

BURNOUT IN IMMIGRANT EARLY CHILDHOOD EDUCATORS

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ABSTRACT

This project aims to provide further insight into burnout experiences in immigrant early childhood educators. The immense physical, emotional, and cognitive demands of early childhood caregiving and a lack of appropriate rewards, such as benefits and pay, make workers in this field highly susceptible to burnout. While studies exist on this phenomenon across the early childhood workforce, there is a dearth of literature that examines burnout as it specifically presents in immigrant early childhood educators. Beyond workplace stressors, immigrant workers may simultaneously experience socio-economic and cultural challenges such as racism and discrimination, acculturative stress, and economic difficulties, to name a few. By providing an extensive literature review, this project elucidates how various stressors for immigrant early childhood educators may intersect to increase the likelihood of developing workplace burnout. Additionally, recommendations are provided for healthcare practitioners and employers on how to address and prevent burnout and how to support immigrant early childhood educators.

Keywords: Early Childhood Educators, Immigrants, Burnout

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Chapter I: Introduction

Inspiration for the Project

The summer I decided to work at a public daycare, I anticipated it would be a short-term summer job. I did not think my experience there would inspire an idea for a research project. During my time at the daycare, I noticed that despite the valuable work many women were doing, they were being paid the bare minimum. Shockingly, I was paid the same amount as these women who had been there for years and had more knowledge and certification. Furthermore, I witnessed many of these early childhood educators expressing overwhelming hopelessness and exhaustion. They felt trapped in their jobs because they needed to support their families financially back in their home countries. Most staff identified as immigrants from various ethnic backgrounds and shared struggles unique to their experiences as immigrant women.

As a student training to be a psychologist and an academic, I strongly believe in critically examining structures that privilege certain groups while oppressing others. My theoretical foundation is rooted in feminist and multicultural perspectives. As such, I am interested in exploring how factors such as job type, race, and gender can intersect to create lived experiences for vulnerable populations. I realized as I was working at this daycare setting that many of the women had numerous barriers they were experiencing as a result of their ethnic background, immigration status, low-paying jobs, and many other associated factors. It was also disappointing to see the immense income disparity between the workers and families they were providing services to; these workers should not have been getting paid so little for the services they were providing. I observed how the low wages had a profound effect on my immigrant colleagues, and I noticed that their quality of life was significantly decreased.

I worked at this job before beginning my graduate training. However, it wasn't until I began delving into feminist theory during my graduate studies that I re-examined this experience with a fresh perspective (Brown, 2018). Through feminist theory, I learnt about systemic oppression and marginalization and the profound impact this has on the mental well-being of those oppressed and marginalized. This knowledge subsequently made me realize the importance of exploring, examining, and addressing systemic problems that influence many individuals I will work with and encounter. I utilized my observations at the daycare and my passion for feminist and multicultural theory as a foundation for the project. Through exploring this knowledge and perspective throughout the project, I hope to become a clinician and academic who can advocate for those oppressed by systemic and significant socio-cultural issues.

The Importance of Early Learning and Child Care

Early Learning and Child Care (ELCC) is a crucial resource utilized by parents, guardians, and caregivers worldwide (Government of Canada, n.d.; Lee & Wolf, 2019). In Canada, these services are vital for infants and preschoolers because they contribute significantly to child development (Government of Canada, n.d.). In Canada, according to Uppal and Savage (2021), there is a substantial rise in utilization of ELCC services: 60% of children under the age of 5 were enrolled in childcare between 2018 and 2019, compared to 42% between 1994 and 1995. In the Canadian context, many childcare services are subsidized, with the federal government focused on reducing costs for childcare services (Employment and Social Development Canada, 2024). Research has overwhelmingly indicated that ELCC programs can be beneficial for the growth and development of young children (Black et al., 2017). Thus, it is of utmost importance to understand how best to support ELCC workers and the programs they work in.

Research has shown the importance of early childhood education for healthy child development. Research literature has highlighted that the first five years of a child's life are a highly critical development period (Centers for Disease Control, n.d.). Children reach important socio-emotional, cognitive, physical, and neuro-developmental milestones within the first five years that have a tremendous impact on the trajectory of their lives (Black et al., 2017; Centers for Disease Control, n.d.). Lack of proper, adequate care in any necessary domain (such as nutrition, education, and physical environment domains) will have immense adverse effects on children's lives (Black et al., 2017; de Onis, 2017). Some examples of negative impacts include, but are not limited to, cognitive impairments, missing critical developmental milestones, and deficiencies in language development (Black et al., 2017)

In addition to having the potential to impact children negatively, ELCC services can also mitigate some of the negative effects of poverty and adverse experiences on neural development during early childhood through carefully curated environments where children's developmental needs are addressed and met (Black et al., 2017). Black et al. (2017) stated that poverty and adverse experiences during early childhood have a detrimental impact on brain development, and their research indicated a positive correlation between low socioeconomic status in early childhood and smaller hippocampal grey matter volume. Poverty is also associated with problems in language and cognitive development, in addition to the negative impacts of malnutrition (Black et al., 2017; de Onis, 2017). Research has documented the positive effects of ELCC services in overcoming these difficulties. Studies have indicated that enrollment in ELCC programs has long-term positive effects on behaviour, socio-emotional and cognitive development, and academic and health outcomes. These positive academic and health outcomes include higher retention in K-12 schools, better academic performance, fewer disciplinary issues,

and lower risk factors for cardiovascular problems in adulthood (Bakken et al., 2017; Campbell et al., 2014; García et al., 2021; Tang et al., 2023).

As noted, ELCC services are critical in facilitating child development, including bridging gaps in care provided for families overwhelmed with adversities. Hence, the role of ELCC workers is vital to ensure these programs and services can provide the learning and care they are designed to. It is essential to take care of the needs of ELCC employees as they are charged with looking after the children, and their interactions will influence both the benefits and drawbacks gained from these programs. ELCC workers' interactions with children and their families can also further perpetuate negative effects as they require a great deal of emotional, cognitive and psychological resources (Schaack et al., 2020).

Context for ELCC Employees

Despite the importance of ELCC services for child development, those working within this field have historically been underpaid, overworked, and lacked support (Eadie et al., 2021; Lee & Wolf, 2019). ELCC workers often work in toxic organizational settings, where they receive little to no support from the administration and may have poor relationships with other staff members (Cumming et al., 2021). These negative factors can cause workers to become extremely susceptible to burnout (Blöchliger & Bauer, 2018).

Immigrant ELCC Employees

According to a Government of Canada 2016 census, a substantial percentage (33%) of the ELCC workforce in Canada are immigrants (Uppal & Savage, 2021). Immigrants, especially people of colour, are susceptible to various social, cultural, and economic challenges when they migrate from their native country (Fung & Gudzer, 2021). Challenges include experiences of racial and ethnic discrimination, acculturative stress, inability to find good-paying work, inability

to transfer their qualifications, and doing precarious work (temporary, part-time) (Chadwick & Collins, 2015; Fung & Gudzer, 2021; Hira-Friesen, 2018; MacDonnell et al., 2017; Stewart et al., 2015). Immigrant workers in Canada (regardless of profession) are paid less compared to their native-born counterparts (Lamb et al., 2021). With the increasing reliance of working populations on these services and the diversification of the ELCC workforce in the Canadian context, it is critical to examine workplace and other socio-economic and cultural factors that uniquely impact immigrant ELCC workers in Canada.

Burnout

When considering the challenges of immigrant ELCC workers, it is important to explore the concept of burnout because ELCC workers are extremely susceptible to burnout, and as such, this may be a significant challenge that immigrant ELCC workers may experience in the workplace. Christina Maslach (1976; 1979) defines burnout as a negative outcome when a worker experiences long periods of stress in the workplace. This stress can lead to three different conditions: emotional exhaustion, depersonalization/cynicism, and feelings of inefficacy, which is also referred to as a feeling of lack of personal achievements. Notably, these conditions do not exist in isolation but are interrelated (1976; 1979). Individuals can experience varying amounts of these conditions depending on their working environment and coping strategies (Maslach, 1976; 1979).

Using this conceptualization of burnout, Maslach and Jackson (1981) created the Maslach Burnout Inventory (MBI), a now widely used instrument for assessing burnout. Numerous studies have examined the validity and reliability of the MBI and have found positive results (Szigeti et al., 2017). Thus, it continues to be used to this day. The MBI is helpful as it identifies burnout and its three equally important components (Maslach & Leiter, 2021). Maslach and

colleagues further extended their MBI by developing a worklife model which describes the different components of occupations that can potentially result in burnout for an individual (Maslach et al., 2001). This measure is referred to as the worklife model. The six components of the worklife model are workload, control, reward, community, fairness, and values (Maslach et al., 2001). These components impact each aspect of burnout differently, as will be explored in the literature review.

As early childhood education professionals significantly impact the critical developmental stages of young children, it is crucial to understand factors such as burnout that impact their well-being. Thus, this project aims to examine the literature on how burnout develops; what workplace conditions might give rise to ELCC workers developing burnout; and to explore what contributes to more well-being at work (Cumming et al., 2019; 2021; Jeon et al., 2018). The following section will discuss the biopsychosocial impacts of chronic stress as it relates to burnout.

Chronic Stress and Health

Research literature has widely indicated that burnout is due to chronic workplace stressors (Khammissa et al., 2022; Maslach et al., 2001; World Health Organization, 2019). Stress caused by workplace and socio-economic factors, in addition to trauma caused by experiencing racism and discrimination, can adversely affect an individual's physical health (Cassiers et al., 2018; Stanley et al., 2019). To cope with stressors, an individual's stress response is activated, involving physiological, behavioural, and psychological changes to cope with stressors (Chu et al., 2022). Specifically, this stress response involves the hypothalamus-pituitary-adrenal axis (HPA), sympathetic-adreno-medullary system, and immune system (Chu et al., 2022). While the stress response is supposed to be adaptive in the short term, prolonged

exposure to trauma and stress can be severely detrimental to an individual's health (Rohleder, 2019). Studies have found that chronic stress has been linked to cardiovascular disease, cancer, and neurodegenerative diseases such as sporadic Alzheimer's disease (Bisht et al., 2018). Acute and chronic stress and trauma can cause structural changes to neural circuitry and brain regions responsible for regulating emotions, such as the amygdala (McEwen, 2017). Due to the adverse impacts of trauma and stress on emotional and physical health, it is vital to understand how various socio-economic and cultural stressors that immigrant ELCC workers experience moderate the relationship between workplace stress and burnout. It is important to understand immigrant ELCC workers' unique experiences because they may be exposed to these adverse events (such as discrimination at work or in their personal lives) continuously and may not have many support or coping strategies to help them. As these adverse events can have an immense detrimental impact on the mental well-being of ELCC workers, we need to comprehend their experiences better.

Canadian Context and Current State of Research

While several studies have examined burnout amongst workers in ELCC settings, very few studies exist to date on how burnout presents across workers' ethnicities and cultural backgrounds, regardless of profession. Some reasons for the gap in the literature could include stigma in immigrant communities about mental health and burnout, lack of understanding and identification of burnout, and challenges in accessing populations willing to participate in studies (Mahalingam & Rabelo, 2013; McLaughlin & Alfaro-Velcamp, 2015; Ngo et al., 2014). Research involving immigrants also requires researchers (who are often resident Canadians) to acknowledge their privilege and understand how that privilege, bias, and assumptions may influence their ability to ethically conduct and complete the research (Mahalingam & Rabelo,

2013). Regarding burnout research on immigrants who identify as people of colour, another potential reason for the lack of research in this area could be the phenomenon known as colorblind racism (Bonilla-Silva, 2006). Berman et al. (2017) briefly describe this theory of colorblind racism by Dr. Bonilla-Silva: “This theory captures the idea that racial inequality exists simultaneously in a world that holds onto the idea that race (and racism) [is] no longer relevant” (p. 53). Several scholars have noted that this could especially be a problem within the Canadian context, where, under the guise of “bias-free” policies and an emphasis on diversifying Canadian society, negative experiences based on ethnic and racial differences are no longer deemed to be relevant by dominant groups, often those who have racial privilege (Abawi & Eizadirad, 2020; Berman et al., 2017; Pimentel et al., 2023).

