

**IMPROVING TEACHER MENTAL HEALTH THROUGH SELF-AWARENESS:
A WORKSHOP AND WORKBOOK**

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Dedication

To all teachers: may you find the courage to do your personal work.

Abstract

This project addresses the need for teachers-in-training and teachers already working in the profession to develop personal and professional self-awareness in order to manage their work-related stress and mental health needs. Numerous research articles have examined the causes of stress in teaching, the effects of stress on teachers, and teacher factors that mediate the effects of stress (e.g. self-efficacy, environmental supports, locus of control), however, currently there are limited resources available specifically targeted to helping teachers develop self-awareness as a way to cope with stress. This project includes literature that outlines the need for supporting teachers, information on how to support teachers in managing their work-related stress and mental health, and *A Workshop to Improve Teacher Mental Health Through Self-Awareness, A Workbook to Improve Teacher Mental Health Through Self-Awareness, and Facilitating a Workshop to Improve Teacher Mental Health Through Self-Awareness: A Guidebook* to address this need in the teaching profession.

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Chapter 1: Introduction

Rationale

Mental health is a growing area of interest within the field of education in Canada, specifically with regard to the mental health and wellness of students. Often schools take part in mental health initiatives, such as Pink Shirt Day to campaign against bullying, BellLet'sTalk to reduce stigma, and Mental Health Awareness Week to increase knowledge and understanding of mental health. Additionally, a variety of mental health curricula have become available to teachers to deliver to students, including the Teacher's Guide: Talking About Mental Illness (Canadian Mental Health Association, 2001) and Stan Kutcher's (2015) Mental Health and High School Curriculum Guide. While the increase in mental health initiatives in schools is promising, the majority of literature and resources appear to focus on student's mental health and the challenges associated with teaching students with diverse learning needs as a result of mental illness.

Currently, what appears to be under-acknowledged and under-addressed is teachers' own mental health. Rodger et al. (2014) analyzed over 400 courses from 66 Canadian institutions that offer accredited Bachelor of Education programs to see how many of them provide students opportunities to learn about mental health, strategies for coping, accessing resources, healthy relationships, wellbeing, and mental illness. They found that only two courses across all provinces and territories met all the criteria for a mental health literacy course (Rodger et al., 2014). Generally, Canadian Bachelor of Education programs focus primarily on instructional practices and philosophies of teaching, but lack a course dedicated to helping teachers develop the skills to manage their own mental health needs once they enter the field. In reference to existing mental

health programs for teachers, Pickens (2015) explains that “the scattered approach to implementing these supports nationwide brings into question how well teacher mental health and stress management is systematically addressed... an opportunity may lie in plain sight with targeted approaches to building teacher self-efficacy” (para. 3).

The lack of attention given to teacher’s mental health may be a result of the time it takes for theories and research findings to be put into practice. For example, Jennings and Greenberg (2009) published an article outlining the importance of social and emotional competence in both teachers and students. They stated, “socially and emotionally competent teachers set the tone of the classroom by developing supportive and encouraging relationships with their students, ... coaching students through conflict situations, encouraging cooperation among students, and acting as a role model for respectful and appropriate communication...” (p. 492). However, there continues to be a lack of attention given to teacher’s own mental health within teacher training programs (e.g. Bachelor of Education Degrees) and within the broader teaching profession.

A few simple, yet foundational concepts exist among helping professions. These concepts apply to teachers, as they are classified as helping professionals. One of these concepts is self-awareness and personal health of helpers, which is illustrated in the well-known saying, “you should help yourself before you can help someone else” as encapsulated through the popular image of a flight attendant instructions to put your own oxygen mask on before helping others. Another foundational concept is reciprocity and empathy, which is commonly referred to as The Golden Rule: do unto others, as you would have them do unto you. Rosenberg (2014) extends this concept and stated “If the Golden Rule was adapted to the helping professions, I believe it would go something like

this: “Do unto yourself as you would expect others to do unto themselves.”... It is an ethical mandate for us helping professionals to practice what we preach” (para. 8).

Additionally, “if teachers cannot keep themselves healthy, it is difficult for them to model health and in turn, encourage health in their students” (Rodger et al., 2014, p. 28). These foundational concepts ground and direct helpers and offer protection from the hazards of helping others, such as chronic stress.

Purpose of the Project

As I completed my Undergraduate Degree in Education, it became apparent to me that there was a lack of information and direct teaching provided to pre-service teachers on how to cope with the demands of being a teacher. I found this surprising, especially in comparison to the heavy focus in my Master of Counselling program on personal coping and health. Now as a graduate student in a Master of Counselling program, I am increasingly aware of the impact that dysfunctional coping skills have on the lives of those in helping professions. In the course, Professional Ethics and Conduct, I discovered how important it is to be mentally and emotionally stable when working in a helping role. The course focused on professional values and morals, ethical decision making, managing one’s own personal needs, and increasing awareness of personal “hot spots” that could be triggered and result in compromised decision making abilities. Examining my personal issues and areas for growth allowed me to be more aware of how I respond when helping others and gave me power to be more intentional in my decision making process as a counsellor. Similar to counsellors, teachers are often required to think on their feet and consider a wide range of pedagogical, theoretical, and interpersonal factors in order to make decisions in the best interest of the student. In the high-demand and

isolated role of teaching, it can be difficult to manage personal and professional issues moment-to-moment, especially without training on ethical decision making or support in developing self-awareness. Again, similar to counsellors, teachers spend the majority of their career in relationships with others, whether it is with students, parents, colleagues, administrators, or field experts/educators. The ability to develop, maintain, and repair relationships is considerably dependent on one's ability to be reflective and intentional. To adequately support teachers in a way that improves their abilities to navigate relationships, cope with professional and personal issues, and be reflective and intentional in their decisions, they need to be given the tools and resources to develop self awareness and cope with personal issues. As a culminating document for my Master of Counselling Degree, I created a final project that will support teachers' understanding of their own mental health and the need to incorporate coping mechanisms for the high stress occupation of teaching. A literature review and resultant practical application, *A Workshop and Workbook to Improve Teacher Mental Health Through Self-Awareness* was created, offering teachers opportunities to develop self-awareness and practical skills in order to improve their ability to manage their emotional, behavioural, and mental health needs. " Education, the most humanitarian of all professions, falls short in developing its own human capital – its most valuable asset in addressing student achievement" (Patti, Holzer, Stern & Brackett, 2012, p. 264).

Overview of the Project

Chapter two includes a review of the literature summarizing and analyzing research studies and theoretical frameworks that explain teacher stress, self-awareness, and coping. The key focuses include: stress and burnout, teacher attrition, stress and risk

of developing a mental health problem, self-awareness, affect regulation, emotional intelligence, introspection, mindfulness, patterns in relationships, boundaries, and coping. Following the literature review is Chapter three, which outlines the project methodology: how the project was completed, what this author developed, targeted audiences and search terms used. Chapter four provides a summary of the workshop and workbook and outlines its contents and purpose. Chapter five is dedicated to the Discussion, which includes a personal reflection, benefits and limitations of the project, and cultural considerations when using *A Workshop and Workbook to Improve Teacher Mental Health Through Self-Awareness*. Appendix A contains *A Workshop to Improve Teacher Mental Health Through Self-Awareness*. Appendix B includes *A Workbook to Improve Teacher Mental Health Through Self-Awareness*. Appendix C includes *Facilitating A Workshop to Improve Teacher Mental Health Through Self-Awareness: A Guidebook*.

Chapter 2: Literature Review

This chapter begins with an introduction to teacher mental health and the current difficulties and barriers involved in addressing this area. This is followed by overviewing relevant literature on a variety of themes that have been found to influence teacher mental health. The topics undertaken in this investigation on teacher mental health include: changes in the teaching profession, increasing demands on teachers, diverse learners, culture and climate, school-based resources, teacher-student relationships, and teacher personal characteristics. Finally, a general overview of the theoretical frameworks that provided a foundation in the development of *A Workshop to Improve Teacher Mental Health Through Self-Awareness* and *A Workbook to Improve Teacher Mental Health Through Self-Awareness* are addressed.

Teacher Mental Health and Teacher Stress

Mental health, in the general sense, is defined as “a state of well-being in which every individual realizes their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community” (World Health Organization, 2014). A variety of biological and environmental factors influence mental health as well as the development of mental illnesses. More specifically, Kutcher (2015) defines a mental health problem as: a reasonable and expected response to an extreme life event (e.g., loss of a loved one, witnessing extreme violence), which is quite different from his definition of mental illness: a disorder of brain function that affects mood, thinking, and behaviour and is diagnosable using the Diagnostic Statistical Manual of Mental Disorders-5 (American Psychiatric Association, 2013). Mental illness affects people regardless of race, ethnicity,

age, gender, sexual orientation, religious beliefs, education, or socioeconomic status (Teen Mental Health, 2017), meaning that teachers are just as likely to developing a mental illness as anyone else.

In fact, due to the work related stress they experience, teachers are at high risk of burnout (Ganster & Rosen, 2013), physical illness (Grayson & Alvarez, 2008) and psychological distress (Borelli, Benevene, Fiorilli, Amelio, & Pozzi, 2014; Richards, 2012). Teaching is one of the top ten professions with the highest rates of sickness absences due to work-related stress (Ahlgren & Gadin, 2011) with women reporting higher levels of occupational stress and taking sick leave more frequently (Bogaert, De Martelaer, Deforche, Clarys, & Zinzen, 2014). One survey reported that nearly half (45%) of teachers categorized their mental health as “poor” to “very poor” and 15% reported taking medication because of work-related stress (Hepburn, 2017). Van der Bijl and Oosthuizen (2007) compared teachers to another class of helping professionals (medical doctors) and found higher levels of anxiety and depression symptoms among teachers, with many displaying a passive attitude towards seeking help. Another study revealed that professionals who report higher levels of occupational stress are more vulnerable to a wider variety of mental and physical problems such as depression, anxiety, sleeping disorders, burnout, and cardiovascular disease (Ganster & Rosen, 2013).

Stress has been defined as “the physical, mental, and emotional response to life’s changes and demands” (Larrivee, 2012, p. 3), and is a subjective experience, meaning that what is stressful for one may not be for the other. Stress results when the demands of the situation exceed the resources one has to manage the demands (Spilt, Koomen, Thijs,

2011). Stress is also contextual; what is stressful on a Monday may not be stressful on a Saturday when there is more time to accomplish a task (Larrivee, 2012). Due to the subjective and contextual nature of stress, considerable difficulties in measurability and generalizability within specific professions, such as teaching, exist. However, research has been conducted specifically on *teacher* stress, providing some insight into how stress exists specifically within the context of teaching. Closely connected to the concept of teacher stress is the concept of burnout. Burnout was initially conceptualized as the experience of emotional exhaustion, depersonalisation, and reduced personal accomplishment, which results from chronic occupational stress (Foley & Murphy, 2015). More recently, Foley and Murphy (2015) explained burnout as a “dynamic process, whereby its three dimensions influence and feed into each other” (p. 46); emotional exhaustion results in a person distancing themselves emotionally and cognitively from their work (depersonalization), which in turn results in reduced effectiveness and accomplishment in the workplace (Foley & Murhpy, 2015). Burnout is significantly correlated with teacher absence and attrition (Bogaert et al., 2014; Hepburn, 2017).

The definition of teacher stress has evolved over the years and will likely continue to evolve as our socio-political and technological landscape changes. The first time the term “teacher stress” appeared in the literature was in 1977 (Kyriacou & Sutcliffe, 1977, as cited in Kyriacou, 2001), followed by an influx of research on this topic. Kyriacou (1977, as cited in Kyriacou, 2001) defined teacher stress as “the experience by a teacher of unpleasant, negative emotions, such as anger, anxiety, tension, frustration or depression, resulting from some aspect of their work as a teacher” (p. 28). Although

Kyriacou's 1970's definition of teacher stress is dated, it provides context regarding the establishment and evolution of the construct. Kyriacou also developed a model of teacher stress and coping, in which he viewed stress as a "negative emotional experience that was triggered by the teacher's perception that their work situation constituted a threat to their self-esteem or well-being" (Kyriacou, 2001, p. 28). His emphasis on perceptions of the self are important when designing and choosing interventions for reducing teacher stress. Since Kyriacou's initial conceptualization of teacher stress, alternative models of stress and coping have been developed which are also worth noting. In particular, Lazarus' (1991). Transactional Model of Stress and Coping offers an explanation of teacher stress based on personal appraisal and perceived resources available. Together, the notions of teacher's perceptions of self and their personal appraisals of stress provide a theoretical foundation for the workbook and are further explored in the section: Theoretical Foundations.

Although research has begun to focus specifically on *teacher* stress, complications continue to arise in the process of understanding stress, one of which is the lack of attention given to teacher mental health. Numerous initiatives have been developed to increase the awareness of student mental health and teacher skills in understanding and responding to student mental health concerns, however the endeavor has not been extended to teacher's own mental health. One possible explanation for why teacher mental health is under addressed is because "the profession inherently breeds a culture of self-sacrifice and endurance, which often dissuades many from seeking help. The notion that teachers will "always pull through" seems to be assumed in the demands and directives of school administrators" (Smol, 2009, para 21).

Another possible factor is that a sense of dissonance would occur should the public acknowledge that helping professionals have mental health problems and may be vulnerable, fragile, and wounded too. It makes sense why the public expects teachers to be superior in functioning, wisdom, and wellness; it makes everyone feel more comfortable when sending children to learn from them. This powerful societal discourse (Tomm, St. George, Wulff, & Strong, 2014), that teachers *must* be of superior functioning, is influenced by the stigma around mental health. Mental health stigma is the devaluing of someone because of a mental health problem or mental illness (Sickel, Nabors, & Seacat, 2014). There is enormous pressure on teachers to withstand the stresses of teaching on their own and not to ask for extra supports. This pressure is perpetuated by common labels the public puts on teachers: “lazy”, “greedy”, and “incompetent”. These are labels I have heard first hand. Not only does stigma perpetuate misconstrued and destructive beliefs about those who have a mental health problem or mental illness, it also gets taken up by those who have mental health problems themselves. Teacher mental health is unaddressed by teachers themselves due to the stigma associated with mental health and the profession’s expectations of rigor and achievement that are put on teachers. The issue of teacher mental health therefore is an easy one to either misunderstand or ignore.

Personal Development

As found in the literature, personal development of teachers goes hand in hand with professional development. Their frequent appearance together can be interpreted as an inter-dependence on each other; in order to develop professionally, one must develop personally, and vice versa. This assumption, in many ways, perpetuates the idea among

teachers and teacher educators that teaching is not a career, but a vocation. In my own teacher training, it was repeatedly stated that we are teachers first and foremost, and no matter where we are, be it in the classroom, on vacation, or in the local bar, we are always seen as teachers to the public. Although I believe the didactic approach was intended to instil a sense of responsibility and honour associated with being a teacher, it also placed considerable pressure to always be “on”. Personally, I see this as subtly contributing to the felt pressures associated with being a teacher and argue that, in some ways, personal and professional development for teachers needs to be treated as distinct endeavours. Surely, the personal development of teachers will benefit them professionally, however it may not always be true that the professional development of teachers will benefit them personally. For instance, learning how to increase literacy and numeracy success among students will not result in healthier, happier, more stable teachers.

A large body of research exists on the kind of professional development teachers require today and how to effectively provide professional development to teachers. Most of the research available addresses how to teach the subject matter in a way the students will understand. However, one study from Patti et al., (2012) stood out with regard to this project. The authors examined a professional development approach called Personal Professional Coaching (PPC), which is “grounded in reflective practices that cultivate self-awareness, emotion management, social awareness, and relationship management” (Patti et al., 2012, p. 263). They found that the educators who participated in this model of development had better relationships with colleagues, increased student attendance and engagement, decreased suspensions, and higher student achievement (Patti et al., 2012).

Unfortunately, PPC was provided only to administrators, failing to reach those who are most often in direct contact with students: the teachers.

Factors That Influence Teacher Mental Health

Generally, the factors of teaching discussed in this section have both protective and risk aspects, depending on their context or application. For example high self-efficacy is associated with teacher well-being, whereas low self-efficacy is associated with teacher stress; similarly, a supportive and collaborative school climate is associated with teacher wellbeing but the opposite (poor school climate) contributes to teacher burnout. With that said, it cannot be assumed that all factors outlined below have both risk and protective features. For example, having a high number of diverse learners in a classroom is a risk factor for teachers who are not trained to work with high-needs students, yet the absence of diverse learners does not necessarily *protect* a teacher. The absence of a risk factor does not equal the presence of a protective factor, and vice versa. Therefore, in this section, both protective and risk elements are explored when relevant, factor by factor.

Changes in the teaching profession. The teaching profession has significantly changed over the past twenty years and is continuing to change at a faster rate than teachers and teacher educators can keep up with (Leung, Mak, Chui, Chiang, & Lee, 2009; Rogers, 2012). Galton and McBeath (2008, as cited in Rogers, 2012) termed this phenomenon “reformation fatigue”. Moreover, advances in technology influence the way lessons are delivered as well as how teachers communicate with students. Although pencil-to-paper is still used in schools, it is becoming the new standard for technology to be part of the education process and many schools have adopted an online platform for

students to submit assignments and for teachers to post lesson plans. As a student teacher in a grade 4/5 classroom, I was encouraged to utilize numerous technological curriculum delivery systems such as googledocs, chromebooks, smartboards, ipads, computers, email, webinars, internet, dropbox, iclickers, skype, and classroom hashtags in addition to the standard lecture, discussions and readings. The demand to integrate technology into delivering lesson plans and teaching students how to use technology responsibly is yet another task teachers face in addition to content-heavy curricula.

Moreover, being a teacher is becoming increasingly difficult as the socio-political landscape in Canada changes. With increasing numbers of immigrants, refugees, and English Language Learners (ELL), teachers must provide instruction to a wider variety of learners. Teachers are required to develop individual program plans, learner support plans, and behavioural support plans for students who require modified or adaptive lessons and assessments; a task which takes considerable time, energy, and expertise. More and more, teachers are asked to take on additional roles; “Such approaches leave them with no time to be creative, use their imagination, work with other teachers, or develop classroom practices that are not wedded to teaching for the test and other demeaning empirical measures” (Wright-Maley & Davis, 2017, p. 16).

Increasing demands on teachers. Increased workload is another factor contributing to teaching being a risky profession (Shernoff, Mehta, Atkins, Torf, & Spencer, 2011). Canadian teacher’s workloads have risen over the years from 47-hour work-weeks to 52-hour work-weeks, on average (Ontario Secondary School Teachers’ Federation, 2005). Not only is the demand increasing, but the teaching role lacks flexibility to have moments of recovery throughout the work day. “The lack of control

teachers have over their timetable, including breaks, makes it very difficult to take respite when it is needed. In most occupations, you can shut your door and have a coffee if things get on top of you” (Hepburn, 2017). In line with increased workload, increases in performance evaluations and reviews of schools also contribute to reports of low satisfaction within the profession (Leung et al., 2009; Shernoff et al., 2011). Increasing occupational demands have resulted in high stress amongst teachers (Hamama, Ronen, Shachar, & Rosenbaum, 2013; Kyriacou, 2001; Leung et al., 2009; Richards, 2012) and increasing burnout rates (Fives, Hamman, & Olivarez, 2007; Grayson & Alvarez, 2008). In their study Ferguson, Frost, and Hall (2012) examined teacher’s experiences of depression and anxiety in relation to job satisfaction and found that workload, working conditions and student behaviour were significant predictors of anxiety and depression.

Unfortunately, increasing occupational demands have also resulted in early-career teacher attrition varying from 5% to 50% (Schaefer, Long, & Clandinin, 2012), with 50% of drop outs occurring within the first two years of teaching (Karsenti & Collin, 2013). Teacher attrition is an also economic burden; 2.2 billion dollars are spent annually on replacing teachers who have left the profession (Alliance for Excellent Education, 2014), but as Mihans (2008) explained, “even more alarming is the fact that projections suggest teacher attrition rates will continue to soar, while student enrollments climb, well into the 21st century” (para. 1). Predictors of teacher attrition include low job satisfaction and low levels of resilience (Arnup & Bowels, 2016), working conditions, administrative support, salary, accountability, and teacher preparation (Heckman, 2011). Efforts to respond to the problem of teacher attrition is evidenced by the resources dedicated to recruiting new teachers, however Heckmen (2011) argued that retaining teachers by helping them

develop coping strategies is a better way to reduce teacher attrition rates rather than using resources to replace teachers who have left the profession.

Diverse learners. Many school districts have specialized classrooms for students who are unable to spend all day in the regular classroom. The special needs of these students include learning disabilities, mental disabilities, emotional/social disorders, and sensory disabilities. Children with special needs often demonstrate difficult behaviours (e.g. running away, yelling, kicking, throwing, swearing) and extreme feelings (e.g., anger, aggression, withdrawn, hopeless, depressed, anxious, paranoid), therefore teaching students with special needs is a demanding role (Shernoff et al., 2011). In fact, one study concluded that teachers in specialized education are more likely to experience mental abuse, physical violence, and armed threats and are at higher “risk of psychiatric distress and mental disorders when compared to general education teachers” (Ervasti et al., 2012, p. 339).

Yet, even outside of specialized classrooms the demands for teachers to understand and respond to student’s mental health concerns are increasing (Clemens, 2007; Ekornes, 2015). According to the Centre for Addiction and Mental Health (2012), 70% of mental health problems have their onset during childhood or adolescence, and 34% of high school students in Ontario reported a moderate-to-serious level of psychological distress. “More than ever, teachers are called upon to attend to the mental health of their students, yet with limited training in mental health awareness or care, they have little support to effectively fulfill this role” (Rodger et al., 2014, p. 3). Additionally, as a prospective therapist, I understand how the mental health problems of others impact me personally; it can be difficult to manage my own negative reactions to the negative

emotions of another. The ability to maintain emotional stability and composure during emotionally-charged interactions has taken a great deal of self-reflection and supervised practice to develop; something I did not receive training or supervision in during my teaching degree. Although my experience is just one, I worry that other teachers were also undereducated in this area. According to the Transactional Model of Stress and Coping (Lazarus, 1991), stress occurs when one does not have the resources required to cope with their perceived demands. With this and the previously cited literature in mind, it is reasonable to believe that both specialized education teachers and teachers in regular education who are tasked with responding to a student's mental health needs are at risk because they lack the knowledge and training to manage student's mental health needs.

School climate and resources. A supportive school climate is associated with higher levels of job satisfaction (Skaalvik & Skaalvik 2017; Hur, Jeon, & Buettner, 2016) and lower levels of stress (Grayson & Alvarez, 2008) among teachers. It appears the most significant contributions to a positive school climate are collegiality and collaboration which are positively correlated with increased teaching efficacy (Shachar & Shmuelevitz, 1997) and negatively correlated with stress (Klassen & Chiu, 2011). One study measured the following school climate factors: work pressure, resource adequacy, principal support, affiliation, staff freedom, and goal consensus and found that work pressure, resource adequacy, and principal support were all directly related to job satisfaction (Aldridge & Fraser, 2016).

Alternatively, factors that contribute to poor school climate include lack of communication between teachers, lack of funding to purchase required resources (e.g. desks, books, school materials), and hierarchical factors such as power struggles with

administrators and federal laws denoting teacher responsibilities (e.g. standardized testing) (Grayson & Alvarez, 2008; Shernoff et al., 2011). Teacher stress is also associated with negative teacher attitudes and proximity to other teachers who are experiencing burn-out (Grayson & Alvarez, 2008), professional isolation, and non-supportive colleagues (Ahlgren & Gadin, 2011). Unfortunately, school-wide burnout due to lack of resources and negative school climate is “less amenable to a teacher’s individual efforts to ameliorate the stressor on his/her own” (Grayson & Alvarez, 2008, p. 1352). In these cases, teachers are more likely to focus on personal coping and survival rather than reformation efforts (Grayson & Alvarez, 2008).

Work engagement. Work engagement is defined as “a positive affective-emotional state and sense of accomplishment that includes three dimensions: vigour, dedication and absorption” (Schaufeli & Bakker, 2010, as cited in Bermejo-Toro, Prieto-Ursúa, & Hernández, 2016, p. 482). One group of authors measured teacher engagement with a self-report questionnaire that examined elements of “work satisfaction (e.g., I enjoy my work), workplace buoyancy (e.g., I am good at dealing with setbacks at work [e.g., poor performance, negative feedback]), participation (e.g., I participate when we discuss things at work), and positive career aspirations ... (e.g., I’m happy to stay on in this line of work)” (Parker, Martin, Colmar, & Liem, 2012, . p. 507). When thinking about the various elements of ‘work engagement’, it is clear that engagement and burnout can be seen as being at opposite ends of the well-being spectrum (Parker et al., 2012); higher engagement in one’s work is conducive of well-being, whereas lower engagement in one’s work puts one at risk of burnout. Bermejo-Toro et al. (2016) found that work engagement had a direct effect on burnout in that engagement led to proactive coping

strategies (as opposed to reactive coping strategies), which in turn led to reduced symptoms of burnout. Therefore, work engagement seems to be a protective factor against teacher stress.

