

TOTAL WORKER HEALTH—A NEW DIRECTION IN SUPPORTING TEACHER WELL-BEING

A CSCH Brief by Lisa Sanetti, Alicia Dugan, & Jennifer Cavallari

Background

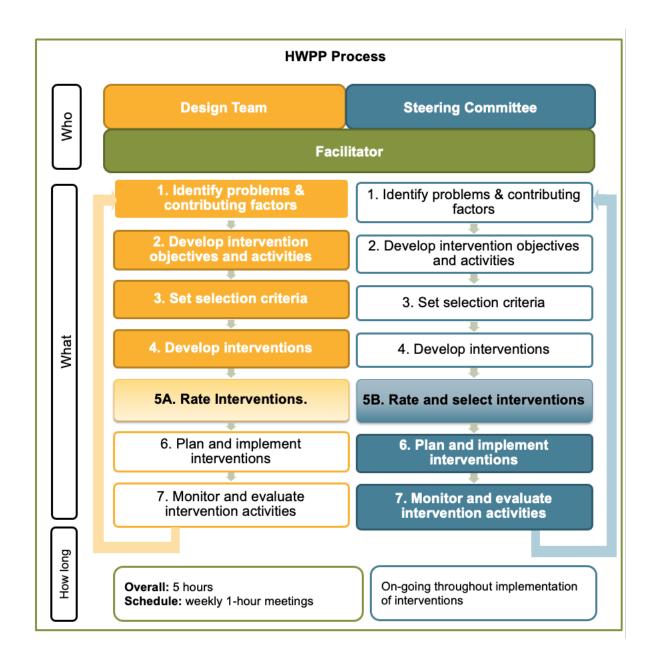
Teachers are tied with nurses as being the most stressed workers in the United States. A survey by the American Federation of Teachers shows 61% of teachers report often or always experiencing significant stress at work.¹ Teachers' stress results in their being less effective in delivering instruction and managing behavior, having poorer relationships with their students, having more physical and psychological health issues, and being more likely to leave the education field.² Further, the students of chronically stressed teachers are more likely to demonstrate disruptive behaviors, have higher suspension rates, and have higher levels of cortisol—the stress hormone.².³ Despite data documenting the high and increasing rates of teacher stress for 50 years, research on how to improve teacher well-being is relatively limited. Nearly all stress-reduction interventions have focused on the individual level and have demonstrated small-to-medium effects.⁴ Although it is important to increase teachers' "toolboxes" of personal stress management strategies, available data make clear that many sources of teacher stress are at the school or systems level.¹ The few systems-level interventions to address teacher stress have been top-down, one-size-fits-all approaches, which were minimally effective.⁵

Total Worker Health® (TWH), an approach prioritized by the National Institute of Occupational Safety and Health within the Centers for Disease Control, recognizes work as a social determinant of health and seeks to optimize workplace factors (e.g., organizational policies/practices, work schedules, colleague relationships, leadership) that promote worker health and well-being. Further, TWH recognizes the importance of developing interventions with the input of the workers they are meant to benefit. Participatory TWH approaches offer an evidence-based approach to promoting employee wellness, one of the components of the Whole School, Whole Community, Whole Child model, also developed by the Centers for Disease Control.

How can a TWH approach be applied in schools?

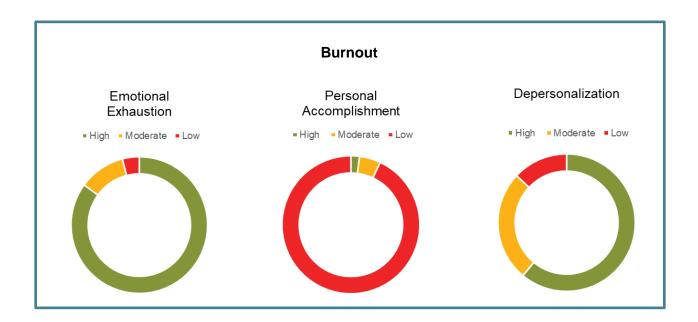
The Center for the Promotion of Health in the New England Workplace (CPH-NEW), a TWH Center of Research Excellence, developed the Healthy Workplace Participatory Program (HWPP), an evidence-based process that engages employees and supervisory personnel in the collaborative, iterative design and implementation of workplace-level health and wellness interventions. As illustrated below, the HWPP process includes a Design Team made up of front-line workers (i.e., teachers, paraeducators, pupil services personnel), and a Steering Committee made up of individuals who have the authority to make decisions, access resources, and support implementation (e.g., principals, pupil services leaders, superintendents). A facilitator, trained in the HWPP, assist the Design Team and Steering Committee complete a structured seven-step process as outlined below. HWPP training videos, instruction guides and worksheets are all freely available.