Unfortunately, the lack of pertinent research on the experiences of immigrant ELCC workers within the Canadian context means there is a gap in understanding the challenges they experience, their stressors, and their needs. Some research exists within the American context that is useful; however, it is important to understand that key differences exist in political, social, cultural, and academic climates between America and Canada. Conversations around racial inequality and immigration can be different; perceptions of immigrant identity are different across countries as well. For instance, variations exist within immigration policies and their subsequent reforms based on changing political climates (Woroby, 2015). As such, it is imperative to understand the experiences of immigrant ELCC workers in Canada as they pertain to burnout.

Rationale For Project

As noted, ELCC workers are critical contributors to the social fabric of our society – as they are responsible for early childhood education and, therefore, the development of future

generations. However, there is a lack of insight into their experiences with occupational stress and burnout. This is especially true for immigrant early childhood educators; their ability to cope with workplace stressors, and subsequently burnout, may be influenced by unique socio-emotional and cultural factors specific to their experiences as immigrants. Additionally, many adverse biopsychosocial effects can arise from chronic stressors that immigrants may experience every day (Hemminki, 2014). As indicated, immigrant ELCC workers constitute a significant portion of the ELCC workforce. However, there is little discussion about their experiences in a field where society undervalues their work despite its vast contribution. Immigrant workers can be quite vulnerable as they are navigating many life challenges associated with adjusting to life and working in a new culture and country. These challenges can intersect with difficulties and stressors that immigrant ELCC workers experience when working in ELCC settings, creating numerous challenges that other immigrants may not experience working in different occupations.

Statement of Purpose

Given the seriousness of the impact of burnout and stress and how these are implicated for immigrants working in ELCC, this project aims to provide a comprehensive literature review that examines the working conditions of early childhood education, socio-economic and cultural factors, and stressors unique to immigrant early childhood educators. I will employ a biopsychosocial model to examine the literature on the impact of stress, trauma, and burnout on psychological and physical health and how these are interrelated.

The overall goal of the project is to help service providers better comprehend how to support immigrant ELCC workers. Further relevant topics to be examined in relation to ELCC workers during the review are intersectionality and reproductive labour. I will review these topics to provide a holistic perspective on workplace stress and burnout in immigrant ELCC

workers. I will highlight current gaps and limitations in the literature to understand the experiences of immigrant ELCC workers better. For the next section of the project, I will utilize the literature synthesis to offer recommendations for service providers; for example, administrators of childcare centers, non-profits supporting immigrants, government agencies, and healthcare professionals like psychologists and counsellors on how to support ELCC workers better. As few studies exist on ELCC workers and thus few recommendations for increasing their workplace functioning, I aim to provide practical guidance for those working with and employing immigrant ELCC workers. The last section of the project will describe limitations and future directions, as well as a description of the ways the recommendations will be distributed.

Chapter II: Literature Review

Definition of Early Childhood Educators

The Government of Canada defines early childhood educators as professionals who “develop and implement child-care programs that support and promote the physical, cognitive, emotional and social development of children” (National Occupation Classification [NOC], 2022, para.1). Those working in early learning and childcare (ELCC) have differences in training and certification (NOC, 2022). For instance, the level of education and training required will vary between early childhood educators and assistants (NOC, 2022). According to the Government of Canada, early childhood educators must complete a two to four-year program in early childhood education (NOC, 2022). Alternatively, they can also have a bachelor’s degree in child development. Furthermore, they must meet licensing requirements, which are different across provinces (NOC, 2022). Meanwhile, assistants do not need to have complete post-secondary education; they may, however, require certification as early childhood assistants (NOC, 2022). They also need to have previous experience in childcare (NOC, 2022). Depending on the province, there may be differences in pay between assistants and educators. Within Alberta, there appears to be no difference in pay despite the differences in requirements (ALIS, n.d.) Early childhood educators and assistants usually work with infants and pre-schoolers and thus are often found in settings such as daycares and childcare centers (NOC, 2022). Some other examples of those who work in early childhood education settings are as follows: daycare workers, childcare worker assistants, and preschool helpers (NOC, 2022).

Importance of Understanding Burnout

Burnout has numerous psychological and physiological effects. A systematic review by Salvagioni et al. (2017) highlighted some physical ramifications of burnout, such as an increased likelihood of cardiovascular diseases (such as coronary heart disease), type II diabetes, hypercholesteremia and musculoskeletal problems. There was also a significant association between burnout and gastrointestinal and respiratory problems (Salvagioni et al., 2017). For psychological impacts, the review found that burnout significantly predicted depressive symptoms and insomnia (Salvagioni et al., 2017). This review exemplifies how understanding burnout and the factors that contribute to it is important.

Link to early childhood educators

Burnout can have severe, detrimental, life-changing impacts that may be irreversible. Therefore, it is critical to thoroughly examine factors that contribute to burnout in immigrant early childhood educators, who may be experiencing additional challenges due to other socio-economic and cultural stressors. To reiterate, early childhood educators' well-being is paramount because their employment should not negatively impact their quality of life. Furthermore, physical and psychological well-being will help them continue providing children with the highest level of caregiving and teaching. As Salvagioni et al. (2017) noted, burnout also impacts overall work productivity by increasing sick day leaves and absences. Inadvertently, burnout will have a negative impact on other staff, parents and children. Burnout will prevent workers from providing the highest quality of care and education to children (Blöchliger & Bauer, 2018; Grant et al., 2019; Yarrow, 2015). If they experience burnout, ELCC workers will be unable to maintain warmth and care in their interactions with children, and this could have negative implications for how children perceive caregiver relationships (Blöchliger & Bauer, 2018; Grant

et al., 2019; Stein et al., 2022; Yarrow, 2015). Consequently, families and parents will be impacted. Overall, burnout of ELCC workers will have long-lasting impacts on children's development and their family's well-being (Blöchliger & Bauer, 2018; Grant et al., 2019; Yarrow, 2015). The project will facilitate a comprehensive examination of the literature on burnout by identifying how specific constructs of burnout are tied to immigrant ELCC workers' contexts. By providing knowledge on this topic and thus helping employers learn about specific constructs of burnout, the goal is to help ELCC employers identify pertinent workplace factors that may contribute to burnout, including factors that might be unique to immigrant ELCC workers. Subsequently, the hope is that this will allow employers to utilize a more targeted approach in addressing those relevant issues.

Defining Burnout

Ng et al.'s (2023) systematic review succinctly highlighted the various workplace and individual factors associated with burnout in early childhood educators. For individual factors, greater familial responsibilities, younger age, and marital status (such as those divorced or single) were correlated with an increased likelihood of burnout (Ng et al., 2023). Similarly, other individual factors such as low wages, social capital (support from others) and poor health were associated with burnout (Ng et al., 2023). The systematic review identified service-related factors: unfavourable workplace structure and environment, negative professional relationships, lack of professional status (how others in society perceived the job), paucity of professional development opportunities and missing emphasis on worker's well-being (Ng et al., 2023). Due to a combination of these factors and others, early childhood workers are vulnerable to high levels of emotional exhaustion, which can result in absenteeism and poor interactions that lack care and compassion with children (Blöchliger & Bauer, 2018; Grant et al., 2019; Yarrow,

2015). The following section explores the history of burnout, how it is defined, and the commonly used conceptualization of burnout by Christina Maslach (1979).

Freudenberger (1975) coined the term burnout when he described feelings of emotional exhaustion, lack of motivation, and commitment that he and other staff members experienced working in an alternative health agency. Christina Maslach (1976; 1979) applied the term to workplace contexts to understand people's interactions with those in their workplace environment. Hence, she emphasized the role of "relational transactions" and how these impacted people (Maslach et al., 2001, p. 400). This is highly applicable to early childhood workers as the majority of their jobs involve interactions with parents, co-workers, and administrative staff.

Maslach et al. (2001) define burnout as the lengthened response to "chronic emotional and interpersonal stressors on the job" (p. 397). Maslach (1979) describes three components of burnout in organizational settings: exhaustion, cynicism, and detachment from the job (also referred to as depersonalization), and feelings of lack of effectiveness and personal accomplishments (also referred to as inefficacy). The three components are interrelated (Leiter & Maslach, 2016).

Exhaustion represents the stress aspect of burnout when an individual feels like they have utilized all their emotional and physical resources and are feeling "overextended" (Maslach & Gomes, 2006, p. 38). She states that a common cause of exhaustion is too much work coupled with conflicts at work (Maslach & Gomes, 2006). Exhaustion can lead to cynicism or depersonalization. This is where an individual becomes negatively detached from different aspects of their jobs to cope with work overload and conflict (Maslach et al., 2001; Maslach & Leiter, 2016).

The cynicism component of the three-component burnout model represents the interpersonal component of work. Detachment manifests not only in a decrease in the quality or amount of work the individual does but also in the relationships people have with their co-workers (Maslach & Gomes, 2006). Maslach and Gomes (2006) state that detachment can lead to the “dehumanization of others” (p. 38).

The last component is inefficacy, where the individual feels they cannot meet their established goals and tasks and feel incompetent (Maslach et al., 2001; Maslach & Gomez, 2006). Lack of self-efficacy is fueled by inadequate resources and support from their workplace settings (Maslach & Gomez, 2006).

Worklife model

Maslach and Leiter (1997) introduced a worklife model with six components. Burnout is then defined as whether the individual "matches" or "mismatches" (Maslach et al., 2001, p.414) with those six components. For example, burnout is more likely to occur for an individual who is overworked and inadequately compensated. The six areas are workload, control, reward, fairness, community, and values (Demerouti et al., 2021; Maslach et al., 2001). The introduction of the worklife model provides a more nuanced understanding of which specific organizational factors influence workplace burnout, as well as how they do it.

Workload. Workload is linked directly to the exhaustion component of burnout. Exhaustion can result from too much work or when the individual does not have the appropriate skills for their job (Maslach et al., 2001). This especially applies to emotional work when individuals must portray emotions inconsistent with how they feel on the inside (Maslach et al., 2001). Maslach et al. (2001) differentiate between chronic large workload and short-term workplace stress. For example, if an individual must deal with an immediate work deadline or a

short-term stressful project, they may not necessarily experience severe exhaustion if they get to recuperate (Maslach et al., 2001; Leiter & Maslach, 2004). However, with chronic workplace stressors, because they are ongoing, the individual does not nearly get as many opportunities to recuperate and recover. As such, they are much more likely to experience exhaustion (Leiter & Maslach, 2004). It has been widely documented that those working in early childhood education experience long hours, low staff-child ratio, and high emotional labour, all chronic stressors (Yarrow, 2015; Blöchliger & Bauer, 2018; Cumming, 2017). Blöchliger and Bauer (2018) researched the aspects of work that were correlated with burnout symptoms among childcare teachers. They found that burnout symptoms (specifically emotional exhaustion) were significantly associated with the workload variable. Specifically, high workload levels were associated with increased burnout symptoms. A systematic review by Ng et al. (2023) indicated that a high workload was one of the most common reasons for burnout among ELCCs. According to a comprehensive report published by the Center for the Study of Child Care Employment, University of California, Berkeley (2018), early childhood educators in the states often put in hours beyond what is required for their role. These hours are not compensated either (UCLA, 2018). A high workload can lead to high levels of emotional exhaustion (Jeon et al., 2022). ELCC workers have great job demands in dealing with parents and being responsible for the child's physical, emotional, and mental well-being (Jeon et al., 2022). These responsibilities require significant emotional resources for educators. The demands on these resources can lead to psychological stress and, eventually, emotional exhaustion (Jeon et al., 2022).