Teacher-student relationship. A healthy-teacher student relationship (TSR) is important for students' school engagement, well-being, and academic success, and a student's social-emotional functioning is strongly influenced by their sense of connection to their teacher and the school (Murray & Greenberg, 2000). However, Spilt, Koomen, and Thijs (2011) also concluded that teachers "have a basic need for relatedness with the students in their class" (p. 457) and a positive TSR is associated with teacher well-being. The same authors drew from Bowlby's (1988) Theory of Attachment to explain that teachers internalize interpersonal experiences with students into their internal working models, which contain a set of beliefs and feelings about the self, the student, and their relationship with the student. Therefore, positive interpersonal interactions contribute to positive perceptions of the self, student, and their relationship, whereas negative interpersonal interactions contribute to negative perceptions of the self, student, and relationship.

TSRs characterized by conflict, tension, and negativity are detrimental to both student achievement and teacher wellbeing (Drugli, 2013). Numerous studies have revealed that the TSR is significantly poorer among students with externalizing mental disorders (e.g. Oppositional Defiant Disorder, Conduct Disorder, Attention Deficit Hyperactivity Disorder) (Drugli, 2013; O'Connor, 2010), however there continues to be disagreement regarding which comes first: the externalizing problems in the child, or the negative TSR (Drugli, 2013). It is easy to imagine the emotional and mental exhaustion

that comes from dealing with difficult student behaviours such as yelling, name-calling, targeting other students, defiance, refusal to complete work, crying, and distracting others on a daily basis. Anyone would have a hard time maintaining a positive and accepting attitude towards students who frequently exhibit such behaviours. Often, students who exhibit these types of behaviours come from dysfunctional family backgrounds, have histories of trauma or loss, or have a mental health disorder and require specialized environments in order to learn (e.g. highly structured and consistent schedule, small child-to-adult ratio, visual learning supports, sensory rooms). There is also evidence supporting the notion that problematic student behaviour begins with a negative TSR, specifically that teachers who struggle to manage their stress can unintentionally create a tense classroom climate and model unhealthy strategies for coping with stress (Pickens, 2015). Additionally, highly stressed teacher's are more likely to express anger and hostility towards students, resulting in negative relationships with students (Yoon, 2002). For children who are predisposed to negative (unpredictable, dismissive, neglectful, or abusive) relationships with adults, a negative TSR could trigger or exacerbate underlying relational problems the child has (Drugli, 2013).

Personal relationships and support system. “Everybody is going to have adversity. If you have adversity in the presence of safe and stable relationships, you end up having fewer long-term health, mental health, social consequences. [But], if you have minimal adversity in relationship-poverty, you end up being very very very at risk” (Perry, 2014). Therefore, supportive and caring relationships are essential for sustaining wellbeing and protecting one against life's challenges (e.g. work-related stress). Alternatively, the absence of a strong support system puts teachers at risk. The

circumstances in which teachers live will influence their mental health and subsequently, the way they show up for their students. Seibt, Spitzer, Druschke, Scheuch, and Hinz (2013) found that factors such as social support and coping style, in part, explained differences between populations of mentally fit teachers and mentally impaired teachers.

Picture a teacher who, at the end of a very stressful day, goes home to a stable, tidy, and welcoming environment in which they have access to basic needs, caring others, and opportunities to care for self and others. Now, picture a teacher who, at the end of a very stressful day, goes home to a chaotic, disorganized, and unstable environment in which they must cope with relationships that lack safety, support, and contribute to their insecurities. Although both teachers depicted above will experience life's adversities, the first teacher will cope better than the second because they will rely on their external supports to sustain them so they can show up ready to be available and attuned for their students (which, as was outlined previously, contributes to healthy teacher-student relationships, which are a protective factor to teacher stress). However, the second teacher lacks the social support and runs the risk of inadvertently using their students to satisfy unmet needs such as a need for approval, a need to feel powerful, a need to be needed, or a need for connection and intimacy.

“Professionals who work intimately with others have a responsibility to be committed to awareness of their own life issues” (Corey, Corey, Corey, & Callanan, 2015, p. p. 40), therefore teachers must be acutely aware and reflective of how their life circumstances can seep into their teaching practice and influence their students. Teachers are required to deliberately examine personal areas of vulnerability that could lead to unethical decisions if not managed or resolved. The following quote that was written for

therapists has been adapted from Jennings, Sovereign, Bottorff, Musell, and Vye (2005) to apply to teachers: I think one of the ways [teaching] goes awry is that the [teacher] starts to use the [student] for their own emotional sustenance... regulation of the [teacher's] self-esteem, all those sorts of things. I think that to be a good [teacher], you must be well fed and well loved (p. 39).

Therefore, teachers are responsible for ensuring their needs for love, belonging, purpose, power, and intimacy are met *outside of the classroom*. Otherwise, the teacher may look to their students to meet those needs, putting both the student and themselves at risk.

Societal issues. Although meaningful for all, societal issues are particularly salient for teachers because schooling experiences significantly influence one's beliefs and biases toward a variety of social issues including race, gender, religion, sexuality, culture, politics, and economics. For example, many Canadians are completely unaware or drastically misinformed about the Residential School System's influence on our First Nations, Metis, and Inuit population (Gray, 2011). This is largely due to the complete absence of an accurate depiction of residential schools and colonization in Canadian Social Studies curricula (Gebhard, 2017; Godlewska, Rose, Schaepli, Freake, & Massey, 2017). As evidenced by the power educators have to shape the values and norms of others, teachers hold vast responsibility for the information they explicitly or implicitly pass on to the next generation. For many, conflict between personal beliefs and the dominant societal perspective arises, which can be extremely anxiety provoking. Two societal issues that are particularly relevant today are sexuality and working with refugee and immigrant students.

Gender and sexuality. One of the most salient societal issues for teachers in 2017 is gender fluidity and sexual orientation. Consideration for teachers with sexually diverse students in their classes as well as teachers who are sexual minorities themselves is essential when examining this issue in education, as both circumstances have potential to significantly influence teacher mental health. In either situation, working in a school district which promotes values and beliefs that contradict one's own values and beliefs will result in what Roger's (1956) called incongruence: a discrepancy between one's self-image and their lived experience; and incongruence causes anxiety. For example, Hsieh (2016) examined perceptions of LGBTQ issues among urban teachers in Atlanta and found that the majority of teachers were open to learning and teaching about LGBTQ issues, but also reported feeling anxious that their administration or school culture would prevent them from actively supporting LGBTQ issues.

Unfortunately many teachers experience confusion and fear of living congruently, as evidenced in recent news stories. An Albertan teacher employed by a Catholic district was fired after undergoing gender-reassignment surgery (Kornik, 2016) and a teacher in British Columbia was sent home from work in 2010 after parents complained that she and her wife had recently had a baby (The Canadian Press, 2010). Yet peril ensues for non-LGBTQ teachers as well: an Albertan teacher in a Catholic school district was removed from his classroom for reiterating the Canadian Catholic Bishop's perspective toward gay marriage, which was part of the course text (Staples, 2016). The teacher stated that he was required by his employer to deliver the information in a way that was consistent with Catholic principles, and that he was not allowed to share personal opinions on homosexuality or gay marriage with his students (Staples, 2016). Catholic schools are not

the only religious districts that require their teachers to abide by prescribed moral guidelines. Palliser Regional Schools, a district which comprises Christian and Islamic schools in Calgary, Alberta, requires staff to maintain a lifestyle that is consistent with Biblical principles, as outlined in the contracts teachers sign (McClure, 2015). There is no easy solution to the issue of gender fluidity and sexual orientation in schools; ideally, no teacher would be required to supersede their religious or moral beliefs for the goodness of the child or to comply with an employer's worldview, however many are required to in order to become and/or stay gainfully employed. At minimum, teachers have to decide where they stand on issues pertaining to sexuality and gender, which requires introspection and self-awareness.

Refugee and immigrant students. Another important societal and cultural consideration is the number of refugee and immigrant children in Canadian schools. Students who have fled their home countries for reasons such as war, poverty, terrorism, or violent threats often bring with them an array of emotional and/or physical traumas. Feuerverger (2011) described various stories that were gathered from immigrant children attending an inner-city school in Toronto. She argued that the key to healing for these students is to open a space for their stories to be shared; "...we must rethink and reshape our understanding of teaching and learning that is more fundamentally linked to the lived experiences of students coming from places of war and other oppressions" (Feuerverger, 2011, p. 373). Various teacher-education programs in Canada include a cultural component specific to teaching immigrant and refugee students (Kirova, Massing, Prochner, & Cleghorn, 2016), however the focus is primarily on helping teachers develop cultural competencies and learning pedagogical and methodological approaches to

integrating culture into the provincial curriculum guide. It has been clearly documented in the literature the benefits of creating a multicultural classroom and ways in which teachers can honour and include student's cultural heritage (Ghosh & Galczynski, 2015).

What appears to be less evident is a focus on how to help teachers develop skills in managing their own emotional responses to the stories and histories of trauma and loss that their students present with. According to Minero (2017), teachers are at a high risk for vicarious trauma, which is a secondary trauma that occurs when one listens to the traumatic experiences of others. One potential contributor to the vicarious trauma (VT) teachers may experience is the stories of trauma and loss that their immigrant or refugee students are encouraged to tell. "When you're learning to be a teacher, you think it's just about lesson plans, curriculum, and seating charts. I was blindsided by the emotional aspect of teaching—I didn't know how to handle it" (Minero, 2017, para. 10). Creating space for students to share their lived experiences can be emotionally and energetically demanding for teachers, therefore it is important for teachers to have an understanding of their emotional responses and strategies to manage the effects of working with students who have histories of trauma and loss, such as students who are immigrants and/or refugees.

Teacher personal characteristics. A variety of teacher characteristics influence the way teachers respond to the demands of the role, experience and respond to stress, and develop over time as teachers. Characteristics that appeared frequently in the literature are summarized below.

Self-efficacy. The notion of self-efficacy was first developed by behavioural psychologist, Albert Bandura (Jones-Smith, 2016). Kiel, Heimlich, Markowitz, Braun,

and Weib (2016) explain self-efficacy as “the expectation and conviction that one would be able to implement tasks and plans successfully based on one’s own abilities and resources... [and] an extraordinary resilience factor in handling stress” (206). In relation to teaching, self-efficacy is a teacher’s personal judgment or belief about their own capabilities to teach (Aldridge & Fraser, 2016). There is a clear relationship between self-efficacy and stress: the more confident a teacher is in his/her abilities, the less stress he/she experiences (Fives et al., 2007; Klassen & Chiu, 2010). Interestingly, level of self-efficacy is predictive of burnout and attrition (Kiel et al., 2016) and negative student-teacher relationships (Yoon, 2002). High self-efficacy can shield against the negative effects of student misbehavior (Kiel et al., 2016) and Bermejo-Toro et al. (2016) found that perceived self-efficacy and personal coping resources mediate the impact of work-related stress on teacher well-being, even more than job resources do.

Contributions to low self- efficacy include lack of student effort (Greving, 2007), work-overload, student misbehavior, and negative experiences with mentor teachers (Akhter, Kanwal, Fatima, & Mahmood, 2016). Also, Brouwers and Tomic (2000) found that emotional exhaustion predicted self-efficacy, which in turn affected teachers’ perceptions of accomplishment and caused feelings of being detached from themselves and the world. There also seems to be a developmental pathway, common among teachers, where self-efficacy plummets during the first year of teaching and then slowly increases with experience and learning (Fives et al., 2007). That being said, Swackhamer, Koellner, Basile, and Kimbrough, (2009) found that teachers who were more intrinsically motivated had higher self-efficacy because they were more likely to access learning opportunities to improve pedagogical knowledge.

Attachment style. Attachment Theory (Bowlby, 1988) posits that each individual develops a blueprint for how to relate to others based on the relational bond they developed with their primary caregivers. This blueprint, or internal working model, develops over time and provides information on how to seek and respond to connection with others. One's internal working model significantly influences one's ability to develop and maintain relationships (for a more detailed explanation, see the section: Theoretical Foundations). Teachers are unique in that their professional relationships hold many similarities to the parent-child bond that is responsible for creating health attachment styles, such as emotional attunement, empathy, and safety. Recent research has begun to examine the way a teacher's internal working model of relationships influences one's relationships with students, suggesting that teachers' internal working models both guide and are modified by their interactions with students (Albin-Clark, Shirley, Webster, & Woolhouse, 2016). More specifically, Kesner (2000) examined the relationship between pre-service teachers' attachment styles (specifically, memories of how they were parented) and their abilities to develop relationships with students. Results indicated that teachers who recalled less harsh parental discipline in childhood reported more perceived closeness in the child-teacher relationship. With pre-service teachers being new to the classroom, Kesner (2000) argued the attachment style teachers had with their parents likely served as the framework for their interactions with students. An integral part of Attachment Theory is Bowlby's description of the individual's internal working model (Cassidy & Shaver, 2016). Spilt et al. (2011) suggest that teachers have a basic need for relatedness with their students and that experiences with students are internalized and integrated into their internal working model of beliefs about themselves,

others, and their relationships with others (e.g. teacher-student relationship). In turn, these working models provide a framework for how teachers respond to student's behaviour and emotions (Spilt et al., 2011).

Locus of control. Rotter (1966) first described Locus of Control (LOC) as having two dimensions: (1) internal control, marked by a belief that the outcomes of events are a result of their own actions, and (2) external control, marked by a belief that the outcomes of events are a result of external factors such as luck, chance, fate or powerful beings. Individuals with internal LOC typically believe they have the ability to change things, will take responsibility, and often attribute results to their own efforts (Senler, 2016). Individuals with an external LOC see themselves as having no control over their future and often believe efforts are unlikely to make a difference and tend to blame others (Senler, 2016). A number of studies have examined LOC in relation to teaching (for full review see Senler, 2016), with a key finding being that internal LOC is associated with less teaching anxiety (Senler, 2016).

Patterns in thinking. In addition to the role of teaching in a specialized program being more difficult, there is some research to suggest that there is a certain "type" of teacher who aspires to work with students who have special needs. In their study, Kiel et al. (2016) examined the dysfunctional thought patterns and self reports of self-efficacy among special education teachers and found that 38% of special education teachers experienced a wide array of dysfunctional thought patterns including placing major importance on what other people think, wanting to be loved by everyone, non-acceptance of failure and immediately feeling responsible if things have gone wrong. An additional 17% of specialized education teachers demonstrate all the dysfunctional thought patterns

listed above in addition to low self-efficacy and the tendency to place oneself in social isolation during times of stress. It appears that there is considerable need to provide supports to teachers in specialized classrooms, based on both internal (i.e. dysfunctional cognitions) and external (aggressive student behaviour) risk factors common among teachers within these roles.

Self-awareness. Wang and Yorks (2012) define self-awareness as the “clearer perception of one’s strengths, limitations, thoughts, beliefs, motivations, and emotions along with how one’s taken-for-granted experiences have embedded these perceptions into one’s way of being” (p. 158). Based on this definition, comprehensive self-awareness includes reflection on past life events as well as perceptions and reactions to current/ ongoing life events. One’s ability to reflect on their actions, take responsibility, and think about their thinking (metacognition) is integral to the development of self-awareness. As described by Vohs and Leonhardt (2016), “metacognition refers to the processes which enable individuals to access, understand, and integrate their ideas about the mental states of themselves and others, and then use that information to recognize and respond adaptively to psychological challenges” (p. 255). Although the ability to develop self-awareness is somewhat dependent on neurological structures and processes (Hoerold et al., 2008; University College London, 2010), research in the area of mindfulness shows that self-awareness can be cultivated through purposely paying attention to the present moment in a nonjudgmental way (Coholic, 2011; Roeser, Skinner, Beers, & Jennings, 2012; Wang & Yorks, 2012).

In relation to stress, however, it appears that one’s ability to self-reflect is reduced by chronic stress; Bennet-Levy and Lee (2014) found that university students who

experienced chronic stress were less likely to engage in self-reflective behaviours (e.g. journaling), and Hoerold et al. (2008) found that chronic stress, which leads to anxiety, in turn diminishes self-awareness. Their finding is exemplified in teachers who experience ongoing stress from student emotional and behavioural difficulties and subsequently find it difficult to see the student as more than their problematic behaviours. This perception may result in rigid reliance on school rules to cope with problematic student behaviour rather than reflective problem solving (Richardson & Shupe, 2003). It appears then, that a vicious cycle occurs: stress diminishes the ability to self-reflect (Bennet-Levy & Lee, 2014), and the inability to self-reflect increases stress (Richardson & Shupe, 2003).

Emotional intelligence. For the past two decades, researchers have focused on the purpose and utility of emotions and concluded that emotional intelligence is linked to well-being, personal effectiveness, and the quality of our relationships (Dolev & Leshem, 2017). Emotional intelligence as a construct developed over time to include five main domains: self awareness/knowing one's emotions, managing emotions, motivating oneself, empathy/recognizing emotions in others, and handling relationships (Blanco Rivas, 2013; Goleman 1995). Self-awareness and emotional intelligence are closely related in that "[t]he ability to monitor our emotions and thoughts from moment to moment is key to understanding ourselves better, being at peace with who we are and proactively managing our thoughts, emotions, and behaviours" (Zhu, 2017).

Researchers have begun to explore the importance of emotional intelligence specifically for teachers and have found that teachers who are more emotionally competent are better able to understand the needs and motivations of their students and therefore are better at managing behaviour, responding to students' needs, and

developing positive relationships with students (Jennings, 2015). In one study, the authors found that enhancing teacher self-awareness resulted in higher emotional competency, specifically in terms of teacher's understanding and empathy toward students (Dolev & Leshem, 2017).

Similarly, teachers who know how to regulate their emotions are more successful in creating positive classroom outcomes (Kremenitzer & Miller, 2008). Moreover, lacking emotional intelligence predicted emotional exhaustion, depersonalization, and hostility toward students (Jennings & Greenberg, 2009). Therefore, it appears that emotional intelligence is indirectly yet still related to teacher mental health in that it protects teachers against emotional exhaustion and burnout and contributes to their abilities to form healthy relationships with others. Arguably, all teacher training programs should implement some type of formal training to increase teacher's emotional intelligence because the reality is that teachers are relational beings first and educators second.

Theoretical Foundations

This project was developed with a number of assumptions in mind that come from a variety of theoretical frameworks. Specific information from each theoretical framework was selected and included in this project for the purpose of orienting the reader. Facilitators and recipients of the workshop are not required to adopt the theoretical principles that informed the development of this project, however I believe it is important for the reader to have a clear understanding of why the activities and information in the workshop were chosen. An integrative theoretical approach was taken in order to provide a comprehensive theoretical foundation for this project. At the root of

every conceptualization are concepts of attachment and relationships; that humans are social beings who are highly motivated to belong and influenced by interactions with one another. Personally, I align closely with social-constructivist perspectives and believe that reality is subjective, socially constructed, and influenced by history and context (Jones-Smith, 2016). Emphasis was placed on Attachment Theory, as it provides explanation and clinical utility with regard to self-awareness and interpersonal functioning. Affect Regulation Theory is rooted in Attachment Theory, but extends the works of Bowlby, Main, and Ainsworth by providing an explanation of how attachment influences one's ability to self-regulate.

It is important to note that some authors identify the works of Bowlby and Sigmund Freud to have mutually influenced one another and therefore see Bowlby as a contributor to the development of Psychoanalysis (e.g. Cortina & Marrone, 2004; De Bei & Dazzi 2014; Shaver & Mikulincer, 2005). These authors argue that Bowlby identified as a psychoanalyst and that Attachment Theory and Psychoanalysis share the same perspectives on the nature of the client-therapist relationship, the nature of therapeutic goals, and some components of therapeutic exchanges. Considering this, it can appear that my post-constructivist views and my value of psychoanalytical constructs are contradictory of one another. While there are some aspects of psychodynamic theory that I reject (e.g. determinism, fixed stages of development and the therapist as expert), I also acknowledge the value of the focus on developing insight and that the primary goal is to “achieve self-awareness, honesty, and more effecting interpersonal relationships” (Jones-Smith, 2016, p. 39). Therefore, Affect Regulation Theory has been included for its explanatory value, as it invites us to develop insight and self-awareness into the relational

experiences that have influences on our development. Additionally, it is the foundation of Hill's (2015) valuable explanation of the relationship between attachment, neurodevelopment, and emotion regulation. The attachment relationship influences how one experiences and manages affect (Hill, 2015), therefore it is important to help teachers develop insight and awareness into their personal attachment style as a first step to helping them develop awareness into their emotion regulation abilities and how they relate with others. Having strong emotion-regulation skills is imperative to being able to manage the emotions and feelings that accompany stress and develop healthy relationships with students.

This project is rooted in the aforementioned assumptions about how humans create and respond to their life events and makes use of three theoretical frameworks: a) Transactional Model of Stress and Coping (Lazarus, 1991) b) Affect Regulation Theory (Hill, 2015), and c) Interpersonal Mindfulness.

Transactional model of stress and coping. Lazarus and Folkman (1984, as cited in Lazarus 1991) developed the Transactional Model of Stress and Coping (TMSC), which outlines the ways in which people appraise and cope with stress. "According to this model, an individual's reaction to stress is guided by the subjective interpretation or appraisal of an external stressor, which subsequently triggers an emotional response" (Spilt et al., 2011, p. 459). The individual's *primary appraisal* is their perception of the stressor (e.g. not very stressful vs. extremely stressful) and the *secondary appraisal* is the individual's perception of their ability to cope with the situation, which influences the intensity of emotions. If an individual frequently experiences secondary appraisal that

results in negative feelings (e.g. despair, fear, inadequacy), a decrease in wellbeing will follow (Lazarus, 1991).

The basic principles of TMSC are: a) stress in the workplace is an individual experience and must be understood in the context of internal characteristics, such as personality, and the external influences of the environment; b) psychological stress occurs when a person evaluates their internal or external demands as exceeding their resources to meet those demands; c) the way people evaluate what is happening with respect to their well-being, and the way they cope with it, influences whether or not psychological stress will result, and its intensity; and d) coping is categorized into two types: *problem-focused coping*, which consists of efforts to alter the external contributors to stress, and *emotion-focused coping*, which consists of efforts to regulate the emotional distress that results from stress (Lazarus, 1991).

Lazarus (1991) highlights the danger in simplistic assumptions about psychopathology or dysfunction that say people either function well in all areas at all times or they don't, as a result of their personality states and traits. Similarly, to view one's environment as completely responsible for their adaptive functioning is also short-sighted. Instead, Lazarus (1991) focused on how *that person* responds in *that context*. The "transactional" element means the person-environment interactions transcend the separate interacting variables and a new entity occurs; "stress is not a property of the person, or of the environment, but arises when there is a conjunction between a particular kind of environment and a particular kind of person that leads to a threat appraisal" (Lazarus, 1991, p. 3)

Lazarus' (1991) emphasis on stress being a product of dysfunctional transactions between individuals makes this model useful when examining teacher stress related to interpersonal difficulties. In their study, Spilt et al. (2011) used the TMSC to examine the influence of teacher's relationships with students on the teacher's wellbeing. The authors viewed the wellbeing of teachers as "a long-term outcome influenced by mental representations of teacher–student relationships through everyday emotions and stress" (p. 459). They specifically examined how teachers' internalized relationship models influence their emotions in everyday interactions with students and concluded that when a teacher has internalized a negative schema about their relationship with a student, that student's disobedient behaviour is more likely to be appraised as challenging, which amplifies the teacher's stress response. Over time, as the negative schema becomes more and more stable, the daily interactions with the difficult student results in chronic stress for the teacher (Spilt et al., 2011).

Principles, ideas, and assumptions from the TMSC were included in the development of this project. Ideas from this theoretical framework have been incorporated into *A Workshop to Improve Teacher Mental Health Through Self-Awareness*, and *A Workbook to Improve Teacher Mental Health Through Self-Awareness* through the following learning objectives:

- To help teachers identify the primary stressors in their roles;
- To provide teachers with a theoretical framework for understanding stress and coping that can be used as a lens through which to view every-day situations;

- To assist teachers in understanding the mental schemas they hold with specific students and to encourage teachers to reflect on how their schemas develop and are maintained;
- To increase teacher's self-awareness through sharing and listening to other's self-reflections of their mental schemas;
- To increase teacher's feelings of connection with one another by encouraging them to share and listen to other ways of coping (i.e. problem-focused coping and emotion focused coping);
- To help teachers develop awareness of the interactions between specific environmental and personal factors that result in stress for them as individuals.

