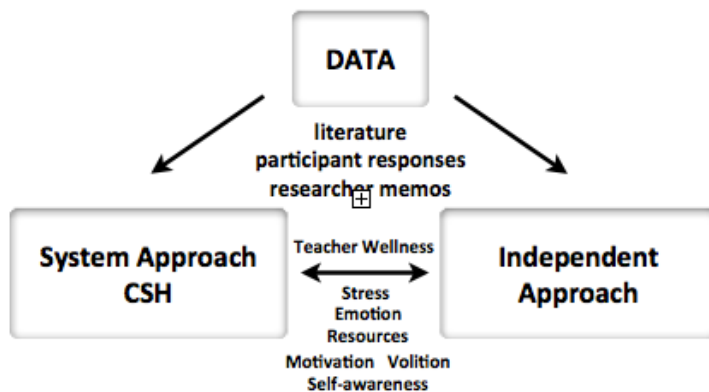


Figure 3. Theoretical Framework

In combination with the participant responses and researcher memos, the literature presented powerful analytical insight into the developing codes and categories. As specific insights regarding emotion, engagement, motivation, resources, autonomy and guilt emerged in the interviews, so too did I search for and discover relevant literature. The different streams of literature were put together to address teacher stress and wellness for sustaining CSH in schools. Both categories of emergent data (participant responses and relevant literature) helped to inform the construction of my memos and became important tools in the concurrent processes of analysis.

The inductive aspect of grounded theory methods calls for successive comparative analyses, building theory up from the data itself (Birks & Mills, 2011); since the literature review becomes an integrated and integral contributor to that data, the process of identifying and



exploring literature relevant to participants' experiences becomes critical to the study's procedural logic. Participant responses in each stage of data collection introduced new layers to emerging themes, calling for further exploration of existing literature. The progression of the data collection stages was dependent upon participant responses. For example, responses from Participant 2 led to purposeful sampling of an administrator who became Participant 3, and an exploration of literature on the relationship between guilt, personal wellness and teaching. There were four stages in total, including the focus group.

The literature explored as a result of these insights helped to guide the constant comparative analysis of categories and inform the emergent theory, as will be outlined in Chapter 5. In alignment with grounded theory practice, the literature becomes part of the data. With this in mind, and to provide clarity in how and when I was drawn to particular literature sources and their relevance to participants' responses, I have included the literature review provoked by the data in Chapter 5 with the rest of the data findings. It was with the above conceptual framework and analysis design that I addressed the research purpose of exploring the interplay between teacher wellness and CSH implementation and sustainability.

## Chapter Four

### Methodology Rationale and Design

#### Qualitative Research Rationale

For the purpose of this study exploring perspectives on the interaction between teacher stress and wellness, and CSH engagement and sustainability, a grounded theory instrumental case study was perceived to be the most meaningful research approach. The study design was expanded from Stewart-Brown's recommendations (2006):

Further research on promoting health in schools is needed. Such research should include a wide range of methodologies, to establish what works and what does not. Research should use outcomes appropriate to the population being studied (universal or targeted), should consider issues of implementation and, where possible, should include evaluations of cost-effectiveness. (p. 18)

Intentions of the study directly aligned with qualitative research purposes: to uncover in-depth perceptions of participants' lived experiences (McMillan & Schumacher, 2010) and to build, not test, understanding and theory (Newman & Benz, as cited in McMillan & Schumacher, 2010).

Qualitative approaches are based in an epistemological paradigm of personal knowledge, subjectivity, interpretation, and motivation (Lester, 1999). Case study and grounded theory approaches depend on obtaining rich data from participants to explore the ways distress is affecting their lives, and the interplay between CSH implementation and benefits and their personal stress and wellbeing. In combination, case study and grounded research strategies provide a strong structure for rich investigation. Instrumental case studies are used to elucidate and provide insight into a particular theme (McMillan & Schumacher, 2010). Complementing this approach, grounded theory seeks to *explain* phenomena of interest to the researcher (CSH

and teacher stress) through interpretation of the perspective and context of those who experienced it (Birks & Mills, 2011). Grounded in field data collected through constructivist design and focused on participants' perspectives, feelings, and beliefs (McMillan & Schumacher, 2010), an enhanced understanding of CSH and teacher wellness was pursued.

### **Grounded Theory Rationale**

Grounded theory research explores and explains a particular phenomenon through interpretation and analysis of participants' lived experiences. The data become the grounding foundation of the evolving theory, and the flow of analysis continues throughout the data collection process. Grounded theory 'data' encompass a broad scope, including the participants' responses, the collection of relevant literature (ongoing), and the researcher's documented memos (Birks & Mills, 2011). These references are concurrently collected and analyzed to establish sensitivity to the evolving theory. The themes and categories become saturated by the data, ensuring the resulting theory is, in fact, *grounded* in the data and authentic to participants' perspectives.

Grounded theory strategies result in "the generation of theory that explicates a phenomenon from the perspective and in the context of those who experience it" (Birks & Mills, 2011, p.16). Rationale behind the methodology of this study exists between both descriptive *explanatory*: to elucidate participant perceptions of the relationship between CSH implementation and staff stress and wellness; and descriptive *exploratory*: to discover themes and open the door for more rigorous research on the impact of CSH on teacher satisfaction, retention, and absenteeism. Since each grounded theory method can be employed as an effective tool in various research designs, to produce an *authentic* grounded theory study the researcher must ensure that the generated theory is effectively *grounded in data with explanatory power*

(Birks & Mills, 2011).

Birks and Mills (2011) caution that studies can mistakenly identify themselves as grounded theory, when in fact they are actually qualitative descriptive analysis. This study was designed to produce an authentic theory that “explicates a phenomenon from the perspective and in the context of those who experience it” (Birks & Mills, 2011, p. 16). I practiced diligence in following a set of outlined essential grounded theory methods. This process progresses from low level concepts of *purposeful sampling, initial coding, concurrent data generation, theoretical sampling, and category identification*, to medium level concepts of *theoretical sensitivity, intermediate coding, selecting a core category, and theoretical saturation*, to the final high level concepts of *advanced coding and theoretical integration* (Birks & Mills, 2011).

### **Philosophical Positioning and Memo Writing**

Considering the important relationships in grounded theory research between the researcher and participants, and the researcher and the data, awareness of my philosophical positioning was necessary to design a “methodologically congruent” (Birks & Mills, 2011, p.65) study. Birks and Mills (2011) presented further rationale highlighted by Denzin and Lincoln (2005) that being conscious of this personal philosophical position is important because “all research is interpretive; it is guided by the researcher’s set of beliefs and feelings about the world and how it should be understood and studied” (p. 21). To help establish and maintain this awareness throughout the research process I created an audit trail of reflective memos, documenting my interactions with participants and decision-making processes. I found this to be an incredibly powerful tool in revealing the personal and professional philosophies guiding my analysis, and in building a clearer understanding of my analytical decision-making processes. As categories and themes emerged (and merged into each other), I could reflect upon the processes

and decisions that introduced the original and subsequent themes, and how that progression related to an evolving theory. Due to its intangible nature, Birks and Mills (2011) admitted that theoretical sensitivity is a difficult concept to grasp, even for an experienced researcher. However, they caution against undervaluing its significance as it “is instrumental to the development of grounded theory and not fully embracing it in your study will result in a shallow product” (Birks & Mills, 2011, p.71). Memo writing enhanced my sensitivity to the evolving theory; it expanded my capacity to recognize pieces of the puzzle as the theory began to take shape.

At the onset, I viewed memo writing as academic journaling. However, my very first memos reflected more personal than academic writing, documenting my philosophies embedded in the research design. Birks and Mills (2011) suggested doing this at the beginning of your research endeavour – practice free-writing about your personal perspectives and positioning – reflect upon who you are as a researcher, and what that means for your journey. Below is a snapshot of one of these memos from the beginning of my research endeavour:

I want to do justice to this work. I know from my own experiences how challenging the work-life of a teacher can be, but also how meaningful and inspiring. I know this is an important topic, not only because of my personal and professional experiences, but because of the insight I have gained through my graduate pursuits and own interest in the literature. And the more I read about grounded theory, the more I connect with its processes. I believe this is how my brain works: gather data, analyze it, gather data from other sources (ex: lit), draw connections and develop themes, back to gathering more data, etc. I have done this before in my own life, creating theories grounded in that ‘data’ about the world around me. There are obviously new terms, and this is a research and

academic writing endeavour – but still, I connect to it and can only assume (hope) that will help the flow of the process.

Memo writing became an essential tool during analysis as codes and categories evolved and I found myself, at times, drowning in data. The memos truly did *ground* me in the data. I continuously cycled through previous memos to recount observations and analytical decision-making. Birks and Mills (2011) cited relevant support of this process by Birks, Chapman and Francis (2008) stating that “in working with the data, the researcher extracts meaning using a process of interpretation ... memoing enables you to articulate, explore, and question these interpretations as you engage with the data” (p. 40). Through this process I felt grounded in the data in a meaningful way. With the use of memos, “data exploration is enhanced, continuity of conception and contemplation is enabled and communication is facilitated through the use of memoing” (Birks et al., 2008, p. 68). Memo writing enabled me to efficiently draw comparisons and relationships between the emerging categories and question the relevance of my codes.

My system of memo-writing reflected my personal preferences and evolved through the research process as I began to accept that a ‘right’ way to memo does not necessarily exist. Memoing is a flexible strategy to aid the researcher in documenting the analysis process; the construction and nature of the memo content is dependent upon the researcher’s experience, preferences, and focus of the research itself (Birks et al., 2008). I began by simply using colour-coded sticky notes. As I worked through the process of discarding and merging codes, I started to recognize categories. I eventually progressed to a digital system of organizing my memos in accordance with the emerging categories, using the ‘sticky notes’ application on my laptop and notebook-formatted word document. I found this to be more effective and efficient as I endeavoured to make analytical sense of the data. I recorded jot notes, diagrams and questions

relevant to the current data, future interview guides, or literature I had reviewed and wanted to revisit. As my memos developed, I began to use them to draw patterns and establish properties:

I am beginning to think that the 'teacher supports' (blue) and 'strategies / ideas' (pink) could be connected ... because what teachers need to support themselves, in turn becomes strategies to help and support CSH. Instead, call it 'STRATEGIES & SUPPORTS'? The key words and phrases are similar across both: time, recognition, support, encourage.

My memos also assisted the revision of my interview guides, reminding me of particular additions and deletions, dependent upon my future participants' roles:

I would like to explore the relationship between feelings of autonomy and stress – self-awareness & autonomy perhaps ... because that is arguably an independent factor, not systemic. And perhaps guilt and teaching (lit), and the impact that has on wellness. Consider Maslow's hierarchy – can you achieve self-actualization when you are struggling with the foundational basics?

And eventually noted the saturation of categories with relevant data, refining the categories:

Many themes are becoming saturated ... the data is fitting into all of them, across the board. I am still noticing, however, some overlap across the themes ... some could again be amalgamated to create a richer theme, with less unnecessary repetition.

The above examples briefly illustrate the evolution of my memo-writing throughout the research process. They became instrumental in the design and analysis of this grounded theory study.

### **Sampling Strategy**

Since grounded theory is an emergent research process, theoretical sampling techniques unique to this methodology help to identify the most appropriate data sources as the research

progresses (Birks & Mills, 2011). The process of theoretical sampling was originally defined by Glaser and Strauss (as cited in Birks & Mills, 2011): “The analyst jointly collects, codes, and analyzes his data and decides what data to collect next and where to find them, in order to develop his theory as it emerges” (p. 81). It is often the most overlooked of the *essential methods* in grounded theory; many studies contradict the principles of grounded theory by collecting data first, and then analyzing it separately (Birks & Mills, 2011).

Initially, theoretical sampling is very purposeful, until themes and categories emerge and direct you to sampling that helps confirm, clarify, or expand the categories (Charmaz, 2006). To truly achieve theoretical sampling, each data collection event should be followed by an analysis and consideration of its meaning by asking “how does it relate to your developing analysis? Does it confirm, contradict, clarify or expand your evolving theory? What direction does it now suggest?” (Birks & Mills, 2011, p. 85). I engaged in these questions at the culmination of each of my analyses and documented my thoughts using memos. I then determined the next logical procedural steps. Depending on the connections I was able to draw between all sources of data, including participant responses, literature and my own reflections, I made decisions of whose participation to request next.

The sampling process involved identifying schools implementing CSH and inviting them to participate, and then employing *maximum variation* sampling for school staff. This combination intends to obtain maximum differences of perceptions about a topic among information-rich informants (school staff), as they are known to be implementing the particular concept/theory (CSH) (McMillan & Schumacher, 2010). As an instrumental case study, it profiles the experiences of teachers in a variety of roles within a CSH school setting. I wanted to explore the perspectives of teachers who were part of the CSH wellness team in their school, at



least one administrator within a CSH school, and an ‘outside’ teacher – someone who taught within a school pursuing a CSH model but who did not sit on the wellness team itself. This combination of participants provided rich data from broad perspectives, all experiencing the same approach to school culture reform in similar work environments.

**Recruiting participants.** For the initial purposeful sampling of my participants, I sought school professionals (either administrators or teachers) working within a CSH school.

Specifically, I wanted to ensure the study represented the voice of at least one administrator, the voices of teachers who were not on a wellness team, in addition to teachers who were active members of a wellness team. Participants’ experiences reflect urban CSH schools in Alberta. Over 50 school divisions across the province and over 700 school communities are registered with Ever Active Schools (2013), a provincial organization that offers a broad range of support to CSH schools as they build their healthy school communities. Having participated in the Ever Active Schools program, I knew teachers and health champions from various schools around the province attempting to implement CSH. It was from these connections that I was able to select an appropriate school, and appropriate participants.

### **Data Collection**

When I first embarked on this research, I envisioned my first interview to be with a participant in an administrator role. An administrator’s role is critical in establishing a sustainable CSH school framework; her/his support has the power to either enhance or hinder the implementation of school-wide initiatives. The CSH team leaders are also instrumental in engaging staff and maintaining momentum (and sustaining administrative support). However, out of scheduling challenges my first interview was with a teacher who did not directly have a role on the CSH wellness team from within the participant’s school. This originally perceived

'glitch' ended up being an effective switch to my initial plan, starting from the outside and working my way into the CSH wellness team. The theoretical sampling progression provided a wealth of data throughout the concurrent collection and literature review.

Grounded theorists engage in post-interview analyses to help review and guide the decision-making process (Birks & Mills, 2011). As described earlier, during this post-interview analysis stage the researcher asks three important questions about the data: 1) "How does it relate to your developing analysis? 2) Does it confirm, contradict, clarify or expand your evolving theory? 3) What direction does it now suggest?" (Birks & Mills, 2011, p. 85). Considering this process, I reviewed the original set of interview questions after each interview and adapted them if deemed relevant and meaningful based on the third question. In some cases I focused more thoroughly on particular questions in the subsequent interview, elaborating on certain points, or I added questions based on new emergent themes. For example, feelings of guilt surfaced among the teachers' perspectives in the first two interviews (related to their commitment to the students versus commitment to their own lives, wellbeing and families, and staying home when ill); I wanted to intentionally explore the administrator's perspective on teacher absenteeism, and on the personal wellness impact of teachers' commitment and dedication, to compare perspectives.

Through coding techniques I was able to interpret my participants' experiences and relied upon Birks and Mills (2011) post-interview questions (outlined in the previous section) to guide my next steps. I wanted to explore trends and topics that might have contributed to, or contradicted, my emerging theory. Overall, the interview questions (see Appendix B) were designed to uncover participants' experiences with the CSH model in their school (including its impact on their own wellbeing), their perceptions of the impact it has had on the overall school culture, and their viewpoints on the sustainability of CSH. Due to the various roles of my

participants, a broad range of perspectives was shared. The following table provides a context snapshot for the participants:

Table 3: Participant Profiles

<i>Participant</i>	<i>Role</i>	<i>Years of Teaching</i>	<i>Gender</i>
One	Teacher	7	Female
Two	Teacher	10	Female
Three	Administrator	35	Male
Four (group)	Teacher	15	Female
Five (group)	Teacher	6	Female

### **Data Analysis**

Grounded theory data analysis was an ongoing venture and valuable learning experience for a novice researcher like myself. I primarily referenced coding and categorization guidelines outlined by Melanie Birks and Jane Mills (2011) in *Grounded Theory: A Practical Guide*, but also suggestions in *Constructing Grounded Theory: A Practical Guide Through Qualitative Analysis* by Kathy Charmaz (2006). Involving inductive analysis, grounded theory begins with specific ideas and perspectives that are embedded in participants' responses, and evolves into a thematic approach from which a theory begins to take shape. Birks and Mills (2011) reminded researchers that the wide scope of data being generated in a qualitative study and the inductive nature of grounded theory may result in distractions and losing sight of the original research question. Throughout each stage of analysis I revisited my original theoretical framework (see Figure 3, p. 40). At one point I was not confident that this framework was relevant to the codes and categories I was organizing. Over time, the emerging theory took form and I was able to observe a relationship between the system and independent approach, illustrated in the conceptual diagram of my results in Chapter 5.