Control. The second component is control, which is associated with the inefficacy or feeling of lack of personal achievement aspect of the three-part model. Feelings of inefficacy or a lack of a sense of personal achievement can result when individuals feel as though they do not

have enough control over the resources they need to complete their tasks and feel as though they do not have enough authority to complete them in a way they would consider effective (Maslach et al., 2001). As Leiter and Maslach (2004) explain, everyone, to some extent, wants to have control over the process that produces outcomes, which are outcomes for which they have professional liability. Not having autonomy over aspects of their job can cause undue stress, contributing to burnout. Leiter and Maslach (2004) also emphasize the ways in which role conflict and role ambiguity can affect one's feelings of self-efficacy and control within a workplace environment. As defined by Leiter and Maslach (2004), role conflict is when the individual faces numerous contradictory demands by different authority figures, causing uncertainty about what demands they need to fulfill and prioritize. This can further lead to role ambiguity, in which an individual's job responsibilities and duties are ambivalent (Leiter & Maslach, 2004). Role conflict and ambiguity may result from several factors: poor workplace organization, internal power struggles between higher-level management and administration, and a lack of staff to fulfill designated job roles (Leiter & Maslach, 2004).

Reward. The third component is reward; feelings of inefficacy can result from inadequate financial compensation and recognition from others for their efforts; a lack of intrinsic rewards can also contribute (Maslach et al., 2001). Leiter and Maslach (2004) emphasize intrinsic rewards, such as feelings of efficacy and accomplishment, which are as important as extrinsic rewards, such as monetary compensation and benefits. It is widely acknowledged that early childhood education workers receive low wages disproportionate to the level of responsibility and emotional and physical labour required (McLean et al., 2019; Wagner et al., 2013). Additionally, there is a significant amount of variation and lack of consistency in how much those in ELCC earn. As Sinha (2014) outlined, many factors influence how much

money a childcare center receives: government funding and subsidies, parental earnings, location, and status (private vs. government-funded). Lack of consistency in rewards can also be a source of stress for many who do not always have available alternatives to transition to a new workplace.

Low wages can also correlate with a lack of value for the work many early childhood educators do. Childcare work can also be considered reproductive labour, also known as social reproduction. According to the European Institute for Gender Equality (n.d.), reproductive labour constitutes work that “supports and services the current and future workforce—those who undertake or will undertake productive work. It includes childbearing and nurture but is not limited to these tasks”. Historically, labour has always been gendered, with gender stereotypes of masculinity and femininity determining what type of labour individuals have been relegated to. As such, due to the nature of social reproduction, tasks (like childcare work) are typically associated with and done by women (Hester, 2018; Weiss, 2021). Such labour done by women has always been undervalued because of societal notions that it is women's innate nature and responsibility to complete such tasks (Weiss, 2021).

While the labour market is evolving, much progress has yet to be made. Women engaging in reproductive labour is seen to be part of their “natural” role, as often, in our societies, women are deemed to be primary caregivers in family units (Weiss, 2021). As such, job roles that involve child rearing are often relegated to women: more than 95% of the ELCC labour force across Canada consists of women (Uppal & Savage, 2021). Because child-rearing is seen to be inherently a responsibility for women, their work is also significantly undervalued (Hester, 2018). This is seen in various studies that indicate that early childhood education is one of the most underpaid professions across different societies. According to McLean et al. (2019),

early childhood education is one of the lowest-paid occupations in the US. This is true even if the educators have qualifications (Thorpe et al., 2020). It is even worse for those without qualifications, and often, those without qualifications will end up living in poverty (Phillips et al., 2016). Totenhagen et al. (2016) also found that low wages and benefits were a key reason early childhood workers chose to leave their jobs, corroborating previously outlined literature. Higher-income for workers was associated with lower turnover rates and increased commitment to their organization or workplace. Additionally, benefits for workers such as health insurance, disability, and a pension plan acted as incentives. Blöchliger and Bauer (2018) found that burnout symptoms (specifically emotional exhaustion) were significantly associated with variables of control and reward. In comparison, more rewards were associated with low burnout symptoms.

Community. The fourth component is community; people are less likely to experience burnout when they get along with their co-workers, share similar values, and receive social support (Hewett & La Paro, 2020; Maslach et al., 2001). Inversely, individuals are much more likely to experience frustration and cynicism due to high levels of conflict and hostility. Schaack et al. (2020) found that early childhood teachers' emotional exhaustion and depersonalization levels were associated with a lack of control and relationships with co-workers. To elaborate further, Schaack et al. (2020) found that negative relationships between co-workers, as well as with children exhibiting challenging behaviour, lead to an increase in emotional exhaustion and depersonalization. McFarland et al. (2022) state that workplace bullying in early childhood care and education is prevalent in Australia and elsewhere, with 40% of those working in ELCC in Australia experiencing workplace bullying. Workplace bullying inadvertently negatively impacts educator-child relationships (McFarland et al., 2022). It is important to note that these studies do

not consider demographic factors (such as ethnicity and race) and how they may influence developing and maintaining interpersonal relationships in the ELCC workforce. It may be possible that cultural differences may make the workplace environment more challenging to work in. Numerous studies have shown that poor organizational culture and professional relationships negatively contribute to workplace burnout (Brooker & Cumming, 2019; Jeon et al., 2022; Ng et al., 2023). As noted earlier, poor workplace relationships can result in cynicism and disengagement; stressful interactions with parents could also contribute to this (Ng et al., 2023). Therefore, a lack of collegial support can worsen some of the stress experienced by ELCC workers in their daily interactions with parents and children (Jeon et al., 2022).

Fairness. The fifth component is fairness. Lack of fairness can result from inappropriate compensation (when people feel they are not getting paid what they deserve) and feel like they are working too much (Maslach et al., 2001). Beyond receiving adequate compensation, fairness also refers to how the administration handles disputes (Leiter & Maslach, 2004). It is not about receiving a positive outcome for oneself but rather whether the process to achieve that outcome has been fair (Leiter & Maslach, 2004). Lack of fairness in due process can also result in cynicism, where an individual does not feel like they are part of that organization (Leiter & Maslach, 2004). If an individual feels as though they are being mistreated compared to those they are working with, despite similar workloads, they may feel cynicism (Maslach et al., 2001). To reiterate, administration and management can be unsupportive in early childhood education settings (Totenhagen et al., 2016). A qualitative study by Brooker and Cumming (2019) examined ELCC workers' perceptions of leadership practices. Interviews done with 12 different educators indicated some of the following leadership practices common in ELCC settings: lack of compensation for breaks for educators, little moral purpose, bullying and harassment, and

power inequality between workers and administration (Brooker & Cumming, 2019). The last factor is critical to focus on as administrative exerting power and control over educators/staff can lead to feelings of unfairness for workers as they are doing the majority of the emotional and physical labour at the center (Brooker & Cumming, 2019).

Values. The last component, values, is when people feel as though the values at their workplace align with their own (Maslach et al., 2001). Individuals within a workplace might be forced or pressured to complete tasks or roles that are incongruent with their personal beliefs and values, and this causes them distress (Maslach et al., 2001). This is especially true when employees are asked to complete an unethical task for the organization and must compromise their values and beliefs (Leiter & Maslach, 2004). Incongruence between an organization's values and the individual's values can be an arduous situation to deal with for the individual; not completing the task can cause significant repercussions such as the loss of their jobs, but completing the task and going against their values can cause cognitive dissonance and emotional distress (Leiter & Maslach, 2004). Whether ELCC workers would have to compromise some core values due to working under challenging conditions remains to be understood. While it may be hypothesized that it may be a possibility, research has yet to explore it.

Maslach Burnout Inventory

Maslach and Jackson (1981) developed the Maslach Burnout Inventory (MBI) to measure burnout and its associated three dimensions. The MBI was initially conceived to be used primarily in human services (MBI-HSS), but a version was created for use in education (MBI-ES) (Maslach et al., 2001). Other versions include MBI-GS, the general survey that can be used for any occupation, and the MBI-MP, which is specifically used for medical personnel (Maslach et al., 2001). The inventory assesses individuals on all three dimensions (exhaustion, cynicism,

and inefficacy) using a Likert scale and is provided with a separate score for each dimension (Maslach et al., 2001; Maslach & Leiter, 2021). Research over the years has shown that the MBI has high validity and reliability, thus making it a widely used instrument for measuring burnout (Williamson et al., 2018). As this is not a research study, the MBI will not be used; however, it is presented in the literature to demonstrate how burnout in occupational settings is commonly measured. This could be a valuable tool for administration, management, and government agencies to assist in identifying burnout. However, it is essential to be mindful of how cultural biases may be inherent in this inventory, and as such, it should not be used as a diagnostic tool.

The following section will explore some unique challenges immigrant workers experience when integrating into a new country and culture.

Immigrant ELCC workforce

The most recent definition of immigrants by the Government of Canada (2023) is as follows: "...a person who is, or has ever been, a landed immigrant or permanent resident. Persons who are 'Canadian citizens by naturalization' are also 'immigrants'" (para. 1). It is important to study immigrant early childhood educators because Government of Canada census reports indicate that 1/3 of childcare workers are immigrants (Uppal & Savage, 2021).

Burnout research has generally failed to examine how demographic factors, specifically ethnicity and/or immigrant status, can impact the three dimensions of burnout. It is essential to note this because burnout may present differently in immigrant early childhood workers due to the unique socio-cultural and economic challenges they experience.

Challenges Faced by Immigrant Populations

Research has consistently shown that immigrants experience challenges such as isolation and loneliness, language difficulties, discrimination, and economic difficulties, to name a few

(Chadwick & Collins, 2015; Galvan et al., 2022; Stewart et al., 2015). The "healthy immigrant effect," also known as the "immigrant paradox," describes a phenomenon where immigrants, upon moving to a new country, experience fewer physical health problems compared to native-born populations (Adjei et al., 2020; Fung & Guzder, 2021). However, immigrants' health deteriorates over time and is the same or worse than the health of the native-born population (Adjei et al., 2020; Elshahat et al., 2022). As Elshahat et al. (2022) described, this complementary phenomenon is referred to as the "years since immigrant effect." Health deterioration in immigrants can be a result of acculturative stress, racism, and other factors. Acculturative stress "consists of psychological and social stress experienced due to an incongruence of beliefs, values and other cultural norms between a person's country of origin and country of reception" (Da Silva et al., 2017, p.214). Acculturative stress has a detrimental impact on immigrants' well-being (Berry & Hou, 2016).

Specifically, research has focused on incidences of chronic illness and mortality (Elshahat et al., 2022). However, as Elshahat et al. (2022) stated, not much research has focused on the deterioration of mental health. They addressed this gap by conducting a systematic critical review of studies examining the mental health outcomes of immigrants in Western countries. Their results were inconclusive as to whether or not the "healthy immigrant effect" also applied to mental health for immigrants, meaning the findings were not clear as to whether or not immigrants had better mental health initially as compared to native-born populations. These inconclusive findings probably result from how studies often treat different immigrant groups as homogeneous and overlook important nuances (Adjei et al., 2020). For example, Alegría et al. (2017) reported that while, as a group, immigrants may suffer less from depressive disorders compared to their US-born counterparts, the story becomes more complicated when you break

the results into subgroups. Specifically, Latino immigrants might experience fewer depressive disorders compared to their US counterparts, but upon further analysis, this result holds only for Mexican immigrants.