Interpersonal mindfulness. Mindfulness originated from Buddhism and Hinduism, but is taught in the Western hemisphere as a set of skills that are independent of spiritual or religious origins (Cohen & Miller, 2009). "Mindfulness can be thought of as moment-to-moment, non-judgmental awareness, cultivated by paying attention in a specific way" (Kabat-Zinn, 2015, p. 1481) and is rooted in the assumption that all humans have an innate capacity for fine-tuning self-awareness (Jones-Smith, 2016). Contrary to popular belief among many North Americans, mindfulness is not simply a relaxation technique; it is a form of cognitive training aimed to reduce "vulnerability to reactive modes of mind that may otherwise increase stress and emotional distress" (Jones-Smith, 2016, p. 439). In an effort to provide the field of clinical psychology with an operational definition of mindfulness, Bishop et al. (2004) developed a two-factor definition: first, the individual must self-regulate attention so that it is maintained on the

immediate experience, which allows for increased recognition of mental events in the present moment, and second, the individual must remain open, curious, and accepting of present-moment experiences. By improving self-awareness, mindfulness assists the development of cognitive flexibility and accuracy in the perception of one's experiences, and less reactivity to one's experiences (Duncan, Coatsworth, & Greenberg, 2009; Moore & Malinowski, 2009).

Mindfulness-based therapies (MBT) have received increasing attention over the past decade, with a variety of mindfulness-based techniques emerging, including Mindfulness-Based Stress Reduction (Kabat-Zinn, 2015), Mindfulness-Based Cognitive Therapy (Segal, Williams, & Teasdale, 2002), and Dialectical Behavior Therapy (Linehan, 1993). Research shows that mindfulness training improves interpersonal relationships (Carson, Carson, Gil, & Baucom, 2004; Shapiro, Astin, Bishop & Cordova, 2005) and increases empathy (Shapiro, Schwartz, & Bonner, 1998). MBT is successful in treating depression, anxiety, and more effective than psycho-education, supportive therapy, relaxation, imagery, and art-therapy (Khoury et al., 2013). Additionally, MBT was found to be more effective in treating psychological disorders compared to medical/physical illnesses (Khoury et al., 2013).

Interpersonal mindfulness extends mindfulness practices to relationships and is particularly useful for addressing relational difficulties and stress. Duncan et al. (2009) developed a model of mindful parenting and the Interpersonal Mindfulness Scale for Parents, which is rooted in the assumption that parents who can stay aware and accepting of their child's needs can create a relational dynamic that is more satisfying and conducive of teaching the child healthy relational patterns. The five key principles of the

mindful parenting model are: (a) listening with full attention; (b) nonjudgmental acceptance of self and child; (c) emotional awareness of self and child; (d) self-regulation in the parenting relationship; and (e) compassion for self and child. Although this model was developed for parents, the basic principles of mindfulness can be extended to the teacher-student relationship, where the teacher can cultivate better relationships with students through mindfulness. With the interpersonal mindfulness model in mind, four mindfulness techniques were utilized in the workbook and workshop: (a) Visual/ Guided Imagery; (b) Deep Breathing; (c) Progressive-Muscle Relaxation; and (d) Meditation. Full descriptions of each technique are included in *A Workshop to Improve Teacher Mental Health Through Self-Awareness* (see Appendix A).

The use of mindfulness to combat work-related stress for teachers is not well-researched, and there is a lack of consensus on how mindfulness training should be delivered to teachers to yield the highest benefit (Flook, Goldberg, Pinger, Bonus, & Davidson, 2013). Flook et al. (2013) conducted a study using control groups to determine the effectiveness of mindfulness-based stress reduction training that was modified for teachers. They assessed a variety of outcomes using both self-report and objective measures including observation of classroom teaching practices, computerized tasks related to attention and emotion regulation, and saliva sampling for cortisol as a physiological stress index. The authors found that the modified mindfulness-based stress reduction (mMBSR) increased self-awareness, self-compassion, and effective teaching behaviours, and reduced psychological symptoms of burnout and inattentiveness. The control group (those who did not receive the MBSR) had higher levels of physiological distress and decreased self-reports of personal accomplishment. Although the use of

mindfulness as an intervention for teachers' work-related stress requires more research, it shows promising results thus far.

Alternatively, mindfulness has been documented as an effective way to manage stress in both clinical and non-clinical populations (Chiesa & Serretti, 2009; Grossman, Niemann, Schmidt, & Walach, 2004) and is particularly effective for managing stress in interpersonal relationships. Interpersonal mindfulness has shown to be associated with higher satisfaction in relationships and less distress contagion (Dekeyser, Raes, Leijssen, Leysen, & Dewulf, 2008). Considering that teachers are constantly interacting with students, mindfulness can be considered a worthwhile strategy for increasing self-awareness and managing stress.

Principles, ideas, and assumptions from Interpersonal mindfulness were included in the development of this project. Ideas from this theoretical framework have been incorporated into *A Workshop to Improve Teacher Mental Health Through Self-Awareness*, and *A Workbook to Improve Teacher Mental Health Through Self-Awareness* through the following learning objectives:

- To help teachers develop strategies and skills for managing stress that can be used daily;
- To decrease teachers' levels of reactivity and improve teachers' abilities to regulate emotions;
- To increase teachers' self-awareness and relationship awareness; and
- To directly and immediately reduce teachers' feelings of stress during the workshop

Affect regulation theory. Affect Regulation Theory was developed by Hill (2015) and is based on Attachment Theory (Bowlby, 1988), therefore I will outline the basic concepts of Attachment Theory first, and then I will outline Affect Regulation Theory and its application to this project.

Attachment theory. John Bowlby's work on attachment originated out of his observations of the intense distress children experience when they are separated from their mothers, even when they are cared for by someone else (Cassidy & Shaver, 2016). At the time, the predominant theory explaining the mother-child relationship was based on internal drives: the mother was important to the child because she met his/her biological needs for survival (e.g. feeding when hungry). However, through Bowlby's integration of evolutionary biology, developmental psychology, cognitive science, and control systems theory, he developed what is known today as Attachment Theory to explain the complex and extremely important bond that forms between mother (caregiver) and infant.

Although attachment theory has evolved since Bowlby's original studies, the basic principle remains the same: attachment is the emotional bond that forms between caregiver and infant, which serves to support healthy development (Hill, 2015) and ensure survival (Šešo-Šimić, Sedmak, Hof, & Šimić, 2010). As Hill (2015) described, attachment is about safety, security, and emotional regulation during times of perceived threat. Attachment styles were categorized by Mary Ainsworth (Ainsworth & Bowlby, 1991) through her Strange Situation Procedure. Three distinct styles of relating between infant and caregiver were identified: a) secure, b) insecure-avoidant, and c) insecure-anxious/ambivalent (Hill, 2015). In later years, two additional categories were added: e)

disorganized/disoriented and f) cannot classify (Hill, 2015). *Secure attachment* is marked by the infant seeking connection (reassurance, proximity, soothing) during times of distress with positive expectations that the caregiver will respond. Infants with secure attachment can self-regulate sufficiently, explore their environments with curiosity and vigor, and respond to their caregiver's efforts to soothe during times of distress (Hill, 2015). *Insecure-Avoidant attachment* is marked by the infant reduced experiences of fear or distress during separations from the caregiver, not seeking comfort from the caregiver, not being receptive to comfort from the caregiver, and when soothing is required they rely on themselves for comfort rather than their attachment figure (Hill, 2015). Infants with Insecure-Avoidant attachment explore their environments easily, however with less interest and enthusiasm, and seem oblivious to the comings and goings of their caregiver. *Insecure-Anxious/Ambivalent attachment* is marked by a strong reaction during caregiver absences and rejects attempts to soothe from other adults. Upon reunion, even if the separation was only a few minutes, the infant seeks but does not positively respond to the caregiver's attempts to sooth; the baby clings to, and intermittently hits, the caregiver, indicating an internal conflict (Hill, 2015). Infants with Insecure-Anxious/ambivalent attachment are unable to explore their environment when left alone, cannot self-soothe, and frequently look back to check that the caregiver is still present, suggesting an anxious preoccupation with abandonment (Hill, 2015). (For a full description of each attachment style, see Hill, 2015. For a full description of Attachment Theory and relevant research, see Cassidy and Shaver, 2016).

The attachment styles that Ainsworth developed have been applied to our understanding of adult attachment, which draws heavily on Bowlby's development of an

Internal Working Model (Bowlby, 1969, as cited in Cassidy & Shaver, 2016). The Internal Working Model (IWM) is a cognitive framework that consists of a person's beliefs and expectations about how attachment relationships operate, and it develops from the infant-caregiver bond and extends overtime and into other interpersonal relationships (e.g. friendships and romantic relationships). A person's IWM is "relatively stable and can operate without the need for conscious appraisal; they guide behaviour in relationships with parents, and influence expectations, strategies, and behaviour in later relationships" (Cassidy & Shaver, 2016, p. 600). Essentially, the IWM is a script for how to "do" relationships, and that script differs from person to person. A simplified application of this can be illustrated through the different expectations for how to handle conflict between a teacher and her administrator. The teacher's IWM instructs her to seek connection and reassurance from the administrator, process the conflict aloud together until resolution is found, and regularly seek validation for the proper execution of the solution. Alternatively, the administrator's IWM tells her to withdraw, not depend on the emotional availability of her employee, process the events independently, develop an array of solutions independently, and instruct the employee on what to do. Also, recall the previous section outlining the Transactional Model of Stress and Coping and the study from Spilt et al. (2011) where the authors measured how the teachers' internalized relationship models influenced their emotions in everyday interactions with problem students. Here, the authors were examining one aspect of the teacher's IWM. With this theory in mind, they proposed that teachers with an avoidant attachment style may be less affected by negative teacher-student relationships because they are "more inclined to distance themselves from others and to interact in a more controlling and task-focused

way” (Spilt et al., 2011, p.467). Alternatively, teachers with an insecure-anxious/ambivalent attachment style will be more affected by negative relationships with students because they have persistent worries about being worthy of love, a strong dependency on approval of others, and are highly responsive to relational conflict. As Hill (2015) explains, “attachment theory now provides the fundamental constructs for understanding the development of how the brain and mind are organized, the origins of fundamental personality characteristics, the capacity to regulate affect, and the etiology of developmental disorders” (p. 16). For the purpose of this project, Attachment Theory was utilized for (a) it’s usefulness in helping people understand the contributing factors from their upbringing that influence how they think, act, and experience the world as adults, and (b) it’s ability to explain the development of affect regulation abilities and one’s capacity to manage difficult emotions (e.g. stress).

Affect regulation theory. Affect Regulation Theory focuses on how the attachment bond between child and caregiver influences neurodevelopment, specifically regarding areas of the brain responsible for emotion and self-control; from this perspective the primary role of the attachment figure is to regulate the child’s emotions, which, when successfully done over and over again, wires the child’s brain to be able to manage emotions independently. Environmental input, including the mother’s “facial expression, posture, tone, psychological changes, tempo of movement, and incipient action” (Bowlby 1969 as cited in Shore, 2002, p. 251), influence brain tissue itself, resulting in the neurological structures of those with secure attachment differing from the neurological structures of those with insecure or disorganized attachment (Bowlby, 1988; Hill, 2015; Moriceau & Sullivan, 2005; Seigel, 2001; Šešo-Šimić et al., 2010; Shore,

2002). Seeing as the brain continually imprints patterns and then uses those imprints as a guide for new neural pathways, early childhood experiences have an exponential impact on brain development. As Perry (2006) stated, “traumatic and neglectful experiences during childhood cause abnormal organization and function of important neural systems in the brain, compromising the functional capacities mediated by these systems” (p. 29), specifically the primary affect-regulating system (Shore, 2002). The primary affect regulating system includes the limbic system, the autonomic nervous system (ANS) and the hypothalamic-pituitary-adrenal (HPA) axis (for a full explanation see Hill, 2015). If an external threat is present, the limbic system will activate the ANS and the HPA, which are responsible for determining the body’s state of arousal (Hill, 2015). The limbic system has a critical period of development in which it is highly susceptible to the influences of the caretaker (Hill, 2015); if the caregiver consistently responds to the infant’s needs (e.g. calm when upset, feed when hungry, protect when in danger, warm when cold, etc.), the neural pathways in the limbic system will develop in such a way that leads to the infant learning that he or she is safe and secure, that survival is not threatened. This optimal course of development where the child feels safe and secure allows them to accurately attribute emotions to a variety of situations (fear when in danger, sadness in times of loss, hurt when wounded, caring when attached, angry when facing injustice, joy during accomplishments, etc.). If the primary affect regulating system does not develop in the context of safe and secure relationships, the person may grow up to repeatedly attribute an unwarranted emotion to a situation (e.g. fear without a threat of danger).

Affect Regulation Theory was included in this project for two main reasons: firstly, the theoretical concepts are useful in helping adults understand their emotional responses and behavioural patterns in relationships, and secondly, the focus on emotion is paramount in successfully managing stress. Affect regulation is important to the overall picture of teacher mental health because the teacher-student relationship influences teacher's experiences of stress (Split et al., 2011; Yoon, 2002) and, as mentioned previously, their ability to make ethical decisions (Jennings et al., 2005). Through an attachment framework, teacher interpersonal relationships can be better understood and transformed.

Principles, ideas, and assumptions from Attachment Theory and Affect Regulation Theory were included in the development of this project. Ideas from these theories have been incorporated into *A Workshop to Improve Teacher Mental Health Through Self-Awareness*, and *A Workbook to Improve Teacher Mental Health Through Self-Awareness* through the following learning objectives:

- To increase teachers' understanding of emotional regulation;
- To increase teachers' self awareness of their own emotional responses;
- To increase teachers' self awareness of how their emotional responses influence their relationships with others;
- To provide insight into why other people have the emotional responses they do and to use that insight to guide behaviours in relationships;
- To bring explicit attention to the implicit processes at work when appraising the behaviour of others;

- To engage teachers in the analysis of their patterns in different types of relationships (friendships, romantic relationships, parent-child relationships, teacher student relationships, collegial, boss/supervisor)
- To help teachers identify personal contributions to interpersonal conflicts;
- To assist teachers in the process of metacognition;
- To guide teachers in making connections between their roles in their family of origin and their roles within the teaching profession.

Improving Teacher Mental Health Through Self-Awareness

In general, there are a variety of approaches people can take to improve their mental health, such as maintaining physical health, practicing self-care, setting goals, having healthy boundaries, spending time with positive people, and practicing mindfulness (Canadian Mental Health Association, 2017). Yet, arguably, self-awareness is a pre-requisite to initiating any one of the previously listed approaches. The literature outlined thus far, when taken together, provides a rationale for improving teacher mental health by increasing self-awareness: self-awareness begets emotional intelligence, which begets emotional, cognitive, and behavioural management, which allows for healthier relationships (personally and professionally), which protects against stress, thereby improving teacher mental health. However, “[a] rigorous look at examining the self is rarely part of our formal education and only occasionally part of our informal learning” (Stolder, Hydo, Zorn, & Bottoms, 2007, p. 266). Thus, the workshop and workbook were designed to make self-reflection a part of the formal education process for teachers because it is far too important for it to be an occasional occurrence.

Cultural Considerations

An integral aspect of the workshop and workbook is the process of examining oneself and reflecting on one's actions, thoughts, and feelings. The assumption that self-awareness is superior to ignorance is embedded throughout this project. However, it is important to note that this assumption is consistent with a particular cultural background, which will not exist among all teachers. Simply by virtue of the careers they have chosen, it can be argued that all teachers, regardless of culture, value general elements of learning such as enlightenment, knowledge, growth, curiosity, and exploration. However, regarding more specific constructs, such as self-awareness, there appears to be more variability across cultures.

Specifically, one's cultural background can influence their inclination to self-reflect. Someone who was raised in a stimulating environment which encouraged thoughtful discussion, critical thinking, regular feedback, non-judgmental questions, and openness to alternative perspectives, will have more practice in self-reflection compared to someone who was raised in an environment lacking such qualities (Koole et al., 2011). One particular environment that discourages critical thinking and self-reflection is that of religious fundamentalism in which students are made to be obedient and blindly accepting of knowledge without questioning, examining evidence, or using any type of critical analysis (Cervone, 2017). Friedson (2015) described Fundamentalism as comprising a) an intolerance of ambiguity; b) polarized and rigid thinking; c) desires for simple, quick fixes; d) intolerance of diversity or differing viewpoints; e) compulsion to convince others of their ideologies; and f) denial of scientific facts. Although a large body of research exists regarding the incompatibility between religious fundamentalism

and public education, the concern here is specifically regarding a teacher's willingness and ability to develop self-awareness while maintaining fundamental religious beliefs. "These traits create an unhealthy mindset and it is the resultant ways of thinking, not the specific theological beliefs that are problematic" (Friedson, 2015, p. 698) For the fundamentalist client, the field of psychology is a violation of the spiritual realm because it aims to supersede the church with regard to thoughts, feelings, and behaviour (Friedson, 2015). Seeing as this entire project is based on psychological principles and theory, a fundamentalist may view it as incompatible with their philosophies and doctrines.

Fundamentalism is certainly an extreme example of how culture can influence one's ability to cultivate self-awareness. However, many shades of grey exist based on age, gender, sexual orientation, socio-economic status, religion, ability and race. Generally, and extremely important to the use of this workshop and workbook is the finding that one's culture can influence whether one benefits from self-reflection or not (Tsai, Chiang, & Lau, 2016). Tsai et al. (2016) found that people gained emotional and physiological benefits from self-reflection only if the practice of self-reflection was congruent with their cultural backgrounds. For example, in Western cultures, independence and self-enhancement are seen as superior, and self-awareness is borne out of a threat to the self (Tsai et al., 2016). Alternatively, in Eastern cultures, collectivism and inter-dependence are paramount, and self-awareness is propelled by open consideration of one's shortcomings and failures (Tsai et al., 2016). Thus, one's cultural norms regarding self-improvement will dictate how and under what circumstances self-awareness should be cultivated.

In collectivist cultures, relationships, harmony, and understanding of each other is privileged above individual needs. Core concepts of collectivism include the welfare of the whole, that one's well-being requires the efforts of the whole family or group, and that personal or private happiness is secondary (Kolstad & Gjesvik, 2014). Promoting the development of self-awareness and taking responsibility for one's mental health is easily perceived as an individualistic endeavour. Therefore, cultural adaptations that incorporate collectivist views into the pursuit of self-awareness are needed. For example, methods where people can use their communities and relationships to cultivate self-awareness should be emphasized, as well as a focus on the benefit to the whole that comes from recognition of mental health problems. Another way to incorporate collectivist ideologies is to draw connections between an individual's self-awareness and the safety and harmony of the family. Kolstad and Gjesvik (2014) stated that in Chinese culture, "[t]he main concern is to improve the material well-being of one's family, and as a result, their safety and harmony. This is part of the obligations of an individual in a mutually dependent society, and one of the expectations which many must fulfil." (p. 276).

Another consideration is the language used to describe and teach the concepts included within this Final Project. For example, many Eastern cultures integrate concepts of mindfulness, which could easily be used in the facilitation of the Final Project as the primary method for developing self-awareness.

Another consideration that is important to how the ideas in this project are delivered is the notion of power in collectivist cultures. Kaur and Norman (2015) studied beliefs and teaching practices of collectivist teachers and found that over time, collectivist teaching practices have moved away from teachers having all the power and

students being passive learners, to teachers “adopting a closer relationship with their students in terms of involvement, discussions, support, and decision-making” (p. 1807). This is in line with the core concepts about student-teacher relationships that are promoted in this final project, however it is important to consider the variety of perspectives on power in teacher-student relationships. In delivering *A Workshop to Improve Teacher Mental Health Through Self-Awareness*, it is important to present the research and literature that was reviewed as a part of this Final Project in order to maintain the project’s integrity. However, it is also important to acknowledge that this Final Project was written from an individualistic perspective, and forcing individualistic philosophies is unethical, culturally violent, and could result in resistance or rejection.

It is important to note that this section of the Final Project is not an extensive review of existing literature on culture and self-awareness. Rather, it is a brief introduction to the ways culture can influence one’s willingness, ability, and approach to developing self-awareness. Fundamentalism and collectivism were chosen because of my personal interest and bias toward seeing the influences of religion and society on one’s ways of knowing and being. In the case where a teacher is unwilling to engage in self-reflection and practices to cultivate self-awareness, attempting to utilize this workshop and workbook will likely be unsuccessful and has the potential to be psychologically damaging. However, it has been argued throughout this paper that self-awareness is critical among teachers, for both their own well-being and the well-being of students. Therefore, it is important to continue research in the areas of how self-awareness can be developed across cultures since the capacity and willingness to develop self-awareness is an essential quality teachers are required to possess.

Summary of Project

A teacher's mental health influences one's ability to: formulate healthy relationships with students; navigate ethical and moral dilemmas; manage and cope with the demands of the profession; and ultimately, remain part of the profession. After analyzing the literature and comparing various studies, it is evident that teachers are at high risk for experiencing stress and burn out. Furthermore, teaching as a profession is at risk, as many teachers are leaving the profession due to high levels of work-related stress and a lack of resources to cope with that stress. It appears that work-related stress, difficulties in teacher-student relationships, and attrition rates are symptoms of a much bigger problem: teachers not having the knowledge, skills, and resources to manage their emotional, behavioural, and mental health needs.

Based on the research to date, it is clear that teachers are tasked with a wide range of responsibilities above and beyond teaching the curriculum. Additionally, teachers who teach specialized education classrooms are at an even higher risk for experiencing work-related stress and burnout. Various studies have examined the effects of stress-reduction techniques on teacher's abilities to manage stress, however this area requires more attention and research. Additionally, some research exists on the effects of self-awareness on improving teacher's ability to manage stress and other emotions, however translation of these results into tangible strategies that teachers can use has yet to be done.

Based on the theoretical underpinnings and literature review that was conducted, a practical application was created to assist teachers to learn about their own mental health. The first portion of this final project, entitled *A Workshop to Improve Teacher Mental Health Through Self-Awareness* (see Appendix A) is based on this literature review and

provides information for teachers about stress, self-awareness, and personal development. The second portion of this final project, entitled *A Workbook to Improve Teacher Mental Health Through Self-Awareness* (see Appendix B) is also based on the literature review and contains corresponding activities and exercises to cultivate self-awareness in teachers for the purpose of managing stress. The workshop and workbook were developed in hopes of contributing concrete and applicable strategies for teachers because now, more than ever, teachers are required to show up healthy, stable, and available for their students. Ultimately all teachers, even those who experience relatively little stress, are called to action when it comes to their personal mental health. It is not enough to sit back and hope for the best. Teachers are required to actively pursue effective strategies for developing healthy relationships inside and outside the classroom, and tools for coping with stress, because of the aforementioned risks that are associated with the teaching profession.

The next chapter, Chapter 3: Methodology, outlines the process involved in creating both this Final Project and the appendices: *A Workshop to Improve Teacher Mental Health Through Self-Awareness*, and *A Workbook to Improve Teacher Mental Health Through Self-Awareness*. Chapter three also includes details about the workshop delivery, target audiences, potential adaptations, and how to access and use this resource.

Chapter 3: Methodology

The purpose of this final project was to provide a workshop and workbook for improving teacher mental health through self-awareness. The project includes a synthesis of empirically validated and peer-reviewed literature on research, theory, and current events related to the mental health of teachers. Specific techniques and strategies that teachers can use to improve their mental health are included, as well as recommended readings for teachers to increase their understanding of stress and coping, their own relational patterns, and their coping strategies. The comprehensive literature review informed the development of the *A Workshop to Improve Teacher Mental Health Through Self-Awareness* and the *A Workbook to Improve Teacher Mental Health Through Self-Awareness*. Both the workshop and the workbook were designed to be delivered to teachers in a workshop modality, through a trained counsellor.

Methods

The creation of this final project began with personal reflection on the experiences I had working in schools and in obtaining a degree in education. The personal realization that my teacher training largely overlooked teacher mental health and my day-to-day interactions with teachers who experienced burnout or mental illness, inspired me to learn more about this issue. When completing my Master's in Education Counselling Psychology course work, the opportunity presented itself to further investigate how to assist teachers to identify mental health concerns and wellness strategies.

In beginning this Final Project, a thorough literature review was conducted on the topic of teacher mental health, which provided a broad foundation to build upon. Additionally, literature was reviewed on the topics of teacher stress, self-awareness, and theories of

attachment, transactional analysis, mindfulness, and cognitive behaviourism. Keywords such as: *teacher, mental health, self-awareness, mindfulness, interpersonal mindfulness, occupational stress, wellness, coping, student-teacher relationship, self-awareness, and attachment* were used as term searches. The databases utilized in this search included: PsychInfo, JSTOR, PubMed, ERIC, and EBSCO, all of which were accessed through the UofL library website. The research articles cited in this project were gathered for the purpose of exploring issues teachers face today and the influences on their mental health. After analyzing numerous studies, common themes were identified and the literature was summarized according to those themes. The literature was analyzed and synthesized it in a way that supported the goals of this Final Project.