Birks and Mills (2011) categorized grounded theory methods into three stages, progressing from low to medium and high level processes. In the low level category of essential methods, I engaged in initial coding, concurrent data generation and collection, constant comparative analysis, and category identification. Initial coding is the first, concentrated approach to the coding process and involves extracting key words or groups of words to provide an initial picture of what the data are representing (Birks & Mills, 2011). In this first stage, the codes gave insight into the stress, wellness, and CSH experiences – both positive and negative – of my first two participants. They identified challenges in achieving and maintaining optimal wellness (both personally and within the culture of the school), but also their perceptions of the value of establishing CSH. I used gerunds and *in vivo* codes for purposes suggested by Charmaz (2006) and Birks and Mills (2011). Gerunds (verbs represented as nouns that always finish with ‘ing’ – for example, coping) identify processes in the data and focus on the participants’ experiences as a source of conceptual analysis (Charmaz, 2006). *In vivo* codes (Latin for ‘within the living’) capture participants’ words as representative of a broader concept within the data (Birks & Mills, 2011). Samples of my initial codes include: feeling guilty, meeting basic needs, experiencing uncertainty, lacking down time, having to participate in frequent meetings, participating in numerous initiatives, coping with toxic environments, feeling ownership, building relationships, having a voice, wanting balance, developing wellness skills, and using wellness language.

The natural progression of coding exposes the researcher to new interpretations of the data and enables relationships to be drawn between participants’ perspectives. According to Charmaz (2006), fit and relevance are two criteria of grounded theory analysis: “Your study fits the empirical world when you have constructed codes and developed them into categories that

crystallize participants' experiences. It has relevance when you offer an incisive analytic framework that interprets what is happening and makes relationships between implicit processes and structures visible" (p. 54). I found Birks and Mills' (2011) citations of Barry Gibson's candid experiences with grounded theory to be helpful as I set my intent to achieve fit and relevance. I wanted to be mindful of the possibility of generating "twenty different fledgling codes that are describing the same thing" (Birks & Mills, 2011, p. 105), and focus my open-coding on comparing incident-to-incident and code-to-code, associating the words and examining similarities. Gibson (as cited in Birks & Mills, 2011) suggested "when you get sick of reading data, sit with these codes and write memos on how they are related" (p. 106). I was determined to move beyond merely re-describing the data using different words (described by Gibson as the 'coding' process), to discovering how to handle the emerging concepts present in the teachers' responses and how to set them within the context of sustainable CSH and the interplay between system and individual responsibilities. Through this process of constant comparison between codes, across the literature, with my own memos and experience and participants' stories, I was able to engage in the distinguishing element that sets grounded theory apart from other interpretive research designs: the constant comparative analysis.

Initial coding continues until those codes start to morph into categories and intermediate coding begins (Birks & Mills, 2011). Termed 'selective coding' by Glaser (as cited in Birks & Mills, 2011), 'focused coding' by Charmaz (2006), or 'axial coding' by Strauss & Corbin (as cited in Birks & Mills, 2011), the intermediate stage identifies patterns and relationships as categories emerge, and makes connections between and within the categories themselves. In this stage I began to experience what Clarke (as cited in Birks & Mills, 2011) referred to as analytical paralysis as "a condition where you feel totally overwhelmed by the data and your seeming

inability to develop a theory from it” (p. 102). I found that a strength of grounded theory is also its challenge – the data are rich and varied in the literature, my memos, and participants’ responses; they are also overwhelming. Through the intermediate coding process I was eventually able to clarify relationships and patterns for myself, and justify the amalgamation of connected categories. For example, a memo from my third interview stated “I think perhaps the yellow category: Impact and Value of CSH could be combined with purple: Impact on Teacher Wellness. They seem to result in a pattern of similar responses, suggesting a potential connection between CSH and teacher wellness?”

I identified properties to characterize each of my categories. A ‘property’ is defined by Strauss and Corbin (as cited in Birks & Mills, 2011) as a “characteristic of a category, the delineation of which defines the category and gives it meaning” (p. 111). I used key words from the codes that informed the categories in the first place. For example, ‘ownership’, ‘guilt’, and ‘cutbacks’ are properties of the ‘challenges to being effective’ category. Also during intermediate coding, it is important to integrate or link the categories together. This process was made easier by referencing my original theoretical framework for the study. Using this, I was able to ask important questions of the data in connection with my original intentions: was the presence of the ‘individual’ and/or ‘system’ evident in the data? Did those connections reflect the literature on individual and organizational engagement and change? Theoretical sampling became integral in filling the gaps that surfaced through this refining of categories through defining their principles and dimensions (Birks & Mills, 2011). I was able to identify who was appropriate to interview next, and adapt my interview guide according to new questions that had been raised.

Theoretical saturation is said to occur when there are no new codes identified in later rounds of data generation or collection pertaining to any particular category (Birks & Mills, 2011). Birks and Mills cited Morse (1995) who stated “researchers cease data collection when they have enough data to build a comprehensive and convincing theory. That is, saturation occurs” (p. 112). I reached theoretical saturation as the later stages of data generation resulted in repeat codes that could easily fit into existing categories. The study is intended to provide rich understanding within the context of CSH schools, exploring maximum variation perspectives within a school setting; it provides a contextual analysis for stakeholders involved in CSH and public education to consider when examining processes and potential within their own contexts.

Progressing toward the advanced stage of grounded theory analysis, I was able to identify two core categories encompassing the rest. Birks and Mills (2011) explained that selecting a core category occurs “when the researcher can trace connections between a frequently occurring variable and all of the other categories, sub-categories and their properties” (p. 113). I identified two recurring, yet opposing, variables: change and sustainability. It is difficult to pinpoint exactly when these two overarching categories came to light for me, since I was so immersed in all forms of data, from the literature to the transcripts and my own writing in the memos. Everywhere I turned it seemed to show ways in which **change** may be necessary to get to a point where **sustainability** is possible. In either a positive or negative direction, change could have staying power – from the toxicity perpetuated in a staffroom, to the enthusiasm of a few passionate colleagues. Connecting these core categories to the rest of the categories and sub-categories informed the final pieces of my developing theory.

## **Ethics**

Ethical guidelines and protocols were adhered to throughout the preparation and duration of this study. All participants were informed of the limits that anonymity could be assured, and all were advised to maintain confidentiality in focus group interviews. All names, of schools and of participants, are pseudonyms and any information precise enough to allow identification has been removed. After the study was completed, the results were shared with the participants, before publication, so they could approve of the final interpretation and also to remove any information they believe could give them away or threaten their role in the school. Prior to the commencement of the study, my research proposal was approved by the Behavioural Research Ethics Board at the University of Saskatchewan on July 2, 2013.



## **Chapter Five**

### **Data Findings**

I embarked on this research endeavour through a genuine desire to explore sustainability possibilities and concerns in school wellness projects. As a ‘health champion’ and wellness teacher in a junior high school, I had learned first hand about the CSH model and observed the potential power of actively engaging teachers in a wellness culture shift by inviting conversations about their own wellness needs and concerns. My concern, however, was in the staying power of CSH if teachers perceived it more as an initiative than embedded in the culture of the school. As much as CSH promotion reassures it is not an ‘add on’, teachers are continuously bombarded with new processes and projects to implement – their perceptions may be quite different than that of someone outside the frontlines.

The literature echoed my own apprehensions concerning the sustainability of CSH in a school. Even with strong and supportive community partnerships, the teachers within a school assume much of the responsibility for building and maintaining momentum for success across each CSH pillar. Increases in workload and initiative-overload in education (the grey area between bandwagon initiatives versus meaningful, progressive reform is a discussion for another study) could result in even the most passionate teachers experiencing a forced shift into survival-mode; only the most essential initiatives survive. Could CSH be considered an ‘essential’ initiative? Or was it necessary or appropriate to consider it an ‘initiative’ at all? That terminology may carry certain assumptions; ideas labeled as ‘initiatives’ may come and go with the ebb and flow of education reform. Instead, CSH’s intention is to be embedded in the culture of a school, and as such, should not hypothetically be the responsibility of a select few, but of all stakeholders including school staff and the school system itself.

My research topic and question evolved throughout my graduate courses and personal experiences with CSH. As I read more literature on teacher stress and wellness, in combination with research on CSH implementation and projected benefits, I began to wonder if there could be an inter-dependent relationship between effective, sustainable CSH and teacher wellbeing. That is where I started. Where I ended up, through my immersion in the data analysis process, showcased themes reflecting effective CSH design and introduced new insights for further exploration. The small scope of this qualitative study limits the potential for generalizations, but generalization was not the intent. My resulting theory is organic and suggested as just the beginning of a broader exploration into sustainable CSH.

Initially I assumed that an appropriate approach to my evolving theory would be a storyline or conditional/consequential matrix as defined by Strauss and Corbin in Birks and Mills (2011). However, grounded theorists differ in the language they use to describe methods of theoretical abstraction (Birks & Mills, 2011). I began to realize that a storyline or consequential approach implies a beginning and an end; the purpose of my research was to explore perspectives of sustainability, which does not necessarily have a beginning or an end. From this realization, I began to draft a conceptual representation of my theory using a circle. I drew upon the CSH diagram presented in Chapter 2 (Figure 2, p. 22), which used the concept of ‘sustainability’ as the overarching and continuous result surrounding the other CSH processes. In this Chapter I will present the final piece of the data, the participants’ responses, that became essential in the constant comparative analysis leading to theoretical saturation and its final conceptual design.

The following section will provide an introduction to my conceptual framework and the categorization process of relevant data that guided its development. My original categories and

their descriptive properties evolved through a continuous amalgamation and restructuring by identifying themes in the transcripts and my memos, and by making connections between the properties. The descriptive properties were key characteristics used to describe my original categories and emerged from the coding process (outlined in Chapter 4). My original categories included (with the corresponding descriptive properties of each listed in brackets): CSH Value and Importance (basic needs, health benefits and skills, ripple effect), CSH Impact on Teacher Stress/Wellness (positive relationships, responsibility, healthy practices, workload), Teacher Stress/Wellness Impact on CSH (passion, ownership), Tools for Sustainability (purpose, passion, relevance, change), Culture of Wellness (relationships, satisfaction, change), Teacher Roles Concerns and Needs (uncertainty, responsibility, lack of balance, time, cutbacks, stress, initiatives), Teacher Supports (time, ownership, voice, feeling encouraged/supported, down time), and Challenges to Being Effective (guilt, scepticism, change, toxic environment, manageable workload). As mentioned earlier, these categories were restructured throughout the data analysis process to produce more concise representations of the data results and emergent theory (see Chapter 4). Resulting from this process, I reduced the number of categories from eight to four, and these four became central pieces of the conceptual framework of my study: Teacher Roles and Supports (sustainability), Addressing Challenges (change), and Inspiring Action (change and sustainability), and Shared Responsibilities. These were the four categories that I used for my analysis.

While analyzing the four categories, I discovered a relationship between Shared Responsibilities, and the other three categories of Teacher Supports, Addressing Challenges, and Inspiring Action. In my original theoretical framework informing the design of my study (Figure 3, p. 40) I had made a distinction between the individual approach and the system approach to

supporting teacher wellness. What became apparent is that while there were important roles that each entity played, common themes of responsibility surfaced within both approaches. There appeared to be shared responsibilities not only between the system and the individual, but within the school community itself (which I hadn't included in my original framework). While unique in their specific contributions, each type of stakeholder (teacher, school administration, system/board and government-level leadership, as well as the community) *shares the responsibility* of supporting teachers' wellness and CSH sustainability by enhancing *teacher supports, addressing challenges, and inspiring action*.

The relationship between the final four categories will be highlighted, as well as the presence of connections and relationship building. As trends were established between the original eight categories and properties, my final four categories began to take shape. This process resulted in a final conceptual representation, much more detailed than the original, found in Figure 4, p. 107. There are important cyclical, interdependent connections between the four categories as they contribute to both sustainability and change. The suggested message is that there are important connections between these concepts in a continuous cycle toward both sustainability and change. Key words associated with this cyclical, ongoing process were extracted from the previously mentioned properties (describing my eight original categories as they evolved through the analytical journey). Feelings of **ownership** support teachers in creating action plans; **passion, purpose, time** and **relevance** are all important elements of effective **communication** and **collaboration** between the system and individuals. I have italicized or bolded any key words represented within participants' quotes.

In the following sections I will summarize the data findings by highlighting: a) the participant responses, in combination with b) the expanded literature review, as it all relates to

the final categories. As explained in Chapter Three, I followed the processes of grounded theory analysis by engaging in a concurrent literature review as themes emerged from both my participants' responses and my own researcher memos. This powerful combination helped to ground my resultant theory in all three areas of data (literature, participants' perspectives, and my own memos). To provide clarity in how and when I was drawn to particular literature sources and how they connect to participants' responses, I have included the literature review that was provoked by the data in this chapter, rather than in Chapter 3 with the initial literature review.

Coding of the first interview did reveal topics aligned with the initial literature review, but also called for a more extensive evaluation relevant to theories of engagement, motivation, self-determination and emotion as they connect to *wellbeing, stress, autonomy, ownership and guilt*. In my initial analysis, I observed connections between feelings of pride and ownership, a sense of responsibility, and resulting stress and guilt if expectations were not perceived as having been met. The concept of **basic needs** also surfaced in this initial interview. Resulting from the continued literature evaluation was a collection of theories that connected the bolded concepts above (including Maslow's famous hierarchy of needs introduced in 1943). This chapter was organized using three of the final four categories as headings (Teacher Roles and Supports, Addressing Challenges, and Inspiring Action), with the fourth category of Shared Responsibility highlighted within each. The corresponding descriptive properties for the categories are used as sub-headings in order to clearly establish the ways in which the participant and literature data jointly contributed not only to the naming of the final four categories, but also to theoretical saturation and the study's resultant conceptual framework.

## Culture of Wellness

Before presenting the data findings in terms of categories and themes, I will introduce participants' perspectives on the overarching aim of CSH: creating a culture of wellness within a school community. Not only is this an important starting point to set a framework for discussion on wellness, but participants alluded to important themes in these initial responses that resurfaced throughout the transcriptions and the literature, contributing to the final categories. The interview guide used was adapted through the data collection process, particularly in preparation for the administrator interview, as I wanted to explore *managerial* questions around initiative rollout, staff morale and absenteeism. However, I kept the opening question consistent to enable a clear depiction and comparison of participants' working definition of wellness. The introductory question was posed, "how would you describe a culture of wellness within a school?"

I think that just has to be alive, *it has to be talked about*, it has to be something that gets students and staff involved in not only in being active with your body, but with your mind too. Having opportunities to be healthy decision makers about not only food and exercise, but decisions, choices, *relationships*. All those need to be seen as staff and students as *connected* and very influential on our work that we do when we arrive at the building everyday. So if it's to teach or to learn, that a culture of wellness implies that we are broadly considering how we as human beings affect each other, that environment, ourselves, communities, societies. It's not just 'eat an apple a day' and you're healthy ... it's being very aware of what wellness means and actually using the *language* to define it for staff and students, and be able to use explicit examples as you're teaching others how to be healthy. (P1)

Where everyone, all the stakeholders, and teachers and students, support staff, are happy and thrive, are *healthy*. There is great *collaboration*, and they enjoy coming to work and being with each other. Enjoy coming to work and *feel satisfied* in the workplace. Strong focus on *relationship* building, and trying to meet the needs of students and give them lots of opportunities to go through different avenues to find strengths. (P2)

I guess what I'd say is that people are *feeling positive* about the environment, they *feel energized* in the work that they're doing, and that negativity isn't a predominant factor within the culture of the school – with staff. But I also think there's a lot of mitigating factors that are beyond the scope of the school that affect the wellness of the school.

*Building positive relationships* is huge part of creating a culture of wellness. (P3)

I think there's an *intentional* will to ensure equality; there's almost a calmness to the building. But I think it needs to be intentional, there needs to be a willingness to ensure that *people are willing to look out for each other*. I think that's the biggest thing, you know, other than people look well. (P4)

Positive energy and *everyone gets along*. (P5)

Across the board, participants mentioned various dimensions of wellness, but the common thread woven throughout involved social wellbeing through an emphasis on *relationships*: trust in one another, trust in the school board, and an overall positive energy. Also the idea of intentional discussion “it has to be talked about” (P1). From research on CSH, we know that having a health champion to help drive those discussions is important, but engaging the entire staff is essential for sustainability. As mentioned earlier, a cultural shift requires majority engagement and buy-in. Themes of motivation and engagement surface throughout participant responses and subsequent literature explorations.