Additionally, Elshahat et al. (2022) explained that it was not clear whether the studies they used grouped refugees and immigrants, which could significantly impact results as refugees are more likely to be exposed to higher levels of psychological distress. Often, first-generation and second-generation immigrants will be grouped, even though they would have widely different experiences (Saasa et al., 2021). Studies should provide a better breakdown of ethnic demographic criteria to understand the differences in experiences better. Results regarding the “healthy immigrant effect” have been more inconsistent; studies varied on whether the “healthy immigrant effect” exists or not. However, studies had more conclusive results for the “years since immigrant effect.” This means that immigrants’ mental health continued to decline over a period due to the cumulative effect of prolonged exposure to various stressors such as microaggressions at work, hate crimes, and lower wages. (Elshahat et al., 2022; Sissoko & Nadal, 2021). With respect to lower wages and racism, employers are 40% more likely to hire someone with an English-sounding name, even if the other candidate has similar experiences and qualifications (Mooten, 2022). This is also tied to immigrant populations' struggle to find work that fits their educational qualifications back in their home country (OECD, 2014). Hence, they might be overqualified for the job that they take to make ends meet (Blanchfield, 2021; OECD, 2014). Workers who take a job for which they are overqualified but must do it out of necessity can find themselves demotivated and experiencing additional psychological stress. Another statistic by OECD (2014) stated that in all OECD countries, immigrant workers with similar educational qualifications as those who are native-born earn less in comparison (OECD, 2014).

Additionally, they have a much harder time having their educational qualifications recognized (OECD, 2014).

Intersectionality

Immigrant women are also paid significantly less compared to their native-born counterparts (The Status of Women in the United States, 2015; Suyemoto & Donovan, 2015). The Status of Women in the United States (2015) stated that in 2013, median earnings for immigrant women working full time were \$32,000 compared to U.S.-born women at \$39,000. The salary differences could be due to numerous factors, such as discrimination, language barriers, and lack of governmental support (Nardon et al., 2022; Suyemoto & Donovan, 2015).

Another vital factor to consider is how ethnic status and gender can intersect. More than 95% of childcare workers are women; this means most immigrants working in early childhood education settings are women (Uppal & Savage, 2021). Immigrant women experience stressors differently as compared to men due to the intersectionality of race and gender (MacDonnell et al., 2017). For example, immigrant women may face specific issues such as unpaid work, changes in family dynamics, and a lack of support and resources. Immigrant women's lack of language fluency can result in social isolation and their inability to access necessary support and help (Guruge et al., 2015). Hence, intersectionality is critical to understanding the struggles of immigrant women within the ELCC field.

Kimberlé Crenshaw created the term intersectionality to understand better how oppression works for African American women (Columbia Law School, 2017). Crenshaw defined intersectionality as a “metaphor for understanding the ways that multiple forms of inequality or disadvantage sometimes compound themselves and create obstacles that often are not understood among conventional ways of thinking” (cited in Government of Scotland, 2022).

To further elucidate this definition, intersectionality explains how various inequalities can intersect for an individual to create oppression (University of British Columbia, 2021).

Intersectionality provides a crucial framework for a more nuanced understanding of how individuals belonging to multiple marginalized groups experience inequality and oppression.

Understanding intersectionality is critical to better comprehending the complexity of this issue.

Immigrant women who are working in early childhood education settings are not only dealing with issues that affect all ELCC workers regardless of ethnic background (like low wages, poor administration, and lack of support) but also other issues that specifically affect them, such as language barriers and acculturative stress (The Status of Women in the United States, 2015).

Change in Gender Norms, Expectations, and Family Dynamics

Another example of an issue affecting immigrant women is contending with changes in social and cultural expectations. For example, in their native country, they may have been expected to stay home and take care of the family, but moving to a different country, they may start working due to financial constraints (León-Pérez et al., 2021). For instance, a study by León-Pérez et al. (2021) found that Mexican women in the United States found it more challenging to fulfill parenting responsibilities due to the exploitative and precarious nature of the work they were doing. Therefore, the process of immigration can be a huge cultural and social transition for immigrant women and their families, who now encounter social norms, expectations, and gender stereotypes that they may not be familiar with, in addition to dealing with financial and occupational stressors (León-Pérez et al., 2021; Premji & Shakya, 2017). Shifting gender roles when moving to a new country could significantly influence family dynamics, wherein the individuals within the family (like a husband or partner) could be

expressing discomfort with the newfound financial freedom for the female members who are working (Dovchin, 2019; Premji & Shakya, 2017).

As noted by Espín and Dottolo (2015), immigrant women must contend with gender stereotypes that are not only prevalent in their ethnic communities but also in the communities of the country they migrated to. Immigrant women may be expected to assume complete responsibility for the acculturation of their children into the host country due to expectations for mothers in their community (Espín & Dottolo, 2015). This may mean they must familiarize themselves with many educational, social, and cultural aspects to facilitate their children's adjustment process (Espín & Dottolo, 2015). Additionally, they are contending with their own challenges during the acculturation process (Espín & Dottolo, 2015).

Racialized Immigrant Women

To reiterate, immigrants, especially women, experience various stressors that intersect and compound to create mental and physical health issues. Hence, it becomes imperative to understand how these stressors impact burnout for immigrant early childhood education workers. Another dimension to consider is the immigrant women's racial background (Nardon et al., 2022). Immigrant women of colour may have vastly different experiences compared to their Caucasian counterparts because they may belong to a racialized group within the host country; this introduces an added component of challenges, stereotypes, and inequalities (Suyemoto & Donovan, 2015). While all those who work in ELCC settings (primarily women) are immensely underpaid, depending on one's status (such as being a racialized immigrant woman as compared to a European-Canadian), there can be further disparities in treatment at work, as well as compensation. A few studies examine related constructs such as wages and ethnicity. For example, Austin et al. (2019) analyzed a national survey to examine the relationship between

ethnicity and wage gaps in early education employment in the United States. In the results, they found that African Americans were less likely to earn more than \$15/hr compared to other ethnic groups, namely Latino/Hispanic and White. This was true even after they controlled for educational qualifications; African Americans earned \$0.78 less than white early educators. Lee et al. (2022) state that in the US, ELCC is an underpaid and undervalued profession as it is women-centred, with 40% of women working within the field being women of colour. As such, wage gaps and devaluation of their work perpetuate and maintain systemic racism.

Suyemoto and Donovan (2015) articulated that immigrant women of colour may encounter racial stereotypes and associated prejudice and discrimination that they did not experience back in their native country. To illustrate this point, Suyemoto and Donovan (2015) shared some poignant personal anecdotes about their experiences as racialized immigrant women in the US. A common underlying theme for these anecdotes was the transition between moving from their native country, wherein they did not have to think about their racial identity, to moving to the United States, where race was a significant and vital identifier (Suyemoto & Donovan, 2015). Racial identity categories govern how many Western societies operate, with institutions, government, and economic systems perpetuating and maintaining racial inequalities (Suyemoto & Donovan, 2015). As Donovan (2015) noted, “[she] quickly learned that race mattered to White European Americans and to African Americans” (p.57). It matters for people of colour because their racial identity governs the opportunities they are afforded in life. It also determines the frequency and type of racial discrimination they experience. Donovan (2015) stated that being a West-Indian immigrant in the US, she received a lot of “external messages... from White-European American Society that being a West-Indian immigrant female was somehow better than being an African-American female” (p.57). This statement highlighted how

spaces in White-European Western societies are governed by arbitrary racial hierarchies created by the dominant group.

Racial and Ethnic Microaggression and Burnout

Immigrants are susceptible to experiencing racial microaggressions in different areas of their lives (Sue et al., 2007). This could have a negative impact on their well-being and potentially exacerbate workplace stressors (Forrest-Bank et al., 2015; Nadal, 2011; Sue et al., 2007). Sue et al. (2007) defined racial microaggression as “brief and commonplace verbal, behavioural and environmental” insults that are targeted towards people of colour. These may be intentional or not, but are hostile and derogatory (Sissoko & Nadal, 2021; Sue et al., 2007). Sue et al. (2007) described three categories of microaggressions, specifically: 1) microassaults, 2) microinsults, and 3) microinvalidations.

Microassaults are an explicit form of racial discrimination and can either be verbal or non-verbal (DeAngelis, 2009; Sue et al., 2007). Microinsults are more covert and subtle forms of racial and ethnic microaggression (Sue et al., 2007; DeAngelis, 2009). Microinvalidations are when others invalidate a person of colour’s experiences and their “experiential reality” (DeAngelis, 2009, para.15). An example of an invalidation could be someone saying that “they do not see colour.” A study by Cénat et al. (2021) on the prevalence and effect of racial discrimination and racial microaggressions on black individuals in Canada found that anywhere from 50.2%- 93.8% of those surveyed had experienced at least one form of discriminatory experience. Sissoko and Nadal (2021) also outline the different forms of racial microaggressions that racial minority immigrants in the United States can experience. One type would be “denial of systemic and individual racism and meritocracy” (p.89), an example of which is “You only need to work hard to achieve success in America” (Sissoko & Nadal, 2021, p. 89). Another

commonly experienced one is “alien in own land” (p. 89), which is seen through questions like “No, where are you really from?” (Sissoko & Nadal, 2021, p.89).

While Sissoko and Nadal’s (2021) work is more specific to the American context, as seen through Cénat et al. (2021) study, it is also quite commonplace in Canada. This also highlights the idea that not everyone who identifies as an immigrant will be a person of colour. For the project, I will break down ethnic categories to understand the differences in experiences between immigrants of colour and those who are not.

Burnout and other intersectional factors. Maslach’s (1976; 1979) conceptualization of burnout explicitly examines how certain intersectional workplace factors—such as low wages—result in burnout. However, it is important to note that factors such as microaggressions and discrimination that immigrant women experience daily could potentially impact the relationship between workplace stressors and burnout. As there is a lack of empirical research in this area, it has yet to be explored how exactly these factors would impact the relationship between workplace stress and burnout.

Khan et al. (2021) conducted a cross-sectional survey examining the role of gender, sexual orientation, and ethnicity on physician burnout during COVID-19. The results showed that women reported higher levels of emotional exhaustion and lower levels of personal accomplishment. Also, visible ethnic minorities felt lower levels of personal achievement as compared to white physicians; however, they did not differ in the other two dimensions. A study by Hussenoeder et al. (2021) examined the migration status of physicians and its impact on their burnout and work-life balance. The results indicated that those with a migration background scored higher on all three dimensions of burnout, meaning they reported having higher levels of exhaustion and cynicism and felt less professional efficacy than those without a migration

background (Hussenoeder et al., 2021). However, migration background did not have any effect on work-life balance.

Biopsychosocial model of understanding chronic stress

Chronic stress can have severe adverse effects on an individual. Prolonged acute stress exposure can severely damage one's immune system and future abilities to cope with different types of stressors. Thus, stress and trauma caused by experiencing discrimination, racism, and acute workplace stressors can have detrimental effects on an immigrant ELCC worker's physical well-being. McEwen (2017) describes three types of stress: "good stress," "tolerable stress," and "toxic stress" (p.2). "Good stress" is defined as when one can deal with a challenge or difficult situation in a way that demonstrates resilience, adaptation, and strong coping mechanisms: the experience of overcoming a challenge and adversity results in positive outcomes for the individual in terms of their individual growth (McEwen, 2017, p.2). Tolerable stress is when the individual is experiencing a difficult situation and can still cope with it due to their support system and skills (McEwen, 2017). Toxic stress is when the situation and challenges that the individual is experiencing are overwhelming, and the individual has limited inner and external resources to cope with the adversity; the stress in this situation may be more severe and long-lasting (McEwen, 2017). It is essential to be able to understand the distinctions between these types of stresses because, considering the stressors that early childhood educators experience in their workplace settings, immigrant ELCC workers may be experiencing more toxic stress (Ng et al., 2023).