A Workshop to Improve Teacher Mental Health Through Self-Awareness was created by organizing the relevant research and some of my personal experiences into a PowerPoint presentation. The information was organized into three main categories: a) Why is Teacher Mental Health Important?; b) Who are you?; and c) Mental health and Relationships. The first section begins with an introduction to teacher mental health including a definition of mental health, an overview of research supporting the idea that teaching is a high risk profession, and a review of the cost to society of teacher attrition. This section was developed by compiling research on mental illness prevalence, mental health curricula, and the effects of the teaching career on one's mental functioning. The second section of the presentation guides participants through a series of reflective activities, discussions, and learning tasks that were designed to bring awareness to the teacher's attachment style, interpersonal patterns, and emotional-regulation skills. Discussion topics include healthy and unhealthy interpersonal patterns, mindfulness,

tricks our minds play on us, and strategies for knowing when to get support. The third section of the presentation addresses strategies for coping with stress, setting boundaries and setting goals for managing one's mental health.

A Workbook to Improve Teacher Mental Health Through Self-Awareness was developed by compiling outlines and instructions that accompany all the activities and discussions that are delivered in *A Workshop to Improve Teacher Mental Health Through Self-Awareness*. The workbook contains worksheets, self-reflection activities, discussion topics, self-report assessments, instructions for experiential activities, and pages for notes. The items included in the workbook were chosen for two purposes: a) to solidify and extend the potential learning that each teacher may experience and b) to make the workshop engaging and personalized to each teacher.

Target Audience

This project was developed with all teachers in mind; pre-service teachers, beginning teachers, and experienced teachers all have the potential to benefit somehow from participating in the workshop. Additionally, the workshop topics and content were designed to apply to a wide variety of teachers regardless of gender, age, educational background, cultural background/orientation, mental health status, years of experience, grade(s) taught, subject(s) taught, location of school (rural or urban), or their school's religious membership. The activities included are specific enough to achieve the desired outcome (to increase self-awareness), yet broad enough to leave room for a teacher's specific circumstance and context to still apply. In other words, *A Workshop to Improve Teacher Mental Health Through Self-Awareness* is based on a process of illuminating personal and relational insights rather than delivering specific content. The discussion

and activities included in the workshop are easily adaptable to different school cultures; for example, the discussion about how student behaviour influences teacher mental health and vice versa may be drastically different based on whether student behaviours are physically violent toward each other and teachers or not. The prompts and questions included in the workshop leave space for teachers of varying contexts to explore the topics. Although easily adaptable, the workshop is limited to addressing teacher mental health *broadly*; this workshop would not be appropriate for teachers requiring specialized therapeutic interventions such as school communities that have recently experienced a school shooting or a natural disaster. This workshop may serve as one element of the response to such events, but would not be sufficient on its own as it does not include information or interventions specific to teacher's personal trauma.

Ideally, *A Workshop to Improve Teacher Mental Health Through Self-Awareness* would be delivered across two sessions, with each session taking three hours. Discussions about mental health can be demanding, therefore participants should be given some time to process the information between sessions. Ideally, there would be no less than a week and no more than three months between the two sessions. The workshop was designed to be delivered to groups of 20 to 50 people. Regardless of the number of participants, it is important that participants have opportunities to discuss the workshop content in small groups of three to six people. If the number of participants exceeds 50, an additional facilitator is recommended.

A Workshop to Improve Teacher Mental Health Through Self-Awareness is deliverable to pre-service teachers who are in the process of completing their Bachelor's of Education Degree. University and College faculty members and professors can enlist

me to facilitate or ask another trained therapist to facilitate this workshop for students. The workshop is also a Professional Development (PD) opportunity for beginning and experienced teachers. School Administrators, or those in charge of organizing PD days, can access this PD opportunity by asking myself or a trained therapist to facilitate the workshop for their teaching staff.

The facilitator is required to be a trained counsellor (e.g. Master's degree in counseling, psychology, social work, or the equivalent) and ideally, although not required, have experience working in the school system. As mentioned previously, the workshop leaves space for a wide range of teaching contexts and cultures, therefore it is important that the facilitator possess a general understanding of the culture and context of the teachers they are facilitating the workshop for so they can respond effectively to those who share personal examples or experiences during the workshop.

The next chapter, Chapter 4: Final Project Synthesis, outlines the purpose of the Final Project, an explanation of how the Final Project is connected to the appendices: *A Workshop to Improve Teacher Mental Health Through Self-Awareness*, and *A Workbook to Improve Teacher Mental Health Through Self-Awareness*. Additionally, potential uses and hoped-for benefits of the Final Project are discussed.

Chapter 4: Final Project Synthesis

Outline and Purpose

This Final Project includes a literature review, workshop, and workbook to help teachers develop knowledge, skills, and strategies for managing their mental health needs. *A Workshop to Improve Teacher Mental Health Through Self-Awareness* is rooted in both the current literature on teacher mental health and my personal experiences of working in schools. In my experience, teachers who self-identified as mentally healthy or mentally stable were also collaborative, had reasonable expectations of themselves and others, were open to feedback and self-aware of their strengths and limitations. The activities in the workshop are designed to promote these specific dispositions and qualities. *A Workshop to Improve Teacher Mental Health Through Self-Awareness* is the lecture portion of the final project, which aims to provide teachers with theoretical frameworks and offer therapeutic techniques for teachers to utilize on a daily basis. The workshop was designed to be delivered across two sessions, with each session lasting three hours. The workshop materials include a PowerPoint presentation with videos, discussion questions, surveys, self-assessments, and homework activities (see Appendix A). Key features of the workshop are that it can provide teachers with a rationale for investing in their own mental health and a theoretical overview of stress, mental health, coping, attachment, and healthy relationships. Overall, the workshop outlines a variety of cognitive and emotional strategies for deepening self-awareness, learning strategies and skills for managing stress, developing insights into relationship styles, and setting mental health goals.

A Workbook to Improve Teacher Mental Health Through Self-Awareness includes all the materials that teachers will need in order to participate and engage in the workshop. The contents of the workbook were designed to capture and hold teachers attention and engage them in self-reflection and learning through experiences. Key features of the workbook are self-assessments, reflection questions, discussion topics, experiential guides, informational handouts, and recommended readings (see Appendix B). The workbook includes large group, small group, and individual activities based on the purpose of the activity and the desired outcome of completing that activity. However, the workshop is largely an intrapersonal endeavor, therefore participants can utilize the workbook to record their thoughts, feelings, and experiences during and after the workshop.

A Gift to the Community

A variety of people can benefit from this final project. Teachers can benefit from engaging in personal development in that they can become more aware of their personal strengths and limitations, which can lead to a clearer sense of when to seek support. Additionally, exploring and reflecting on the resources and healthy coping strategies one already has can further solidify the teacher's innate capacity for health and wellness. Teachers are not the only ones who will benefit from this final project. Students will benefit from healthier teachers in numerous ways. For example, teacher mental health is associated with student achievement and student wellness (Jennings, 2009; Jennings & Greenberg, 2015; Schussler, Jennings, Sharp, & Frank, 2016) and mentally-fit teachers are better able to model healthy emotional regulation skills and are more capable of being attuned and responsive to students (Albin-Clark et al., 2016; Pickens, 2015; Richardson

& Shupe, 2003; Rodger et al., 2014). It is also possible that the benefits students experience from socially and emotionally competent teachers will extend into their home lives and result in parents benefitting too. Teachers who model self-awareness and emotional regulation give their students opportunities to mimic these skills and practice social and emotional competence (Jennings & Greenberg, 2009). Of all the parents I have met, I believe each one of them would say that it is preferable to parent a child who is somewhat self-aware, so strategies for regulating their emotions are important.

The larger school community, including other teachers, administrators, and superintendents, will also benefit from *A Workshop to Improve Teacher Mental Health Through Self-Awareness*; emotionally reflective and relationally healthy teachers have fewer health-related absences (Bogaert et al, 2014; Hepburn, 2017), are more emotionally stable (Jennings & Greenberg, 2015), and have better relationships with colleagues (Patti et al., 2012). This will benefit the larger school community because less conflict among teachers may lead to a healthier school climate, increased openness and trust among teachers and other staff, and less involvement of Superintendents in issues around conflict resolution and mitigation.

The mental health of teachers is a crucial element to a balanced reciprocal relationship between teachers and their supports systems; mentally healthy teachers are less demanding on their support systems, allowing the support system to recuperate and maintain an ability to support. Purportedly, teachers who are mentally and emotionally stable and healthy will not demand as much from their support systems as teachers who suffer from burnout or a mental illness. Blogs and magazine articles attest to the challenges associated with being married to a teacher, including isolation, interrupted

family time, late nights spent grading/lesson planning, and listening to frustrations associated with the job (Peyton, 2017; Faulkner, 2016). The family and friends of teachers are required to be flexible, understanding, and supportive, while additional pressures and demands on the support system could eventually result in the support system becoming burnt out too.

Finally, society in general will benefit from this final project in that it encourages a paradigm shift with regard to the way teacher's mental health is viewed in society, and offers a realistic and effective response to teacher attrition. An implicit message of this project is to normalize the challenges that many teachers face as a result of working in highly demanding and emotionally laborious environments. Teachers are human beings who need help and support, and they are not immune to the effects of stress, burnout, or symptoms of mental illness. Yet our society sends messages to teachers that they should be helpers in their school communities, even at the expense of their personal lives, self-care routines, or other important commitments. Like so many others, teachers are also effected by mental health stigma and are silenced by fear of being judged or devalued because of a mental illness. Through my conversations with teachers, it has come to my attention that many teachers feel isolated in their experiences of mental health and fear the potential risks associated with speaking up and seeking help.

Instead of reacting to the problem of attrition by training even more teachers, supporting and improving the well-being of the teachers who are already part of the profession will reduce the likelihood of teachers leaving the profession due to burn out or work-related stress (Heckmen, 2011; Karsenti & Collin, 2013; Mihans, 2008). Although funding for teacher education and programs is a complex issue, a proactive such as

providing teachers with opportunities for personal growth, such as this project, may be a smarter way to utilize funds and also works to shift society's views of the teaching profession in a direction that is more accepting, acknowledging, and supportive.

A Workshop to Improve Teacher Mental Health Through Self-Awareness was designed to provide teachers with strategies for increasing their self-awareness in order to improve their mental health. The workshop can be accessed by obtaining a copy of this project and the appendices (Appendix A: *A Workshop to Improve Teacher Mental Health Through Self-Awareness*, Appendix B: *A Workbook to Improve Teacher Mental Health Through Self-Awareness* and Appendix C: *Facilitator's Manual*). Teachers or Administrators who are interested in the workshop are tasked with finding a facilitator who is qualified to facilitate the workshop; the facilitator is required to be a trained counsellor (e.g. Master's degree in counseling, psychology, social work, or the equivalent) and ideally, although not required, have experience working in the school system. More specifically, it is ideal that the facilitator have experience working in a similar context as the teachers who will be participating. For example, if the teachers who participate are from a rural district, it is ideal that the facilitator have experience working in rural communities and/or rural schools. Likewise, if the teachers are primarily from an inner-city high school, it would be ideal for the facilitator to have some lived-experience of working in this context. However, it is not necessary for the teachers to be a homogenous group (e.g. all having similar backgrounds) as the workshop leaves space for a wide range of teaching contexts and cultures. The workshop can be delivered to an entire school or a group of interested teachers from a variety of schools. Also, it can be facilitated in a variety of formats. For example, this workshop could be facilitated on

weekends, after school, during professional development days, or at teacher's conventions.

The next chapter, Chapter 5: Summary of Discussion, outlines a personal reflection on the experiences and insights that lead to the creation of this Project. I have included a summary of significant moments and influencers of this project as well as my hopes for this Project and its limitations. Finally, I provide a brief exploration of how this project can be used to promote social justice for teachers.

Chapter 5: Summary of Discussion

This Final Project was created to help increase teachers' self-awareness with regard to their own mental health and strategies for coping with stress related to teaching. The Final Project includes a literature review and two "gifts to the community": *A Workshop to Improve Teacher Mental Health Through Self-Awareness* and *A Workbook to Improve Teacher Mental Health Through Self-Awareness*. This chapter includes a personal reflection on the experiences I had leading up to the creation of this project and the process of developing it .

Personal Reflection

This project was born out of a particular combination of personal experiences that, when taken together, presented a clear problem and therefore the momentum to try and offer my community of teachers and counsellors a potential solution. The problem with teacher's mental health first became apparent to me as a student in a Bachelor of Education degree. In nearly every interaction I had during those two years, I noticed either myself, my supervisors, or others in my cohort discussing frustrations, concerns, conflicts, and feelings of exhaustion associated with the profession. In addition, I had several experiences with students, parents of students, other teachers, teacher-supervisors, and even professors challenge my boundaries in a way that demanded me to communicate and respond with professionalism and careful consideration of the power differentials and the need to network and build relationships within the field. There were certainly moments where I felt I did communicate and respond professionally and in a way that maintained my integrity and personal values. However, there were also times where that was not the case. I recall staying late in the evenings with a teacher-supervisor

as she told me extremely intimate details about her childhood and personal relationships; details that I did not want to know, but I did not know how to set healthy boundaries and preserve our relationship at the same time. I also recall getting caught in unhealthy thinking patterns that perpetuated my lack of self-care and my personal need for being seen as worthy. I became acutely aware of how my teacher-supervisors spoke about the students, other teachers, and the profession and began to see themes of anger, resentment, and hopelessness.

It wasn't until my Master of Counselling degree that I learned the importance of boundaries and managing one's own biases, values, and emotional responses. It was in my Master's degree that I engaged in deep self-reflection and examined many of my automatic patterns of thinking and responding. This process has allowed me to become much more intentional in how I live my life and has given me a wider range of options when responding to stress. I am also more aware of when and how to engage in self-care and I have begun to deal with my negative core beliefs about worthiness and productivity. In addition to my educational experiences, I have also spent the last five years working alongside teachers in classrooms designed for students with mental illness(es). I have witnessed many interactions among teachers and students, or teachers and other teachers, that have seemed so obviously problematic from my viewpoint, yet the teachers often seemed to lack awareness that their response would perpetuate the problem, cause conflict, or be damaging in some way. Efforts to support teachers were made, such as providing them with professional development (PD) around trauma-informed practice, mental illness, and offering weekly consultation. However, over time, it became apparent that teachers were responding poorly not because they lacked

knowledge about mental health or how to teach. Rather, it appeared to me that teachers were responding poorly due to a lack of self-awareness and personal insight. Teachers benefit from having a basic understanding of mental health including diagnoses, treatments, how mental health affects learning, and what contributes to mental illness, as this can help them recognize the signs that a student may require outside support from a mental health professional. But teachers also benefit from having a *personal* understanding of mental health which occurs out of self-exploration and self-reflection in order to recognize when they may need to access outside supports. Asking teachers questions and giving them an opportunity to explore themselves as emotional and vulnerable, as human beings, leads to more socially and emotionally competent teachers. For example, “What thoughts and feelings arise for you when a student is defiant? What about when you feel a parent is blaming you? What are you aware of when your administrator asks you to take on another task? What thoughts and feelings arise when one of your students gets suspended?” By asking teachers to reflect on their relational, emotional and cognitive processes, teachers may be able to clarify their own beliefs, intentions, and perceptions and know themselves better. When teachers are better able to understand and navigate their internal worlds, they will be better able to understand and navigate their external world.

I am aware that this project invites teachers to share their vulnerabilities as teachers and as human beings. For instance, inviting teachers to reflect on their personal histories and current mental, emotional, and social problems is a risky request. I acknowledge the process will spark or uncover strong emotions related to one’s self-image and the perceptions of others. Jacobson (2017) argued that there is actually a

downside to being more self-aware: “Self-knowledge seems to really benefit the people around us more than ourselves. It enables us to calibrate our behavior based on others' feedback but does not necessarily make relationships easier to navigate” (para. 4). Being able to receive honest and accurate feedback from others, while maintaining self-compassion and respect for one’s efforts and strengths, requires training and practice.

Currently, teachers can access mental health supports through their district’s employee assistance program (EAP) if their district has such services. However, many EAPs require the therapist to share private information about the client, including the client’s name, number of sessions attended, presenting concerns, and progress made in therapy. This may deter teachers from attending therapy through an EAP, especially considering the stigma related to mental health among teachers. Alternatively, teachers can try to access a private or community therapist, but there are often long waitlists or high costs. *A Workshop to Improve Teacher Mental Health Through Self-Awareness* includes a list of local resources that teachers can access should they need support, assistance, or therapy. However, it is hoped that one day teachers will have access to a school counsellor on site who is available to teachers in the same way they are available to students.

It is important to consider the courage and commitment it takes for teachers to explore their personal wellbeing and mental health. Having delivered the workshop twice to teachers in training, I have experienced teacher expressions of heavy emotions including fear, guilt, shame, and anger upon reflecting about personal characteristics they view as nonproductive to their mental health. Also, since the process of developing self-awareness often involves examination of one’s past (the events that made a person who

they are today), I have also witnessed teachers sharing extremely intimate stories including experiences of abuse, substance addiction, engagement in self-harm, and struggles with body image. Some teachers feel very overwhelmed when they are asked to reflect on their personal experiences or to be vulnerable in front of others.

An important consideration for the facilitator is that it is possible that the teachers who participate in the workshop may all come from the same school. In such cases, there may be dynamics between teachers that would prevent them from sharing openly and honestly with one another. For example, I worked with two teachers who had been assigned to co-teach a class but over time their relationship deteriorated to the point of both teachers avoiding each other in the halls and speaking poorly about each other to other teaching staff. In circumstances such as those, it may seem too risky to those teachers to be vulnerable and honest in front of one another. It is vitally important that the facilitator does their best to gain an understanding of the dynamics among the group of teachers who are taking the workshop prior to facilitating.

A Social Justice Perspective

This project acknowledges our teachers as humans who may be in need of support regarding their mental health. I believe there are a variety of societal discourses that influence the way teachers and the public think about and respond to teacher's mental health. Discourses are the "invisible rules" that society enforces on its members simply by virtue of everyone following the rules. (Tomm, St. George, Wulff, & Strong, 2014). Discourses about teaching may differ across districts and regions and the ways in which people take the discourses up into their lives can vary. For example, I observed a common discourse among teachers in Calgary, Alberta that teachers who take a stress-

leave are weak or lesser-than. I recall hearing teacher colleagues and teacher-supervisors state that they have needed a break for years but were worried that if they took one it would effect their ability to “move up” in their profession.

Additionally, there is a societal discourse around teacher mental health that says teachers should be mentally healthy. Discourses can be either positive or negative, depending on the way the discourse is taken up (Tomm, St. George, Wulff, & Strong, 2014). I believe the discourse mentioned above has been taken up in a way that is causing negative effects on our teachers and teaching communities. Due to the stigma around mental health, teachers are discouraged to talk about their vulnerabilities and experiences of mental health. I have worked with teachers who have a history of stress-leave on their file and worry about having problems applying for different positions at different schools. I have worked with teachers who come to work pretending to have it all together while the truth is they are really struggling mentally and/or emotionally (perhaps grieving a loss, managing a mental illness, or coping with family stress). I believe that the discourse “teachers should be mentally healthy” has been taken up in a way that prevents teachers who are struggling from speaking up and getting help. Teachers themselves may be uncomfortable with the notion that they, or their peers, may be in need of some support for their mental health. Due to the fear of potentially being judged, teachers who are experiencing burnout, work related stress, or symptoms of a mental illness may cope through denial or by ignoring the signs that they need help. This project is delivered in a way that challenges the response of denying or ignoring and stresses the importance of personal accountability and responsibility. The workshop encourages teachers to recognize their personal limitations and the risks associated with teaching and to take

initiative for seeking help and support to manage their mental health. In this project, this objective is accomplished by providing invitations to teachers to reflect on their inner experiences and give voice to their successes and struggles with regard to managing stress, coping with burnout, and fostering personal resilience.

One of the limitations of this project is the ever-changing body of research that initially informed the theoretical foundations and specific activities included in this workshop and workbook. The definitions and constructs used in this project will likely evolve over time. Additionally, the workshop is based on a personal conceptualization of the theoretical and empirical data available and has not been evaluated or reviewed for effectiveness. It is my hope that one day, funding will be available to deliver the workshop and conduct follow-up research to examine whether or how the activities and information improved teacher mental health, and if the improvements were stable across time. Overall, my hopes for this final project are (a) for preservice teacher education programs to utilize the workshop and workbook as a way to offer teachers an opportunity for personal development as part of their formal education, (b) for this workshop to be made available as a professional development opportunity to teachers already in the field (e.g. Teacher's Convention), and (c) to contribute in some way to the movement of acknowledging the importance of mental health for professionals.

Conclusion

This Final Project was created for the purpose of helping pre-service teachers and teachers already in the field develop self-awareness in order to improve their mental health. A summary of the literature on teacher mental health, stress, burnout, and various factors that contribute to attrition within the teaching profession is provided. The

literature examined was analyzed from the perspectives of a variety of psychology and counselling theories including the Transactional Model of Stress and Coping, Affect Regulation Theory, and Interpersonal Mindfulness. Based on this analysis and my personal experiences as a teacher and a therapist, the products of the Final Project were formed: *A Workshop to Improve Teacher Mental Health Through Self-Awareness* and *A Workbook to Improve Teacher Mental Health Through Self-Awareness*. The hope of this Final Project is to provide teachers with a concrete application of the findings in the research on teacher stress and coping and to bring society's attention to the importance of teacher mental health. The emotional, relational, and mental needs of our teachers is something our economy and our society can no longer afford to neglect.

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Appendix A

Workshop

**A Workshop to Improve
Teacher Mental Health Through
Self-Awareness**

Created by Laura Doney

Facilitator Introduction

Session 1

Developing Personal Awareness

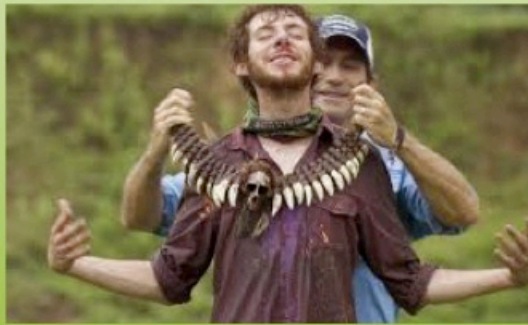
Activity: Why does your mental health matter?

In groups of two or three, please discuss the questions below and record your responses in your workbook.

- Why should you take responsibility for your mental health?
- Why does your mental health matter to your students?
- How does your mental health affect those in your community?
- Why does your mental health matter to the profession of teaching?

Mental health does not discriminate

Mental illness effects people regardless of race, ethnicity, age, gender, sexual orientation, religious beliefs, education, or socioeconomic status (Teen Mental Health, 2017)



...and being a teacher does not give you immunity!

You have chosen a high-risk profession

The teaching profession has significantly changed over the past twenty years and is continuing to change at a faster rate than teachers and teacher educators can keep up with (Rogers, 2012).



Lack of confidence and resources to meet the demands of the profession (Lazarus, 1991)



Stress

You have chosen a high-risk profession cont'd

- Create meaningful and engaging lessons
- Fitting in large curriculums in a limited amount of time
- Be involved in the teaching community
- Stay up to date on best practice
- Respond to mental health needs of students
- Manage difficult behaviours from students
- Diverse earners
- Administrative tasks (paperwork, report cards etc.)
- Frequent and rapid changes in education policies
- Performance evaluations and reviews of schools and individual teachers
- Dealing with social issues e.g. gender, sexuality, human rights, etc.

High risk professions...


- Van der Bijl and Oosthuizen (2007) examined symptoms of anxiety among doctors and teachers
- They found:
 - High levels of symptoms of anxiety and depression in both groups, with teachers more affected than doctors
 - Many of whom remained untreated
 - Many participants in the study displayed a passive attitude with regard to seeking help
 - 40% of teachers reported they planned to leave the profession
- What does this mean?
 - At the time of the study, teachers and doctors (in SA) were at a high risk for developing serious mental health problems, with low levels of recognition and intervention

Stress management ...


- Another group of authors found a strong correlation between occupational stressors (e.g. role overload) and symptoms of depression and anxiety
- Teachers who received stress management PD reported significantly less physical symptoms, higher satisfaction with teaching, and lower occupational stress
- Teachers ranked 5 healthy promoting behaviours: spiritual growth, interpersonal relations, nutrition, stress management and health responsibility. Stress management behaviors ranked only fourth and health responsibility came in last.
- What does this mean??
 - It is important to increase teachers' awareness of taking care of their own health
 - We need to empower teachers with active stress management skills and techniques
 - We need to help teachers engage in stress management behaviors.