## **Teacher Roles and Supports (sustainability)**

Participants identified their perceptions of valuable *teacher supports*, which stemmed from their insight on *teachers' roles* and their *concerns* relevant to the conversation of wellness and balance. These categories were closely connected; the teacher supports suggested by participants were made in response to roles and concerns associated with the profession, and with wellness and CSH in particular. Therefore, the originally separate categories of 'teacher roles and concerns' and 'teacher supports' merged to become one overarching category. By addressing both concerns and celebrations of teachers' roles, this section will provide a snapshot of participants' key responses which, when combined and connected, illuminate a vision of necessary teacher supports for establishing sustainability not only in CSH, but in teachers' overall mindful and meaningful practice. Again, the subheadings represent the descriptive properties that helped to shape the final categories. Some properties appear in multiple categories (for example, the properties of *connections* and *relationships*), but there are also unique properties to each category.

**Connections, relationships and work culture.** As evident in the descriptions of a culture of wellness presented previously, participants spoke of the importance of **connections**, between their colleagues, students, administration, and the system, but also within themselves.

That's why you're a teacher, for the *relationships*. It gives you *satisfaction*. (P2)

Increased workload demands in combination with colleagues exhibiting a protective mindset on their time have the power to unleash negative attitudes within the building, which ultimately affects the quality of relationships. During the focus group interviews, participants noted that negativity breeds negativity, unless one makes a conscious effort to remove her/himself from the environment, or change the environment.



I'm in my room during lunch; I don't go into the staffroom anymore because it's so negative – staffroom venom. (P4)

I don't go into the staffroom anymore because there's too much complaining. And I felt like I was getting sucked into that at one point so I just stopped going. (P5)

What brings staff morale down is the perspective of how much people are or aren't contributing. Admin does not monitor what everyone is doing. There are complaints about accountability. (P2)

There are no outward consequences. Maybe there is accountability and we don't know about it. Uncertainty of accountability breeds animosity. (P4)

Participant one suggested a potential solution to combat this inequality in time commitments:

I think the best answer to it is to have a process for equitable extra-curricular and ensure that everyone is doing something, because it's hard to pick up the slack in times of cutbacks & reductions especially. (P1)

When asked her viewpoint on the potential impact of an equitable extra-curricular distribution system with enforced accountability, Participant 2 responded:

I think it would make the more negatives even more negative, and the people who are already contributing a lot of hours would contribute more. Maybe it would take away the behind the scenes complaining. (P2)

Administrator responses also included the reality of cutbacks, and the direct impact it has on teachers' wellbeing:

I think as there's reduction in staff – system reduction in staff – I think it adds added pressure on people. I think the jobs don't go away; there's more to do with less people. (P3)

In response to a question about the evolution of CSH, Participant 1 emphasized creating opportunities for staff to have dialogue about their feelings, needs, and overall issues of concern to support a positive environment as well as maintain momentum within implementation of CSH:

I think the most valuable thing in any situation is just having an opportunity to really *voice what you're feeling*. The questions are good, they allow you to get to the core of what's going on. That having a more open forum for discussion is important. The dialogue that we have as colleagues is always ongoing, but having a similar dialogue in a professional way is important. It's easy for people to bitch & complain about what they don't have, and what's wrong with everything ... but if there's enough *recognition* that there's a significant issue or problem, that people can see that it needs to be addressed. I also think that teachers can get into a bad place when it comes to talking about their unhappiness. That can be very *toxic*. I think those proactive conversations need to be more visible/visual in our staffroom space. (P1)

I highlight the above contributions now, when talking about sustainability, because quality social relationships are the foundation of any kind of sustainable change.

**Ownership, passion, purpose and voice.** Connecting to one's own sense of purpose and passion is essential to forming relational connections, as it builds confidence and self-efficacy. This is well represented in the research literature (presented later in this section). Participants discussed, both explicitly and implicitly, the importance of connecting to vocational passion and purpose and having a respected voice as a professional:

Teaching allows me to mix with so many different people both students and staff, and give my *authentic self* to those people that I couldn't do working in an HR position. You

can affect people positively, but also negatively if you're in the wrong place or unwell.

(P1)

Participant 2 identified the impact that student-centred educational philosophies can end up having on educators:

I would say that since we are so student-centered, sometimes the needs of teachers get kyboshed. Always over the needs of the students, regardless of what's realistic. (P2)

This may also play on the general assumption that teachers are passionate, dedicated, and already willing to put themselves to the side for the benefit of their students:

I think most hard-core teachers are going to say that they love teaching because they love kids. But it's also a very impactful position in society. So, it is respected by more people than it's disrespected by, and that goes back to why it's so important to make sure our teachers are taken care of. (P2)

Participant 3 also suggested ways that ownership leads to self-imposed stress:

They put stress on themselves by putting high demands on themselves. (P3)

Senge (as cited in Intrator & Kunzman, 2006) advocated for schools to be staffed by individuals who know how to learn and grow. Relevant to CSH implementation, Intrator and Kunzman discussed Senge's view that effective reform and personal growth, which are also hallmarks of the CSH model, happen only when individuals connect with a deeper understanding of their own thinking. Perhaps reaching one's full potential is dependent upon strong metacognition. While what began to surface in the interviews was more focused on the traditional pyramid of needs, expressing concerns with not having time to use the washroom freely throughout the day or lack of sleep, Intrator and Kunzman (2006) suggested that awakening teachers' sense of purpose is also foundational:

Without laying the groundwork that creates purposeful, resilient teachers, any benefits of training centered around new procedures, techniques, and strategies will eventually fade. Overloaded teachers who work in isolation will not retain what it takes to do their most inspired teaching. (p. 42)

Schools are unique settings and as such, call for an innovative perspective on ‘basic needs’:

Efficient, programmatic professional development that focuses on content or classroom survival skills may appeal to schools because such programs seem to represent the education equivalent of food and safety. But such programs alone don’t ultimately answer teachers’ deepest needs. If we want schools to sustain and develop effective teachers for the long term, and to foster both teacher growth and student learning, then we must recognize that the way to truly increase teachers’ capacities and skills is to **engage their souls**. (p. 43)

The literature highlighted on this topic suggested that a direct connection between the purposes of CSH and teachers’ sense of purpose and self-actualization should be established, ideally through a reconnection with their passion for teaching in the first place and a deliberate, observable value placed on their wellbeing by the school and system.

While feelings of **ownership**, as well as **passion** and **purpose**, are essential to wellness and work satisfaction, they also have the power to create barriers in achieving balance. Connections to a sense of purpose and feeling like a contributing member of a school are critical, but the flipside to being passionate and how it can breed animosity (therefore impact relationships negatively) is also addressed in participants’ responses. This includes feelings of guilt for saying no, and comparing time commitments to colleagues.

**Guilt, responsibility and basic needs.** Participants' revelations did not always surface in uplifting or positive ways, as teachers addressed the barriers they had experienced in achieving connections to personal wellbeing.

Another negative thing for health: feeling *guilty* when we don't take on absolutely everything. What brings staff morale down is the perspective of how much people are or aren't contributing. (P2)

If nobody else volunteers, I feel *ownership* over doing it, and then I feel *guilt*. Then I eat ice cream. It's hard to reconcile that feeling of 'we're not doing enough', 'we're doing too much'. I don't know, there are certain things that we probably could do as a staff, school, board to make this more manageable? (P1)

People who have a lot of self-initiative do things from their own beliefs, not the expectations by admin. They have a lot of *ownership*. When it isn't always leadership from the top people put more expectations on themselves because they have control. (P3)

I would say everyone puts their lives on hold for the school year. And finds it very difficult to maintain balance. I don't know; I love my job, I love working with kids. I love my colleagues. But I was so unhealthy last year. I can't handle not having a *basic necessity* like going pee. But if anything happened if you left the room? *Guilt* and *responsibility*. I don't know any other career that has that. Maybe Emergency Medical Services or police. (P2)

There's a high level of standards that teachers hold themselves to, but we just can't maintain it. (P4)

As demonstrated above, guilt surfaced frequently in participants' stories. I discovered a study that sought to move beyond popular methods of researching teacher effectiveness through

examining their cognition and thinking, to understanding the emotions and feelings of teaching, where specifically the emotion of guilt was highlighted. Hargreaves and Tucker (1991) discussed two kinds of guilt: persecutory and depressive. Their qualitative study also identified four guilt traps of teaching:

1. The commitment to care
2. The open-endedness of teaching
3. Accountability and intensification
4. The persona of perfectionism

(Hargreaves & Tucker, 1991, p. 496)

Interestingly, these ‘guilt traps’ paralleled the challenges and barriers to wellness and satisfaction that my participants had been identifying.

According to Hargreaves and Tucker (1991), guilt is a “central emotional preoccupation” (p. 494) for teachers. Hargreaves and Tucker emphasized how frequently guilt has been brought up through recent studies of teachers’ recounts of their daily lives. Below are excerpts from Hargreaves and Wignall’s studies (as cited in Hargreaves & Tucker, 1991), demonstrating that while the exact concerns within the teaching profession may look different, the emotions experienced look quite similar now, over 20 years later “teaching is a profession that you go home, you always have stuff that you think about. You think, ‘I should be doing this’: I feel guilty sitting down half the time” (p. 494). They go on to say:

[Wasted time is] when I’m at home and I take a half hour to watch a programme on pollution or something, that’s because I’m interested in knowing about my environment. But then I get angry at myself. The ‘teacher’ gets angry at me and says: ‘You should be in your study correcting your spelling books because they’re still there and they will need

to be marked.’ Then I have a great inner conflict. Where do I have the time to look after who I am, the person, and to look after my responsibilities as the teacher and as the parent, wife, mother? (Hargreaves & Tucker, 1991, p. 494)

Solutions to the identified ‘guilt traps of teaching’ resulted from Hargreaves and Tucker’s study. Some of these solutions mirrored the suggestions of my participants, including easing the accountability and intensification of demands of teaching, and building teams of colleagues who set standards at the school level, reducing the open-ended and uncertain initiatives set forth by the school boards.

Participants in my first two interviews both expressed concern for basic needs. Both of them brought up the high prevalence of urinary tract infections (UTIs) in teachers. A study was done in France using a cross-sectional survey to explore the question of whether or not teachers experience a higher frequency of certain health problems (Kovess-Masfety, Sevilla-Dedieu, Rios-Seidel, Nerriere & Chan-Chee, 2006). Results from the study indicated a higher risk of lifetime anxiety disorders, a higher prevalence of laryngitis, conjunctivitis, urinary tract infections, and varicose veins, to name a few (Kovess-Masfety et al., 2006). The cross-section was of 3679 teachers and 1817 non-teachers aged 20-60 years old. This raises cause for concern and further exploration. Both of my participants who raised the issue of UTIs noted feeling **guilty** when leaving the classroom to use the washroom because of professional and legal supervisory responsibilities.

While **basic needs** were mentioned in the initial interview, they were emphasized in a more significant way in the second and subsequent interviews. Maslow’s (1943) hierarchy of needs organized human beings’ basic needs into categories. In Maslow’s original theory, the most basic and foundational needs must be met in order for someone to progress up the

hierarchy. These foundational needs were physiological, followed by safety needs, feeling a sense of love and belonging, self-esteem and a sense of accomplishment, and finally the last and hardest to reach, self-actualization (Maslow, 1943). This final peak of the hierarchy involved realizing one's full potential. Maslow's original work has been explored and modified, with acknowledgement that not all people go through the stages as Maslow had laid them out. In fact, a focus on self-actualization (the peak of the hierarchy) may actually contribute to fulfilling and enhancing the originally defined basic or foundational needs (Intrator & Kunzman, 2006).

The roles and responsibilities of teachers can impact their capacity to meet basic wellness needs on a daily basis. Participants shared their perceived workplace realities, the restrictions and responsibilities associated with those, and the potential value in receiving additional supports for pursuing health in a profession that has a significant societal impact.

People just think that report cards are stressful ... it's the day-to-day stresses and decisions you have to make: that's what's stressful. We have very little time in the day where we could pursue something like a lunchtime walk ... I think that is also something that is just not possible. But, I think a lot of those choices fall on teachers just to make as human beings. And I don't know ... maybe that's fair too ... but as a very influential group of people in our society, I think it would be something to consider taking care of ... more than just one person ... because this one person affects a lot of other people. I think teachers are overlooked in a number of ways. (P1)

These themes of connection, ownership, passion, purpose and unfortunately, guilt, drew me toward relevant literature on motivation and engagement. Theories of motivation and engagement are inherently relevant to the development of skills and values in both education and health. The Oxford Dictionary provides a general definition of motivation: "a reason or reasons



for acting or behaving in a particular way; desire or willingness to do something” (Oxford Dictionary, 2014). Prior to self-determination theory, theories of motivation were concerned with intentions: intentional versus unintentional behaviour (Deci, Vallerand, Pelletier & Ryan, 1991). These theories focused on goals or outcomes and the processes that direct behaviour toward those desired outcomes (Banudar, 1977; Dweck, 1986; Eccles, 1983 as cited in Deci et al., 1991). According to Deci et al., these theories failed to address why those certain goals or outcomes were desired in the first place. Perspectives on engagement have also explored some of the reasons behind an individual’s actions or behaviours. Phillip Schlechty (2002) identified different types, or levels, of engagement within the context of education. According to Schlechty, engagement occurs when personal meaning is attached to the activity and adequate levels of interest and challenge are established; engaged people have a strong grasp of the material and are able to retain and transfer the knowledge.

Motivation takes many shapes and forms, from survival needs to internal desires. Maslow (1943) discussed a hierarchy of needs, from survival motivations – meeting our foundational, basic, physical needs to ensure our wellbeing before we can progress to our more psychological needs (although the two are linked). Self-determination theory (Deci et al., 1991) includes three innate, psychological needs, including competence, relatedness, and autonomy (or self-determination). Motivations can also be categorized into intrinsic and extrinsic. Intrinsically motivated behaviours are engaged in for their own sake; individuals engage in activities out of interest, not in expectation of a reward other than participation itself (Deci et al., 1991). According to Deci et al., extrinsically motivated behaviours are engaged in through the understanding of consequences (positive or negative) rather than interest. An awareness of a reward or punishment is the root of extrinsically motivated behaviours, and related to the theory

of behaviourism. Connecting to these theories of motivation, behaviour and engagement, Hargreaves and Tucker (1991) discussed Woods' view that "creativity in teaching is accompanied by feelings, even thrills of discovery and breakthrough, in moments which display innovation, involve teacher **ownership**, and show teacher control and have **relevance** to teachers' and students' needs" (p. 494). Themes of ownership and relevance surfaced throughout the interviews and focus group discussion. My memos reflect concerns of how sustainability in any type of initiative, especially one with aims of a cultural shift, could possibly occur without ownership and passion – and the dangers of mistaking engaged ownership and commitment to CSH by teachers, for commitment out of guilt. If teachers commit to CSH out of guilt, it may appear for a while as though they are engaged and the initiatives are progressing, but sustainability may be compromised as well as the capacity for CSH to truly engage students and influence health outcomes.

**Time and Relevance.** Relationships between time and relevance, in response to questions about teacher realities and supports, were apparent in responses. Participants expressed them in terms of 'needs', how they connected to personal wellness, and their impact on essential elements of change and sustainability including collaboration and communication.

I still kind of miss out on *down time*. I think the biggest things in a teacher's day are the lack of down time, and opportunities to be healthy and in the sense that you can eat healthy, you can exercise, but you can't do both. (P1)

The key factor is *time*, and when you only have so many hours in a day, regardless, your primary job always comes first, and that's meet the needs of the students. And when you have one more thing on the plate, the first thing to go is your own well-being. (P2)

The administrator also recognized the lack of down time as a growing concern and impactful on teachers' mental wellbeing, especially in combination with their own high expectations:

I think a level of anger and frustration is felt that there's never any *down time*. It's perpetual ... one thing after another ... it never slows down. I would say to some degree their mental wellbeing is being affected. There are self-starters and people have so many high expectations of themselves. (P3)

Participant 1 shared the challenges in trying to balance the limited time a teacher has in CSH initiatives for both personal and student benefit, with the second response specifically addressing a question on sustainability of CSH and sustainability of teacher wellbeing:

I do work out with the kids at the end of the day ... but that's not really 'me' time because you're still responsible. (P1)

One of the most difficult things becomes the *time*, and the expectations of teachers' time outside of the classroom. When I wouldn't work out, it was because I had to go home and do more school work. Inevitably, that is what happens. (P1)

On the discussion of teacher supports in relation to teacher realities, Participant 2 outlined the decision making process that would occur if you saw relevance, but lacked time. Priorities must be ranked.

So they have this yoga class at 4:30, or I could meet with this parent, pick up my kid, go home, make dinner, put them to bed, and then do my marking ... I think I'm going to have to miss the yoga class. We have a pretty sweet workout facility, when do you have time to work out? Are you able to even enjoy it if you're thinking about all these other things you have to do? (P2)

What is the potential outcome of not receiving support to sustain wellness and balance throughout the year?