Stress and Immune Responses

Short-term stress response involves acute inflammatory reactions to help the individual deal with the threat to their body (McEwen, 2017). However, prolonged inflammatory responses

can cause harm to an individual's physical health and can result in various diseases, such as autoimmune diseases, cancers, and diabetes (Seiler et al., 2020). A stress response involves the hypothalamus-pituitary axis and the sympathetic nervous system, which releases cortisol, glucocorticoids, norepinephrine, and other hormones that activate the immune response (Seiler et al., 2020). Long-term release of these hormones, such as cortisol, can negatively affect an individual's body, such as increased blood sugar levels (which can eventually lead to Type II diabetes) (Kamba et al., 2016). The chronic stress response can be seen as a prolonged flight-or-fight response. During a flight-or-fight response, our sympathetic nervous system gets activated, which releases essential hormones such as epinephrine and norepinephrine that are crucial to help our body deal with the perceived threat (physical and emotional) (American Psychological Association [APA], 2023). For instance, activation of the sympathetic nervous system can constrict blood vessels (results in increased blood pressure), hyperventilation, and increased muscle tension, to name a few (APA, 2023a). For an immediate threat and stress, this response ensures we can endure the stress. However, this same response over a long period can cause issues such as cardiovascular, respiratory, and digestive (APA, 2023a).

Immigrants and Health Services Utilization

Many researchers have studied the topic of immigrants' health (Hall & Cuellar, 2016; Hemminki, 2014; Misra et al., 2021). Most studies have found that immigrant's health can be severely impacted by the transition that occurs during the process of their move (Hemminki, 2014; Misra et al., 2021). This is because migration and acculturation can cause social, cultural, economic, and educational challenges, to name a few (Misra et al., 2021). Misra et al. (2021) also describe how structural racism contributes to poorer health outcomes for immigrants; many factors, such as constantly dealing with macro and microaggressions and institutional and

systemic racism, can result in chronic stress and trauma, which can result in adverse effects on physical health. Common ailments for immigrant populations include but are not limited to diabetes, cardiovascular issues, obesity, and asthma (Hemminki, 2014).

There is also an added component of immigrants not being able to access appropriate medical care and treatments due to financial barriers, lack of knowledge, minimization of health problems due to focus on survival, and cultural differences, which can include a reliance on holistic or non-Western medicine (Yang & Hwang, 2016). Language barriers and location can also be significant barriers (Yang & Hwang, 2016). For example, in countries like the United States, where gentrification is expected and neighbourhoods are separated based on class and race, access to healthcare can be a considerable problem (Misra et al., 2021; Yang & Hwang, 2016). Many of these communities can be a poverty trap, with no access to fresh produce, healthy food items, and health centers providing adequate medical care (Misra et al., 2021; Yang & Hwang, 2016). Transportation may not be readily available either. This may result in individuals not getting medical care unless absolutely needed or not getting medical care at all (Yang & Hwang, 2016). Also, immigrants can experience many financial difficulties, and the connection between lack of money and nutritious, healthy food is quite simple---- those with financial constraints cannot always afford healthy food and may have to resort to less nutritious options (Khullar & Chokshi, 2019). Lack of access to healthy, nutritious food and continued poverty can be seen as a long-term stressor. Often, it is not within the control of the individual to break out of the cycle of poverty. Institutions and systems work against those who are vulnerable and marginalized, and thus, whether an individual can break out of poverty has very little to do with individual merit or willpower.

Available Literature on Job Satisfaction

This section presents some literature on factors associated with job satisfaction in early childhood education. Research has shown that high retention in early childhood education is associated with higher pay, better organizational and workplace environments, more positive support from colleagues, and more perceived control for workers (Totenhagen et al., 2016; OECD, n.d.; ECEC, 2022). A review of empirical literature conducted by Totenhagen et al. (2016), excluding home-based childcare providers and child welfare workers, revealed the following seven main reasons that influence early childhood workers' retention of their jobs: wages and benefits, job satisfaction, available alternative job opportunities, education and training, demographic characteristics such as age and ethnicity, characteristics such as organizational climate and workplace environment, job characteristics such as the amount of time spent on the job and professional experience. Totenhagen et al. (2016) found that early childhood workers were less likely to stay if they perceived they had alternative job opportunities. Another aspect of this finding was that workers would transition to better-paying jobs within the field if available.

In a similar vein, Cumming (2017) did a review of the literature on early childhood educators' well-being. She found that colleague support and more autonomy were positively associated with lower stress levels and more job satisfaction. In sum, greater workplace support, autonomy, and wages can improve workplace quality for immigrant ELCC workers.

Support For Immigrants in the Workplace

Supports for immigrant early childhood educators may need to be more specific to help address their socio-economic and cultural challenges; this project will address this in the

recommendations. Some studies are available on measures that could help in integration and decrease psychological distress for immigrants. For instance, a study by Chadwick and Collins (2015) found that an increase in social support was associated with higher self-perceived mental health among immigrants in Canada. The OECD (2014) published a policy recommendation on this topic. One recommendation listed among several others is ensuring that immigrant women have equal opportunities to integrate into the workplace and in the country of migration.

Integration measures can refer to support that employers can provide to help immigrant workers become more adjusted to their host country. Some other recommendations include: “tackl[ing] stereotypes and false perceptions by disseminating fact-based evidence on migration issues” and “focus on vocational language training and provide it - where possible on the job” (OECD, 2014, p.1).

As a significant part of the workforce in early childhood settings consists of immigrants, it is critical to provide recommendations to employers and governmental policymakers on how to improve workplace quality for immigrant ELCC workers, as they are already experiencing many other stressors in their daily lives. It is important to provide ideas for managing these stressors so that we can improve their lives and their ability to provide adequate care. Hence, chapter four of this project will focus on providing recommendations specifically targeting healthcare providers, employers and government policymakers.

Chapter III: Methodology

This project utilized the presented literature review and other studies and publications to curate a list of recommendations for healthcare providers, employers, and government policymakers. These recommendations highlighted how various stakeholders can better support immigrant ELCC workers working in an occupation requiring intensive emotional, physical, and mental labour. While some recommendations are more specific to immigrant ELCC workers, others are more generalizable to the larger working population in ELCC. These recommendations are based on extensive evidence-based studies to ensure that the recommendations provided have utility. The process involved research and compilation of studies to support the recommendations. An ethics review was not required for this project, as this project involved formulating recommendations based on pre-existing literature; hence, no data collection and involvement of participants was required.

Recommendations will be distributed via different platforms to ensure the information can be disseminated to various populations. Chapter V will discuss this further.

Timeline

The time below demonstrates how the project progressed from 2023 to 2024.

Project Proposal Development and Revisions	August – December 2023
Project Proposal Submission	January 2024
Research (Continuing lit review and synthesis), creating recommendations	Mid-February 2024
Feedback and requested changes by the supervisor	February-April 2024

Submission to Committee	End of April 2024
Feedback and any requested changes from the committee	Mid-May 2024
Final Submission and Approval	Beginning of June 2024

Chapter IV: Recommendations

Importance of Improving Life for Immigrant ELCC Workers

The extensive literature review highlighted the importance of improving working conditions and, hence, the lives of ELCC immigrant workers. As explored, one-third of the workforce in ELCC settings consists of immigrants (Uppal & Savage, 2021). There are many reasons for immigrants working in these settings, including an inability to have their credentials and qualifications recognized for jobs they held in their native country, being financially responsible for their families, and costs associated with licensing for their professions (Raihan et al., 2023). As such, community organizations that support immigrant communities should fully comprehend some of the unique challenges faced by those working in ELCC settings and how to support them.

Burnout in ELCC settings for all workers is prevalent for various reasons (Totenhagen et al., 2016). Some of the most common factors contributing to burnout include low and inadequate pay, lack of benefits and support from administration, management, and colleagues, limited opportunities for upward mobility, insufficient resources for assigned tasks, and pressure from parents/guardians (Grant et al., 2019; Jeon et al., 2018; Ng et al., 2023; Schaack et al., 2020). Unfortunately, there is a lack of data available on the specific experiences of burnout in immigrant ELCC workers. Hence, the key aims of this project were to: 1) examine the literature on burnout as it relates to ELCC workers; 2) analyze literature on socio-cultural and economic difficulties unique to immigrants that may intersect with stressors experienced within ELCC settings; 3) provide recommendations on how to mitigate the stress experienced by immigrant ELCC workers based on the literature review and analysis.

As discussed, the nature of ELCC workers' jobs is highly stressful as they act as caregivers and teachers to young children, requiring extensive utilization of their emotional, physical, and cognitive resources to ensure high-quality care (Jeon et al., 2018). Consequently, turnover rates in ELCC settings are very high due to the stressful nature of the job (Totenhagen et al., 2016). However, many immigrants may be unable to leave their jobs due to financial constraints and other responsibilities, such as being sole caregivers for their families. The inability to leave this stressful environment is compounded by other personal factors unique to immigrants, such as language difficulties, sociocultural adaptation, and acculturative stress (Berry & Hou, 2016). Additionally, immigrant workers in ELCC may lack access to adequate resources to cope with this stress, such as counselling services (Kalich et al., 2016; Ren & Jiang, 2021).

Structure of Chapter and Targeted Audience

The following section will utilize literature review themes found in the previous chapters to provide recommendations. The recommendations will cover five critical thematic areas: language barriers, acculturative stress, lack of access to resources and support, preventing burnout, and addressing burnout. Each section will describe the context and problem of the thematic area, the associated mental health implications, and recommendations to address the problem. In each recommendation section, I will be looking at how the application of the recommendation aligns with preventing burnout. Outlining these recommendations will allow me to achieve the third aim of the project—to provide recommendations on how to mitigate the stress experienced by ELCC workers.

This project's target audience will be employers, government policymakers, and healthcare providers. Employers are directly responsible for organizational structure and

environments. Thus, some recommendations address how employers can address and prevent burnout in their organizations. Government policymakers are included as they are responsible for factors such as funding designation, certification, and regulations. For this chapter of the project, “healthcare providers” refers to those providing counselling services (such as psychologists and counsellors) and medical services (nurses and general medical practitioners). Healthcare providers supporting immigrant ELCC workers via non-profit organizations and community-based settings would benefit from learning about the unique challenges individuals face in ELCC settings. This can help healthcare providers better understand the precarious situation and impact on health that many immigrant ELCC workers may find themselves in due to the circumstances of their profession.

Some of the recommendations are also targeted at social workers because they provide vital resources that ensure the well-being of individuals. In Alberta, social workers are regulated under the Health Professions Act (HPA) and are, thus, considered to be health professionals (Government of Alberta, n.d.). Social workers’ responsibilities are wide-ranging, including but not limited to connecting individuals with resources such as housing and basic necessities, advocacy, legal and mental health support, and working with other health professionals (Canadian Association of Social Workers, n.d.). Immigrants (especially newcomers) may seek support from social workers. Therefore, the information presented in the recommendations would be beneficial in unique ways for each target audience to consider when working with immigrant ELCC workers.