Student-Teacher Relationship

- Yoon (2002) examined the relationship between teacher stress and teacher-student relationships, finding:

Negative relationships with students  teacher stress

But what about?

Teacher stress  negative relationships w students

- Teacher stress levels *did* predict the number of students they had negative relationships with
- Teacher stress also influenced their general attitudes towards teaching
- Expressions of anger and hostility were the mediating variable
- What does this mean?

What does all this mean?

- Teachers are not great at identifying their mental health needs
- Teachers are not very good at taking care of themselves
- Teacher stress influences students
- In my personal opinion... Teacher education programs are not doing a good enough job of teaching teachers how to respond to the stresses of being a teacher

Economic Cost

- The projected cost of mental illness to Canada's economy is \$48.6 billion per year (Rodger et al, 2014)
- **Increasing occupational demands have resulted in high stress amongst teachers** (Hamama, 2013; Kyriacou, 2001; Leung, Mak, Chui, Chiang, & Lee, 2009; Richards, 2012), **high burnout rates**, (Fives, H., Hamman, D., & Olivarez, A., 2007; Grayson & Alvarez, 2008), **and early-career teacher attrition varying from 5% to 50%** (Shafer, Long, & Clandinin, 2012) **with 50% of drop outs occurring within the first two years of teaching** (Karsenti & Collin, 2013).
- Teacher attrition is an **economic burden; 2.2 billion dollars are spent annually on replacing teachers** who have left the profession (Alliance for Excellent Education, 2014).

What is Mental Health?



Watch Video: https://www.youtube.com/watch?v=Klswi_4yRaE

Definition of Mental Health

Mental Health

“Mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community” (WHO, 2014)

Mental Health Problem

- everyone experiences this
- the response to an extreme life event (e.g. losing a family members, witnessing or experiencing extreme violence, war, poverty, etc.)
- not diagnosable acc. To DSM –V
- temporary

Mental Illness

- disorders of brain function that affect your mood, thinking, and behaviour.
 - occurs in all cultures and socioeconomic groups
 - 1 in 5 (20%)
 - diagnosed using the DSM-5
- Teen mental health (2017)*

Wellness

“Wellness is an active process through which people become aware of, and make choices toward, a more successful existence” (National Wellness Institute)

What causes mental illness?

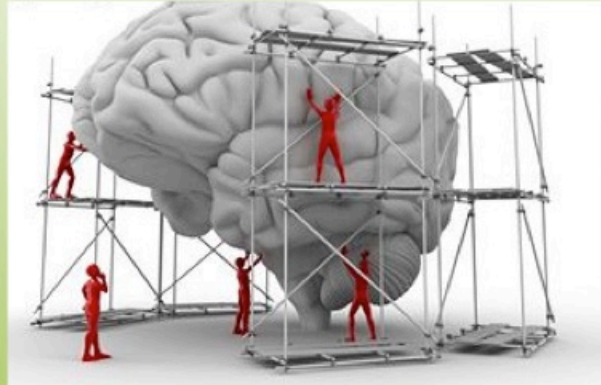
| Myth | Fact |
|---|---|
| <ul style="list-style-type: none"> - Laziness - Poor parenting during childhood (e.g. abuse, neglect) - Moral failing (punishment from God) - What we eat - Low socio-economic status or poverty - Living in a war-torn country - Race, sexual orientation, political or religious views | <ul style="list-style-type: none"> - Caused by complex interactions between both genetic and environmental factors - "Genetics load the gun, environment pulls the trigger" - Risk factors > protective factors |

WHO ARE YOU?

Examining your history as a way to increase self-awareness

How did you become you?

- Attachment
- Stress (Healthy stress vs. Toxic stress)
- Early Childhood Experiences

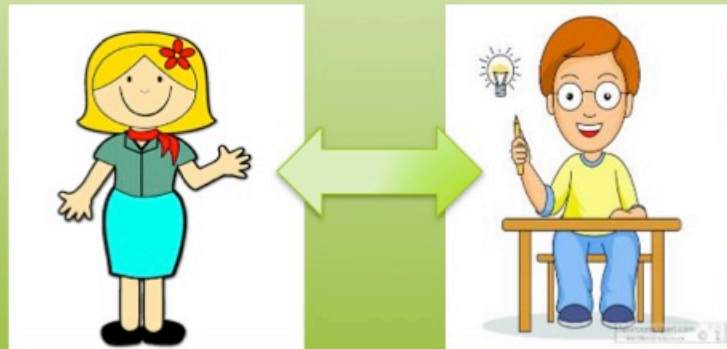


Watch Video: <https://www.youtube.com/watch?v=LmVWOe1ky8s>

Self-Awareness

Self-awareness is the “clear perception of one’s **strengths, limitations, thoughts, beliefs, motivations, and emotions** along with how one’s taken-for-granted experiences have embedded these perceptions into one’s way of being” (Wang & Yorks, 2012, p. 158).

(Richardson & Shupe, 2003).



Attachment for Adults

- **Attachment primes us for:**
 - Shaping the success or failure of future intimate relationships
 - The ability to maintain emotional balance
 - The ability to enjoy being ourselves and to find satisfaction in being with others
 - The ability to rebound from disappointment, discouragement, and misfortune (resiliency)
- **Researchers found that successful *adult* relationships depend on the ability to:**
 - manage stress
 - stay “tuned in” with emotions
 - use communicative body language
 - be playful in a mutually engaging manner
 - be readily forgiving, relinquishing grudges

Attachment

- Attachment theory provides fundamental constructs for how the brain and mind are organized, the origins of personality characteristics, the capacity to regulate emotion, and the etiology of mental health disorders (Hill, 2015)
- For a baby, a warm, close relationship with their caregiver is as much of a necessity as food and water.
- Secure base & safe haven
- Mary Ainsworth – strange situation test (way to measure secure base and safe haven)

Secure

- Jane settles in quickly to play and appears comfortable.
- When the stranger comes in, Jane stops playing and focuses on her mother, however she is easily reassured, even from a distance, and continues to play.
- When the mother leaves her along with the stranger, Jane becomes upset right away. The stranger cannot fully console Jane. When mom returns, Jane hurries to her and reaches out to be picked up.
- Mom can console her and Jane can return quickly to play.

Insecure: Avoidant

- Kevin quickly begins to play with the toys, although is not fully engaged.
- The entrance of the stranger barely fazes him
- When mother leaves him with the stranger he is not as frightened as Jane and can continue playing with the toys.
- When his mother returns, he seeks her out but does not fully engage with her (e.g. does not make eye contact, not a full body embrace)
- When left completely alone he does become upset but is able to calm himself down within the three minutes and return to playing.

Insecure: Anxious/Ambivalent

- Katie takes a long time to get comfortable to play with the toys. When she does play, she keeps a close eye on her mother.
- When the stranger enters, she hurries to her mother and does not return to play.
- When left alone with the stranger, she cannot be soothed and cannot return to play.
- When Katie's mother returns, she clings to her, interspersed with hitting and arching her back.
- When left completely alone, she becomes so distressed that her mother returns early and again has a hard time calming her.

Activity:

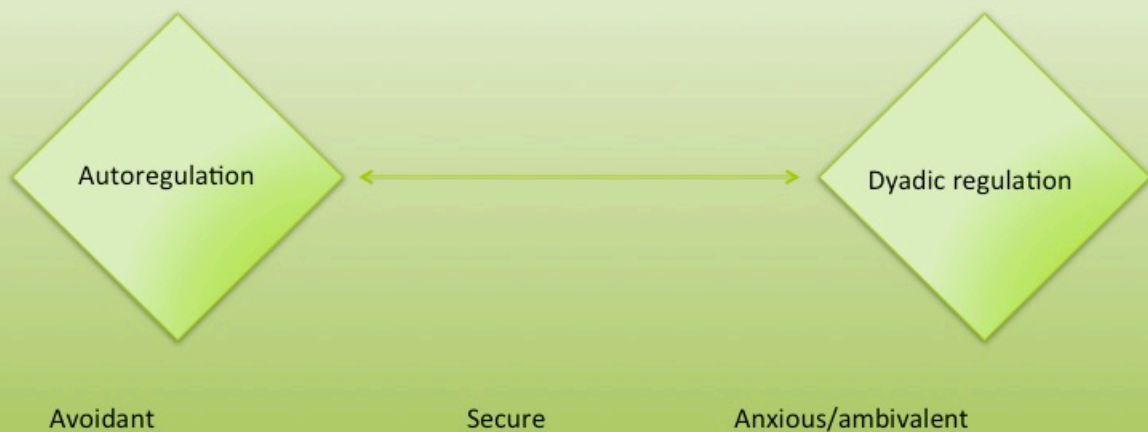
What is your attachment style?

- Complete the attachment style self assessment in your workbooks. The Relationships style questionnaire was developed to assess attachment styles in adults.
- To learn more about attachment styles please refer to Affect Regulation Theory by Daniel Hill (an excellent resource 😊)

Purpose of knowing your attachment style

- The purpose of having an understanding of your own attachment style is:
- To better understand yourself
- To gain insight into your emotion regulation patterns/ methods
- To develop a deeper awareness of your current relationships

Attachment style and emotion regulation



Get to know your emotion regulation skills

- Complete Difficulties Emotional Regulation Scale
- Higher scores in certain categories indicate areas for improvement
- Highlight your highest score (even if it is moderate) and keep this in mind for later when we do goal setting
- Highlight your lowest score (reminder: the lower your score, the more skilled you are in this area) and begin thinking about the things you do well in this category

Activity: Developing emotion regulation strategies

- Brainstorm through a discussion the ways in which people are already regulating their emotions (there is a lot we can learn from each other 😊)
- If you had a particularly low score in a certain category, please share the skills and strategies you are already using
- You are encouraged to record everyone's ideas – the goal is for you to leave with a long list of emotion regulation strategies

Activity: Using **mindfulness** to regulate emotions

- Roeser et al. (2013) found that teachers who participated in a mindfulness training program reported lower levels of job stress and burnout symptoms.
- Mindfulness Definition: Non-judgmental paying attention on purpose to the present moment
- Whole Group Guided Meditation

ACTIVITY: **cognitive distortions**

- A cognitive distortion is a biased and/or irrational perception
- Everyone experiences cognitive distortions, but when they can lead to and/or exacerbate negative emotional and behavioral states (Pratt, 2014)
- *** It is about the rigidity and distress caused by the thoughts ***
- Activity in workbook – identify your “go-to” cognitive distortions

Activity: Using **self-talk** to regulate emotions

- “People make irrational demands on themselves that lead to psychological disturbances” (Erford, 2015, p. 116)
- Monitoring self-talk is a CBT technique
- Self-talk is based on your beliefs about yourself and is self-fulfilling; you get what you put out there
- Self-talk is a way to dispute your unhelpful thoughts; “It is a way for people to deal with the negative messages they send themselves” (Erford, 2015, p. 116)

HOMEWORK

Examining Your Emotional Experiences (optional)

- Consider these questions and use them as a self-reflective tool on your own time

Asking For Feedback

- Complete the homework assignment outlined in your workbook

Emotion Regulation

- Homework – Asking for feedback
- How was it for you to manage your emotions during this activity ?
- Think – Pair – Share
 - Consider the reflection questions from the homework assignment
 - Discuss your thoughts and insights with the people at your table
 - Choose one person record the table's responses and another person to share the themes from your conversation with the larger group

Session 2

Developing Interpersonal Awareness

Emotion Regulation

- Homework – Asking for feedback
- How was it for you to manage your emotions during this activity ?
- Think – Pair – Share
 - Consider the reflection questions from the homework assignment
 - Discuss your thoughts and insights with the people at your table
 - Choose one person record the table's responses and another person to share the themes from your conversation with the larger group

Healthy Interpersonal Relationships

- Think about various types of relationships, in various contexts, and various points in your life
- What are the characteristics of HEALTHY relationships? Please brainstorm with each other your ideas and write them down in your workbook

Attachment & Relationships



Watch Video: <https://www.youtube.com/watch?v=apzXGEbZht0>

Attachment and Relationships

DRAMA TRIANGLE

- Most of us learned how to be in relationship to ourselves, to each other and to the world around us by occupying one of these three positions
- Starting gate: we all have one position where we usually start and then move around from there. Our starting gate is intertwined with our identity.
- What starting gate do you think is common among helpers?

Unhealthy Relationships

- “Unmet Attachment Needs” – Read together as a group
- Watch Brene Brown’s youtube video on Boundaries



Watch Video: <https://www.youtube.com/watch?v=BESvQB6J5rc>

Boundaries

The Self Help Alliance (2010)

- Boundaries Defined “Boundaries are a life enhancing system of “yes’s” and “no’s.” They are stop signs and borders you install to protect yourself so that it is clear that you own your life, make good choices, and pursue the authentic expression of who you are in the way you live, love, give and relate.”
- “Boundaries are a limit you set between yourself and people due to thoughts, activities and things that aren't in your best interest”
- “The first boundary I drew was between myself and my habit of saying negative things about myself to others...Once I got a handle on that, I moved to setting limits on names I called myself, like “You stupid fool” and “Loser.””
- “And this is one of the major questions of our lives: how we keep boundaries, what permission we have to cross boundaries, and how we do so.”

Boundaries

The Self Help Alliance (2010)

Boundaries help you to:

- Define Your Identity – you become clear and confident with yourself, and others know what to expect from you.
- Bring Order – without them, you are unable to regulate demands, ideas, dreams, responsibilities, opportunities, pleasures and activities. Life can become chaotic.
- Promote You – leaders and employers with good boundaries know that if you have good boundaries, you can be trusted to state clearly what you can and cannot do, welcome input and work passionately without burnout.
- Protect Yourself from the Control of Others – having clear boundaries makes it difficult for others to control you, and makes it easier for you to say no when you need to.
- Preserve Your Purpose and Mission – once these are identified, boundaries save you for the relationships and opportunities that best fit who you are.
- Satisfy Your Need for Self-Confirmation – by defining you and your personality.

Boundaries

The Self Help Alliance (2010)

Ineffective or poor boundaries can lead to:

- Loss of respect from self and others
- Loss of control of the direction of your life
- Increased chaos, distractions, and guilt.
- Loss of interest in life.
- Unmet goals and the stress of chaos can lead to hopelessness, depression or anxiety.

Activity: Boundaries

The Self Help Alliance (2010)

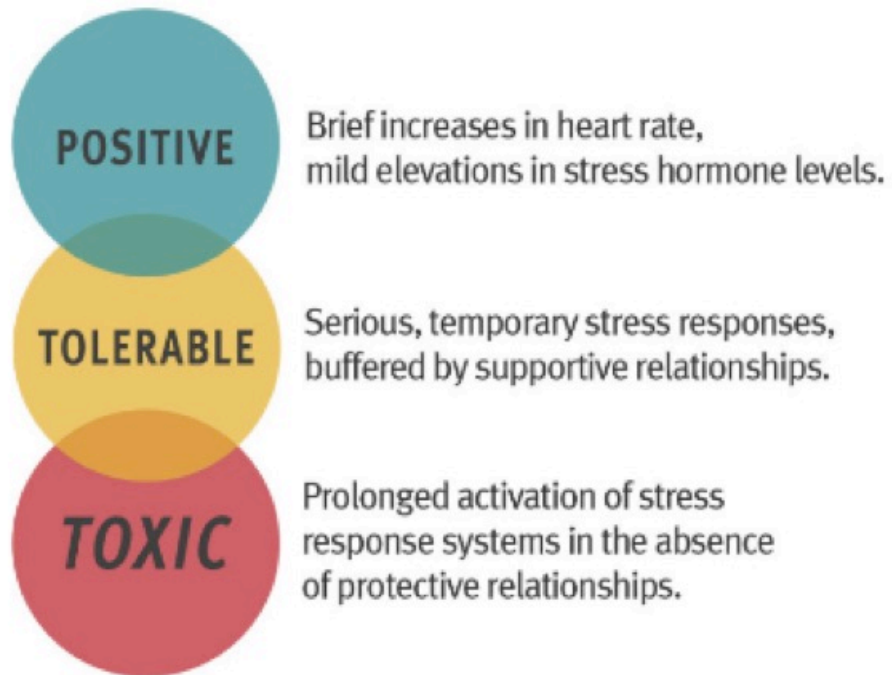
- Complete the “Your boundary beliefs” self-assessment
- Upon completion, engage in small group discussion about your ideas, goals, and experiences regarding setting personal boundaries

Care Giving Questionnaire

- Complete the Care Giving Questionnaire to gain a deeper understanding of how you provide support to others.
- The questions in this questionnaire are worded toward intimate partners, however you may change the language of it so that it applies to other close relationships (e.g. parent-child) or you can answer the questions as if you were in a relationship
- The results of your self-assessment can give you some insights into your patterns of supporting others. After all, supporting others is a big part of teaching.

Stress

- Our attachment style significantly influences the way we handle stress
- Normal stress versus toxic stress (see next slide)
 - Toxic stress occurs when safety and security is not provided during times of normal stress. The attachment system in the body becomes activated and STAYS activated if the child (or adult) does not experience relief. This results in a stress-response system set permanently on high alert.
- How much stress do you have in your life right now? Are you someone who experiences toxic stress?



Watch Video: <https://www.youtube.com/watch?v=RcGyVTAoXEU>

Activity: Burnout and Self Care

- Complete the **Professional Quality of Life (ProQOL) Survey**
- If you finish the ProQOL survey early, read through the **Basic Self Care Needs: Checklist**. This is for you to take home and complete on your own time.

Activity: A Good Teacher is Well Fed and Well Loved

Why did you become a teacher?

What do personal needs have to do with ethics?

- Meeting your personal needs through your students, (e.g. need for love, comfort, acceptance, intimacy, power, the need to be right, have the last word....) can
- If you have “flipped your lid” (Seigel, 2012) and you can’t regulate your emotions, you go from being able to access all kinds of critical, logical, rational thinking skills to only having your emotions available to you to guide your decisions.
- MAKING PROFESSIONAL DECISIONS BASED ON EMOTIONS CAN BE RISKY
- MAKING PROFESSIONAL DECISIONS BASED ON UNMET NEEDS CAN BE RISKY

4 Tests to Guide Your Actions

- Test of Justice: Assess your own sense of fairness by determining whether you would treat others the same in this situation.
- Test of Publicity: Ask yourself whether you would want your behavior reported in the press.
- Test of Universality: Assess whether you could recommend the same course of action to another teacher in the same situation.
- Test of Moral Traces: Was expediency, politics, or self-interest involved in the decision?

ACTIVITY: Setting Your Compass

- Fill in the boxes on your compass as a way to set some (goals) directions for your future
- You are welcome to complete this activity independently or with others, you decide 😊

ACTIVITY: Letter From Future Self

- Write a letter **from** your future self *to* your current self thanking your current self for all the things you did to reach your goals.
- Your future self might be you in one year, you in ten years, you in a month... you pick.
- Be as specific as possible.
- You may focus on one goal, or you might write about various areas of your life.

Appendix B

Workbook

**A Workbook to Improve Teacher Mental
Through Self-Awareness**
Workshop Activities



**Part One:
Developing Self-Awareness**

*Teacher Mental Health
Attachment
Emotion Regulation*

Why Does Your Mental Health Matter?

Please discuss the following questions in small groups :

1. Why should you take responsibility for your mental health?

2. Why does your mental health matter to your students?

3. Why does your mental health matter to your family/ friends/ community?

4. Why does your mental health matter to the profession of teaching?

Self-Assessment: Attachment Style

The Relationships Questionnaire (RQ)

Bartholomew, K. & Horowitz, L. M. (1991). Attachment styles among young adults: A test of a four-category model. *Journal of Personality and Social Psychology*, 61(2), 226-244.

Relationship Style Scale: Following are four general relationship styles that people often report. Please rate each of the relationship styles above to indicate how well or poorly each description corresponds to your general relationship style.

Type 1: It is easy for me to become emotionally close to others. I am comfortable depending on them and having them depend on me. I don't worry about being alone or having others not accept me.

| | | | | | | |
|----------------------|---|---|-------------------|---|---|-------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Disagree strongly | | | Neutral/ Mixed | | | Agree strongly |

Type 2: I am uncomfortable getting close to others. I want emotionally close relationships, but I find it difficult to trust others completely, or to depend on them. I worry that I will be hurt if I allow myself to become too close to others.

| | | | | | | |
|----------------------|---|---|-------------------|---|---|-------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Disagree strongly | | | Neutral/ Mixed | | | Agree strongly |

Type 3: I want to be completely emotionally intimate with others, but I often find that others are reluctant to get as close as I would like. I am uncomfortable being without close relationships, but I sometimes worry that others don't value me as much as I value them.

| | | | | | | |
|----------------------|---|---|-------------------|---|---|-------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Disagree strongly | | | Neutral/ Mixed | | | Agree strongly |

Type 4: I am comfortable without close emotional relationships. It is very important to me to feel independent and self-sufficient, and I prefer not to depend on others or have others depend on me.

| | | | | | | |
|----------------------|---|---|-------------------|---|---|-------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Disagree strongly | | | Neutral/ Mixed | | | Agree strongly |

Attachment Style Summaries

Copied directly from Cherry & Gans (2017)

Type 1: Secure Attachment

As Children:

- Are able to separate from parent
- Seek comfort from parents when frightened
- Greets return of parents with positive emotions
- Prefers parents to strangers

As Adults:

- Tend to have good self-esteem
- Have trusting, lasting relationships
- Are comfortable sharing feelings with partners and friends
- Seek out social support

Children who are securely attached generally become visibly upset when their caregivers leave and are happy when their parents return. When frightened, these children will seek comfort from the parent or caregiver. Contact initiated by a parent is readily accepted by securely attached children and they greet the return of a parent with positive behavior. While these children can be comforted to some extent by other people in the absence of a parent or caregiver, they clearly prefer parents to strangers.

As adults, those who are securely attached tend to have trusting, long-term relationships. Other key characteristics of securely attached individuals include having high self-esteem, enjoying intimate relationships, seeking out social support, and an ability to share feelings with other people.

Type 2: Insecure - Avoidant Attachment

As Children:

- Do not seek much contact or comfort from parents
- May avoid parents
- Show little or no preference for parents over strangers

As Adults:

- Invest little emotion in social and romantic relationships
- May have problems with intimacy
- Unwilling or unable to share thoughts or feelings with others

Children with avoidant attachment styles tend to avoid parents and caregivers. This avoidance often becomes especially pronounced after a period of absence. These children might not reject attention from a parent, but neither do they seek out comfort or contact. Children with an avoidant attachment show no preference between a parent and a complete stranger.

As adults, those with an avoidant attachment tend to have difficulty with intimacy and close relationships. These individuals do not invest much emotion in relationships and experience little distress when a relationship ends.

They often avoid intimacy by using excuses (such as long work hours), or may fantasize about other people during sex. Research has also shown that adults with an avoidant attachment style are more accepting and likely to engage in casual sex. Other common characteristics include a failure to support partners during stressful times and an inability to share feelings, thoughts, and emotions with partners.

Type 3: Insecure - Anxious/Ambivalent Attachment

As Children:

- May be wary of strangers
- Become greatly distressed when parents leave
- Do not appear comforted when parents return

As Adults:

- Reluctant to become close to others
- Worry that their partner does not love them
- Become very distraught when relationships end

Children who are ambivalently attached tend to be extremely suspicious of strangers. These children display considerable distress when separated from a parent or caregiver, but do not seem reassured or comforted by the return of the parent. In some cases, the child might passively reject the parent by refusing comfort, or may openly display direct aggression toward the parent.

According to Cassidy and Berlin, ambivalent attachment is relatively uncommon, with only 7 to 15 percent of infants in the United States displaying this attachment style. In a review of ambivalent attachment literature, Cassidy and Berlin also found that observational research consistently links ambivalent insecure attachment to low maternal availability. As these children grow older, teachers often describe them as clingy and over-dependent.

As adults, those with an ambivalent attachment style often feel reluctant about becoming close to others and worry that their partner does not reciprocate their feelings. This leads to frequent breakups, often because the relationship feels cold and distant. These individuals feel especially distraught after the end of a relationship. Cassidy and Berlin described another pathological pattern where ambivalently attached adults cling to young children as a source of security.

Type 4: Avoidant/ Disorganized Attachment

At Age One:

- Show a mixture of avoidant and resistant behaviors
- May seem dazed, confused, or apprehensive

At Age Six:

- May take on a parental role
- Some children may act as a caregiver toward the parent

Children with a disorganized-insecure attachment style show a lack of clear attachment behavior. Their actions and responses to caregivers are often a mix of behaviors, including avoidance or resistance. These children are described as displaying dazed behavior, sometimes seeming either confused or apprehensive in the presence of a caregiver.

Main and Solomon proposed that inconsistent behavior on the part of parents might be a contributing factor in this style of attachment. In later research, Main and Hesse argued that parents who act as figures of both fear and reassurance to a child contribute to a disorganized attachment style. Because the child feels both comforted and frightened by the parent, confusion results.