What I don't like about the stress of the teaching life is that I didn't feel at the end of the year that I had the *kind of support that I needed* in terms of **time** to sort out my own life. And I was working late hours, and it took its toll in so many ways. That is a bad place to be in. And not a place I want to be in. There's all this talk about *balance* but I haven't been able to find that. I can be either active, healthy, or I can be a really good marker, planner, and teacher. I can't do both, and doing either of those things in a half assed way isn't good in either case. (P1)

When asked to consider the constant flow of new initiatives and heavy time commitments as perhaps 'the nature of teaching', participants' perspectives varied, but shared a realization of a shift in professional realities and its impact on teachers' wellbeing and ability to achieve balance:

I would say in the last 5 years though that pressures on teachers and teacher exhaustion is significantly higher. I don't think it's because what is demanded of the school it's what demanded of the system. I can think back 5-7 years ago we talked about teachers as being 'heroic', and the question is the demands on them has been far greater than it was even 5-6 years ago. So if it was heroic 5/6 years ago ... what is it now? (P3)

I think a lot of it is coming above. School admin hands are tied in some aspects. There's no work-life balance. I would say everyone puts their lives on hold for the school year and finds it very difficult to maintain *balance*. (P2)

Perceived time limitations are also *challenges to being effective* which are expanded upon in the next section, 'Addressing Challenges', but it is significant to mention now in relation to sustainability and contextual understanding. It presents a real and frequent dialogue that takes

place for busy professionals, in this case teachers, when prioritizing their own health over their other responsibilities.

**Collaboration, communication and trust-based professionalism.** In terms of relevance, participants mentioned a constant bombardment of new system initiatives and “administrivia” (P2), admitting the inevitable stress associated with uncertainty, in addition to another demand on their time.

We have more meetings. So many initiatives. There’s just so much extra. It’s beyond paperwork. Again, I think from my perspective, I have no problem doing anything if it’s *meaningful* for learning, but when it’s just doing paper trail – someone’s hair-brain idea, when it’s not *justified* and meaningful, you start to resent the process. Top-down initiatives need to be *justified, meaningful, beneficial, and introduced*. (P2)

There is more frustration & dissatisfaction, more negative talk about the system as a whole. I think a lot of times teachers question their (the system’s) motives – that they’re not focused on schools or kids or teachers, they’re focused on themselves for their own purposes. There’s more and more dissent that what’s being asked and demanded of them is beyond the scope of what is reasonable & practical. (P3)

I think when you have outside factors ... system led initiatives with undefined roles and expectations, and you combine that with new personnel, it’s a perfect storm. Which you don’t have control over. New initiatives are unclear and undefined. What is that going to look like? How much work will it be? That causes a lot of stress. (P4)

Concerns and frustrations with board decisions that seemed to be rushed and lacking organization emerged several times. These perspectives contributed important data strengthening

the value of investing in relationship building between the school board and the schools themselves.

There is a continuous re-introducing of new initiatives that aren't well thought-out. That aren't considerate of all aspects of the board; it's not a one size fits all. The interpretation is being left to administrators, and sometimes that's not across the board either. And everything's last minute, again ... a constant yo-yo that stresses people out. A lot of *uncertainty*. Admin try to make it manageable, but it ends up being unmanageable. (P2)

More clarity, less initiatives – decisions are made & implemented quickly. The way the person delivers it as well has to be mindful of what the staff is *feeling*, instead of creating more negative feelings or that they don't understand or care what you're going through. (P5)

A lack of trust and stability in the relationship between the system and in-school personnel, resulting from a lack of **communication** and **collaboration**, may also have an impact on the culture of a building.

I think any time people are put under stress, and in this board they are put under stress frequently, even though the rhetoric is positive, the practice does not always follow suit. I am not sure that they even acknowledge or care the type of pressure they are putting on people because the demands are always increasing with no consideration of the affect on staff. When that happens people become frustrated & exhausted. (P3)

Participant 3 was asked how that stress, frustration and exhaustion was observed (from a lack of trust), or how it manifested itself within schools:

I think more negativity about the system in general. *Feeling unappreciated* by the system, feeling used and abused to a large extent. I don't think there's a strong belief from the teachers that the system cares. (P3)

Relevant literature to the above discussion on trusting relationships between the system and the school was found in Finnish research. Finland's consistently impressive PISA scores continue to draw attention to its education system. Finnish education reformer and educator to an international audience, Pasi Sahlberg (2011; 2008; 2007), identified several elements that differ from Western education. Global education reform trends include standardization, a focus on literacy and numeracy, and consequential accountability, while education policies in Finland include flexibility and loose standards, broad learning combined with creativity (focused on personality growth – creatively, morally, etc.), and **trust-based professionalism** which focuses on building a culture of trust within the system that values teachers' professionalism (Sahlberg, 2011; Sahlberg, 2007). The final, bolded element is particularly relevant to my participants' perspectives and concerns with decisions for reform being made at a system level with minimal consideration of teachers' professional capacity to contribute to the conversation. There are many demographic factors that may also contribute to Finland's high achievements on standardized tests. It seems, though, that educators in Finland are treated with a considerable amount of respect from other members of society (Sahlberg, 2007). The importance of cultivating feelings of pride, **ownership**, and value in teachers' work became evident through continuous data collection.

Exploring findings a little closer to home, a recent study was conducted in Saskatchewan that surveyed the work life and health of teachers in Regina and Saskatoon. The study results further validate the call for action to support teacher wellbeing. A disheartening number of

participants responded “the demands of their work as teachers had a negative impact on their ability to pursue personal interests (78%), their family lives (69%), their relationships with their spouses/partners (64%), and friends (55%)” (Martin, Dolmage & Sharpe, 2012, p. 20).

Satisfaction and joy in teaching relate to **emotional connections**, with teachers recounting memorable students and expressing feelings of personal **satisfaction** in observing their students’ success (Martin et al., 2012). Participants expressed a passion for teaching (98%) and looked forward to going to work (89%) (Martin et al., 2012). While Martin et al. recognized that the scope of their study limits the ability to establish a causal relationship involving work-related stress on the health of teachers, they do recognize that “it is possible that the negative realities of teaching (i.e., increasing workloads and expectations) may be finding outward expression in the mentioned physical and mental health problems of teachers” (Martin et al., 2012, p. 24). This recent and relevant data linked to themes of **emotional connection** and **personal satisfaction** that continued to emerge from my participants’ responses. These literature findings mirrored my participants’ responses in celebrating the positive implications: **satisfaction** and its interplay with responsibility and commitments.

My own personality and *motivation* to be involved in things also creates that conflict. I get *satisfaction* from participating in the school environment. And that is way more than just the teaching, not the committee work, meetings, meetings, meetings; so many meetings. (P1)

This next perspective suggested that inspired **collaboration** and creation from teachers themselves could help to shift the hierarchy of education and decrease the perceived disconnect between pre-service education and actual on-the-job teaching:



The system itself of hierarchy is still based in the 80s, chief-superintendent, directors, etc. Where they want to go and a lot of young teachers are being trained to go and want to go, there is no *connection*. Multi-modality; it's about the process not the grade. I think you'll find the ones who complain the most are the ones who knew what it was like back then. Young people see the light and want to *change*. Now they're holding us back because of the board structure and new initiatives. (P4)

Participants' perspectives on the current and evolving context of teachers' roles, responsibilities, and desired supports provided valuable insight for understanding the environmental factors contributing to CSH sustainability. Relationship building was embedded in responses, from those within the building itself, to the relationship between the school board/system and the school. Responses suggested a shared responsibility to building this healthy relationship through respect, trust, communication, appreciation for perspectives and contributions. Participants felt a lack of respect and empathy from the board, but an expectation to carry forward initiatives, often presented in urgency. While these participants did not perceive CSH to be a board initiative, it becomes difficult to approach it as anything but an 'add-on' (which is opposite of CSH intentions) when priorities of student learning and assessment (not to mention teachers' family lives) take precedence. Participants acknowledge that healthy students learn better, even from their own observations resulting from CSH-focused projects within their own schools: "I think it creates a noticeable change in the overall environment. Made it a lot more conducive to learning and activity; students' *basic needs* have been met". However, there are only 24 hours of the day and teachers' roles extend beyond the walls of the school; it is their passion for education and love for kids that helps to sustain momentum. To help support that passion and commitment, teachers' personal wellness must take precedence over the continuous

shifts in processes through decisions at the board level. While the school board may hold the perspective that they are transparent and consider teachers' voices, these participants express the opposite perspective.

### **Addressing Challenges (change possibility)**

**Connections, relationships, work culture and purpose.** Relationships drawn between participants' varied insights on the challenges and barriers to realizing both CSH and optimal teacher wellness provided roots from which the possibilities of change began to take form. The power of change, or the 'case' for change particularly related to teachers' capacity to achieve wellness, was reflected in responses: "My greatest influence is by living a healthy life in front of my students; a lot of that has to happen outside the school" (P1). With a foundation of a healthy relationship between the employees and employer, possibilities for meaningful change become more realistic.

Generating space or time for staff buy-in was an important necessity that emerged within the area of change possibilities. To inspire a meaningful, sustainable shift in school culture, engagement through relevance and connection to passion and purpose was suggested:

I think if people are given the opportunity to think creatively, they will be involved in what they can offer ... I mean, I could run a book club & could tie that to wellness. So it's just getting people to think about how all of these things actually related to wellness. Then everyone feels *ownership* too, which is part of work *satisfaction* as well, and that's a positive domino affect, if I'm thinking I have something to offer. Sustainability of it is a big factor, and approaching wellness from a wider umbrella. (P1)

I think when people are *empowered* ... they put a lot more energy and effort into things ... when they know both they're recognized for what they do and they have control. (P3)

In order to successfully collaborate, and create positive supports for staff, relationships were again emphasized.

Relevant to the above discussion, CSH implementation was specifically highlighted in participants' responses and how a lack of personal wellness among staff compounds the toxic-environment barrier to change and the engagement in CSH as a worthy initiative:

We have majority buy-in, but you'll always have your small group of negatives who would blow it off. They blow off everything – a *toxic force*. Unfortunately though, as you get more run down, that toxic force gains power. It's really hard to battle it. It influences people who are borderline, who would be susceptible to it – if they were in a different environment it wouldn't be an issue. When you're run down, stressed & tired, you find yourself ranting more and that festers; the negatives feed on that and help develop it. (P2)

When asked how to combat that toxic force which seems to inevitably present itself in various ways in the workplace, Participant 2 suggested overpowering those negative voices by empowering and supporting those individuals with positive perspectives:

Where it's so intense, you still have the majority who go on as happy as they can be – that *toxic* group will be wherever you are. Key is to keep them overpowered by positive people. Focus on drowning out their voice by supporting the positive people. (P2)

While participants felt overwhelmed by change and new initiatives, it was also seen as necessary – but not change for the sake of change – rather, meaningful *growth* for specific benefits, either to students, or to staff, or both:

When you experience initiative overload, the initiatives become 'lost in translation'.

What was the *purpose* again? (P2)

CSH was viewed as one of those entities that cultivated growth overall, positively influences classroom practices and even serving as a recruitment and retention strategy for schools:

I know that if I had a choice of going to two schools, and one of them I could develop my curriculum *or* if I could have the assurance that there's a step toward my wellness, that I'm going to be taken care of? I'm going to go for that way more, because that is going to help me teach. I'm smart enough to know that that is more important. Again, it's *basic needs*. When you overlook that, that's significant. If my school wasn't a CSH school, yeah I'd still be teaching there, but I think the doors that it opens – it's just another appealing reason to be there – because there's opportunity for growth. *And I think that nothing is more dangerous in a school than lack of growth, or stagnation, or not listening to the pulse of a place.* (P1)

Intrator and Kunzman (2006) suggested that for teachers, Maslow's hierarchy should be flipped. This hierarchy is often represented as a pyramid; basic, physiological needs form the foundation that, according to Maslow, must be met *first* in order to progress up the hierarchy to the self-actualizing peak of the pyramid (Cherry, 2013). The needs represented on the pyramid become increasingly more psychological and social as one moves up the pyramid, focusing on esteem, love, and realizing one's full potential (Cherry, 2013). Cherry (2013) summarized the characteristics of the self-actualized individual (the highest level of Maslow's hierarchy), to include self-awareness, attention to personal growth and a desire to fulfill her/his full potential. When Intrator and Kunzman (2006) suggested that Maslow's pyramid be flipped for teachers, they were advocating to support teachers in building their personal self-awareness, attention to personal growth, connection to their passions, and desire to reach their full potential (professionally and personally).

The characteristics of a self-actualized individual may help to set a strong foundation for teachers to not only sustain themselves in their demanding roles, but also enhance their capacity to flourish within the profession. Intrator and Kunzman (2006) did not say that Maslow's foundational needs, including physiological and security, were not also essential (concerns regarding these physiological needs surfaced in participant responses), but that in the teaching profession, a more deliberate focus on self-actualization could be beneficial and proactive in supporting teacher wellness and effectiveness. In this view, the self-actualization peak of Maslow's pyramid is actually foundational; considered a basic, prioritized need. This inversion cultivates powerful teaching by starting with the "soul of the enterprise, the passion and purpose that animate teachers' ongoing commitment to students and learning" (p. 38). Intrator and Kunzman compared the logic of Maslow's hierarchy to the logic of designing professional development for teachers:

We assume that to be prepared for the reality of the classroom, teachers must first be trained in such subsistence strategies and techniques as classroom management, guided reading models, cooperative learning, and process writing. Once teachers learn these basic skills, we can address their higher needs by helping them reflect on their deeper purposes as educators. (Intrator & Kunzman, 2006, p. 38)

Intrator and Kunzman cited the support that Farkas, Johnson and Duffett offered to this logic of professional development: "as professional development workshops continue to emphasize content matter, technical skills, and pedagogical theory, many teachers are responding to these offerings with skepticism, impatience, and an underlying lack of enthusiasm" (p. 38). Like all authentically motivated and engaged individuals, teachers must see and feel value and purpose in the work they are doing – within the school, the classroom, and the professional development

workshop.

Professional development needs to engage teachers in activities that cultivate capacity to teach with integrity and self-awareness (Intrator & Kunzman, 2006). Perhaps if CSH was presented as a model to enhance school culture and rekindle teachers' **passion and purpose** through personal and professional development, it would support the likelihood of sustainability of both entities: "Groups who sustain their workers *do* turn Maslow's pyramid upside down; no amount of professional development focused merely on technical proficiency will matter to teachers who are feeling overwhelmed, adrift in their mission, or disconnected from like-minded colleagues" (Intrator & Kunzman, 2006, p. 39). Conversely, teachers who *are* engaged and connected to their passion and purpose may not be swayed by professional development focused merely on technical proficiency, unless they can ensure that the new practice will benefit students.

Motivation is the precursor to engagement (Kohn, 1999). This can apply to all human beings, but for the purposes of this study, it applies to teachers and students. If the motivation among staff diminishes, how can one expect engagement in any type of wellness initiative to develop and sustain itself? As many teachers enter the profession with genuine, caring intention and purpose, their motivation for teaching, and teaching well, is intrinsic. Teachers want their students to succeed, and feel joy themselves through the process of supporting their students. A sense of belonging is a stage in Maslow's hierarchy of needs (1943); perhaps for teachers, this is in the form of respect from the community – approval as an external motivator to supplement and help to sustain the intrinsic. Conversely, other forms of extrinsic motivation, including merit pay or measurements of accountability, may be detrimental to teachers' natural intrinsic motivators. Motivation precedes engagement, and engagement precedes learning (Schlechty,

2002); and perhaps, wellness is involved in an inter-dependent relationship with all of the above: as an individual engages, wellness is enhanced, and as wellness enhances, motivation grows stronger.

Motivational techniques that pressure the subjects to think, feel, or behave in a specific way diminishes their sense of autonomy, and decreases the chance of intrinsic motivation development (Deci et al., 1991). Presentation of initiatives influences its reception by participants; when an external source controls an individual's behaviour, passive compliance, rather than engagement, results. On the other hand, when individuals perceive choice and autonomy, their behaviour becomes self-determined and they are more likely to engage in the task (Deci et al., 1991). Empowerment through autonomy is what results, which was identified by participants as a valuable tool in building positive working relationships and a personal sense of satisfaction. Satisfaction is linked to intrinsic motivators, the self-determined behaviours. A perception of choice and value in the activity would be determinants of the resulting satisfaction one might feel. Covered in the initial literature review, **satisfaction** is a key factor in reducing the negative physiological and psychological impact of stress (Canadian Institute of Stress, 2012).