Section 1: Language Barriers

Context and Problem

Communicating in English can be quite challenging for many immigrant workers whose native language is not English; they may have had little to no exposure to English in their home country (Huot et al., 2020; Schultheiss & Davis, 2015). Even if they learned English in their native country, comprehending and using it proficiently could still be a significant barrier for many (Huot et al., 2020; Schultheiss & Davis, 2015). As Huot et al. (2020) stated, “language is understood as a form of capital that is mediated through social power relations” (p. 95). Accordingly, communicating adequately in English in countries like Canada can pose a significant barrier for many immigrants, especially in occupational settings (Huot et al., 2020). A study by Wang and Jing (2018) found that language proficiency can be a determinant of job satisfaction for immigrant workers; this suggests that a lack of language proficiency can potentially lead to challenges within the workplace.

In general, a lack of language proficiency in one’s occupational setting can lead to isolation, feelings of overwhelm and frustration, and an inability to understand instructions and to complete assigned tasks (Huot et al., 2020; Schultheiss & Davis, 2015). These stressors can all contribute to various components of burnout, such as exhaustion; exhaustion is when a worker may not have the necessary resources to complete the assigned tasks (Maslach et al., 2001). According to the Government of Alberta (2013), ELCC settings expect communication to be in one of Canada’s official languages. Hence, a lack of proficiency in the language can affect the completion of tasks in early learning settings and can contribute to immigrants’ stress, exhaustion, and, subsequently, burnout.

Working as an ELCC worker requires much communication with children and parents. Thus, proficiency in communication in either of the two official languages is a required asset for the job. The inability to communicate in such a manner could result in exhaustion for immigrant ELCC workers who would struggle to complete their daily tasks.

Proficiency in communicating in English or French in Canada and understanding it well in early childhood settings constitute important skill sets. Beyond communicating with parents, co-workers, and administration, early childhood educators must be able to communicate effectively with the children under their care. ELCC workers contribute to the early language and communication development in young children and thus should be able to create learning environments conducive to language growth and learning (Brebner et al., 2016). Children will likely spend significant amounts of time under the care of ELCC workers. As such, ELCC workers' language abilities and communication styles will influence the way children communicate (Brebner et al., 2016). Immigrant ELCC workers may struggle to communicate with children in English or French in Canada, especially older children who are more verbal and cognizant of the language being spoken. Struggles with communication due to language barriers can thus be a significant source of frustration for ELCC workers and the children in their care.

Mental Health Implications

The mental health impact of learning a new language for immigrant ELCC workers can be substantial. Although there is not much literature on the specific experiences of immigrant ELCC workers, we do know about the general experiences of immigrants. Huot et al. (2020) conceptualized "fluency in the dominant language as a potential form of linguistic capital" (p.97) in a qualitative study examining the impact of language barriers on immigrant integration into host society. This quote exemplifies that integrating into the host society is mainly contingent on

proficiency in the host country's dominant language(s). Huot et al.'s findings reinforced this hypothesis: the inability to communicate in the dominant language proficiently negatively impacted participants' ability to integrate socially and culturally and thus resulted in isolation (Huot et al., 2020). Further, a mixed-method systematic review by Alemi et al. (2014) on psychological distress in Afghan refugees found that psychological distress was correlated with language difficulties. Based on available research literature and as presented in chapter two of the project, it is evident that the inability to communicate proficiently in the local language hinders more than just job opportunities; it can also contribute to mental health challenges as language barriers can lead to problems integrating socially and culturally.

These findings have implications for immigrant ELCC workers, who may also experience mental health struggles due to the inability to communicate effectively. As the literature review highlighted, several studies have demonstrated the impact of a lack of language proficiency on mental health outcomes for immigrants. For instance, research has indicated a correlation between low language proficiency and the prevalence of mental disorders, as well as the intensity of psychiatric symptoms; those with lower language proficiency had a greater incidence of mental disorders, as well as the intensity of psychiatric symptoms (Montemitro et al., 2021). Overall, it is clear from revisiting the literature review that language difficulties are associated with isolation, lack of feeling of belongingness, more significant psychological distress, and mental disorders (Alemi et al., 2014; Huot et al., 2020; Montemitro et al., 2021).

Recommendations

1. Language Supports and Resources. It is of utmost importance to provide additional support beyond basic language support classes to ELCC workers to decrease language barriers and gaps and to help them communicate with key stakeholders (parents and children) in their

jobs. Specifically, becoming more adept at communicating in the dominant language will allow ELCC workers to better understand both parents' and children's verbal and written communication, which is essential for functioning on the job. Training in overcoming language gaps can enable immigrant ELCC workers to make sense of common idioms, phrases, and overall language structure. This understanding can further enhance their ability to communicate in the dominant language with others beyond the work setting in the host country, thus contributing to feelings of belonging both on the job and in the larger community.

Additionally, immigrant workers may not know how to express professional challenges to the administration due to language barriers. They might experience fear of losing their job because they feel they do not have the correct vocabulary to describe their struggles professionally. Immigrant ELCC workers may also be unable to precisely articulate the areas in which they need additional support and how they need it. The provision of language training support could, therefore, be a means to address all three components of burnout in various ways. Language supports could allow immigrant ELCC workers to voice their need for additional resources to complete their tasks, which can help combat feelings of emotional exhaustion and inefficacy, which are burnout's first and second components, respectively (Maslach et al., 2001). Lastly, these supports can allow them to deal with any interpersonal conflicts professionally and lessen feelings of cynicism towards their co-workers, employers and parents, thereby addressing the third component of burnout.

Based on the above considerations, an important starting point for service providers like government language training agencies should be to provide language classes, training, and workshops specific to communication styles within these ELCC settings. To elaborate, federal and provincial governments should invest money in providing language development

opportunities that teach necessary communication skills that match children's various developmental stages. This may mean providing information on and teaching non-verbal and verbal modes of communication for children at different stages of development. This would be in addition to any other necessary language proficiency training that immigrant ELCC workers may be given or utilize.

A key focus of these programs should be to help immigrants develop their language skills to a certain level of proficiency for communicating with children and parents, as this can be a critical resource for performing their jobs. The workshops and training could thus suggest helpful ways of communicating with parents to address the needs of children. These supports would differ from other general language development classes, as these would be oriented towards developing specific language skills needed for the job. These government language programs for immigrant ELCC workers should be developed using recent research literature on children's language development to ensure that the information provided is based on empirical and clinical evidence. It may also be worthwhile to consider utilizing a multi-disciplinary approach by having some classes taught by child psychologists and speech pathologists specializing in language development. Notably, these programs would serve two purposes: they would lessen the burden on ELCC workers by providing them with necessary skills and information, and their heightened skills would, in turn, help in children's language development.

It would also be necessary for ELCC employers to consider these resources as part of paid work time, allowing workers to utilize these training resources without additional time or financial burdens. Many immigrant ELCC workers may not choose to attend these language classes due to the mental load of learning a new language. Some possible ways to decrease this mental load would be to provide incentives such as gift cards, certificates, or acknowledgment of

training received. Providing a small reward, in conjunction with paid time to attend language classes, could positively reinforce ELCC workers' attendance at language development opportunities.

Section 2: Acculturative Stress

Context/Problem

As described in the literature review, acculturative stress is a common experience for many immigrants. To reiterate, acculturative stress is “stress that emerges from conflicts when individuals must adjust to a new culture of the host society” (Ren & Jiang, 2021, p. 1). The degree to which immigrants adapt and integrate into the host society is contingent on the extent to which they want to maintain their native cultural norms, values, and beliefs (Berry & Hou, 2016). Some common factors that may result in acculturative stress include but are not limited to becoming familiar with and adjusting to different cultural norms, cultural values, and cultural beliefs, experiences of social isolation, loneliness, loss of a sense of belongingness, language barriers, and discrimination (Berry & Hou, 2016; Kalich et al., 2016; Kristiana et al., 2022). Thus, we can view acculturative stress as the result of a multitude of challenges, including racism and racial discrimination. Berry and Hou (2016) postulated that racial discrimination can negatively impact the way that immigrants may adapt to the host country. Specifically, experiences of racial discrimination may decrease a sense of belongingness to the host country and increase a sense of wanting to connect more to an individual's host country and culture. While racism and racial discrimination are one part of acculturative stress, they can be one of the more significant and commonplace stressors (Mooten, 2022). Hence, a key focus of section two will be addressing this component of acculturative stress.

It is also important to note that the experiences of all immigrants will not be the same (Adjei et al., 2020). Scholars have pointed out that many research studies examining topics such as mental health outcomes for immigrants, acculturation, and discrimination fail to identify important nuances between immigrant groups, which can affect the outcomes of all studies (Elshahat et al., 2022; Saasa et al., 2021). These differences are paramount to understanding racism and related stressors because not all immigrants will be visible minorities. Many individuals may also immigrate from Western nations and may not be racialized visible minorities. Immigrants who are not visible minorities will have different challenges, and issues such as racial discrimination and racial inequality may not be as pertinent to them.

Those in administrative and management positions in ELCC settings must be cognizant of these vital differences and not come up with blanket solutions to immigrants' presenting issues related to acculturative stress. As emphasized throughout the literature review, the perspective of intersectionality is critical in understanding the experiences of immigrant ELCC workers; many of the immigrant ELCC workers are racialized and thus have intersecting identities (Suyemoto & Donovan, 2015). Racialized immigrant female ELCC workers will have vastly different experiences in their workplace compared to non-racialized immigrant female ELCC workers.

It is critical to highlight that for this project, I took the perspective that many immigrant workers within ELCC settings are racialized visible minorities. This is consistent with statistics from the Government of Canada, which outline that about 23.7% of ELCC educators and assistants identify as a visible minority (Uppal & Savage, 2021). Hence, the literature review and recommendations for this project focus on how racial inequality and discrimination will be profound stressors for immigrant ELCC workers, whether in the workplace or in daily life. The

project's focus is also congruent with my goal of highlighting the experiences of visible minorities within a profession that is already undervalued. To reiterate, my theoretical foundation is based on feminist and multicultural therapy. Both treatment modalities emphasize critical examination and deconstruction of power structures that position vulnerable and marginalized groups at the end of the social hierarchy (APA, 2018; Brown, 2018). Feminist and multicultural therapy also aligns with the intersectional approach explored in the literature review. Individuals live within this social hierarchy; thus, their realities are subjective and based on their experiences of intersecting inequalities.

Mental Health Implications

The significant challenges stemming from socio-cultural and economic adjustments during acculturation and the resulting stress can increase the likelihood of developing burnout in the occupational realm. An individual only has so many psychological resources to deal with stress when it encompasses most aspects of their life. Some of the implications of the acculturation process for mental health have already been outlined above, such as feelings of isolation (Fung & Gudzer, 2021). Other psychological problems that may arise because of acculturative stress include depression, anxiety, and psychosomatic issues (Tiwari et al., 2017). I also note that the process of acculturation may be a form of *chronic stress* because it is tumultuous and filled with uncertainty, which indicates that it can be a never-ending process for many. In sum, immigrants undergoing acculturation encounter various long-term stressors, including unemployment, poverty, limited access to healthcare, racism, and overall instability (Fung & Gudzer et al., 2021). These stressors have been linked to various impacts on mental health and functioning.

From a neurobiological perspective, prolonged release of cortisol (the stress hormone) is linked to mental health issues such as depression and irritability (Dziurkowska & Wesolowski, 2021). Higher cortisol levels are also found after traumatic events (Dekel et al., 2017). Dziurkowska and Wesolowski (2021) noted that high levels of cortisol were found in about 50% of patients who had recently been diagnosed with depression. Paradies et al. (2015) also found that a common mental health outcome for those who have experienced racism was depression. Misra et al. (2021) highlighted in their study that structural racism can result in trauma for immigrants.