Cherry, K. & Gans, S. (2017). *The different types of attachment styles*. Retrieved from <https://www.verywell.com/attachment-styles-2795344>

Self-Assessment: Emotion Regulation

The Difficulties in Emotion Regulation Scale (DERS)

Please indicate how often the following statements apply to you by writing the appropriate number from the scale below on the line beside each item.

| 1 | 2 | 3 | 4 | 5 |
|-------------------------|-----------------------|------------------------------|------------------------------|----------------------------|
| Almost never (0-10%) | Sometimes (11-35%) | About ½ the time (36-65%) | Most of the time (66-90%) | Almost always (91-100%) |

- ___ 1) I am clear about my feelings.
- ___ 2) I pay attention to how I feel.
- ___ 3) I experience my emotions as overwhelming and out of control.
- ___ 4) I have no idea how I am feeling.
- ___ 5) I have difficulty making sense out of my feelings.
- ___ 6) I am attentive to my feelings.
- ___ 7) I know exactly how I am feeling.
- ___ 8) I care about what I am feeling.
- ___ 9) I am confused about how I feel.
- ___ 10) When I'm upset, I acknowledge my emotions.
- ___ 11) When I'm upset, I become angry with myself for feeling that way.
- ___ 12) When I'm upset, I become embarrassed for feeling that way.
- ___ 13) When I'm upset, I have difficulty getting work done.
- ___ 14) When I'm upset, I become out of control.
- ___ 15) When I'm upset, I believe that I will remain that way for a long time.
- ___ 16) When I'm upset, I believe that I will end up feeling very depressed.
- ___ 17) When I'm upset, I believe that my feelings are valid and important.
- ___ 18) When I'm upset, I have difficulty focusing on other things.
- ___ 19) When I'm upset, I feel out of control.

- ___ 20) When I'm upset, I can still get things done.
- ___ 21) When I'm upset, I feel ashamed at myself for feeling that way.
- ___ 22) When I'm upset, I know I can find a way to eventually feel better.
- ___ 23) When I'm upset, I feel like I am weak.
- ___ 24) When I'm upset, I feel like I can remain in control of my behaviors.
- ___ 25) When I'm upset, I feel guilty for feeling that way.
- ___ 26) When I'm upset, I have difficulty concentrating.
- ___ 27) When I'm upset, I have difficulty controlling my behaviors.
- ___ 28) When I'm upset, I believe there is nothing I can do to make myself feel better.
- ___ 29) When I'm upset, I become irritated at myself for feeling that way.
- ___ 30) When I'm upset, I start to feel very bad about myself.
- ___ 31) When I'm upset, I believe that wallowing in it is all I can do.
- ___ 32) When I'm upset, I lose control over my behavior.
- ___ 33) When I'm upset, I have difficulty thinking about anything else.
- ___ 34) When I'm upset I take time to figure out what I'm really feeling.
- ___ 35) When I'm upset, it takes me a long time to feel better.
- ___ 36) When I'm upset, my emotions feel overwhelming.

Gratz, K. L. & Roemer, L. (2004). Multidimensional assessment of emotion regulation and dysregulation: Development, factor structure, and initial validation of the Difficulties in Emotion Regulation Scale. *Journal of Psychopathology and Behavioral Assessment*, 26(1), 41-54.

To access the DERS online:

[http://www.excellenceforchildandadolescence.ca/sites/default/files/meas_attach/Difficulties_in_Emotion_Regulation_Scale_\(DERS\).pdf](http://www.excellenceforchildandadolescence.ca/sites/default/files/meas_attach/Difficulties_in_Emotion_Regulation_Scale_(DERS).pdf)

Some of your scores need to be reversed. Reversed scoring is used in psychometrics to gather more accurate results. In order to help you with reverse scoring, the original score column is blacked out on your scoring sheet. Instead, reverse your score and record it in the reverse score column. For example, if your original score was a 1, change it to a 5. (1=5, 2=4, 3=3, 4=2, 5=1)

| Q # | Original Score | Reversed Score | Total | Category |
|-----|----------------|----------------|-------|--|
| 11 | | | / 30 | Non-acceptance of emotional responses. A high score in this category reflects a tendency to have negative secondary emotional responses to one's negative emotions, or non-accepting reactions to one's distress. |
| 12 | | | | |
| 21 | | | | |
| 23 | | | | |
| 25 | | | | |
| 29 | | | | |
| 13 | | | /25 | Difficulty engaging in goal-directed behaviour. A high score in this category represents difficulties concentrating and accomplishing tasks when experiencing negative emotions. A low score indicates maintenance of goal-directed behaviour amidst negative emotion. |
| 18 | | | | |
| 20 | | | | |
| 26 | | | | |
| 33 | | | | |
| 3 | | | /30 | Impulse control difficulties. A high score in this category reflects difficulties remaining in control of one's behaviour when experiencing negative emotions. A low score would indicate better emotional control when experiencing negative emotions. |
| 14 | | | | |
| 19 | | | | |
| 24 | | | | |
| 27 | | | | |
| 32 | | | | |
| 2 | | | /30 | Lack of emotional awareness. A high score in this category indicates an inattention to, and lack of awareness of, emotional responses that one experiences. A low score would indicate higher emotional awareness. |
| 6 | | | | |
| 8 | | | | |
| 10 | | | | |
| 17 | | | | |
| 34 | | | | |
| 15 | | | /40 | Limited access to emotion regulation strategies. A high score in this category is indicative of a belief that there is little that can be done to regulate emotions effectively once an individual is upset. A low score would indicate the belief that one can do something to effectively manage their emotions. |
| 16 | | | | |
| 22 | | | | |
| 28 | | | | |
| 30 | | | | |
| 31 | | | | |
| 35 | | | | |
| 36 | | | | |
| 1 | | | /25 | Lack of emotional clarity. A high score in this category demonstrates the extent to which individuals lack knowledge or understanding about the emotions they are experiencing. A low score would indicate more emotional clarity. |
| 4 | | | | |
| 5 | | | | |
| 7 | | | | |
| 9 | | | | |

Emotion Regulation Strategies

Share with others the strategies you are already using to manage your emotions.

Strategies for accepting emotional responses:

Strategies for maintaining goal-directed behaviour:

Strategies for developing emotional awareness:

Ways to increasing emotion regulation strategies:

Ways to improve emotional clarity:

Mindfulness to Regulate Emotions

Guided Meditation Script

Begin by finding a comfortable position sitting or lying down. Close your eyes and feel your body supported by the earth/chair beneath you. Your only job for the next ten minutes is to listen to the sound of my voice.

As we go through this guided imagery, you may have a variety of sensations arise within you. You may feel restless and have a desire to move around. You may feel emotional. You may feel peaceful and relaxed. You may become distracted by your thoughts or self-analysis. You may want it to rush through it. All of these responses are normal and in no way a sign that you are doing anything wrong. I urge you to just allow whatever comes up into your awareness to float by like a cloud. You might notice it for a few moments, and then simply let it go. Let it pass by your awareness with ease.

Lets begin by focusing on your breathing. It is fast? Slow? There is no need to change it, simply notice it. If you'd like to change how you're breathing, that is okay too. You will find that from time to time your mind will wander off into thoughts. When you notice that your attention is no longer here and no longer with your breathing, without judging yourself bring your attention back to your breathing and aim to be fully conscious of the duration of each breath from moment to moment. Every time you find your mind wandering off, gently bringing it back to the present, back to the moment-to-moment observing of the flow of your breathing. Use your breath as an anchor to focus your attention, to bring you back to the present whenever you notice that your mind is becoming absorbed or reactive. Use your breath to help you tune into a state of relaxed awareness and stillness.

Notice if you are holding tension anywhere in your body. Again, allow the chair/floor to completely support you as you sink deeper into it. You have nothing to worry about right now. You are safe.

It is a bright, warm afternoon. The sun is radiating warmth and comfort as it shines boldly. The sky is crystal clear without a cloud in sight. Up ahead you see a beach. You start walking towards it and the grains of sand shine from the sunlight and warm the soles beneath your feet. The sound of the waves beating against the shore echoes in the air.

You feel the warm, light breeze brush against your faces as you walk onward. Far off in the distance, you can hear the cries of sea gulls. You watch them glide through the sky, swoop down into the sea, and then fly off once again.

You begin walking slowly toward the water. You smell the air. It is salty and crisp. You breath in deeply again, smelling the ocean. Take a few more steps on the beach. You are by the edge of the water, and can see the waves coming in and out. It is inviting you to step in. You inch forward, so the waves can kiss your toes. It is cool and refreshing. You watch the waves come in and out, as you soak in this moment of tranquility.

You decide to continue walking along the shore, feeling each foot sink slightly into the wet sand, leaving footprints behind you that are washed away by the waves. You can hear the wind gently dance past your ears. You can see trees ahead, swaying with the breeze.

As you walk further along the shore, you decide to rest. You sit down on a mound of pure white sand and gaze out at the sea, staring intently at the rhythmic, methodical motion of the waves rolling into shore.

Each wave breaks against the coast, rising slowly upward along the beach. The wave gently retreats back out to sea, only to be replaced by another wave that crashes against the shore...working its way up the beach...then slowly retreating back out to sea. With each motion of the wave as it glides in and then out, you find you feel more and more relaxed. The sound creates a sense of calmness.

As you stare off into the distance, you see that the sun is beginning to sink into the horizon. Brilliant colors of red...orange... pink and yellow... begin to peak through the clouds while the sunsets, sinking down into the horizon.

You take a minute to notice everything around you. The beating of the waves, the smell of the sea, the cries of the gulls, the beauty of the sky and warmth against your body. You feeling very calm, refreshed, and relaxed. As you rest in the sand, you close your eyes and sink into the warmth of the earth. You stay here for a minute and begin to forget where you are.

As you breathe in, you notice the sound of the ocean once again. You can hear the waves rolling in... and out... you can feel the warmth of the sun on your face. You take a deep breath in and exhale. You stand up and walk back in the direction you came from. With each step, you begin to bring yourself back into your body. The sound of the gulls and the waves gliding onto the shore become softer and softer. As you look off into the horizon, you can see the ocean disappearing into the distance. You leave this oasis knowing you can come back to this place as often as you like.

Now, you notice yourself sitting in your chair/laying on the floor, and you begin to slowly wiggle your fingertips. Gently feeling the sensations come back into your arms and legs. You return to this room and when you are ready, you can open your eyes.

Using Thoughts to Regulate Emotions

The Tricks Our Minds Play on Us (Cognitive Distortions)

All or nothing thinking: Extreme interpretations. You see things in black-and-white categories. For example, if your performance falls short of perfect you see yourself as a total failure. You often use words like “always” or “never” to describe your experiences.

Overgeneralization: You make broad conclusions from limited evidence/ see a single event as representative of the whole. E.g. one negative event is seen as an ongoing pattern of defeat. **Disqualifying the positive:** you reject positive experiences and insist that they “don’t count” for some reason or other. In this way, you can maintain a negative belief that is contradicted by your everyday experiences.

Jumping to conclusions (fortune telling): You make interpretations even though there are no definite facts that support your conclusion. You feel convinced your conclusion is an already-established fact.

Mind reading: You arbitrarily conclude that someone is reacting to you, and you don’t bother to check this out with them.

Magnification (catastrophizing) or minimization: You exaggerate the importance of things (such as your goof-up or an achievement), or you inappropriately shrink things until they appear tiny (your good qualities or another’s good qualities). Catastrophizing is sometimes referred to as worrying about the “worst-case-scenario”

Emotional reasoning: You assume that your emotions reflect the way things really are; “I feel it, therefore it must be true”. E.g. I feel like she doesn’t like me, therefore she doesn’t like me.

Should statements: Pre-occupation with the way people “should” behave. You try to motivate yourself with should and shouldn’t statements. For example, I should go to her birthday, he should know better than to say that, she shouldn’t have acted that way.

Labeling and mislabeling: instead of describing your error, you attach a negative label to yourself (e.g. I am dumb). Labeling often involved describing an event with language that is highly colored or emotionally loaded.

Personalization: you see yourself as the cause of some negative external event, which in fact you are not responsible for.

Blaming: holding other people responsible for your personal situation or emotional distress.

Burns, D. (1989). *The feeling good handbook*. New York, NY: William Morrow & Company

Self Talk to Regulate Emotions

The Countering Method

Step 1: Detect and reflect on negative self-talk

- How often does your negative self-talk occur?
- What types of situations bring about your negative self-talk?
- Which cognitive distortions are you aware of that are underlying your negative self-talk? (Come up with 3 or 4 negative self-talk statements)
- What number on your SUDS do these negative self-talk statements cause? (See below for SUDS instructions)

Step 2: Explore the themes among the statements

- What purpose does the negative self-talk serve?
- What does this thought help you do or feel?
- What beliefs about yourself are evident through your self-talk?

Step 3: Develop counters or self-statements that are

- a) Incompatible with the negative thought
- b) Consistent with your positive beliefs about yourself (so they are believable statements)
- c) And in the same *mode* as the statement being challenged (e.g. images are counteracted with images, thoughts with thoughts, emotions with emotions)

Re-assess your level of distress using the SUDS.

Subjective Units of Distress Scale (SUDS)

Think of the most distressed you've ever been in your life, and assign it to the number 100.

Then think of the most calm you've ever been – no distress at all – and assign that state to the number 0.

Now you have a scale to assess your current state of distress.

At every moment of your waking life you will be somewhere between 0 and 100.

Where are you on your scale of 0-100 now?

Erford, B. T. (2015). *40 techniques every counselor should know (2nd ed.)*. Upper Saddle River, NJ: Merrill Pearson Education Inc.

Examining Your Emotional Experiences

Questions for Self-Reflection

1. What are you feeling/ sensing in your body right now?
2. Is this emotion familiar?
3. How often do you feel this way?
4. When does this emotion typically occur?
5. Does the feeling you are experiencing right now have a name? If not, is it similar to anything?
6. What triggered this emotion to occur?
7. How do you typically express this emotion?
8. How do others typically express this emotion?
9. How will others know you are feeling (emotion)?
10. Can others accurately sense what emotions you are experiencing right now?
11. Is it better to keep this emotion to yourself or to share it with others (considering you context, situation, past experiences, etc.)?
12. Is the emotion you are feeling positive or negative? How do you know?
13. How intense is this emotion?
14. In what ways are you managing this emotion? How well are your strategies working?
15. When others experience this emotion, what do they typically do?
16. If you were to be able to ask someone for exactly what you needed right now to manage this emotion better, what would you ask for?
17. What other emotions are you experiencing in response to your original emotion?
18. What sorts of ideas have about the emotion you are experiencing right now?
19. Are you finding this emotion easy or difficult to express? Why?
20. Do you imagine you may feel this emotion again in the future?

Session One Homework

Seeking Feedback

Preparation: Please seek out three different people and ask for feedback about your relationships. One of these people will be someone you share in intimate relationship with (e.g. parent, spouse, partner, sibling, child, best friend, etc.), one will be an acquaintance (e.g. someone you know from a course you took, a friend of a friend, a distant relative, etc.), and one of them will be someone you have a professional relationship with (e.g. peer, professor, boss/manager, supervisor, teacher, colleague, etc.).

Open the conversation with something along the lines of...

"I have been asked to gather some feedback about how I am in relationships and was hoping you would be willing to answer some questions for me? I am aware that you may say things that might be hard for me to hear, but please be as honest as you can. It is important for me to develop skills in asking for and receiving feedback because it will make me a better teacher (and spouse, and friend, and employee, and boss, and person in general 😊)."

Please inform the person who will be giving you feedback that you both have the right to say, "Yes", "No", "Pass", and "Stop". The point of this exercise is not for you to gain as much information as possible; rather it is to practice staying emotionally regulated during interpersonal interactions. When you ask the questions listed below, you are aiming to practice staying in regulated energy while you listen to the answers.

Questions:

1. Do you feel you can be honest with me? Why or why not?
2. Think about a time when I reacted poorly – what did I do? What can I do differently next time?
3. Think about a time when I responses well in the past – what did I do? What was helpful/good about it?
4. What do you notice happens when you try to contradict me? How do I respond?
5. How well do I communicate what I need from you?
6. Am I approachable? How doe you think I make others feel when I am around them?
7. Am I available (emotionally, mentally, physically, spiritually...) to you? How so?
8. What is one thing I do that you really appreciate/ admire?
9. What is one thing I do that you would like me to change?

Tips for staying in regulated energy while receiving feedback:

- Notice your breathing – don't try to change it, just notice it.
- If you find yourself going into dysregulated energy (freeze, fight, flee, freak out), please take a break such as pausing the activity entirely, or taking a few seconds to return back to your regulated energy (e.g. by thinking of something positive).
- Have something to occupy your hands/ eyesight during the conversation (e.g. fidget toy, doodle/sketch book, sparkle jar, play dough, coffee/tea mug)
- Depending on your level of comfort, you may choose to have the conversation in a private place (e.g. your home) or a public place (e.g. restaurant). Different people need different environments to feel "safe"; think about what you will need to feel calm/safe during this activity.

Post-Activity Processing: (We will discuss these questions in session two)

1. Did you feel uncomfortable in this process? How did you know?
2. How do you manage when you are uncomfortable or in dysregulated energy?
3. What were you aware of (thoughts, body sensations, actions, emotions) when you received feedback that you disagreed with?
4. What were you aware of (thoughts, body sensations, actions, emotions) when you received feedback that you agreed with?

A Workbook to Improve Teacher Mental Through Self-Awareness

Workshop Activities

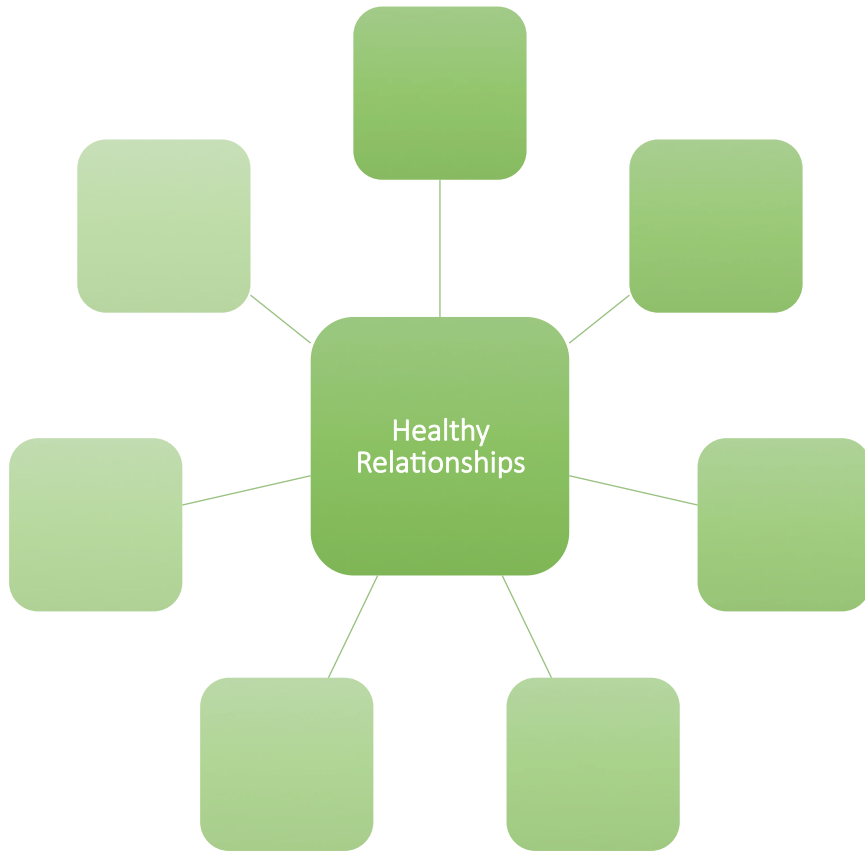


Part Two: Developing Interpersonal Awareness

*Interpersonal Patterns
Boundaries
Stress-management and Self-care*

Healthy Interpersonal Relationships

Please use the space below to create a mind map



The Drama Triangle

A tool for examining interpersonal patterns in relationships

The Drama Triangle is a model of dysfunctional social interactions created by psychotherapist Stephen Karmpan. Each point on the triangle represents a common and ineffective response to conflict; a response that is more likely to prolong disharmony than end it.



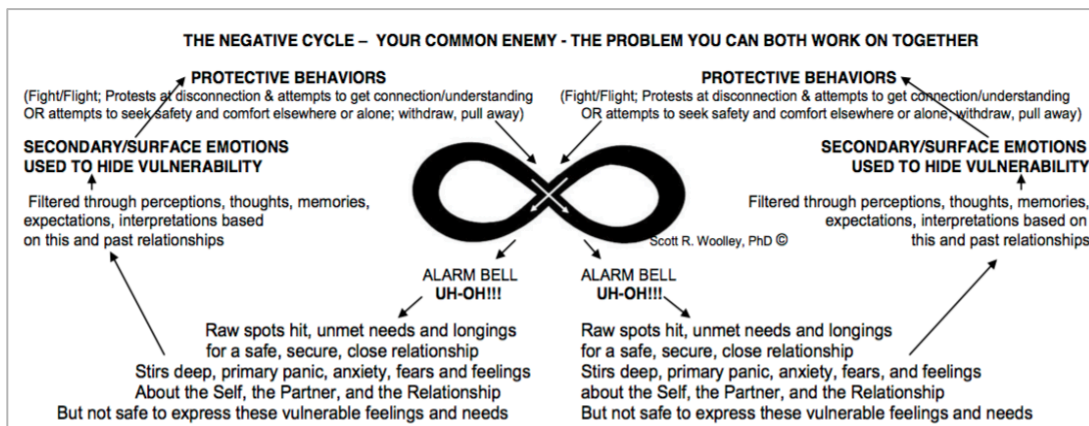
Participants in a drama triangle create misery for themselves and others. The goal is to transform this lose-lose situation and create a more positive outcome for everyone. Each player in this particular mind game begins by assuming one of three archetypal roles: Victim, Rescuer, or Persecutor

- **Victims** are helpless and hopeless in their situations. They deny responsibility for their circumstances and deny possession of the power to change them. They do less than their “fair share”, won't take a stand, and act overly sensitive, wanting kid glove treatment and pretend incompetence and impotence.
- **Rescuers** are constantly applying short-term repairs to a victim's problems, while neglecting their own needs. They are often working hard to “help” other people. They are harried, tired, and often have physical complaints. They are usually angry underneath and may be a loud or quiet martyr in style. They often use guilt to get their way.
- **Persecutors** blame victims and criticize enabling behaviour of rescuers, without providing guidance, assistance, or a solution to the underlying problem. They are critical and good at finding fault. They often feel inadequate underneath. They control with threats, order, and rigidity. They can be loud or quiet in style and sometimes engage in bullying behaviour.

Players sometimes alternate or “switch” roles during the course of a game. For example, a rescuer pushed too far by a persecutor will switch to the role of victim or counter-persecutor. Victims depend on a saviour, rescuers yearn for a “damsel in distress”, and persecutors need a scapegoat. While a healthy person will perform each other these roles occasionally, pathological role-players actively avoid leaving the familiar and comfortable environment of the game. Thus, if no recent misfortune has befallen them or their loved ones, they will inadvertently create one. In each case, the drama triangle is an instrument of relational destruction. The only way to “escape” the drama triangle is to function rationally and not participate in the game.

Unmet Attachment Needs

A Negative Cycle in Relationships



We all have needs to feel loved, cared for, treasured; to feel our bond is safe and secure (attachment needs and longings) from cradle to grave. When our needs aren't met by the person whose love we need, some try again gently, some fight to get them met (complaint, criticism, demands, pleading, control), and some inhibit or try to turn off the need (avoid conflict, withdraw, pull away, addictions, or turn to others for understanding and comfort). We may have begun to develop these ways of coping early in life. The brain has built neural pathways, reinforced over time, that lead us to cope in these ways automatically.

If it feels like our partner's behavior threatens the safety or security of our bond → Our brain's alarm bell rings, based on our perceptions, thoughts, memories, and expectations from this relationship and relationships with parents and others → Our rapid filter leads us to feel fear about the relationship and/or ourselves in this relationship. If we can't vulnerably, with trust, tell our partner our deep, primary emotions (fear of being unlovable, rejected, seen as inadequate; fear of losing the relationship, being abandoned; etc.) and ask for what we need (soothing, reassurance of being loved, comfort, validation, understanding, safety and security), and/or our partner can't or won't meet these needs → Our hearts will beat faster, adrenaline will flood our system, we'll lose blood from our pre-frontal cortex (thus lose good judgment, develop tunnel vision) and we'll move into self-preservation, not couple-preservation, and into fight or flight (maybe freeze first), reacting from secondary emotions (anger, frustration, irritation, disdain, contempt, disappointment, etc.) with protective behaviors (numbing, fighting, blaming/criticizing, defending, withdrawing, avoiding conflict, addictions, etc.) to avoid expressing vulnerability and longings → That will sound the alarm bell in our partner, → Who will then use his/her rapid filter, bypass primary emotions and needs, fill with adrenaline, lose blood from the pre-frontal cortex, and → React from his/her secondary emotions with his/her protective behaviors → Our alarm bell rings again → And on and on.