A correlation seems to exist between quality of engagement and the intensity of motivation. The broad concept of engagement reflects a "person's enthusiastic participation in a task and subsumes many interrelated expressions of motivation, such as intrinsically motivated behaviour, self-determined extrinsic motivation, work orientation" (Reeve, Jang, Carrell, Jeon & Barch, 2004, p. 148). Reeve et al. cited research that pointed out that engagement also refers to the emotional quality of task involvement. If a person is actively and emotionally involved, it indicates task engagement. In one study, people who expressed their active task involvement by

being goal-directed, focused, intense, persistent, and interested, were labelled ‘engaged’ (Reeve et al., 2004). In contrast, ‘disengaged people’ showed “their passivity by being apathetic, distracted, half-hearted, helpless, or burned out” (Reeve et al., 2004, p. 148). These connections between emotions, engagement, motivation and behaviour are significant to Participant 1. She described feeling motivated by her own desire to help her students and get involved in driving positive initiatives forward, but also that some colleagues seemed to approach those initiatives with less enthusiasm, or not at all. Additionally relevant to her perspectives is another body of research that suggested “engaged people express their voice and take initiative in trying to produce changes in their environment” (Reeve et al., 2004, p. 148). On the other hand, disengaged people revealed their passivity “by allowing external forces outside their personal control to regulate their task involvement” (Reeve et al., 2004, p. 148). Engagement, motivation and emotion are inextricably linked, and have significant influence over the potential for change within a social context.

**Time and funding.** As introduced previously, financial cutbacks have taken a significant toll on the healthy functioning of a school, in decreasing available time and breeding animosity between colleagues – perhaps beyond the power that CSH can influence.

I don’t want to harp on the system or be naïve, but the fact that we have less teachers has impacted our wellbeing, and our capacity to offer programming is directly affected by the fact that we have less teachers. Even though you could say that above all: math, science, LA, whatever ... health is the most important? It is the first one cut. (P1)

In the same thought, this participant also acknowledged that while health is the first subject area cut, it is the most essential to experience success across the others:



Everything hinges on something else ... it's a crazy microcosm. When you're talking about the core of someone, you're talking about their health. Whether it's mental, physical – that is the most important, really. Math, science – those can only work if you're a solid person. We need to equip teachers with those same skills. (P1)

Unfortunately, some factors that limit the capacity for change within a school are beyond frontline teachers' control, and as stated previously, brought down through the system either through new initiatives with minimal communication or collaboration, or through cutbacks. When asked how those external factors impact the success of CSH, administrator perspectives acknowledged what is and isn't possible.

I don't think it (CSH) falls by the wayside, but I think those factors that add stress to people mitigate some of the benefits that you're trying to accomplish in giving people opportunities to be healthy – to exercise, etc. We can still focus on healthy snacks for teachers. But what do we let go of? You can't keep doing more with less and less people. What we always have to look at – it's not about doing more – it's about what's your best bang for your buck ... because you can't do it all. (P3)

While teachers' perspectives could at times be critical of administrator support with the onslaught of new initiatives, the administrator expressed being caught between two worlds of responsibility. When asked how that 'middle-person' role impacted administrator job satisfaction, the response shows attempts to please both sides and do what is best for kids, first and foremost, with tones of frustration and at the end, a loss for words:

A lot of teachers have commented that they need to say no – that admin needs to say no. There's more and more dissent that what's being asked and demanded of them is beyond the scope of what is reasonable & practical. Again, it's made us ask the question,

‘what is reasonable of us to ask people to do’? What do we need to let go of? When certain demands are made of the system on us – we need to let go of things, good or bad for the school or kids. Because there’s certain things at the system level that are demanded of us – what things are we going to let go of, even if it’s not good for kids because we don’t ... I don’t know. I don’t really have an answer for that question. (P3)

Feelings of *guilt* resurfaced in relation to time, as participants identified their motives for joining their school wellness team, and the limited time they were able to dedicate to it: “feeling like I did a crappy job. It’s spread out all over the place; I need to focus more energy there on ONE thing” (P5).

I now have 3 extra-curricular roles ... if I’m on the wellness team. Other people need to pick things up so that you don’t turn to the negativity. You need to start *prioritizing people’s time*. (P4)

Most teachers and administrators are inherently dedicated to what is best for kids. When caught in a tornado of new initiatives and tasks, on top of the daily roles they play in the classroom, feelings of defeat and disappointment in themselves may be inevitable consequences of feeling overwhelmed. This is concerning, as the literature shows the necessity of ownership, satisfaction, and positivity in authentically engaging in change.

**Isolated approach.** The administrator perspective on addressing challenges is different than teachers’, because the leaders of the school have that middle-person role to play “there are challenges in balancing expectations of a variety of stakeholders. Balancing the needs of teachers, kids, parents, school board, government, etc.” (P3). Even the relationship between administration and the school board, if lacking in trust, can cause scepticism that permeates into other forms of distrust, including questioning funding for CSH initiatives. The best interest of the

school is in the forefront of intentions, but balancing scepticism with belief regarding the intentions and professional capabilities of your superiors may be more effectively achieved through relationship building across the hierarchy of education.

Yes, there may be money available to schools to support different programs, but the question is, what's attached to that money and who has control? Seems to me when other people have control, there are other agendas that start to become more important – more political agendas. That's always my issue. *Sceptical* of conditions and an alternate agenda attached to money ... and the benefit is lost on other agendas that might be in place.” (P3)

When asked about CSH promotion and its effectiveness, participants (in various ways) commented on its *isolated approach*. Isolated in that it does not directly tackle teacher wellbeing, and it is less of a priority to roll out in every school than some of the other initiatives, like assessment: “I think maybe it's an *isolated* thing, not taken holistically within the profession” (P2). There must be *connections* established in a comprehensive approach to CSH. There is a combination of stakeholders responsible to consider and build capacity for improvements to teacher wellbeing, in ways that include funding, which in turn enhances student wellbeing.

I think they [school board and organizations] do have a *responsibility* to consider teacher wellness – for sure. I think it's necessary in every school. I would be jealous if our school didn't have a program, and my friend's school did. I'm glad it's at least something we've started doing. Even through this conversation I see ways in which I feel I can do better – and I guess that's what you hope to get out of bringing this to light for a varied audience. *You can't have student wellness without teacher wellness*. So, I think those organizations have the responsibility to educate people – not only the people who are giving them the

money, or people who MAY be giving them money, but actually being a presence in a school. (P1)

Perceptions of the availability of mental health supports for teachers seemed dependent on relationships within the building – but the barriers or apprehensions to accessing those supports exist out of a desire not to add to anyone’s already overflowing plate.

It is palpable with staff. Have had people go through stressful situations – no internal support in building. Peer support but not professional. We lost a lot of key people who would quietly ask when noticed something “off” with a teacher. There are a couple who could, but because of their workload are stressed. People don’t go to them because we know how over worked & stressed they are. (P4)

If you are going through something difficult in your personal life, you may be less likely to confide in someone with whom you *do not* have a healthy, trusting relationships. Even if a school board offered mental health supports, if the relationship isn’t built through which employees feel safe and respected, supports may not be accessed.

When there’s an issue teachers who feel comfortable with one another will share, but I don’t know if they go out of their way to talk to whoever you turn to at the board if you’re going through something. (P4)

Biggest thing that shifted is in *time requirements* – I work harder ... I have more things to teach, to do, to *balance*. The staffroom has turned into ‘one place I can find a friendly face to vent to’. (P5)

Resulting from earlier participant responses, I wanted to ask focus group members what they believed would be within the school’s control, and what would be the school board’s responsibility, in terms of supporting teacher wellness.

There is no system support that I know of that is apparent. There could be? But it is not apparent. It is self-generated. The support system within a school is self-generated and sometimes minimal. (P4)

It would be interesting to research what school boards have done for mental health for teachers. I just don't think that it's happening on a large scale – but that the power of doing that? The *ripple effect*? Is pretty significant. *Money saved on teacher leaves could be redistributed*. It's a vicious cycle – more work on fewer shoulders due to teacher absences. (P1)

**Need for autonomy, flexibility and a proactive approach.** Suggestions in participant responses included increased *autonomy* and flexibility, and proactive health benefits measures and incentives to supporting teachers, resulting in enhanced CSH as well as offset substitute costs.

Having more flexibility with non-instructional days could be number one. Having that one day a month that you can do what you need instead of being directed. That would be key. I think allowing more health/wellness days versus sick days. Legitimately, I would consider that a wellness benefit. If I don't have to call in sick for 'x' number of weeks ... I earn wellness days. As an incentive. Allowing me to bank my sick days. (P4)

If we could have a certain amount allocated for gym membership, or vitamins. Other professions get that, and I think, I really need this. So many people would be not calling in sick, so you are *preventing* the cost of so many sick days. (P5)

I'm hung up on the *basic necessities*. I'm not hoping for fancy gyms like the corporate world has. But perhaps CSH initiatives and the board could look at our benefits package. Let us have holistic health – why can't we have gym memberships, or more access to

*holistic* wellness supports? Looking at improving/promoting health through our benefits plan – be *proactive* rather than reactive. (P2)

If someone was going to give me a couple hundred bucks each year to spend on wellness, I would spend it ... and I would make sure that I take a class ... I could sign up and do a yoga class ... that would be something that *my employer could benefit* from as well. And if you're not healthy, if you're not functioning in a healthy way, that impacts the kids that you are in front of and the colleagues that you are around. (P1)

I feel like if someone was going to offer me some support, I would definitely take it. Monetary support, time support. We all know as teachers, and I think as a society too ... we know that teachers have a huge impact. (P1)

Administrator perspectives also supports the potential of a proactive approach to health: Anytime people can feel more revitalized or happier I think that their health is in a better state. I think the *benefit is people don't get sick if they're feeling energized*. When people are energized by *positive reinforcement*. (P3)

Health benefits were discussed by several of my participants as potential means to enhance wellness and decrease stress among teachers. This prompted a review of literature exposing current benefits available to teachers in Western Canada. The Canadian Teachers' Federation (2013) claims that benefits packages may vary from jurisdiction to jurisdiction, but will include a combination of dental, life, supplementary medical, and long-term disability insurance, cumulative sick leave, compassionate leave, to name a few. Teachers do not have access to benefits for activities, such as purchasing exercise equipment or taking classes (ASEBP, 2013).

Media attention regarding teachers' benefits plans has alerted the public to spending concerns and discrepancies between districts' plans. Media can act as hegemonic devices in the

interests of neoliberal agendas (Orlowski, 2011) through which criticism of public service workers has become a regular occurrence. CBC news British Columbia published a story entitled “Vancouver teachers’ massage claims hit \$1.6M last year” (Zimmerman, 2013). It revealed the difference in massage benefits available to teachers within British Columbia “the vast majority of B.C. school districts cap massage claims at \$500 per year, but there is no limit for Vancouver teachers” (Zimmerman, 2013). The Alberta School Employee Benefit Plan (ASEBP) sets standards for group benefits for Alberta teachers, but health-spending account amounts and annual distribution, which includes coverage for massage therapy, is determined by each school division (ASEBP, 2013). Saskatchewan paramedical coverage is capped at \$500 per service category (ex: massage therapy, psychologist, naturopathic doctor, etc.) each year (Saskatchewan Teachers’ Federation, 2013). The question is raised, what is a reasonable amount (with sustainable inflation) to award teachers to take care of their personal health? We rarely see headlines drawing attention to the health claims of private sector professionals. How could private sector professionals who may receive higher personal health benefits argue that teachers are less deserving? The benefits in reduced absenteeism may offset the initial investment in proactive health services, causing financial gains to public sector funding, and therefore all tax paying citizens regardless of professional positioning.

The topic of sick days had surfaced in earlier interviews, revealing an increase in personal sick days (from actually being very ill), and hesitations in calling in sick at all:

I was absent more this year than I’ve ever been. I was sick a lot – probably six times. But – I used to go a year with maybe one day off. Personally, I was sick a lot more this year. And going to work sick ... a lot. Lots of people do that. Here’s another profession where you can’t just call in sick and stay home ... you have to do sub plans. Ok, am I sick

enough to do two hours of sub plans? Or am I just better off going to work and going through the motions. How wrong is that? (P2)

Participants' visions of a proactive and comprehensive (rather than isolated) approach are reflected in the previously presented research literature (Avison, 2009; Clift & Jensen, 2005; Dukowski, 2009; Havlinova & Kolar, 2005; Intrator & Kunzman, 2006; Massey, 1999; Omarova et al., 2000; Stewart-Brown, 2006; Storey et al., 2011; Veugelers & Schwartz, 2010; West et al., 2004) on successful CSH models and meaningful teacher professional development.

**Initiative overload and trust-based professionalism.** Administrator perspectives also expressed limitations of the school based on support from the system:

What I think needs to happen is I believe it's more at a system level than a school level. Schools are becoming more and more aware of what supports kids and their health, but a system may be very good at the rhetoric but not so good at following through; lots of talk, less action. I think in schools it's really important that administrators maintain and build trust with teachers around their wellbeing and a belief that they do care about their wellbeing. It becomes very hard because of the demands placed on schools by the system. (P3)

I think you have to be careful because you can become frustrated & we lose the significance of what we're trying to do as educators if we become so jaded with the pressures that are put on us ... we don't do quality work any longer. I think it's a very complex program that's getting worse, not better. I think all it takes is a few good bureaucrats that actually care about what happens. (P3)



The demands of the system create barriers to achieving wellness, but may also strengthen the responsibility that administrators feel in establishing meaningful relationships with staff built on trust and open communication.

Numerous challenges exist in creating a culture of wellness in a school and inspiring the continuous evolution and growth of the CSH model. Participants emphasized “clear roles and healthy support” (P4) as essential tools to establishing a solid wellness team and sustaining feelings of satisfaction in the workplace. According to participants, solutions to these challenges exist both within and beyond a school’s control. The mentality ‘do what you can’ is often lost on ambitious and passionate educators who believe in health education and the philosophies of creating a culture of wellness. School staff strive to create a learning environment that is best for kids, often at the expense of their own wellbeing. But as Participant 1 noted, there is an inter-dependent relationship between students’ and teachers’ engagement in wellness: “healthy teacher-healthy students, healthy students-healthy teacher” (P1).

### **Inspiring Action (change possibility and sustainability)**

Responses were rich in depth and variety relevant to the perceived value of CSH, its personal and potential impact on teacher wellness, and suggested strategies to inspire and engage school staff in creating a culture of wellness. Participants recognized the value of CSH on a holistic level, impacting numerous facets of a school community. To achieve effective and sustainable CSH, themes of engagement in change and growth continued to emerge: “I think that sustainability and engagement are the two biggest things and they’re also really connected” (P1).

Perceptions of the value of CSH were embedded in participants’ responses of impact on teacher wellness and benefits to students. Through collaboration and celebration, participants discussed the power of teamwork in realizing and evolving the vision of CSH:

I think it's a combo of having the right people who believe in the importance of wellness as a topic of discussion & action in a school. But also not just the people, it's having a supportive administration that can allow for some of those things to be realized. (P1)

Again, relationships become the foundation from which these teams of like-minded individuals can join forces and inspire action among their colleagues. Observable benefits create further engagement and motivate a commitment to sustain and advance the culture:

I think we've already seen that it's *sustaining* itself. Like anything, when people see benefit to it beyond talk, I think it begins to sustain itself. *What's sustainable is when people see an actual benefit to them.* It perpetuates itself. If they see a benefit in the classroom where kids are more engaged ... it demands that we continue it. People are becoming more and more conscious of their own wellbeing ... kids and teachers. (P3)

In alignment with suggestions from the AB-HSCWF (2014), CSH is both a bottom-up and a top-down model. It requires passion and commitment at the grassroots level, but also support from the top of the educational hierarchy.

I think part of the conversation needs to include – in order to make it *sustainable* and affect things from teachers' satisfaction to absenteeism – *things work from the ground up*, everything is so connected ... kids happy, teachers happy, teachers happy, happy kids, right? That needs to be part of the education process ... there needs to be things on a wall, a space that can facilitate those kinds of opportunities. (P1)

When there is a **shared responsibility** among the stakeholders involved in CSH including teachers, administrators and school boards, awareness of overall benefit to pursuing school wellness, and teachers are supported at the school level (change possibilities), sustainability becomes possible. Although from an administrator perspective, there may be more

responsibility on the shoulders of the system in order for CSH program to have the chance to flourish, there is significant power among teaching staff to create space for change possibilities and sustain a culture built from their efforts. While the benefits to teachers' own wellbeing strengthens that momentum, time limitations are also a consideration.

It allows people to be *creative*, to know that they have *ownership & control* over things, they can take risks. I think when people are *empowered* they put a lot more energy and effort into things. When they know both they're *recognized* for what they do, and they have control. I think in too many buildings it's top-down management and people don't feel they have the kind of opportunities to do what they want to do. (P3)

I think when teachers can get away from the day to day grind and get involved in some activity and have some fun themselves that they're more energized and that perpetuates itself. (P3)

A non-controlling style of presenting new initiatives or ideas encourages internalization; the events or activities should be presented in a way that does not leave the participants feeling like "pawns" (deCharms, 1968, as cited in Deci et al., 1991). In this way, cultivating a sense of ownership may engage, motivate, and inspire teachers to not only drive initiatives, but also maintain the momentum. Authentic engagement requires seeing value and meaning in the tasks presented (Schlechty, 2002). Deci et al. (1991) presented a study that demonstrated how pressure from administrators on teachers created a more controlling atmosphere in the classroom for students, and in turn, had negative effects on the students' self-determination. This is a significant factor when trying to establish a culture of wellness across all dimensions of wellness, since self-determination is described as "the avenue to attaining outcomes such as creativity, cognitive flexibility, and self-esteem" (Deci et al., 1991), aspects that would also affect their

overall wellness. Hargreaves and Tucker (1991) presented Woods' (1990) perspective that "creativity in teaching is accompanied by feelings, even thrills of discovery and breakthrough, in moments which display innovation, involve teacher **ownership**, and show teacher control and have **relevance** to teachers' and students' needs" (p. 494).