Initial Findings

The HWPP was piloted in elementary schools in New England pre-COVID. Results of two elementary schools in the same district approximately one mile apart are presented to demonstrate the unique building-level sources of teacher stress. **Across these schools, 80-85% of teachers rated their job as highly stressful.** Further, nearly all teachers met criteria for burnout, with high rates of emotional exhaustion and depersonalization as well as low rates of personal accomplishment (see figure on next page). In each school, seven teachers served on the Design Team, which met weekly to complete steps 1-5A of the HWPP process.



In School A, workplace communication and improved workplace climate were identified as top concerns. In School B, improved individual well-being and workplace climate were identified as top concerns. Through a root cause analysis, the Design Team developed multi-component interventions to address these concerns. Examples of the Design Team-identified solutions and results of the Steering Committee's adoption and implementation are provided below alongside quotes from staff after HWPP implementation.

School A				
Sample Solutions		Adoption	Outcomes	
Communication	24-hour email policy for principal	Set up Gmail nudges for principal	40% increase in timely response from principal	
	Administrative office hours – open door, no appointment needed	Principal had weekly office hours during lunch	100% of staff found effective.	
Workplace Climate	Provide all teachers and staff with sincere individual feedback. Staff "Shout Outs" announced daily	Staff provided "Shout Outs" for peers. Read daily and posted on door.	227 Staff Shout Outs given	
	Staff activities outside of work	Not adopted; addressed by another teacher-led committee	N/A	

[&]quot;We feel seen and respected as people in a way we never have before."

School B					
	Sample Solutions	Adoption	Outcomes		
Staff Well-being	Provide opportunities for physical activity at school	Running club before & walking club after school	On average 16 staff engaged in one club weekly for rest of year.		
	Provide staff information about the health/wellness programs available through the district.	Human resources representative presented at staff meeting and provided written materials.	100% attended presentation and received requested information.		
Workplace Climate	Restructure schedules or processes to increase brief breaks for teachers throughout the day.	Substitutes used to provide breaks to teachers; one teacher on each team gets a break from recess duty daily.	75% of staff received at least one break.		
	Provide space for teachers to decompress after challenging student situations.	Identified teaching "buddies" who can cover classes at different times of day if a teacher needs a break.	Teacher reported using the provided coverage and that they were better able to resume instruction after.		

"Having coverage so I can go to the bathroom allows me to drink water throughout the day. I'm finally not dehydrated all day."

Implications

The results from initial piloting demonstrate that the **HWPP** can be effective in **K-12** schools. Importantly, results also highlight that the majority of sources of teacher stress were at the workplace level, suggesting that a TWH approach is more promising in protecting and promoting teacher health than initiatives that only intervene at the individual teacher level. Unique needs and root causes of stress were identified across schools demonstrating the value of the participatory approach. These results support that effective solutions to improve teacher well-being must address workplace and individual factors while including teacher voice.

Additional Resources

Center for Promotion of Health in the New England Workplace (CPH-NEW)

Provides free resources and training related to workplace well-being.

<u>CPH-NEW Healthy Workplace Participatory</u> Program (HWPP) Toolkit

Resources and trainings necessary to implement the HWPP are freely available on the CPH-NEW website.

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https://www.aft.org/sites/default/files/2017_eqwl_survey_web.pdf

Worker Health. https://www.cdc.gov/niosh/twh/default.html

¹American Federation of Teachers. (2017). Educatory quality of life survey. Retrieved from:

²Sanetti, L. M. H., Charbonneau, S., Knigol, A., Cochrane, W. S., Kulcyk, M. C., & Kraus, K. E. (2020). Treatment fidelity reporting in intervention outcome studies in the school psychology literature from 2009 to 2016. *Psychology in the Schools*, *57*(6), 901-922.

³Oberle, E., & Schonert-Reichl, K. A. (2016). Stress contagion in the classroom? The link between classroom teacher burnout and morning cortisol in elementary school students. *Social Science & Medicine*, *159*, 30–37.

⁴von der Embse, N., Ryan, S.V, Gibbs, T. & Mankin, A. (2019). Teacher stress interventions: A systematic review. *Psychology in the Schools*, *56*, 1328-1343.

⁵Naghieh, A., Montgomery, P., Bonell, C. P., Thompson, M., & Aber, J. L. (2015). Organisational interventions for improving and reducing work-related stress in teachers. *Cochrane Database of Systematic Reviews*, (4).

⁶Centers for Disease Control, National Institute for Occupational Safety and Health. (n.d.) Total