Over time, the pattern becomes rigid and happens more and more quickly. Couples feel stuck in these repeating cycles of isolation, disconnection, and pain. Learn how each person affects the other (often unwittingly). Providing safety and security for your partner, even though you are upset, will build new neural pathways leading to these behaviors and reactions that bring calm to your partner, rather than push them to protect themselves. These positive cycles will lead to mutual connection, safety, security, trust and comfort. Together, fight the real problem: the automatic negative cycles.

Shore, K. (2011). The negative cycle: Your common enemy – the problem you can both work on together. Retrieved from <http://qualiacounselling.com/wp-content/uploads/2016/05/The-Cycle.pdf>

Invisibility:

This involves you pulling in or over-controlling so that others, even yourself, never know how you are really feeling or what you are really thinking. Your goal is not to be seen or heard so that your boundaries are not violated.

Aloofness or Shyness:

This is a result of your insecurity from real or perceived experiences of being ignored or rejected in the past. This feels like a violation of your efforts to expand or stretch your boundaries to include others in your space. Once rejected, you take the defensive posture to reject others before they reject you. This keeps you inward and unwilling or fearful of opening up your space to others.

Cold and Distant:

This builds walls or barriers to insure that others do not permeate or invade your emotional or physical space. This too can be a defense, due to previous hurt and pain, from being violated, hurt, ignored or rejected. This stance is your declaration that "I've drawn the line over which I dare you to cross." It is a way to keep others out and put them off.

Smothering:

This results when another is overly solicitous of your needs and interests. This cloying interest is overly intrusive into your emotional and physical space. It can be so overwhelming that you feel like you are being strangled, held too tightly and lack freedom to breathe on your own. You feel violated, used and overwhelmed.

Lack of Privacy:

This is present when it seems to you that nothing you think, feel, or do is your own business. You are expected to report to others in your family or group all details and content of your feelings, reactions, opinions, relationships and dealings with the outside world. You begin to feel that nothing you experience can be kept in the privacy of your own domain. You begin to believe you do not have a private domain or your own space into which you can escape.

Caregiving Questionnaire

This self-report measure was included to give you insight into your patterns of caring for others.

For each statement, write the number that indicates how descriptive the statement is of you. Write the number in the space provided, using the following rating scale:

- | 1 | 2 | 3 | 4 | 5 | 6 |
|------------|--------|-----------|-------|------------|---------------|
| Not at all | Rarely | Sometimes | Often | Very often | Almost always |
-
- ___ 1. I sometimes push my partner away when s/he reaches out for a needed hug or kiss.
 - ___ 2. I can always tell when my partner needs comforting, even when s/he doesn't ask for it.
 - ___ 3. I always respect my partner's ability to make his/her own decisions and solve his/her own problems.
 - ___ 4. When my partner cries or is distressed, my first impulse is to hold or touch him/her.
 - ___ 5. I help my partner without becoming overinvolved in his/her problems.
 - ___ 6. Too often, I don't realize when my partner is upset or worried about something.
 - ___ 7. When my partner is troubled or upset, I move closer to provide support and comfort.
 - ___ 8. I'm good at knowing when my partner needs my help or support and when s/he would rather handle things alone.
 - ___ 9. I feel comfortable holding my partner when s/he needs physical signs of support and reassurance.
 - ___ 10. I'm not very good at "tuning in" to my partner's needs and feelings.
 - ___ 11. I tend to get overinvolved in my partner's problems and difficulties.
 - ___ 12. I don't like it when my partner is needy and clings to me.
 - ___ 13. I often end up telling my partner what to do when s/he is trying to make a decision.
 - ___ 14. I sometimes miss the subtle signs that show how my partner is feeling.
 - ___ 15. When necessary I can say "no" to my partner's requests for help without feeling guilty.
 - ___ 16. I tend to be too domineering when trying to help my partner.
 - ___ 17. When it's important, I take care of my own needs before I try to take care of my partner's.
 - ___ 18. I am very attentive to my partner's nonverbal signals for help and support.
 - ___ 19. I can easily keep myself from becoming overly concerned about or overly protective of my partner.
 - ___ 20. I'm very good about recognizing my partner's needs and feelings, even when they're different from my own.
 - ___ 21. I can help my partner work out his/her problems without "taking control."
 - ___ 22. I sometimes draw away from my partner's attempts to get a reassuring hug from me.
 - ___ 23. I am always supportive of my partner's *own efforts* to solve his/her problems.
 - ___ 24. I tend to take on my partner's problems—and then feel burdened by them.
 - ___ 25. When my partner seems to want or need a hug, I'm glad to provide it.
 - ___ 26. When I help my partner with something, I tend to want to do things "my way."
 - ___ 27. I frequently get too "wrapped up" in my partner's problems and needs.
 - ___ 28. I sometimes "miss" or "misread" my partner's signals for help and understanding.
 - ___ 29. When my partner is crying or emotionally upset, I sometimes feel like withdrawing.

- ___ 30. When my partner tells me about a problem, I sometimes go too far in criticizing his/her own attempts to deal with it.
- ___ 31. I create problems by taking on my partner's troubles as if they were my own
- ___ 32. When helping my partner solve a problem, I am much more "cooperative" than "controlling."

Total your scores on the next page

Some of your scores need to be reversed. Reversed scoring is used in psychometrics to gather more accurate results. In order to help you with reverse scoring, the original score column is blacked out on your scoring sheet. Instead, reverse your score and record it in the reverse score column. For example, if your original score was a 1, change it to a 6.

| Question # | Original Score | Reversed Score | Total Score | Scale |
|------------|----------------|----------------|--|---|
| 1 | | | Add up all your scores in this section to get a total. | The <i>Proximity Maintenance Score</i> : Higher scores reflect a stronger tendency to approach and comfort a relationship partner in times of need. |
| 4 | | | | |
| 7 | | | | |
| 9 | | | | |
| 12 | | | | |
| 22 | | | | |
| 25 | | | | |
| 29 | | | | |
| 2 | | | Add up all your scores in this section to get a total. | The <i>Sensitivity Score</i> : Higher scores reflect greater sensitivity to a relationship partner's needs. |
| 6 | | | | |
| 8 | | | | |
| 10 | | | | |
| 14 | | | | |
| 18 | | | | |
| 20 | | | | |
| 28 | | | | |
| 3 | | | Add up all your scores in this section to get a total. | The <i>Controlling Caregiving score</i> : Higher scores reflect a more controlling, domineering approach to providing care or assistance. |
| 13 | | | | |
| 16 | | | | |
| 21 | | | | |
| 23 | | | | |
| 26 | | | | |
| 30 | | | | |
| 32 | | | | |
| 5 | | | Add up all your scores in this section to get a total. | The <i>Compulsive Caregiving score</i> : Higher scores reflect greater over involvement in a partner's problem-solving efforts. |
| 11 | | | | |
| 15 | | | | |
| 17 | | | | |
| 19 | | | | |
| 24 | | | | |
| 27 | | | | |
| 31 | | | | |

Mikulincer, M. & Shaver, P. R. (2007). *Attachment in adulthood: Structure, dynamic and change*. New York, NY: Guilford Press

PROQOL

Compassion Satisfaction and Compassion Fatigue Survey

PROFESSIONAL QUALITY OF LIFE SCALE (PROQOL)

COMPASSION SATISFACTION AND COMPASSION FATIGUE (PROQOL) VERSION 5 (2009)

When you *[help]* people you have direct contact with their lives. As you may have found, your compassion for those you *[help]* can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative, as a *[helper]*. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the *last 30 days*.

| | 1=Never | 2=Rarely | 3=Sometimes | 4=Often | 5=Very Often |
|-----------|---------|----------|-------------|---------|--------------|
| _____ 1. | | | | | |
| _____ 2. | | | | | |
| _____ 3. | | | | | |
| _____ 4. | | | | | |
| _____ 5. | | | | | |
| _____ 6. | | | | | |
| _____ 7. | | | | | |
| _____ 8. | | | | | |
| _____ 9. | | | | | |
| _____ 10. | | | | | |
| _____ 11. | | | | | |
| _____ 12. | | | | | |
| _____ 13. | | | | | |
| _____ 14. | | | | | |
| _____ 15. | | | | | |
| _____ 16. | | | | | |
| _____ 17. | | | | | |
| _____ 18. | | | | | |
| _____ 19. | | | | | |
| _____ 20. | | | | | |
| _____ 21. | | | | | |
| _____ 22. | | | | | |
| _____ 23. | | | | | |
| _____ 24. | | | | | |
| _____ 25. | | | | | |
| _____ 26. | | | | | |
| _____ 27. | | | | | |
| _____ 28. | | | | | |
| _____ 29. | | | | | |
| _____ 30. | | | | | |

YOUR SCORES ON THE PROQOL: PROFESSIONAL QUALITY OF LIFE SCREENING

Based on your responses, place your personal scores below. If you have any concerns, you should discuss them with a physical or mental health care professional.

Compassion Satisfaction _____

Compassion satisfaction is about the pleasure you derive from being able to do your work well. For example, you may feel like it is a pleasure to help others through your work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society. Higher scores on this scale represent a greater satisfaction related to your ability to be an effective caregiver in your job.

The average score is 50 (SD 10; alpha scale reliability .88). About 25% of people score higher than 57 and about 25% of people score below 43. If you are in the higher range, you probably derive a good deal of professional satisfaction from your position. If your scores are below 40, you may either find problems with your job, or there may be some other reason—for example, you might derive your satisfaction from activities other than your job.

Burnout _____

Most people have an intuitive idea of what burnout is. From the research perspective, burnout is one of the elements of Compassion Fatigue (CF). It is associated with feelings of hopelessness and difficulties in dealing with work or in doing your job effectively. These negative feelings usually have a gradual onset. They can reflect the feeling that your efforts make no difference, or they can be associated with a very high workload or a non-supportive work environment. Higher scores on this scale mean that you are at higher risk for burnout.

The average score on the burnout scale is 50 (SD 10; alpha scale reliability .75). About 25% of people score above 57 and about 25% of people score below 43. If your score is below 43, this probably reflects positive feelings about your ability to be effective in your work. If you score above 57 you may wish to think about what at work makes you feel like you are not effective in your position. Your score may reflect your mood; perhaps you were having a “bad day” or are in need of some time off. If the high score persists or if it is reflective of other worries, it may be a cause for concern.

Secondary Traumatic Stress _____

The second component of Compassion Fatigue (CF) is secondary traumatic stress (STS). It is about your work related, secondary exposure to extremely or traumatically stressful events. Developing problems due to exposure to other's trauma is somewhat rare but does happen to many people who care for those who have experienced extremely or traumatically stressful events. For example, you may repeatedly hear stories about the traumatic things that happen to other people, commonly called Vicarious Traumatization. If your work puts you directly in the path of danger, for example, field work in a war or area of civil violence, this is not secondary exposure; your exposure is primary. However, if you are exposed to others' traumatic events as a result of your work, for example, as a therapist or an emergency worker, this is secondary exposure. The symptoms of STS are usually rapid in onset and associated with a particular event. They may include being afraid, having difficulty sleeping, having images of the upsetting event pop into your mind, or avoiding things that remind you of the event.

The average score on this scale is 50 (SD 10; alpha scale reliability .81). About 25% of people score below 43 and about 25% of people score above 57. If your score is above 57, you may want to take some time to think about what at work may be frightening to you or if there is some other reason for the elevated score. While higher scores do not mean that you do have a problem, they are an indication that you may want to examine how you feel about your work and your work environment. You may wish to discuss this with your supervisor, a colleague, or a health care professional.

WHAT IS MY SCORE AND WHAT DOES IT MEAN?

In this section, you will score your test so you understand the interpretation for you. To find your score on **each set** total the questions listed on the left and then find your score in the table on the right of the section.

Compassion Satisfaction Scale

Copy your rating on each of these questions on to this table and add them up. When you have added them up you can find your score on the table to the right.

3. _____
6. _____
12. _____
16. _____
18. _____
20. _____
22. _____
24. _____
27. _____
30. _____

Total: _____

| The sum of my Compassion Satisfaction questions is | So My Score Equals | And my Compassion Satisfaction level is |
|--|--------------------|---|
| 22 or less | 43 or less | Low |
| Between 23 and 41 | Around 50 | Average |
| 42 or more | 57 or more | High |

Burnout Scale

On the burnout scale you will need to take an extra step. Starred items are "reverse scored." If you scored the item 1, write a 5 beside it. The reason we ask you to reverse the scores is because scientifically the measure works better when these questions are asked in a positive way though they can tell us more about their negative form. For example, question 1. "I am happy" tells us more about

- *1. _____ = _____
*4. _____ = _____
8. _____
10. _____
*15. _____ = _____
*17. _____ = _____
19. _____
21. _____
26. _____
*29. _____ = _____

Total: _____

| You Wrote | Change to |
|-----------|-----------|
| | 5 |
| 2 | 4 |
| 3 | 3 |
| 4 | 2 |
| 5 | 1 |

the effects of helping when you are *not* happy so you reverse the score

| The sum of my Burnout Questions is | So my score equals | And my Burnout level is |
|------------------------------------|--------------------|-------------------------|
| 22 or less | 43 or less | Low |
| Between 23 and 41 | Around 50 | Average |
| 42 or more | 57 or more | High |

Secondary Traumatic Stress Scale

Just like you did on Compassion Satisfaction, copy your rating on each of these questions on to this table and add them up. When you have added them up you can find your score on the table to the right.

2. _____
5. _____
7. _____
9. _____
11. _____
13. _____
14. _____
23. _____
25. _____
28. _____

Total: _____

| The sum of my Secondary Trauma questions is | So My Score Equals | And my Secondary Traumatic Stress level is |
|---|--------------------|--|
| 22 or less | 43 or less | Low |
| Between 23 and 41 | Around 50 | Average |
| 42 or more | 57 or more | High |

Basic Self-Care Needs: Checklist

Please use this checklist as an indicator of how you are doing right now. Remember, there is always room for improvement.

| Some Self-Care Needs | Y | N | So- So | If you want a change, what will you need to do? |
|--|---|---|-----------|---|
| Within a week, I usually get enough sleep | | | | |
| Do I usually eat something fresh and unprocessed everyday? | | | | |
| Do I allow time in my week to touch nature, even briefly? | | | | |
| Do I get enough sunlight, especially in wintertime? | | | | |
| Do I see my medical practitioner at least once a year? | | | | |
| Do I get regular sexual thrills? | | | | |
| Do I get enough <i>fun</i> exercise in a week? | | | | |
| Am I hugged or touched amply in a week? | | | | |
| Do I make time to see my friends – quality time? | | | | |
| Do I nurture my friendships on a regular basis? | | | | |
| Do I have friends I can call when I am feeling down – friends who listen without trying to fix or “steal” my airtime? | | | | |
| Can I honestly ask for help when I need it? | | | | |
| Do I regularly release draining emotions in a healthy manner? | | | | |
| Do I regularly forgive myself when I make a mistake? | | | | |
| Do I tend to forgive others, who are close to me, when they make a mistake (vs. hanging onto their mistake for payback)? | | | | |
| Within a week, do I usually do at least 3 things that give me a sense of fulfilment, joy, and purpose – outside my job? | | | | |
| Do I create and/or notice an abundant beauty in my life? | | | | |
| Do I stop and think about what I am grateful for – everyday? | | | | |
| Within a week, do I usually make time for mindful solitude? | | | | |
| Each week, am I getting the amount of spiritual nourishment I need? | | | | |
| Do I prevent work/office tasks from bleeding into my home and family time? | | | | |
| Do I care for my body in healthy ways – aside from exercising? | | | | |
| Is my personal life, for the most part, healthy – rewarding? | | | | |
| Within the last 14 days, have I laughed so hard that I nearly cried? | | | | |

Adapted by Dawn McBride (2009) from the Woman’s Comfort Book (Louden, 1992).

Reference: Loudon, J. (1992). *Woman’s Comfort Book*. Toronto, ON: HarperCollins Publishers

A Good Teacher Is Well Fed and Well Loved

“This excerpt serves as the foundation of my career”

- Laura Doney

(Please note that this excerpt is from an article that was originally written for therapists. I have adapted it to apply to teachers by replacing the words therapist, client, and therapy session with the words teacher, student, and classroom, respectively. The data collected in the study that informed the original article was gathered in relation to therapy, yet the core message is extremely significant for teachers too; in fact, it served as the foundation for this entire Workshop.)

Master [teachers] expressed a good deal of satisfaction in helping others. However, rather than acting out of completely altruistic motives, the [teachers] acknowledged that they entered this field to meet their personal need to be useful or to accrue other personal benefits in their professional work. One master [teacher] succinctly summed up the personal satisfactions of [teaching]: “Where else would I ever have this kind of intimate contact with such interesting people? I feel like I am doing a useful job.”

Nonmaleficence.

Not only did master [teachers] value helping others, they also were aware of the tremendous potential to do damage in the context of the [student-teacher] relationship. They seemed mindful of the ways they could potentially harm their [students] and had developed measures to minimize this risk. For example, one master [teacher] said,

I think one of the ways [teaching] goes awry is that the [teacher] starts to use the [student] for their own emotional sustenance...regulation of the [teacher's] self-esteem, all those sorts of things. I think that to be a good therapist, you must be well fed and well loved.

Self-awareness.

Master [teachers] expressed a deep commitment to awareness of their own life issues. Their self-awareness seemed to centre around two issues: (a) understanding and fulfilling their personal emotional and physical needs; and (b) awareness of their own unfinished business, personal conflicts, defenses, and vulnerabilities. More importantly, the master [teachers] were well aware of the potential for these issues to intrude upon the [classroom environment]. Seemingly paramount to the [teachers] was an awareness of personal emotional needs and fulfilling those needs through various activities including travel, exercise, spiritual practice, and contacts with colleagues, friends, and family.

For example, one master [teacher] said, “When I think about [teachers] who've gotten themselves in difficulty, it's often because there hasn't been self-care, and there's been a looking either to the [student] to provide something for them or else not really being available for all the [student] might need or want to do as a part of their [educational journey]”.

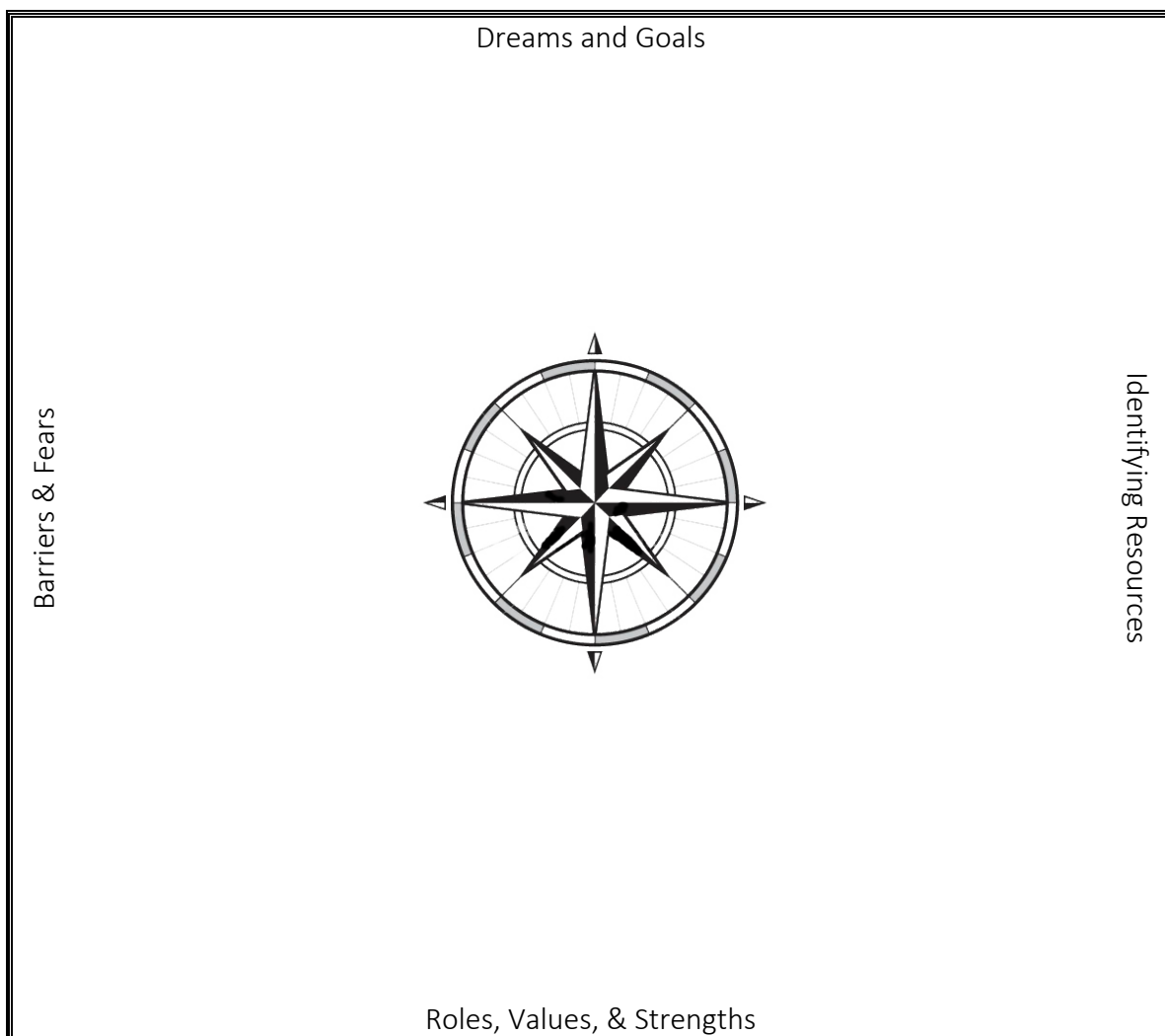
The ability to meet the [student's] needs also became compromised when [teachers] did not obtain appropriate resources to meet their own personal needs. One [teacher] said, “I think that self-awareness is really the key to helping you understand if you're getting in the way or not getting in the way, of facilitating, [the educational journey]”

An awareness of personal problems, biases, and conflicts was vital to master [teachers] in order to be [educationally] effective. ... "If I'm sitting here and you're a [student] and I'm worried about you liking me, I'm worried about you thinking I'm competent, I'm worried about you not getting mad at me – any of those kinds of unfinished issues inside of me makes me powerless to help, makes me very self-centered, and isn't going to do much for you."

Jennings, L., Sovereign, A., Bottorff, N., Musell, M., & Vye, C. (2005). Nine ethical values of master therapists. *Journal of Mental Health Counseling, 27*(1), 32-47.

Setting Your Compass

A guide to help you in your future endeavors



Appendix C

Facilitating a Workshop

Facilitating a Workshop to Improve Teacher Mental Through Self-Awareness

A Guidebook



Welcome Letter

Hello!

Welcome to your role as a facilitator of the Workshop for Improving Teacher Mental Health Through Self-Awareness. Being a facilitator of this workshop is a unique opportunity to influence adult learners as they navigate their careers as teachers. Perhaps the most important aspect of being a facilitator is that you are not simply delivering information; rather, you are providing a learning *experience*. Every aspect of this workshop was designed to be personally significant and engaging, involve reflection and discussion, and engage people's senses, feelings, and personalities.

Imperative to this workshop is the facilitator's ability to generate trust, openness and safety for each participant. The topics issued and discussed here are sensitive, personal, and require a certain level of vulnerability from participants. Therefore, please be compassionate, gentle, and respectful in every interaction during your role as facilitator.

The inherent power differential that is present between facilitator and participant is very important to consider, as it can come at the expense of the intimate personal experiences the participants are designed to have. As a facilitator of this workshop, you are required to self-disclose your personal experiences of stress, coping, and navigating interpersonal relationships in order to normalize and model healthy vulnerability.

As a facilitator, you have a responsibility to provide participants with relevant and accurate information. The information outlined in this manual is based off research done through an academic literature review; the majority of information was gathered from peer-reviewed journals, however news articles, magazine articles, and videos were also utilized. Considering that new research is constantly being published, the information in this manual will eventually become out-dated. As a facilitator, it is your responsibility to critically evaluate the information you are delivering and ensure you are providing reliable and up-to-date information.

Finally, please accept this invitation to contact me regarding any questions about the workshop, the workbook, or the facilitation process. I hold this work close to my heart and will make myself available for questions and consultation to anyone who is interested in facilitating it.
Sincerely,

Laura Doney

Introduction to the Manual

A Workshop for Improving Teacher Mental Health Through Self-Awareness is designed to be delivered in two, three-hour sessions (ideally on two separate days in close succession to one another). Therefore, this manual is organized into two sections, with one section corresponding to each session.