Participants' personal experiences combined their perceptions of the potential impact a wellness culture could have on *teacher* wellbeing implied that CSH in their school, and as a model in general, could generate a ripple effect of benefits. Generating ownership and meeting basic needs were again embedded throughout responses.

We all know as teachers, and I think as a society too ... we know that teachers have a huge impact. And if you're not healthy, if you're not functioning in a healthy way, that impacts the kids that you are in front of and the colleagues that you are around. (P1)

The ripple effect of CSH came out in many ways, but included the ways that student behaviour and alertness were improved, alleviating some of the classroom stressors that teachers experience on an hourly basis. This was identified as having a positive impact on teachers' overall health and satisfaction at work, leaving the day with more emotional energy. In this way, *relevance* is established and buy-in is generated.

You have to have teachers buy in in a certain way – to be personally reflective and then more globally reflective. Ask teachers, 'what are the factors that are contributing to students' lack of success'? They're going to list things like: inactivity, lack of support for *mental health*, they're going to list all wellness related things. So then, you have everyone on the page. Then you are able to start the conversation of how does each of us on staff make healthy living visible, and model that, and how do we bring it to our students? So 1: how am I going to do one thing that I'm going to talk about & be up front

about with my students; 2: how am I going to teach it specifically in my class? I think you've got to, in some way, brainstorm it and help them to see that *our kids' issues are wellness issues*. (P1)

This leads to the ripple effect benefiting teacher wellness, and an especially powerful impact with the presence of positive and supportive work relationships. The impact of CSH for this participant is clear, not only as a benefit to her/his personal physical and mental health and ability to cope with the inevitable daily roles and responsibilities a teacher carries, but also as a significant benefit to the students in her/his class:

Having those things at school for students, you buy them because they're going to be good for students, but teachers benefit as well. I dropped 40 pounds through a number of different changes, but I would say having the support of the school and having equipment and making a really conscious effort to make the time to do it, and having colleagues who noticed and were encouraging of my own wellness path and lifestyle changes was huge. I noticed how that impacted my time in front of students, too; I approached things with a clearer head, I wasn't as worried. I would go to bed, I would get a good sleep, I would be a good teacher. (P1)

On the topic of relevance, and a continuation of the earlier discussion on teacher absenteeism, one participant shared improvements to physical health when she/he had time to participate in CSH projects:

It would get to the point where I wasn't taking sick days, and it would also mean that at the end of the day I got to work out, for free. So I wasn't taking on a costly gym membership & the travel to & from ... so that was my reward, my cookie at the end of the maze was to know that I had a facility that I could use. (P1)

Strategies to inspire and *engage* school staff in creating a culture of wellness emerged throughout participants' responses, and mirrored approaches outlined in literature mentioned previously. Participant 1 explicitly named passion, commitment, and continuity as essential components of a sustainable CSH program: "I think the most significant factor in having it continue is having teachers run it and mentor other teachers, and encourage other teachers to get involved" (P1). Providing opportunities for staff to collaborate and develop skills to further realize the vision is also mutually beneficial – to teacher wellbeing and to CSH sustainability:

There is a *cyclical relationship* between developing yourself professionally and wellbeing – improves *appreciation* between people, which improves confidence and self-esteem.

People supporting each other in the work they're doing – which is the ultimate goal – not directed by admin, but controlled by teachers for their own benefit. (P3)

Relationships, ownership and collaboration are once again identified as necessary tools and positive benefits to CSH:

I feel like the power of the wellness, of CSH, is in getting a larger group of people together and branching out in different ways – that includes having the art teacher run an art club. I think if people are given the opportunity to think *creatively*, they will be involved in what they can offer. So it's just getting people to think about how all of these things actually related to wellness, and then identifying the school as a 'wellness school', and we accomplish that by all of these things. Then everyone feels *ownership* too, which is part of work *satisfaction* as well. That's a positive domino effect: if I'm thinking I have something to offer. *Sustainability* of it is a big factor, and approaching wellness from a wider umbrella. (P1)

The *Psychology and Health* journal published an issue in 2003 that highlighted

correlations between job conditions and stress/wellness outcomes in teachers across various countries. Anne Rasku & Ulla Kinnunen (2003) studied job conditions and teacher wellness in Finnish upper secondary schools compared to a European reference sample of teachers from ten European countries. While Rasku and Kinnunen introduced the purpose of their study by highlighting the declining working conditions in Finland, the results show that Finnish teachers were experiencing higher levels of wellness than their neighbours:

The Finnish upper secondary school teachers assessed, in particular, their job conditions (e.g., lower job demands and higher job control), but also their well-being (higher level of job satisfaction and lower level of **de-personalization** and somatic complaints) as better than their European colleagues. Job demands and control had only main effects on well-being: high demands explained low job satisfaction, high emotional exhaustion and high de-personalization, and high control explained high job satisfaction and high personal accomplishment. The additional job conditions and coping strategies increased the explained variance of somatic complaints, emotional exhaustion, and personal accomplishment. (Rasku & Kinnunen, 2003, p. 441)

The results align with job conditions my participants yearn for – including autonomy, choice, and voice. The coping strategies will be expanded upon in chapter six.

Aligned with data collected during both stage one (first interview) and stage two (second interview), teachers seek **voice** and **ownership** over change initiatives. Self-determination theory posits that “when a behaviour is self-determined, the regulatory process is choice, but when it is controlled, the regulatory process is compliance” (Deci et al., 1991). Feelings of **ownership** contribute to the process of internalization, becoming intrinsically motivated to support a culture of wellness “engaged for their own sake, for the pleasure and satisfaction” (Deci et al., 1991). If

teachers perceive their role as both valuable and valued in the CSH vision, in combination with support of their own personal wellbeing, they may exhibit more authentic engagement with the initiatives and become intrinsically motivated to invest their time and energy into CSH success. Participants' in this study expressed frustration with the constant bombardment of new initiatives. We know that uncertainty is one of the most significant contributors to distress (Canadian Institute of Stress, 2012). If new ideas in education require change and reform on the front lines, involving teachers in the conversation *before* the initiative is rolled out is critical. Not only does teacher feedback help bring a level of realism to ideas generated outside the walls of an actual school, the conversations help to clarify the vision and purpose of the project from the onset. This decreases the level of stress associated with uncertainty and increases buy-in.

Teachers are more likely to buy-in if initiatives are introduced to *engage* rather than *direct* them, and affirmed that the system did, in fact, value their voices. Participants spoke of in-school wellness initiatives, highlighting both their concerns and excitements. Key lessons have been learned regarding the implementation of CSH, emphasizing the need for adequate time and resources (Littlejohns, 2007). Release time for teachers and funding for initiatives are two requests that my participants also identified. Among other effective processes to carry forward in improving CSH delivery, Littlejohns' (2007) review of CSH programs across Alberta identified the following:

1. Designated coordinators at a school make a difference to reach goals
2. Need to sustain the project activities so that schools have the support to continue promoting healthy eating and physical activities
3. Sustainability equals paid people and partnerships
4. Fund schools adequately given an adequate infrastructure



(p. 7)

These findings align with IUHPE's 11 descriptors of sustaining a health-promoting school initiative (see page 19). In addition to adequate time and resources, a grassroots structure to CSH initiatives empowers the passion within educators to build it up and carry it forward, rather than a top-down framework (Littlejohns, 2007). The literature review for this study supports these findings – authentic engagement in activities that cultivate emotional connections, self-efficacy and healthy relationships are more likely to support teachers' personal wellness *and* enhance the quality of engagement with, and sustainability of, system change initiatives.

### **Summary**

Aligned with the literature content, participants' responses demonstrated how connecting sustainability of CSH to building skills and knowledge in staff and students builds an impactful environment for both. One participant commented on the power that a CSH environment can have "it creates such a culture of wellness that you look at staffing – this is a part of who we are, and do you fit into that? I think that's a value that a particular school holds" (P1).

Inspiring action through authentic engagement across all stakeholders not only creates the space to influence meaningful and relevant change, but also lasting change. Relevant to this were works by deCharms (1976), Fiedler (1975), and Koenig (1977) summarized in Reeve et al. (2004) stating that "engaged people express their voice and take initiative in trying to produce changes in their environment" (p. 148). On the other hand, disengaged people revealed their passivity "by allowing external forces outside their personal control to regulate their task involvement" (Reeve et al., 2004, p. 148). Although Schlechty (2002) specified that "schools cannot be made great by great teacher performances," he also believed "student learners need to see adult learners model the behaviours of engaged learners." The starting point should be staff,

and a focus on building strong relationships on which they rely to help cultivate their capacities to connect, create, collaborate, and celebrate.

Shared responsibilities between the system and the individual exist within each of the main categories: addressing challenges, teacher supports and inspiring action. The concept of ‘shared’ responsibilities does not mean that the contributions look exactly the same; it implies that each stakeholder has a role and a responsibility to contribute in meaningful and effective ways that enhance a culture of wellness within a school community. These responsibilities include building positive relationships strengthened by trust and mutual respect, **addressing challenges** (ex: the system *values* the contributions of its teachers; the teachers *collaborate* to determine the school community’s basic needs – of staff and students), **teacher supports** (ex: the system can revisit health benefits and attempt to create more holistic, *proactive* supports; the individual teacher takes *ownership* over engaging in *satisfying/eustress* behaviours), and **inspiring action** (ex: the system *collaborates* with colleagues on initiatives, establishing *relevance* and adequate *time*; the individual connects to her/his genuine interests and *passions*, creating *ownership* over unique contributions to CSH).

As my new framework began to take shape and relationships were drawn between the original eight properties, the data (participants’ and literature) and the final four categories, the continuous presence of ‘connections’ and ‘relationships’ mandated that these two themes become central concepts in the framework. These terms were pulled from participant responses as well as the data analysis. Along with the overarching categories, they help to tie all of the thematic pieces together. I believe that making connections and building relationships are relevant actions in achieving the change possibilities and sustainability suggested within each of the final categories (which were constructed from and grounded in the data). A more linear

storyline depiction of my theory could read: **relationship building** leads to **shared responsibilities** in **addressing challenges**, **inspiring action**, and establishing **teacher supports**. When combined with the continuous presence of making important and relevant **connections** to sub-categories of *passion, purpose, ownership*, etc., these elements could help to *build change possibilities* and **sustainability**. The relationship is at the centre, as it must be established first (as a *basic need*), before there is a chance of change possibilities or trust in shared responsibilities. Sustainability in a healthy relationship can lead to sustainability in other areas.

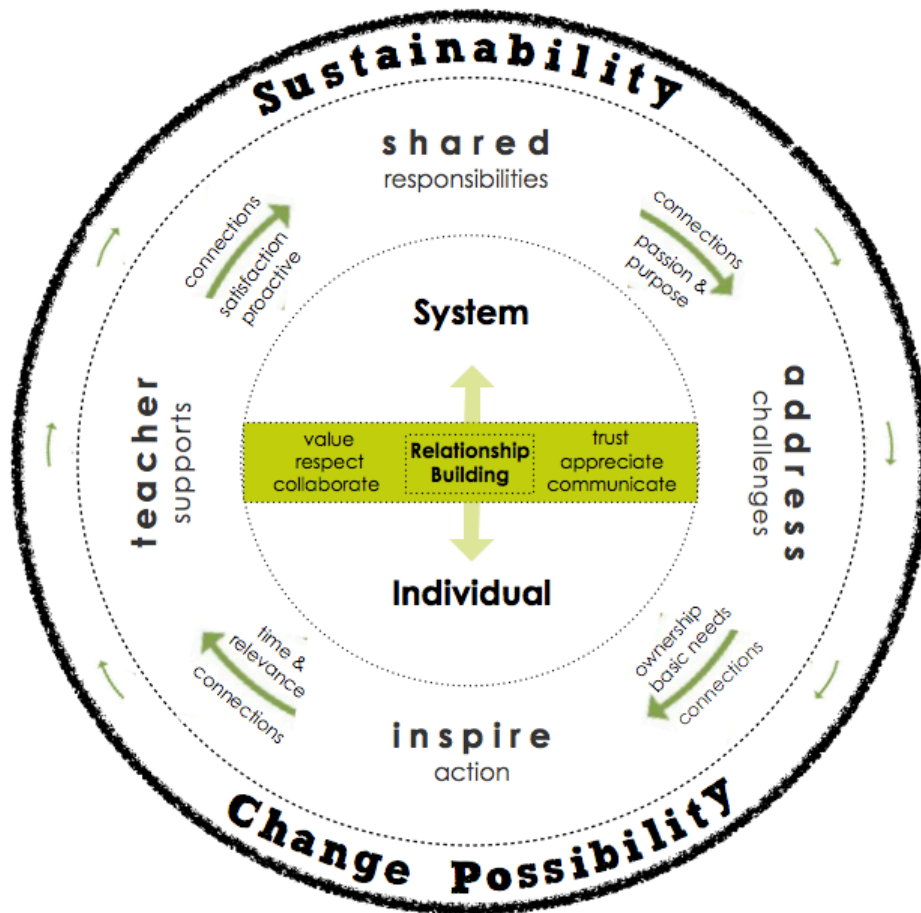


Figure 4. Final Conceptual Framework

## Chapter Six: Discussion

The purpose of my research was to explore a potential relationship between teacher wellness and sustainability in CSH. Driven by my combined passion for education and wellness and personal experiences with both, I began a challenging and enlightening journey. My graduate courses helped to inform my research question and design, but it was my personal connection to the inherent stress of teaching that inspired my pursuit of this type of study. To discover if my experiences resonated with others, I chose qualitative research. Qualitative research provides a platform for participants to share their stories. In particular, I found grounded theory to be effective in providing a rich and authentic illustration of how participants' perspectives connected, even through different roles within the building.

Emerging throughout the concurrent data collection and analysis process were perspectives suggesting that change was necessary to get to a point where sustainability was possible. This desired change was not necessarily within the physical school environment, although participants also spoke of the importance of relationships with colleagues and students, but envisioned between the governing bodies and the frontline bodies; between the school board and the school staff. Drawing on participants' comments, research literature and my personal experiences, I believe that relationship building would establish the *mutual* trust and respect necessary to work together *as a team* to drive initiatives forward. The social dimension is essential in the pursuit of holistic wellness, for the individual and within a work environment.

Elements of a healthy relationship, including trust, respect, and communication, set a strong foundation from which change and growth in other areas become possible. To shift the culture of a school effectively, as the goals of CSH set out to accomplish with regard to a culture of wellness, it may be *essential* rather than recommended, for the first steps to include cultivation

of healthy relationships across and between stakeholders. These relationships are not limited to those within the school, but also across the hierarchical structure of our current education system. If frontline teachers and administrators do not have trust in the interests and objectives of their school board, and if the school board does not trust the professional capacity of their employees, limits may be formed to the organization's ability to reach its full potential. The emergence of change possibilities, engagement in follow-through, and maintenance of momentum to achieve sustainability may rely upon the strength and wellbeing of the team.

### **Final Discussion of Relevant Literature**

Creating an effective team through relationship building may also require investing in each member's personal wellness. In *Wellbeing is Contagious (for Better or Worse)*, Jennifer Robison (2012) summarized research which found that one employee's wellbeing affects that of the entire team. Robison cited Christakis and Fowler's research which included findings that showed how emotion travels over social networks in much the same way viruses do, and that the relationship between supervisors' wellbeing and that of their workers grew substantially over time. This relationship across the managerial hierarchy was shown to be reciprocal in Agrawal and Harter's study (as cited in Robison, 2012): "individuals are likely influenced by the shared culture of their team and that individuals also appear to be influencers of their team's collective wellbeing" (p. 1). This is relevant to the results from my study, as the level of wellbeing of individuals within the school board and within the school may have a similar interdependence. Robison noted that in Agrawal and Harter's study that measured wellbeing in three six-month intervals using 105 teams and 1740 individuals who were not necessarily in the education field, the researchers identified points for future research that are highly significant to the theory which emerged from my data. As cited in Robison (2012), Harter stated, "these findings hint that a

certain level of **trust** needs to be built before the wellbeing of supervisors can rub off on their team, whereas peers can have immediate influence” (p. 1). The education system has many levels of supervisors and teams – from the government to the school board, school board to the schools themselves, administrators to the teachers, teachers to the students, etc. People with high levels of wellbeing are good role models for others (Harter, as cited in Robison, 2012). Quality relationship building may establish the **trust** necessary to build strong teams through which each member can reap the positive ripple effect of wellness.