Based on the preceding literature, it is evident that there is a significant negative impact on mental health for those who are going through the process of acculturation. These impacts are more complex and severe for those who may also be experiencing racial inequality and discrimination in this process. In line with this project's focus, this section's recommendation will focus on how to create a workplace environment where diversity and inclusion are championed. Employers can create a more meaningful and healthy workplace experience for immigrant ELCC workers through such an environment.

Recommendation

1. Create and Implement EDI (Equity, Diversity, and Inclusion) Policies for ELCC workplaces. Racism and discrimination are a key component of acculturative stress (Berry & Hou, 2016; Mooten, 2021). Experiences of racism and discrimination within workplace settings can contribute to burnout, as individuals do not feel part of their new host community. A sense of community and collegial support is one of the six components of the worklife model (Maslach et al., 2001). A lack of community can lead to feelings of depersonalization/cynicism and further negative interactions with colleagues (Maslach et al., 2001). Additionally, these negative

experiences of racism and discrimination can further drain the emotional and psychological resources that an individual needs to do their job.

As the literature review highlighted, acknowledgment of the prevalence of racism and discrimination within Canadian workplace settings is obscured by the very complex discourse on discrimination and racial inequality within the Canadian diaspora (Mooten, 2022).

Unfortunately, the reality is that immigrants often still experience racial discrimination as a form of bullying within workplace settings in Canada (Sterud, 2018).

An equity, diversity, and inclusion framework (EDI) can help decrease instances of discrimination against racialized workers. Equity ensures everyone gets equal opportunities regardless of gender, race, sex, and so forth (University of Toronto, n.d.). Diversity emphasizes creating a community representing people from multiple facets of life and identities (University of Toronto, n.d.). Lastly, inclusion ensures that regardless of an individual's identity, they feel like they belong and have equal access to opportunities (University of Toronto, n.d.). Whether on a provincial or federal level, governments should create a mandate where ELCC settings specifically demonstrate how they have incorporated the EDI framework into their organizational structure through policies, activities, and support provided. To test effectiveness, anonymous yearly surveys could be provided to workers to assess how well administration and management adhere to the EDI framework. These surveys should include questions pertaining to experiences of racial discrimination, harassment, and bullying.

EDI frameworks can be beneficial in helping immigrant ELCC workers integrate into their workplace as well as the larger community. This can help address the various components of acculturative stress. To reiterate, acculturative stress results from challenges experienced during the process of adapting to the host country (Ren & Jiang, 2021). Often, individuals are

conflicted between holding onto their values and beliefs and adopting those of the host country (Berry & Hou, 2016). An EDI framework can decrease this conflict by alleviating some pressure to assimilate by forgoing one's cultural beliefs and values. Individuals can continue to hold onto their cultural values and beliefs while also adopting those of the host country they align with. This is because an EDI framework advocates for diversity and equity; a key underpinning of the framework is that everyone's unique identity is appreciated and promoted (University of Toronto, n.d.). Evidently, this framework is conducive to the professional and personal growth of immigrant ELCC workers. Further, this framework aims to diminish and eliminate workplace discrimination, such as racism (University of Toronto, n.d.). We know, based on the extensive literature reviewed in the project, that immigrants are highly susceptible to workplace discrimination due to various factors such as accent, race, and language skills (Raihan et al., 2023). Ideally, by incorporating an EDI framework, workplaces can remove some workplace stressors that are specific to immigrant ELCC workers and moderate the relationship between workplace stress and burnout. Another essential benefit if this recommendation is implemented is that immigrant ELCC workers would feel more welcome in their workplaces and the larger host society.

Section 3: Lack of Access to Resources and Support

Context and Problem

This next section will explore the lack of access to resources and support, undergirded by the assumption that inadequate access to suitable healthcare providers and services often contributes to burnout. Further, once an individual experiences burnout, having access to available support services becomes essential for recovery and continued well-being. The recommendations below will touch on each of these aspects. Further, the recommendations will

specifically highlight the intersectional challenges immigrant women who are often racialized can face in accessing helpful supports. It is imperative that immigrant workers have access to culturally safe health and counselling services, as doing so may allow for an expanded ability to cope with the challenges of migration, racism, and the demands of ELCC work. Unfortunately, this is not often the case.

As highlighted numerous times throughout the document, working as an early childhood educator can be immensely stressful--these workers are responsible for the emotional, physical, and mental well-being of extremely young children, who are often in a critical stage of their development (Jeon et al., 2018). Immigrant ELCC workers are also often dealing with other forms of chronic stressors, such as racism and discrimination, that negatively impact their health (Szaflarski & Bauldry, 2019). Lack of access to financial, social, and health-supporting resources can contribute to acculturative stress and pose significant challenges for immigrants navigating the landscape of the host country (Turin et al., 2021). Administrative staff (meaning those responsible for running the ELCC settings) must recognize that much of the ELCC workforce consists of individuals with marginalized identities who may require support in various ways (Uppal & Savage, 2021). Even though multiple resources may exist, there can often be cultural, economic, and linguistic barriers to accessing these resources (Luft & Kellett, 2023).

Health services utilization is already low within immigrant communities (Yang & Hwang, 2016). As a result of the lack of employee healthcare benefits, immigrant ELCC workers might avoid accessing necessary services until their health is poor enough that they might not be able to continue working (Garasia et al., 2023). Other factors, such as language barriers, lack of information, and fear of discrimination, prevent immigrants from accessing healthcare services

(Thomson et al., 2015). Even when immigrants access resources meant to be helpful, they may experience a lack of cultural competence on the part of the clinicians providing the resource, which can cause other stress responses (Luft & Kellett, 2023). Language difficulties represent a further barrier when accessing healthcare services, as immigrant ELCC workers may not be able to express feelings of burnout and stress to their healthcare provider. They may also have to navigate an unfamiliar healthcare system and not receive adequate coverage that would otherwise be provided to their native counterparts (Garasia et al., 2023; Martin et al., 2018; Yang & Hwang, 2016).

In addition to the above considerations, mental health services are still quite expensive and often not subsidized or included in health plans or employer benefits. As explored, early childhood education and caregiving are undervalued work, often meaning many workers may not get health insurance from employers (ECEC Report, 2022). Lack of health benefits means this group will have to pay out of pocket if they want to receive counselling or other non-subsidized services such as medications. This problem can be pronounced for immigrant ELCC workers due to low wages and familial pressures.

Furthermore, if immigrant early learning and child care (ELCC) employees cannot access resources that cater to their health and well-being in a culturally sensitive and competent manner, it not only affects them personally but also impacts their performance and interactions with children and colleagues in the workplace. Lack of access to culturally safe resources or access to resources that are not culturally relevant could result in more harm than benefit. Culturally relevant resources would address individual needs by incorporating appropriate cultural values and belief systems (Sanders et al., 2019).

It is also important to revisit the unique social determinants of health (SDOH), such as experiences of discrimination, poverty, and acculturative stress, that have an immense impact on immigrants' health. Studies have shown that inequitable social factors can be linked to poorer health outcomes for racialized minorities (Deferio et al., 2019; Nair & Adetayo, 2019). Healthcare practitioners who do not take into account these SDOH will fail to provide adequate care that target the ailments (physical or mental) that affect this population (Kirkbride et al., 2024; Nair & Adetayo, 2019; Shim et al., 2020). Lack of appropriate care can worsen health issues with inappropriate diagnoses and treatment, hiding serious underlying problems (Nair & Adetayo, 2019; Kirkbride et al., 2024). Culturally relevant resources can be utilized when working with immigrant ELCC workers with SDOH that are specific to them and their intersecting identities.

Mental Health Implications

Mental health implications of a lack of appropriate resources and support include feeling a sense of isolation, fear, sadness, and loneliness (Chadwick & Collins, 2015; Salami et al., 2019). Individuals may also experience increased feelings of stress while navigating the healthcare system. Additionally, many may not access healthcare services due to previous negative experiences with healthcare providers (Zghal et al., 2021). When immigrants use resources that are not culturally relevant, it can push them away from seeking further services (Zghal et al., 2021). They may lose trust in their healthcare provider, leading to further harm. Studies have indicated that a lack of equitable treatment from their healthcare provider can contribute to lower quality of life (Zghal et al., 2021).

It is essential to emphasize the importance of the physiological impacts of chronic stress on mental health. As discussed previously in the literature review section on the biopsychosocial

model, chronic stress can lead to numerous health diseases, such as cardiovascular issues, high blood pressure, diabetes, and obesity (McEwen, 2017). It is also important to note that the physical and psychological health of ELCC workers (immigrant or not) will have an impact on the quality of caregiving that children receive (Kwon et al., 2020). Potential psychological impacts of long-term or chronic stress include anxiety, depression, substance use issues, insomnia, memory, and cognitive issues (APA, 2022).

Recommendations

1. Create a readily available resource list for immigrant ELCC workers that they can easily access. By compiling a comprehensive list of resources relevant to immigrants and newcomers, administrators and management can facilitate the process of immigrant workers accessing support (Selvanandan & Reid, 2021). This resource list should be curated meaningfully to ensure that it addresses the specific intersectional needs of immigrant ELCC workers. Luft and Kellett (2024) developed a resource that helps service providers assess immigrants' immediate needs. Here are some factors to take into consideration when determining if a resource would be appropriate for inclusion on the list: whether it is low cost or financially feasible, whether it is specific to immigrant status, whether it is well matched to other intersectional factors such as ethnic and linguistic background, and if there are available linguistic/translation resources. It is vital to ensure that those choosing these resources keep these factors in mind, as otherwise, resources may not be helpful for immigrant ELCC workers and could contribute to more stress and frustration. The resource list should also be regularly updated through ongoing community research to ensure it remains current and includes the latest available resources. This may involve identifying community-based and non-profit organizations

offering culturally relevant services to immigrants and gathering information on local places of worship such as temples, churches, mosques, and other gathering places.

2. Encourage Religious and Spiritual Connections. This recommendation centres around connecting immigrant ELCC workers to local places to worship, which can be helpful and a critical resource they rely on. Spirituality and religion can often be a source of hope for many immigrants and the resources they turn to in times of need (Chaze et al., 2015). Healthcare providers must be aware but also respectful of the importance of this in the everyday lives and healing of many immigrants. Religion and spirituality often play significant roles in acculturation and coping with stressors for many immigrants (Chaze et al., 2015). Many immigrants find significant support, connection, and community when attending religious gatherings (Agyekum & Newbold, 2016; Berry & Hou, 2019; Chaze et al., 2015). Such gatherings can enable them to network with others in their community, fostering a sense of belongingness amidst overwhelming challenges (Agyekum & Newbold, 2016; Berry & Hou, 2019; Chaze et al., 2015).

3. Provide Counselling Services. To reiterate, many ELCC workers may choose not to seek mental health services because of how expensive they can be. Many immigrant workers may also not seek counselling due to a lack of knowledge of what it entails and how it may help them. Further, they may be reluctant to seek counselling due to a lack of knowledge of what it involves and how it may help them. Employers should ensure that they are providing information on counselling services and how these services can support their workers. While employers are responsible for providing mental health support within their workplace settings, governments are much more accountable as they are responsible for funding, policy creation, regulation, and monitoring. Hence, it is of utmost importance that the federal government creates and implements policies that ensure that ELCC workers across Canada have mandatory health

benefits, which include access to mental health services. Governments should allocate more funding toward mental health services than currently assigned and ensure that every health plan consists of a certain amount of subsidized counselling. Unfortunately, although mental health issues are highly prevalent in Canada (one in five people in any year will have a mental illness), there is not an emphasis on ensuring that mental health support is included as necessary health care services (Canadian Mental Health Association, n.d.). However, as we know, mental health is as important as physical health, and they are often intertwined (McEwen, 2017).