This manual is a companion to the literature review of this project; facilitators are required to read the literature review prior to facilitating. Ideally, the facilitator will have also conducted his or her own general research on the topic of teacher mental health. Facilitators are required to have post-secondary education in both psychology and education, and a Master's Degree in Counselling (or an equivalent).

It is assumed that the facilitator has considerable knowledge on topics of mental health, attachment, stress and coping, burnout, interpersonal relationships, and cognitive behavioural theories. For this reason, Appendix A: *A Workshop to Improve Teacher Mental Health Through Self-Awareness* is considered "bare bones" material. The facilitator is responsible for bringing the Workshop (PowerPoint) to life by adding personal experiences, examples, and additional information such as expanding on the theories, interventions, and strategies used in the workshop. Please do not facilitate this workshop if you simply plan to read the slides as it was not intended to be delivered that way.

This manual includes the following:

- A sample script for introducing the workshop to participants
- A list of the materials and any pre-session preparation required for both sessions
- Detailed instructions for facilitating the activities that are included in Appendix B: *A Workbook to Improve Teacher Mental Health Through Self-Awareness*
- How to contact the author for support with facilitating the Workshop

Introducing the Workshop

A Sample Script

Provide some general information about yourself (education, hobbies, interests, how you came to facilitate this workshop, etc.)

Introduce the *purpose and goals* of the workshop. Below is my personal script for you to serve as an exemplar:

- *Laura's Introduction:* "From my experiences during teaching practicums, my master's level courses and my job as a Family Support Worker, I have come to realize that for any classroom to run successfully the teacher MUST be mentally well. Unfortunately, I believe teachers are not given the tools during their pre-service training or during their careers to develop awareness of their mental health or strategies for managing their mental health. In my opinion, many of the large problems in education today, such as high attrition rates, burnout, boundary violations, and chronic stress, exist because teacher mental health is not emphasised enough or addressed appropriately. My hope is that this lecture provides you with some incentive to take responsibility for your mental health and a few introductory strategies to do so. This workshop was created to influence your knowledge, skills, and attitudes towards mental health. Each sections has a mix of theoretical, practical and philosophical topics and activities that were designed to have you leave here with some tools to improve your mental health and deepen your own self awareness."

Check in with the group and a feel for who is in the room by asking people to raise their hands if they are already teachers, how long they have been teaching for, and educational backgrounds in psychology or social work

Housekeeping items: This is where you obtain verbal "informed consent" from each participant in the workshop. Outline expectations and limits of confidentiality, what they can expect from the workshop, what they expect from you (especially around conflict, intense emotions that come up, or if someone needs to leave the room), and the risks and benefits of participating in this workshop.

- *Confidentiality* – I can guarantee that I will keep your information confidential, but I cannot guarantee that others will. Of course, I ask that you respect your peer's and commit to not talking about anyone else's experiences outside of this room. So, if you choose to share, please keep that in mind.
- *Mental health is a sensitive subject* – if you feel the need to take a break, please feel free to. You are adults, I am trusting you to take care of your own needs as you see fit. Also, please be mindful of your contributions to our discussions and respect the opinions/ experiences of others.
- We are going to be doing *A LOT of self-reflecting* today. This is an uncomfortable process for some people, but I encourage you to be open the experiences you have today and gentle with yourself and your process.

- There is a lot of information for you to learn today and you can expect to feel overwhelmed and tired at the end of class today. We are going to use every single minute of this lecture time I have so please put your phones away, avoid side bar conversations and be on time when you come back from your break. I will start without you if you're not all back.
- *You have a workbook* – it is yours to keep so please write all over it. All the activities we will be doing throughout the lecture are in there.
- In addition to personal reflection activities, I am going to teach you some practical strategies for improving your mental health. There are a couple of therapeutic interventions I am going to demonstrate for you today but it is important to understand that I have received training to provide these interventions and so it would not be appropriate for you to use them with students. *Today is really about you learning about yourself* as opposed to you learning new teaching strategies.

Materials and Preparations

For each session you will need:

- The PowerPoint Presentation (Appendix A: A Workshop for Improving Teacher Mental Health Through Self-Awareness)
- Internet access to play the YouTube videos that are included throughout the presentation (unless you've downloaded them and saved them to your computer)
- A copy of the Workbook for each participant (Appendix B: A Workbook for Improving Teacher Mental Health Through Self-Awareness)
- Your facilitation notes (Appendix C: Facilitating A Workshop for Improving Teacher Mental Health Through Self-Awareness)
- A projector/television to present the PowerPoint Slides
- Whiteboard/chalkboard/flipchart to draw diagrams, record themes from the participants, write down important points, etc.
- Medium sized Post-it Sticky Notes (at least one for each participant)

Preparations

- Read through the entire Final Project – you will need to weave the information outlined in the project into the presentation
- Guide yourself through all the workbook activities so you know what each activity entails and how long it typically takes to complete

Activity Instructions

Step-by-step facilitation of each activity in Appendix B

Why does your mental health Matter?

Instructions: Instruct the participants to discuss the questions included in this activity with a small group. If the participants are seated at tables, the discussion could take place with those at the table. It is recommended that you try to facilitate the activities with discussion components in such a way that allows the most sharing to occur. From my experience, participants prefer to be given an opportunity to talk amongst themselves before sharing with the entire group. As the facilitator, be sure to have your own answers to the questions included in this activity so you can contribute to the discussion and extend the ideas shared by others.

Materials: Workbook and pencil

Tips: Since this is the first activity in the workshop, and it comes right at the beginning, it is important to set a tone of openness and informality. Sharing your own experiences and thoughts related to these questions will hopefully contribute to sharing from others.

Self-Assessment: Attachment Style

Instructions: Instruct the participants to complete the questionnaire. Descriptions of the four main attachment styles have been included in the workbook for participants to review on their own time (do not read the descriptions as part of the workshop).

Materials: Workbook and pencil

Tips: Please explain to the participants that this assessment is a very broad indicator of their individual attachment styles. If participants are interested in gathering a more thorough description of their attachment style, refer them to Daniel Hill's Book: Affect Regulation Theory and invite them to read up on how the original research on attachment styles were done. Most people can self-label their attachment style after reading descriptions of the original research and/or the descriptions of each style (which are included in the workbook as supplementary readings). Complete the assessment yourself prior to facilitating.

Self-Assessment: Emotion Regulation

Instructions: Instruct the participants to complete the questionnaire. After they have completed the questionnaire, invite them to look at the categories that they scored LOW on (a low score indicates that they have some emotion regulation skills/strategies) and reflect on the emotion regulation strategies they are already using. Prepare participants by telling them that after everyone has finished the assessment, they will be discussing their strategies with one another.

Materials: Workbook and pencil

Tips: Some participants struggle with the instructions to reverse their scores. You may have to explain numerous times how to reverse the scores. I have found that it is helpful to write the conversions up on the board (1=5, 2=4, 3=3, 4=2, 5=1). The scoring table has been designed in a way to help the participant know which questions need to have the score reverses and which

ones need the original score. When referring to the scoring sheet (I recommend you look at it now), you will see areas blacked out. The spots that are not blacked out indicate whether the original or reversed score is required. For example, is the participant scored 4 for question 18, the original score would be kept (which is why the reversed score box is blacked out). But, if the participant scored 4 for question 20, the score would need to be reverse (which is why the original score box is blacked out). Complete the assessment yourself prior to facilitating.

Emotion Regulation Strategies

Instructions: The purpose of this activity is to hear from participants what they are already doing well with regard to emotion regulation. This activity is based on the results from the DERS Self-assessment. Invite participants to look at the categories that they scored LOW on relative to their other scores (a low score indicates that they have some emotion regulation skills/strategies) and reflect on the emotion regulation strategies they are already using. For example, if someone scored low (relative to their other scores) on *Lack of Emotional Awareness*, that would indicate they have some skills in emotional awareness. Ask the participants to share their ideas (not their final scores) with one another in small groups first, then with the larger group afterwards. The spaces on this activity page are for participants to record the ideas they hear from others so they leave the workshop with a page full of strategies to regulate emotions.

Materials: Workbook and pencil

Tips: Inform the participants that the DERS was not designed to assess what the person is doing well, but it is important to highlight what they are already doing well. Chances are that there if someone scored very high in one category, another person scored very low. This is an opportunity for everyone to learn from each other. You may have to start the discussion off with a few of your own ideas that you came up with from doing the assessment yourself.

Mindfulness to Regulate Emotions

Instructions: Prepare participants by sharing some general information about mindfulness (from your background experience/readings or from the literature review in the Project). Explain to them that this is an experiential activity and they get to decide to participant or not, or how much they participate. Read aloud the guided meditation included in the workbook, word for word. After you have finished reading the script, check in with participants about their experiences/ reactions/ likes/dislikes.

Materials: Workbook guided meditation script.

Tips: I recommend you scan the room by asking for a show of hands how many people have done a guided meditation before. This practice can be uncomfortable for some people at first. Common reactions are agitation, anxious feelings, emotional releases, and boredom. Please reviewing that participants are responsible for managing themselves during this workshop and that if they need to leave for a break, they can.

Using Thoughts to Regulate Emotions

Instructions: Read through the cognitive distortions that are listed in this activity (you can read through them yourself or invite participants to read aloud for the group). Give an example or two of each cognitive distortion either from your imagination or your own lived experience. After you have read through them, invite participants to discuss how they see themselves getting trapped by these “mind tricks” and how they manage to rationalize through them. The focus of the discussion should be on two things: A) bringing awareness to distorted patterns of thinking, and B) sharing ways to overcome distorted patterns of thinking.

Materials: Workbook

Tips: Some people have difficulty holding compassion for themselves when they discover they have been trapped in a distorted way of thinking. Invite participants to find balance between going easy on themselves and working toward self-improvement.

Self Talk to Regulate Emotions

Instructions: Ask a participant to volunteer to help you demonstrate the countering method. You will need to obtain informed consent (verbally) prior to demonstrating the intervention. Countering method steps:

1. Detect and discuss negative self-talk / self-statements. Explore what types of statements, how often, and the situations that stimulate negative self-talk.
2. Ask the participant “What purpose does the negative self-talk serve?” There are usually three to four themes among their negative self-statements (e.g. themes about worth, love, perfection, being right, assumptions about others, etc.) As you explore the purpose of the negative self-talk, increase the participants self-awareness about the effects these negative self-statements have on their lived experiences. Helpful questions to ask during this step include: (a) What does this negative thought help you do or feel? (b) How willing are you right now to challenge the truth of this negative thought?
3. Choose the most dominant negative self-statement (according to the participant) and develop counters, or positive self-statements, that are incompatible with the negative self talk. The counter must: (a) dispute the irrational negative self-statement, (b) be consistent with the client’s positive beliefs about themselves, (c) exist in the same mode as the original negative self-statement (e.g. thoughts are countered with thoughts, images are countered with images).
4. Explore the effects of the positive self-statement using the subjective units of distress scale.

Materials: A volunteer who is willing to help you demonstrate the countering method and the original countering method as described by Erford (2015) for reference (should you need more details than have been provided here).

Tips: Some people have difficulty holding compassion for themselves when they discover they have been trapped in a distorted way of thinking. Invite participants to find balance between going easy on themselves and working toward self-improvement.

Examining Your Emotional Experiences

Instructions: This activity is a list of questions that will help participants reflect on their emotions; it is supplemental and is not to be facilitated during the workshop. Simply invite participants to look at these questions on their own time and refer back to them when processing emotional experiences. Tell participants that it is recommended they review these questions before the second session, as the awareness that can come from answering these questions will optimize their learnings in the second session.

Materials: Workbook

Session One Homework

Instructions: Carefully read through the assignment with participants and give them an opportunity to ask any questions. Invite participants to integrate the questions from the previous activity (Examining Your Emotional Experiences) into this activity by using those questions as an extra opportunity to debrief. Encourage participants to take this activity as seriously as possible and explain to them the rationale and purpose of learning to take feedback.

When I facilitate, I say: “It is important for you to become skilled in managing your emotions when receiving feedback. Often times, when people give us feedback that we don’t want to hear (whether it is constructive or straight up criticism) we protect our egos by disqualifying the messenger or discounting their message. Learning to stay regulated and present so you can listen and integrate feedback from others is a secret weapon – it can literally make or break your career. There will be many people in your professional life that will be giving you feedback (e.g. administrators, colleagues, professors, peers, parents, students, etc.) and your ability to respond openly, calmly, and rationally will significantly influence your relationships with those people. This is also true for your personal relationships. In my own experience, many of the problems I encountered in schools was due to what people call “teacher personality” – in my opinion, what they are really saying is that the teacher is unwilling or unable to receive and integrate feedback. This activity is a remedy to the problem of “teacher personality”.

Materials: Workbook

Tips: Remind participants of their rights (that they can say yes, no, pass) and that although this is an assigned homework, they are adults and therefore in charge of their own learning process. This activity can be very difficult for some people to do, and even the thought of asking others for feedback can be anxiety provoking.

Healthy Interpersonal Relationships

Instructions: Lead the group in the “Think, Pair, Share” method: first, participants think to themselves about the characteristics of healthy relationships, second they share with a partner what they came up with, and third the entire group discusses the ideas generated.

Materials: Workbook and pencil.

Tips: The next two activities focus on what *not* to do in relationships, so this activity was included for the purpose of giving attention to what to do in healthy relationships. The goal is to help participants share what they already know about healthy relationships in order to amplify

their existing competencies and strategies. Some questions you can use to facilitate the discussion are: Where did your ideas about healthy relationships come from? How are you able to tell when a relationship has moved from healthy domain into the unhealthy domain? What do you imagine contributes to individuals being able to initiate and maintain healthy relationships?

The Drama Triangle

Instructions: Read aloud the text included in the Drama Triangle activity (it is an introductory explanation). After reading the first paragraph, draw large triangle on the board. Continue reading, and pause after the explanation of each position (Rescuer, Persecutor, and Victim) and add it to the board so your final diagram looks like the one below:



Feel free to include jot notes describing each position in your diagram. Next, provide a real life example of how you have occupied a position (or multiple positions) on the drama triangle. I have included my “script” that I use when I facilitate to give you an idea, but please feel free to facilitate this activity in a way that feels natural to you.

“Typically, I occupy either the rescuer or persecutor positions – these seem to be my go-to when I am dysregulated. In fact, my belief is that many people in the helping professions are prone to the rescuer position due to our innate desire to help others. But over the past few years I have discovered how important it is to differentiate between helping and rescuing. Anyways, who wants to hear about how I can travel around the drama triangle in a single conversation? It’s actually pretty impressive how quickly I can do it! (said with sarcasm).

So picture this, I’m headed to an important appointment with a professor because I did an assignment completely wrong – well actually it was her fault because the assignment description was probably the worst I’d ever seen (as I say this, I point to the persecutor position). So I was annoyed to begin with because I had been working so hard and it just seemed like no matter what I did for this prof she was never satisfied (I point to the victim position). So I am on my way to the university to sort this out and on my way to the office I get caught in the hall by a peer who stops me to tell me about her awful supervision experience. I feel bad for her (I point to the rescuer position) because she always seems to be dealing with some sort of chaos so I stop and listen to her (I keep pointing to the rescuer position). But now I am late (I point to the victim position) and feeling annoyed with this peer (I point to the persecutor position); It’s not my fault that she can’t get her life together (keep pointing to the persecutor position). Anyways, I get to my prof’s office and she helps me figure out where I went wrong by clarifying her expectations. I asked some questions and got clear answers, but then I had to re-do the entire assignment and she only gave me a week to get it done! She is so unreasonable! In fact all the profs at this university seem to be lost on the struggles of being a student (point to

persecutor). No wonder my peer is having such a hard time (I point to rescuer). There is no way I am ever going to be able to get a good mark on this assignment (I point to victim).”

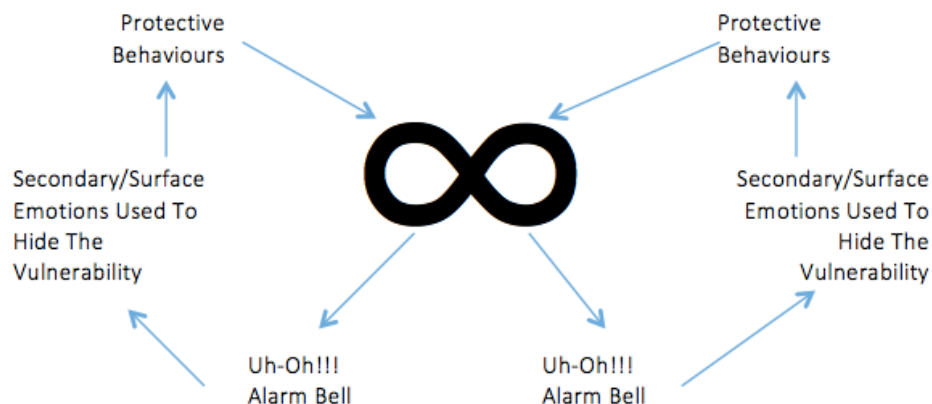
After you finish explaining how easy it is to become stuck in the drama triangle, offer some time to the participants to discuss amongst each other which position they think they gravitate toward the most.

Materials: Workbook, whiteboard/chalkboard/flip chart paper & writing tools

Tips: I suggest you use humor in telling your personal experience with the drama triangle. This will help normalize and soften the implicit messages of pathology associated with the drama triangle.

Unmet Attachment Needs

Instructions: Draw the following diagram on the board (it is a simplified version of the diagram in the workbook):



Then, read aloud the paragraph included in the workbook and as you read, pause to point to the corresponding locations on the diagram. Invite participants to follow along on their own diagram in their workbooks or to watch you apply the paragraph to the diagram on the board.

Materials: Workbook, whiteboard/chalkboard/flip chart paper & writing tools

Tips: Read this activity very slowly, as the concepts of attachment may be new to some. Also, invite the participants to switch out the terms “partner/couple” so it can still apply to them even if they aren’t currently in a relationship. A possible alternative is the teacher-student relationship.

Your Boundary Beliefs

Instructions: Invite participants to complete the questionnaire. Let them know that if they are finished before others, they can take time to read through the information titled “Signs of Ignored Boundaries”. Participants who take longer to complete their self-assessment can read this information on their own time. After all participants have completed the questionnaire, initiate a discussion around setting both personal and professional boundaries.

Materials: Workbook and pencil.

Tips: While it is important that participants recognize where they are currently at with regard to their ability to set boundaries, it is also important to highlight their existing competencies and strategies – what they are already doing well. Some questions that can help guide the discussion are: What do you find is the easiest part about setting boundaries? What is the hardest? What ideas and/or biases do you hold with regard to boundaries? What past experiences have contributed to your beliefs about boundaries? As teacher, what are the effects of setting boundaries on your students? Yourself? Your admin/colleagues?

Caregiving Questionnaire

Instructions: Invite participants to complete the questionnaire. Inform the participants that the questions in this questionnaire are worded toward intimate partners, however they may change the language of it so that it applies to other close relationships (e.g. parent-child). They can also answer the questions from experiences in past relationships. Explain to participants that hopefully the results of their self-assessment give them some insights into their patterns of supporting others. After all, supporting others is a big part of teaching. After all participants have completed the self-assessment, initiate a conversation around patterns of caregiving – this can easily be related back to the rescuer concepts from the Drama Triangle.

Materials: Workbook and pencil.

Tips: Some helpful questions to facilitate the discussion are: How do you know when your caregiving is helpful? How do you know when your caregiving is counterproductive? Does your caregiving ever cross the line over to controlling? What are some risks of being a caregiving that you are aware of? What ideas or biases to you hold with regard to caregiving? How do you imagine your beliefs about caregiving influence your work as a teacher?

Professional Quality Of Life (PROQOL) Scale

Instructions: Invite participants to complete the questionnaire. Instruct participants to answer the questions as their present self. Participants who finish early can begin the next activity “Basic Self-Care Needs: Checklist”, as these two activities go hand in hand. Once all the participants are done the PROQOL, invite a discussion around the concepts of burn out and vicarious trauma. Provide examples from either your own experiences or your knowledge of other’s experiences with VT. Your contributions to the discussion should include a definition of VT, how to detect VT, and ways to get support.

Materials: Workbook and pencil.

Tips: Some participants may need help with scoring their results. It is highly recommended that you complete this survey prior to facilitating it so you are aware of the scoring methods.

Basic Self-Care Needs: Checklist

Instructions: Participants who finished the PROQOL survey early can complete this checklist while they are waiting. Otherwise, participants can take this checklist home and complete it or reflect on it on their own time.

Materials: Workbook and pencil.

A Good Teacher Is Well Fed and Well Loved

Instructions: Provide each student with a Post-it Sticky note and ask them to write down their answer to the following question: Why did you choose to become a teacher? Instruct students to leave out any identifying information and to place the Post-it on the board/wall. Once all the post-its are up on the board, read aloud some of the answers at random. As you read the answers, you will begin to notice a theme of people entering this profession as a way to meet a personal need (e.g. to help others, because of their love of working with children/young people, to give back to society, to hold a purposeful job, to provide care and safety for children, to help children learn, etc.). Ask the participants if they are able to identify any themes among the group’s answers. Once the group is finished exploring themes, read aloud *or* invite volunteer readers to read through the excerpt included in this activity. Afterwards, ask the participants, “What do you imagine your answers have to do with the article we just read?” Somewhere in the discussion, bring to their attention the theme that people enter this profession as a way to meet a personal need. Open a discussion around this idea and how it relates to ethics and emotion regulation (E.g. using your career to meet personal needs can be a good thing if you navigate it with self-awareness and reflect on your motives; but if you are unaware that you are using your students to meet your personal needs it can get risky fast. Unmet needs that are triggered by students can result in powerful emotions that can negatively influence our professional decisions).

Materials: Workbook, Post-it Sticky notes (at least one for each participant), and white

Tips: This topic can be difficult to navigate for two reasons: a) there is some risk that participants will feel scolded for entering this profession based on a personal need. Make every attempt to normalize this process and communicate that personal needs are not bad; they just need to be brought to awareness and monitored appropriately; b) there is some risk that the intended message (which is to be self-aware of one’s personal needs and to meet as many needs as possible outside your job) gets misconstrued into the message that teachers are expected to be robotic, emotionless, and without needs; that they are to always put their students before themselves no matter the cost. It is recommended that you move slowly through this material and offer participants opportunities to ask questions so you can clarify any misunderstandings.

Setting Your Compass

Instructions: Invite participants to complete this activity individually or in small groups (some people learn better through talking it out, others learn better through thinking in solitude). Instruct participants to begin by thinking about their “Dreams and Goals” (north) in relation to the information presented in this workshop. Then, instruct them to fill in the rest of the compass, moving clockwise (East, then South, then West).

Materials: Workbook and pencil.

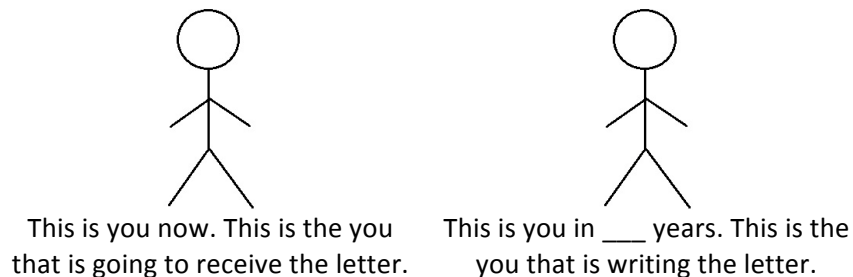
Tips: Move around the room and join those who have decided to complete this activity in groups. Listen to their discussion and offer direction, validation, and/or feedback as you see fit. If time permits, invite participants to share one thing from their compass with the entire group.

Setting Goals Through Letter Writing

Instructions: Since this is the last activity, you can use it as a buffer for managing your time - if you are under time, give participants longer to complete this activity and if you are over, give it to participants as homework. Instruct participants to follow the instructions included in the activity and to be as specific as possible. Share with them the phenomenon that thanking yourself for something you have yet to do tricks your subconscious into believing it has already happened. This removes any fears, doubts, or hesitations with regard to personal goals, hopes, and desires.

Materials: Workbook and pencil.

Tips: Providing examples from your own letter will help participants visualize this activity. Also, some people find it confusing to understand what perspective they are writing the letter from. It can be helpful to draw the following diagram on the board:



Contact the Author

An open invitation!

As a final gift to the community, I welcome any one who is interested in facilitating this workshop to contact me with questions or comments. I am willing to discuss my experiences of facilitating the workshop and brainstorm ways to help you in your own facilitation. Thank you for your interest in addressing teacher mental health and working towards helping teachers develop self-awareness.

Sincerely,

Laura Doney

lauraddoney@gmail.com