At the time of this study, the Alberta provincial government introduced plans for a new education framework called Inspiring Education, which proposes redesign to curriculum, student learning assessments, and teacher assessments (Alberta Education, 2014). As one of the Inspiring Education initiatives, the Task Force for Teaching Excellence was created by Alberta’s Minister of Education. The Task Force for Teaching Excellence (2014) generated recommendations “on teaching excellence to ensure that for every child, in every class, there is an excellent teacher ... the interest of the student was paramount – the child came first” (p. 2). Controversy surrounding Inspiring Education and recommendations made by the associated Task Force for Teaching Excellence (2014) included disappointment from the ATA (2014), calling some of the recommendations “offensive” (para. 3) and a “direct assault on teachers and the teaching profession” (para. 2). Among the recommendations highlighted by the ATA (2014) were those suggesting teachers undergo re-evaluation every 5 years in order to retain their certification to teach in Alberta, stripping teachers of fundamental employment protection, and what they suggest to be “particularly offensive to teachers are the thinly veiled threats larded into the recommendations ... if the Association [ATA] does not cooperate sufficiently with the government in turning principals from education leaders and professional colleagues into bosses,

then it is recommend that ‘consideration be given to removing principals from the Alberta Teacher’s [sic] Association’” (para. 6).

While there is merit in evaluating teacher performance and providing feedback, those processes already exist in an ongoing format, with a collegial forum between school principal and teaching staff. Transforming the role of the school administrator and further widening the gaps between the already apparent hierarchy of education, may do more damage than good when it comes to trust and the relationship building which this study’s results so clearly emphasized.

Mark Ramsankar, president of the ATA responded (as cited in ATA, 2014):

It astonishes me that when curriculum redesign is in disarray and a petition of thousands of Albertans is questioning the leadership of Jeff Johnson [Alberta Minister of Education] and his department, the government would undermine the very teachers who helped this province become a global leader in education ... the core of Alberta’s success is the constructive and collaborative culture created over the years among teachers, government, and school boards – Johnson’s task force is a direct threat to that culture and ultimately to the success of Alberta’s schools. (para. 8)

Perhaps instead of a focus on *inspiring education* through an apparent narrow approach to curriculum design and an onslaught of new initiatives, Alberta Education should take note of Intrator and Kunzman (2006) and Sahlberg’s (2011, 2009) recommendations and focus attention on *inspiring* its already capable *educators* by extending trust in their professionalism, in their ability to develop and move their practice forward, and a sincere appreciation for the inspired learning currently happening in Alberta classrooms.

Engaging members of the team in the cultural shift, from top to bottom and bottom to top, may generate more possibilities of change and sustainability through empowerment. Robison

(2012) discussed another study in which Harter and Agrawal sampled 4894 individuals who worked full time, and discovered that employee engagement is a much stronger predictor of overall wellbeing than factors such as hours worked, weeks of vacation time taken, and flex-time allowed. As my participants' and literature data suggest, autonomy and ownership are keys to long-term engagement. The question becomes – how do we spark and sustain both engagement and motivation necessary to cultivate wellness at all levels? What types of motivation are necessary to move CSH forward in meaningful and lasting ways, benefiting both students and staff? Students are also part of the CSH wellness team, but behind every strong student leadership group is an effective and motivated leadership teacher – or several. CSH requires teamwork to shift the culture of a building toward that of wellness. As mentioned throughout the chapters of this thesis, teachers serve an integral role in that process.

It is possible that people, and in this context teachers, could progress from either *external regulation* (initiated and regulated externally – offer of reward, threat or punishment) or *introjected regulation* (internalized demands or pressures to avoid guilt or for promised rewards – from participants' perspectives, numerous teachers fall into this category of motivation), to *integrated regulation* (behaviour expressing who the individual is; similar to intrinsic motivation demonstrating genuine interest in the activity itself) (Deci et al., 1991). A limitation to achieving integrated regulation is that it is “characterized by the activity being personally important for a *valued outcome*” (Deci et al., 1991, p. 330, italics added for emphasis). What would teachers perceive as ‘valued outcomes’? Determining whether this shift has occurred involves using qualities associated with intrinsic motivation as objective markers, including behaving willingly, being creative, and displaying intuitive understanding (Deci et al., 1991). As CSH initiatives take form within a building, these markers should be considered. Participants in my study suggested



inviting all departments in a school to get involved in offering wellness supports – from art classes for staff, to wellness book club (P1). Through this, they are behaving willingly, showing creativity, and may experience intuitive understanding through the relationships they are building with colleagues.

Self-determination theory of engagement and motivation emphasizes three innate needs: competence, relatedness, and autonomy – or self-determination (Deci et al., 1991).

Competence involves understanding how to attain various external and internal outcomes and being efficacious in performing the requisite actions; relatedness involves developing secure and satisfying connections with others in one’s social milieu; and autonomy refers to being self-initiating and self-regulating of one’s own actions.

(Deci et al., 1991, p. 327)

While these needs are manifested in the individual themselves, certainly the system (in this case, the school board or government) has a responsibility to attempt meeting these needs, which are characterized by Deci et al. (1991) as “human needs” (p. 327). Referencing Maslow’s hierarchy of needs, how can you reach self-actualization (where perhaps that connection to purpose also results in intrinsic motivation, or integrated regulation) when the foundational basics are absent? Although Intrator and Kunzman (2006) suggested an inverted hierarchy for teachers, suggesting that a connection to purpose within the category of self-actualization is in fact, a *foundational* need and highly impactful on teachers’ overall wellbeing. Teacher participants in my study emphasized the importance of basic physiological and relational needs, and admitted these were often lacking due to workload demands. By meeting these needs, increasing teacher engagement and enhancing CSH, literature and participant responses suggest that a reduction in costs associated with absenteeism may become a change possibility. As noted in Chapter 5, Participant

2 discussed proactive approaches to holistic health through the benefits plan, rather than reactive approaches to illness, may have a significant impact on enhancing teacher wellness and minimizing absenteeism.

Studies conducted through the Gallup Business Journal revealed a direct, positive correlation between engagement and wellbeing, and how this relationship can result in lower health costs and boosts in performance (Sorenson, 2013). Employees who are ‘thriving’ (strong, progressive overall wellbeing) have 41% lower health-related costs compared with employees who are ‘struggling’ (moderate or inconsistent overall wellbeing) and 62% lower costs compared with employees who are ‘suffering’ (well-being that is at high risk) (Sorenson, 2013). Wellbeing improves employee engagement, and engagement has a similarly beneficial impact on wellbeing and productivity (Robison, 2013). While Sorenson sampled for the business world, the education field must also balance the needs of multiple stakeholders and establish positive working and learning environments. Findings in the study suggest, “employers who make an effort to improve their workers’ engagement levels will help employees improve the quality of their lives, minimizing the costs of decreased productivity resulting from chronic illnesses” (Sorenson, 2013, para. 3). They speak of ‘decreased productivity’, but in the case of teachers, this means the quality of educational experiences our youth are able to receive. Healthy teachers provide richer learning environments for children and youth. Participants indicated an increase in sick days (despite feelings of guilt discussed in the next paragraph), which brings significant cost implications to the education sector – which has already experienced significant reductions in funding over the years.

Martin, Dolmage and Sharpe (2012) uncovered similar concerns in that teachers commonly go to great lengths to avoid taking time off for “minor” illness. The reasons behind

this appeared varied, including not wanting their colleagues to be called upon to assume their teaching responsibilities (guilt), and questioning if it is worth the time in preparation – providing lesson plans and materials – in addition to the effort required to catch up once they return to school (Martin et al., 2012). Again, my participants’ perspectives mirrored a call for change found in the literature: “it seems reasonable to suggest that the varied reasons teachers have for not taking sick days must be identified, and systemic changes should be implemented that address these barriers” (Martin et al., 2012, p. 24). As much as we must focus efforts on cultivating a healthy, sustainable workplace environment for teachers with goals in saving money in substitute costs and attrition, we must direct equal attention and value toward supporting un-well teachers in their efforts to heal. CSH may play a role in proactive wellness and stress management, but system and school supports for supporting the ‘walking wounded’ is critical in order for sustainability in CSH (or any other school initiative for that matter) to occur.

All of my participants spoke of a noticeable and unmanageable increase in school board and government initiatives, the ‘administrivia’ and ‘paper trail’ that has gone “beyond the scope of what is reasonable and practical” (P3). Intrator and Kunzman (2006) warned, “no amount of professional development focused merely on technical proficiency will matter to teachers who are feeling overwhelmed, adrift in their mission, or disconnected from like-minded colleagues” (p. 39). CSH could help to set the foundation from which all other education initiatives could flourish, or at least help to generate more meaning and buy-in from those directly affected within the schools themselves. When asked about the potential impact that a deliberate focus on teacher wellness through CSH could have on the overall school culture of wellness, Participant 2 suggested a 60-40 split focus between student and teacher:

60% on student wellness making sure that we are putting forward healthy, productive members of society, and 40% to supporting teachers & really *basic necessities* for them – and then go from there. (P2)

This split would inevitably begin to blur as a correlation would likely emerge – healthy teachers help to support and produce healthy students. More research needs to be done to explore this potential relationship, in addition to the correlation between healthy, self-actualized teachers and student academic achievement.

Research in positive psychology and mindfulness are relevant to a discussion that suggests tools for enhancing CSH for both teachers and students. Both are proactive wellness strategies and coping tools for stress and anxiety. Studies exploring the impact of mindfulness programming in K-12 education has shown an increase in teachers' sense of well-being and teaching self-efficacy, and their ability to not only manage classroom behaviour but also to establish and maintain supportive relationships (Meiklejohn et al., 2010). Kabat-Zinn's definition of mindfulness was cited in Meiklejohn et al. (2010) as, "the awareness that emerges through paying attention on purpose, in the present moment, and nonjudgmentally to the unfolding of experience moment by moment" (p. 4). Meiklejohn et al. (2010) expressed concern and surprise that despite statistics on teacher distress and burnout, the empirical research addressing potential solutions is sparse, and emphasized the "evident need for innovative, cost-effective ways for school systems to train and better support the resilience of their teachers" (p. 3). Research supports mindfulness as a practice that directly affects the mind, brain, body, and behaviour. As cited in Meiklejohn et al. (2010), Greeson has reviewed 52 studies exemplifying the most current and rigorous empirical and theoretical research on mindfulness, concluding: "mindfulness practice can influence the brain, the autonomic nervous system, stress hormones, the immune

system, and health behaviours including eating, sleeping and substance use” (p. 3). Findings by Holzel, Lazar, and Luders were presented in Meiklejon et al. (2010) that demonstrated “correlations between mindfulness training and increased thickness of cortical structures (i.e., grey matter) associated with attention, working memory, processing sensory input, self-reflection, empathy, and affective regulation” (p. 3). If mindfulness has the capacity to change brain structure in ways that promote brain health and improve quality of life (Meiklejon et al., 2010), deliberate inclusion of the practice in CSH implementation and teacher training is a no-brainer.

As change possibilities come to light, the process through which it is carried out may have a significant impact on its success, particularly when pursuing change within a social environment. Collective impact is a change model gaining attention as organizations experience success through working together with different stakeholders in pursuit of a clearly defined goal, rather than isolated impact, through which the stakeholders engage in initiatives independently. Collective impact understands that the complexity of a social environment, and change within those environments, is beyond the scope of any one organization or sector (Kania & Kramer, 2011). Kania and Kramer identified three pre-conditions to confirm the applicability and relevance of collective impact on a particular issue: an influential champion – someone who has the power to carry out organizational change, adequate financial resourcing, and a sense of urgency for change.

As a model, collective impact shares many similarities to CSH. It is a commitment of a group of important stakeholders from different sectors to a common agenda for solving a specific social problem – through partnerships and joint efforts (Kania & Kramer, 2011). Both my initial and concurrent literature reviews established a sense of urgency for change and a problem to be

tackled, including rates of teacher stress, burnout and attrition. While it could be argued that this is not a social problem, I believe it is. Public education is social programming, it is publicly funded and we are all responsible to ensure the health of the system itself. If our primary actors within these institutions are struggling, I am not alone in feeling a sense of responsibility to support them to the fullest extent possible. A shared responsibility is necessary and backed by evidence-based models such as collective impact as being successful in leading and sustaining social change.

We cannot discuss collective impact without considering the system through which teachers are trained and prepared for this unique role in society. Teacher education programming is a logical and meaningful first step in the proactive process – building capacity not only for personal wellness within the educator her/himself, but in the knowledge and value of CSH which can then be carried forward and promoted as they begin their journey within the schools. The University of Ottawa piloted a program in the Faculty of Education to transform teacher candidates into champions of health, rather than consumers of knowledge. Lloyd, Whitley, and Olsen (2013) published the results of this research. This team of researchers dedicated to promoting physical and mental health shared a goal of preparing teachers to become champions of school health. The inaugural cohort of 40 K-6 generalist teacher candidates travelled as a group through their bachelor of education program, “encouraged to infuse the three pillars of CSH within their various courses, practicum placements and extra-curricular activities” (Lloyd et al., 2013, p. 15). Successes and challenges of the CSH cohort were shared, including the need to establish a collective vision and identity and students’ uncertainty in how to implement health literacy in their practicums (Lloyd et al., 2013). One student commented that CSH was

particularly difficult to implement because her practicum was in an inner-city, low-socioeconomic school with a lot of social problems and behaviours:

I found it really hard to wave the CSH banner in those schools when most of the teachers were, just weren't ... it just wasn't a priority for them. You know, I could do in my lessons, I could promote it, but without having other teachers around also engaged in that and promoting it ... I think I struggled with that a lot ... I felt like no one's listening.

(CSH cohort participant as cited in Lloyd et al., 2013, p. 20).

The challenges and rewards of CSH are context-dependent, and require teachers to be confident with the model and comfortable with adaptation. Each school community's unique needs must be addressed by engaging in meaningful conversations. Perhaps more important than the components of CSH, we should be developing teacher candidate's capacity to communicate effectively and build professional relationships, through the CSH approach.

Major lessons learned through the first CSH cohort of pre-service teachers included making explicit links between curriculum, pedagogy, and CSH, and offering hands-on experiential opportunities with CSH-related activities. For example, professors organized a volunteer experience for those teacher candidates who preferred more direction. They had the opportunity to deliver a mindfulness-based program at a local elementary school. Lloyd et al. (2013) also discovered that prepared educators to be "confident, respectful, creative, passionate champions of comprehensive school health [who saw that CSH] is a long-term endeavour, and not one to be considered accomplished within a brief program" (p. 20). Perhaps a program that includes follow-up professional development offered through the government and/or teacher's federation would further enhance CSH sustainability. Again, there may be an important place for the collective impact model involving multiple stakeholders:

We have shifted our goals to include facilitating the development of a mindset among pre-service teachers of openness, curiosity, and risk-taking with respect to CSH, rather than imagining fully-equipped educators armed with CSH teaching toolkits ... we are confident that the preparation of teachers to work within, contribute to, and lead health-promoting classrooms and schools is necessary and worthwhile ... by introducing CSH through a specialized teacher education cohort and promoting health in complex ways, we are doing different things and seeing different results, which in this case, are creating a positive step towards the promotion of physical and mental health of children in schools. (Lloyd et al., 2013, p. 20)

This unique teacher education CSH cohort endeavour and its subsequent research has created a valuable blueprint for other post-secondary institutions to consider expanding upon.

Another professional development program to engage teachers in their own wellness, highlighted by Intrator and Kunzman (2006), focused on the “personal in the profession” (p. 40). The program was called The Courage to Teach and was piloted by the author himself, Parker Palmer, in 1994. This program calls 20-30 teachers together for a three-day retreat each academic quarter, asking participants to explore that which lies at the heart of teaching for each of them: “using personal stories, reflections on classroom practice, and insights from literature and various wisdom traditions” (Intrator & Kunzman, 2006, p. 40). The sessions do not focus on knowledge or content, but rather on connecting personal and professional beliefs to teaching. According to Intrator and Kunzman, “this inner exploration by teachers builds the foundation they need to engage with ongoing activities at the other end of Maslow’s hierarchy – pedagogy, content, and policy” (p. 41). As stated previously, in their view, Maslow’s hierarchy is flipped and the self-actualization piece is critical for teachers to establish first. These basic needs unique



to teaching may also include establishing healthy, trusting relationships in order for this process of inner exploration to continue within the schools themselves, perhaps encouraged through the CSH model.

Intrator and Kunzman (2006) cited Poutiatine's review of empirical research studies conducted on teacher renewal programs, which uncovered that participation in those programs resulted in significant personal and professional growth. Among the benefits teachers identified were: a renewed sense of passion for their work; a greater focus on creating hospitable learning environments for students; a devoted attention to listening to students; clarified and renewed beliefs about students and teaching; a commitment to taking on leadership roles within their schools; a deepened appreciation for collegial relationships (Intrator & Kunzman, 2006). Intrator and Kunzman (2006) expressed a powerful call for teacher supports: "without laying the groundwork that creates purposeful, resilient teachers, any benefits of training centered around new procedures, techniques, and strategies will eventually fade. Overloaded teachers who work in isolation will not retain what it takes to do their most inspired teaching" (p. 42). Relationships, change possibilities, and sustainability were all weaved throughout the recommendations for professional and pre-service programming. These trends present a strong case for more intentional and relevant supports for key players in the education sector, namely the teachers and administrators who have direct and significant impact on students.

Just as the concern exists for teachers, a similar and understandable concern arises for teacher candidates in such a program: would CSH become a nuisance, undervalued and labelled as 'one more' educational theory or project to learn and implement? An emphasis on physical and mental health is essential to the teaching profession, because they are essential components not only of living a full and enjoyable life, but of reaching one's full potential. Instilling interest

and passion in lifelong learning is an aim of education, and is enhanced by an engagement and perceived value in healthy living practices. Pre-service and frontline teachers need to know that the entire system of stakeholders values the important work they do by showing care and concern for the challenges teachers face – including maintaining balance and healthy practices themselves. In this way, it is communicated to teachers that the work they do is valued enough to prioritize their physical and mental health, and to recognize that the realities of this ever-changing and demanding profession sometimes make that difficult to maintain. If teacher candidates perceive value for themselves, they will see the connection and benefits to their students. Mental wellbeing is for everyone, not just teachers, but not everyone plays such an influential role on a daily basis on the minds of our youth, our future.

The systemic impact of ignoring concerns of teacher wellness, by failing to implement adequate supports (both proactive and in times of need), is already being felt. An article written by Robert Smol published in 2009 by the Canadian Broadcasting Corporation entitled *Teacher Stress is Killing My Profession* powerfully highlighted concerns about the state of teacher wellness from a teacher's perspective:

It is because a storm of new and increasingly unrealistic demands, coupled with a noticeable decline in support from many principals and parents, is contributing to a growing incidence of illness among teachers, including mental illness due to work-related stress. I should note that teaching has not broken me. But it has broken the sanity and soul of some very motivated teachers I know. (Smol, 2009, para. 4)

Naylor stated (as cited in Martin, Dolmage & Sharpe, 2012) that increased workloads and work-related stress have been linked to rising rates of absenteeism, claims for stress-related disability, and attrition among teachers. In 2006 the Canadian Broadcasting Corporation (as cited in Martin

et al., 2012) reported on released data from the Quebec Provincial Association of Teachers that 31% of teachers on long-term leave left the classroom due to stress and burnout. This is why the responsibility is shared: both parties benefit. Teachers may experience greater health and satisfaction (which in turn may impact students), while the system may experience a decrease in cost for stress-related absences and leaves. In order for this correlation to occur, the relationship between those two parties requires attention and care. The importance and value of this relationship building was embedded across my participants' responses.

### **Conclusion: Implications and Further Research**

Through their stories, my participants showed me the importance of building a foundation on which any and all other educational endeavours, including CSH, have the greatest potential to flourish. This foundation covers a broad range of basic needs unique to teaching, from washroom accessibility to trusting relationships not only between colleagues, but between employee and employer. The recent statistics highlighted in the literature showing increased rates of job dissatisfaction, stress, and workload among teachers, reflect the stories of those who are likely still in the profession. Consider these alarming statistics, combined with those who have already left the profession due to those factors; we are losing too many quality educators to circumstances within *someone's* (perhaps the system's) control or influence. Teachers are an impactful group of individuals, as are their supervisors and governments. Collectively, we have an impact: on students, on families, on society, on the future.

Revisiting the four JCSH pillars of CSH, implications of my study call for deliberate focus on elements essential to teacher wellness as important components within each pillar, or perhaps, as a fifth pillar of CSH. When I refer to 'elements essential to teacher wellness', I am referring to concrete actions that support a milieu hallmarked by community and school division

value for teachers overall, and perhaps additional supports for those who passionately work toward building a healthy school community. The current pillars are: 1) teaching and learning; 2) social and physical environments; 3) healthy school policy; and 4) partnerships and services (JCSH, 2008). As introduced in the beginning of the thesis, teacher wellbeing is inherent in a school's culture of wellness and could be connected to the CSH model, within its existent four pillars. The question was, and still is within various contexts, to what extent are teachers actually being supported through current CSH implementation, and are improvements possible and/or necessary to ensure sustainability? Participants' responses showed the challenges embedded in their professional duties that make optimal wellness (at the personal and school CSH level) even more difficult to achieve. Their insight was not selfish, however, as they all spoke of the importance of sustainability in CSH for the benefit of students and staff, but that in order to be successful in *addressing challenges* and *teacher supports* to effectively *inspire action*, strong *relationships* must be built and *responsibilities shared*.

Participants perceived a misunderstanding between public opinion and actual reality of the teaching profession. Again, this was reflected in literature and news sources. The public often critiques the performance (or perceived faults) of the educational system, with frontline teachers bearing the brunt of this scrutiny. Education is a public responsibility and right, but that does not make every citizen an expert on what actually occurs within classrooms. The scrutiny and attack on teachers and public schools may exist partly because some educated citizens believe that their first-hand experience in school developed sufficient knowledge of education processes to form a strong opinion and judge its quality, or perhaps they feel as taxpayers that on some level they employ teachers; society is also heavily influenced by government and media agendas. The less deserving the public believes teachers are of any 'perks', or benefits (beyond what they are

perceived to already have; i.e. summer vacation), the greater momentum tax-cut agendas may gain as a result (Orlowski, 2011). This only makes the situation worse as teachers are expected (by all stakeholders, including themselves) to both *maintain* and *enhance* the quality of their teaching practice, the achievement and wellbeing of their students, and the education system's image on a local and global scale, with less time and fewer resources.

Suggestions from all sources of data, from both moral and economic perspectives, support CSH as a public responsibility. Education is the greatest determinant of health; these inextricably linked, publicly funded sectors impact everyone in society. Long-term health outcomes may be enhanced through programs like CSH, which aim to instil lifelong wellness values and practices in youth. To effectively introduce and sustain these programs, a comprehensive approach to implementation, including buy-in from community members, is necessary, as the Finland model has also demonstrated (Sahlberg, 2011). As stated in the literature, those who see personal value in an activity are more likely to authentically engage; building relationships within the school and across the broader community is essential to establishing mutual respect and trust as a team (of teachers, system-level leaders, community members) who are motivated to share responsibilities for the betterment of our society, and in this context, our health and wellbeing.

As a teacher and advocate for building healthy school communities, I have observed an increase in attention and resources on the topic of mental health. Breaking down the barriers of stigma around mental health involves a collective and intentional approach to mental health education. The issues teachers face with their own wellbeing include mental health concerns, as do those faced by students. Organizations like Ever Active Schools have noticeably and commendably increased the presence of professional development on mental health literacy

through their conferences and workshop offerings. Mental health must be embedded in CSH implementation, and as presented through my research findings in terms of basic needs and social relationships, becomes essential to the strength and sustainability of a CSH program.

As my conceptual framework took shape and I reflected upon my memos and data findings through participant perspectives and current literature, I began to note suggestions for future research. Combining my ideas for expanding upon the growing body of knowledge in successful and sustainable CSH, I will discuss my suggestion for a longitudinal study tracking the effectiveness of a *comprehensive* approach to introducing CSH. From teacher education to on-the-job support, continued professional development and community buy-in, CSH implementation could follow an intentional (yet unique to each community context) progression. Design of this inclusive approach should include a unique and relevant teacher education program or course, and commitment from the system and community to meaningful and manageable wellness supports and resources for teachers and students (drawing from school community needs), including dedication to developing relationships built upon trust and respect regarding teachers' professional capabilities.

The pre-service program in teacher education could combine insight from both the University of Ottawa's CSH cohort (presented in the literature review) and the Courage to Teach program discussed by Intrator and Kunzman (2006). A focus on teacher candidates' passions and purpose, as well as strengths and limitations to reaching and sustaining optimal personal wellness (within and beyond the teaching profession context), could become valuable elements to an effective program. Practical application of CSH implementation (including setting the groundwork for building school community relationships and generating buy-in) during internship experiences, followed by discussions of limitations and triumphs may also be

beneficial. A cohort succession as teachers transition to employment could help to track the impact as well as offer support to each other as they attempt to implement (or support any existing) CSH programming. Tracking the impact may include an examination of teachers' personal wellness goals, achievements, and limitations, and once in the workforce, the rates of illness, work satisfaction, etc. among the cohort members themselves, but also among the teachers in the CSH schools who hire a CSH cohort teacher.

Throughout the design process of both the program itself and the longitudinal research study, it would be imperative to invite a variety of stakeholder voices to the table. These diverse perspectives and rich discussion would ensure that the comprehensive approach covers as many bases as possible, factoring in the concerns and ideas of everyone involved in building a sustainable healthy school community. My participants discussed the potential for toxic environments to emerge from opening up dialogue about concerns in education. I believe it is important to design meaningful, engaging conversations that limit the destructive negativity and encourage constructive feedback. As a teacher who has been inundated with surveys and invitations to feedback discussions myself, I can attest to the hesitation experienced. Time is valuable. A meaningful cross-section of contributors would perhaps include those who hold both passion and scepticism toward the value of CSH, as both perspectives exist within the broader community and add insight to the design of an effective program. I believe that if stakeholders of any level perceive their voices and time are respected and valued, they will openly share their constructive perspectives.

There are a number of ways that teachers' wellness could be supported within the realm and capacity of the school and CSH model, and in turn, potential for enhanced sustainability of CSH through the engagement of healthy teachers. My participants' perspectives provided new

insight, and in combination with existing research including positive psychology, mindfulness, teacher education programming, and collective impact, these are powerful suggestions to be considered in CSH implementation. My study suggested that an inter-dependent, cyclical relationship does exist between CSH and teacher wellness, and emphasized the importance of relationship building at all stakeholder levels in education. In combination with an extensive review of relevant literature, the study results call for further research over an extended period of time, a longitudinal study, that designs and implements a comprehensive approach to Comprehensive School Health introduction. This important research should observe the longitudinal impact of such an approach on teacher health outcomes, student health outcomes, and determinants of a successful and sustainable school culture of wellness.



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## Appendix A: Consent Letter

June 2013

### Dear Participant:

You are invited to participate in a research project entitled **Comprehensive School Health Sustainability and Teacher Stress, Wellness, and Retention**, conducted by Dana Fulwiler. The project will involve an examination of your experiences regarding a Comprehensive School Health (CSH) program. I am a Masters student in the Department of Curriculum Studies, College of Education at the University of Saskatchewan; this study will become the thesis submission for my degree. The purpose of my research is to identify possible ways in which CSH programs can contribute to teacher wellness. It is anticipated that the research, through centering and validating teachers' experiences, will identify how best to implement CSH programs.

This research is significant, as no studies have yet been conducted on the effects of CSH programs on teacher wellness. Early research suggests that children benefit, but do these benefits also accrue to teachers? Are CSH programs sustainable, if teachers do not experience greater wellness? This study will explore the possibility of a cyclical, interdependent relationship between supporting teacher wellness and establishing effective, sustainable CSH. While there are no anticipated personal benefits for the individual participants, benefits anticipated from this research include building on current research in the area, and providing further insight into CSH best practices (potentially useful for school-based, board, and provincial sharing and planning).

You are being invited to participate in this project because your school has a CSH program. Your involvement with this project would involve one 60-90 minute interview to be conducted at a time and location of your choice. You may also (or instead) be invited to attend a focus group session at an agreed upon location, for a duration no longer than 2 hours. Predetermined interview questions will help guide the individual discussion, and results from those interviews will help to inform the design of the focus group. It is anticipated that 3 individual interviews will precede the focus group of 3-5 participants. Depending on your preference, individual interviews will either be audio or video-recorded. The focus group will be video-recorded. Please feel free to ask any questions regarding the procedures and goals of the study or your role.

Although direct quotes will be used in this study, your anonymity and identity will be protected through use of a pseudonym, and steps will be taken to ensure that your name, address, and any other identifying information will be removed from the interview. All identifying dates, locations and names will be removed from the transcript. The interview will be recorded and you may ask the recording to stop at any time during the interview. You will have an opportunity to review and revise your transcript before the information is used (in writing the final thesis submission – a specific timeline will be provided with a final date to withdraw data). Information from this study may be reported in journal articles or conference proceedings. Any information obtained from you or about you in connection with this project will remain confidential and will be disclosed only with your permission. As the researcher, I will protect

the confidentiality of the discussion, but cannot guarantee that other participants will do the same. Please respect the confidentiality of the other members of the group by not disclosing the contents of this discussion outside the group, and be aware that others may not respect your confidentiality.

I do not anticipate any risks or discomforts with this research. If any discomfort should arise you may withdraw prior to the interview data being themed (this date will be communicated to you) and, if needed, I can provide you contact information of counselling services. Data from your interview will be stored in electronic forms in secure locations in a locked office at the University of Saskatchewan, separate from all identifying information (consent forms and master list). All materials will be destroyed five years after the study's completion. There are no perceived conflicts of interest and no financial benefits will be gained from this research.

You are not under any obligation to participate in this study, and your decision will not affect your future relationship with the University of Saskatchewan. Furthermore, **if you decide to participate you may withdraw at any time** (up until the interview data has been themed – this date will be communicated with you) **without penalty or prejudice**. If you withdraw from the research project at any time, any data that you have contributed will be destroyed at your request.

This project was reviewed on ethical grounds by the University of Saskatchewan Behavioural Research Ethics Board. Any questions regarding your rights as a participant may be addressed to the Research Ethics Office toll free at 1-888-966-2975 or [ethics.office@usask.ca](mailto:ethics.office@usask.ca).

Please contact me, Dana Fulwiler, at [dlf957@mail.usask.ca](mailto:dlf957@mail.usask.ca) or at 403-650-7656, if you have questions about this project or your participation in it. To obtain results from the study, please feel free to request a copy by email.

Your signature below indicates that you have read the information provided on this form, it has been explained to you, you have been offered a copy of this form to keep, you have been given an opportunity to ask questions about this form, your questions have been answered, and you agree to participate in this project.

Participant	_____	<input type="checkbox"/> Audio-recording
Signature	_____	<input type="checkbox"/> Visual-recording
Date	_____	<input type="checkbox"/> Interview
		<input type="checkbox"/> Focus group
Principal Investigator	_____	
Signature	_____	
Date	_____	

## Appendix B: Interview Guide

How would you define comprehensive school health? What does that look like? In what ways has your school achieved a culture of wellness?

When was CSH initially introduced to your school, and who led/inspired the initiative? In what ways have staff been involved in its implementation?

Who is currently part of the CSH team in your school, and how does your team set goals and drive those goals forward?

From your perspective and experience, what role do teachers play in the successful and sustainable implementation of CSH? Administrators? Students? Parents?

Describe the CSH implementation process in your school. From your perspective, what impact has this had on your teaching staff?

What does the CSH model look like in your school *today*?

In what ways have you observed the CSH model to support *and/or* hinder teacher wellness?  
How has it affected you, specifically?

Describe any impact that you have observed CSH to have on your student population, and as a result, any perceived impact this has had on teachers. On you?

How would you describe the attitude of students and staff toward CSH-inspired initiatives?

Have you observed the implementation of CSH to have an affect teacher attitudes, work-satisfaction, collegiality, absenteeism, or retention? Please explain.

From your perspective, describe the pros and cons to CSH. Are there any pros OR cons that directly relate to teacher stress and wellness?

Considering the implementation and participation in CSH (buy-in, number & scope of participants on the CSH team, admin support, etc.), how sustainable do you feel the model is at your school? What challenges in sustainability do you foresee, and why?

If supports beyond the school were accessible, what types of resources do you think would help to ensure that CSH was sustainable in your school?

From your perspective and experience, what would assist in establishing a **sustainable**, effective CSH program?

Based on your experience, do you believe CSH implementation should include initiatives that target both students and staff wellness equally? Please explain.

In what ways do you believe that CSH was necessary/unnecessary in your school? On what basis or evidence do you think your perspective has been formed?

From your perspective, to what extent and in what ways has CSH created a 'culture of wellness' at your school?

### **Additional Interview Questions**

From an administrator perspective, have you observed any changes/shifts in staff morale since implementation of CSH practices? Please explain.

Have you observed any changes in teacher absenteeism? Please explain.

In what ways have you observed feelings of guilt to impact teachers' effectiveness at work?

Research suggests that Canadian teachers are increasingly dissatisfied in their workplace, experiencing a significant increase in workload and stress, and leaving the profession. In what ways (if at all) have you observed these statistics in your own school? From your experience and perspective, does CSH have the power to support teacher wellness and work-satisfaction? Why, or why not?