4. Practice from a Culturally-Competent Framework. An important finding from the literature review emphasized the need for healthcare providers serving immigrant ELCC workers to actively consider factors like acculturative stress, burnout in the ELCC workplace, and language barriers when conceptualizing a patient or client's main presenting problems. This type of conceptualization should subsequently inform the treatments and interventions used. The treatments and interventions should be administered in a culturally competent manner, which may differ across healthcare professions. Cultural competence in healthcare is defined as the ability of the clinician to: 1) be aware of and understand the client/patient's cultural background, beliefs, and norms; 2) acknowledge their own biases, assumptions, and privileges; 3) comprehend how those biases and assumptions may influence their ability to provide the highest level of care, 4) integrate culturally-relevant and safe resources and practices into treatment if necessary (APA, 2023b; Nair & Adetatayo, 2019).

For psychologists, culturally competent practice may entail more than simply being aware of cultural norms, beliefs, and values. Awareness and understanding of the client's cultural norms, values, and beliefs represent the minimum standard, aligning with the College of Alberta Psychologists (CAP) standards of practice on cultural competency (CAP, 2022). Psychologists

working with clients who are immigrant ELCC workers may also want to consider the cross-cultural validity of any interventions and assessments they use. It might also be prudent to better understand the emotional and cognitive demands placed on immigrant ELCC workers and how these factors can lead to burnout.

The Canadian Psychological Association's (CPA) Code of Ethics also has numerous ethical standards that help to ensure cultural competency, which is vital in ethical practice (CPA, 2017). Principle I, *Respect for Dignity of Persons and Peoples*, speaks to respecting the diversity of our clients and, thus, helps to ensure that the highest level of care is provided despite any cultural differences (CPA, 2017). For instance, in ethical standard I.11: *Non-discrimination*, it is clearly outlined that clinicians create and provide services such that "they contribute to the fair distribution of services to individuals and groups, and they do not unfairly exclude" those who may be in vulnerable positions (CPA, 2017, Standard I.11, p.13). Additionally, in Principle II: *General Caring*, ethical standard II.10 focuses on clinicians assessing how factors such as their own beliefs, culture, values, and socio-economic and cultural contexts may influence the services they provide to their clients (CPA, 2017, Standard II.10).

Language difficulties can also present a significant barrier for clients. As such, psychologists may want to consider the following: 1) the use of interpreters and the ethical and clinical implications involved, and 2) referring clients to other clinicians who have the necessary language competency. Working with immigrant ELCC workers may require psychologists to conduct additional research, assess their competency, and identify appropriate psychological treatments and tools. In line with the Canadian Psychological Association's (CPA) code of ethics, specifically Principle I: *Respect for Dignity of Persons and Peoples*, and Principle II:

Responsible Caring, the responsibility lies with the clinician to ensure that the highest level of care is provided to clients (CPA, 2017).

It is important to note that while these three recommendations focus on addressing the problem of a lack of resources and support, they also apply to section four, which focuses explicitly on addressing burnout. Having access to resources such as community networks, places of worship, and improved and expanded healthcare services (which includes counselling) can help to decrease the severity of the stressors that an immigrant ELCC worker may experience in their workplace. As explored at length in the sections above, having counselling services can provide immigrant ELCC workers with an outlet to share their experiences of workplace and personal stressors. Most importantly, it can help them heal if they are already experiencing burnout. Community support networks and other culturally relevant resources can mitigate acculturative stressors and increase their ability to integrate into Canadian society. Therefore, these recommendations are also relevant to the section below on addressing burnout.

Section 4: Addressing Burnout

Context and Problem: Toxic Workplace Environments

The literature review illustrated how toxic workplace environments and organizational culture significantly contribute to burnout in ELCC workers (c.f., Brooker & Cumming, 2019; Jeon et al., 2022). Specifically, a lack of administrative support and unequal power between administration and workers can lead to cynicism and depersonalization, which is a crucial component of burnout (Brooker & Cumming, 2019; McFarland et al., 2022). Furthermore, research has demonstrated that immigrant workers are much more likely to experience bullying in workplace settings (Sterud et al., 2018). Bergbom and Vartia (2021) indicated that immigrants may be more susceptible to workplace bullying for the following reasons: prejudicial attitudes

towards particular ethnic groups, lower perceived status and power within the organization, and cultural differences. Immigrant workers may fear reporting instances of bullying due to the perception that they may not receive support from the administration and that it would exacerbate the situation. Additionally, they could fear losing their job if they express dissatisfaction. Moreover, workers may lack avenues for reporting issues against the administration, particularly in ELCC settings.

Mental Health Implications

Sansone and Sansone (2015) summarized findings from 12 studies on the health impacts of workplace bullying. The findings revealed that workplace bullying resulted in increased mental distress and leaves of absence, which can increase financial burden, leading to more stress, sleep problems, anxiety, and adjustment disorders (Sansone & Sansone, 2015). Some physical health issues resulting from workplace bullying may include acute pain, cardiovascular problems, and neck pain (Sansone & Sansone, 2015). Another study found that workplace bullying can lead to drug abuse, suicidality, life dissatisfaction, and depression (Chatziioannidis et al., 2018). It is important to note that those who experience bullying generally do so long-term; they continuously experience harassment over an extended period. Conway et al. (2021) found that those who experienced bullying exhibit PTSD symptoms similar to those of individuals who have experienced a traumatic event. As noted, toxic workplace environments, particularly workplace bullying, to which immigrant workers are more susceptible, can result in severe mental and physical health problems.

Recommendations

1. Do mid-year anonymous surveys to assess workplace environments. Anonymous surveys are valuable because they allow individuals to express their opinions on various topics

without revealing their identity (Murdoch et al., 2014). By creating anonymous surveys, administrators can assess workplace environments more effectively, gain insight into areas needing improvement and additional support for workers, and identify major problem areas (Frampton et al., 2017). These surveys can include questions addressing racial inequality and discrimination, allowing immigrant ELCC workers to share their experiences without experiencing additional anxiety, fear, or stress. Such surveys can make workers feel heard and increase their engagement (Frampton et al., 2017). Moreover, they can give immigrant ELCC workers a sense of control in an environment where they may feel that administrators hold significant power over every aspect of their job. As noted in the literature review, according to the worklife model, control is one of the six factors contributing to burnout (Maslach et al., 2001). Lack of control can lead to feelings of inefficacy and a lack of personal achievement (Maslach et al., 2001). Therefore, administrators and management should also strive to balance power dynamics between themselves and workers in early learning settings. Hiring a third-party service to do these anonymous surveys might be helpful and could increase workers' participation.

This recommendation applies to the next section, "Preventing Burnout," as well. Feedback about the workplace environment will help address the areas that need improvement and act as a preventative measure, where employers know the main problem areas that need to be fixed so it does not cause similar problems later.

Context and Problem: Lack of knowledge on Burnout

It will be challenging to address or prevent burnout if employers lack an understanding of what burnout is. As defined in the literature review, Maslach's (1976) definition of burnout was utilized to develop this recommendation, as their conceptualization of burnout is the most

commonly used definition. By learning about burnout, employers could take an essential step toward fostering healthy workplace environments that promote meaningful work, growth, and collegial support (Klinghoffer & Kirkpatrick-Husk, 2023; Mills, 2021). Unfortunately, employers may not know much about burnout and thus may find it challenging to identify aspects of their workplace that are contributing to burnout. It can be inferred that ELCC employers' lack of knowledge on burnout is more pronounced as compared to other professions based on research that states organizational culture in early childhood education settings significantly contributes burnout (Jeon et al., 2018; Ng et al., 2023; Schaack et al., 2020).

Mental Health Implications of Burnout

Burnout can result in depressive symptoms, the use of antidepressants, and potential hospitalization for mental disorders (Salvagioni et al., 2017). Other components of burnout are physical and emotional exhaustion, cynicism, and feelings of incompetency (Maslach et al., 2001). In research with medical students, Wilkes et al. (2019) found that burnout can also contribute to anxiety disorders. Another study by Stelnicki et al. (2020) found that in comparison to nurses who reported no burnout, those who reported clinically significant levels of burnout were more likely to be assessed positively for all mental disorders (post-traumatic stress disorder, generalized anxiety disorder, and panic disorder) except for major depressive disorder. ELCC workers, in general, report high levels of burnout due to the highly stressful nature of their jobs (Grant et al., 2019; Ng et al., 2023). Numerous factors in an ELCC's workplace can contribute to feelings of burnout, such as low pay, low staff-to-child ratio, and inadequate resources, to name a few (Stein et al., 2022).

Recommendation

1. Learn about Burnout. Administrators and management must understand burnout and the unique factors in ELCC settings that contribute to it. This understanding can facilitate: 1) preventative measures to reduce burnout risk factors and 2) recognition of workers who may be at risk of experiencing burnout (Klinghoffer & Kirkpatrick-Husk, 2023; Mills, 2021). Employers cannot effectively support workers of any background without adequate knowledge of burnout and its causes. Therefore, administrators should mandate professional development activities such as workshops and seminars to educate themselves on burnout. This may involve organizing workshops for administrative staff and management to educate them on burnout in ELCC settings.

2. Use Maslach Burnout Inventories (MBI). This recommendation centres on how employers may use the MBI to learn about their employees. As outlined in the literature review, the Maslach Burnout Inventory (MBI) is commonly used to assess individual burnout levels. While the inventory should not be used as a standalone diagnostic tool, it can be valuable when combined with other information (Maslach & Leiter, 2021). Employers can easily access these inventories online for purchase. Employers need to administer the MBI inventories in a culturally-informed manner. Strategies may include: 1) using interpreters or administrative staff fluent in the worker's language to administer the tool, and 2) providing information pamphlets on burnout (translated into commonly spoken languages) for workers to easily comprehend and identify with. Helping immigrant ELCC workers identify burnout may involve using various communication modes such as videos, podcasts, and seminars. There are minimal research studies examining cross-cultural validity and adaption of the MBI, with only one study being found during a literature search (Chen et al., 2014; Squires et al., 2014). This study examined

cross-cultural validation and adaption of the MBI in Malaysia, and statistical analysis indicated that the different versions of MBI (Health-Services, General Survey and Educators Survey) were valid (Chen et al., 2014). Due to the limited evidence available on the validity of culturally adapted versions of MBI, it might be important to adhere to the current version of the MBI and use it as another data piece in understanding the larger picture.

There are some important ethical implications to take into consideration regarding the use of the MBI. Employees should not be forced to answer the survey or inventory if they do not feel at ease. Forcing employees to answer questions on the survey would be counterintuitive to the purpose of the inventory because it can create undue stress due to the participant's lack of autonomy and control. An informed consent process should also be involved if employees agree to respond to the survey. Fundamental principles of informed consent involve the purpose of the inventory, information storage, confidentiality, benefits and risk, ability to rescind/withdraw consent at a point, alternatives to taking the inventory and assessing the individual's capacity to give informed consent (CAP, 2022). Furthermore, to help with standardized administration, it may be important to train a few staff members to administer the survey consistently rather than have multiple untrained staff members do so. While this is by no means a formal diagnostic assessment, standardization can help maintain objectivity and ensure the validity of the assessment tool (Huber & Skedsmo, 2017).

The two recommendations in this section highlighted 1) how employers can learn more about burnout and 2) how a widely used instrument (MBI) may be used to help identify burnout in their employees. As is well established, burnout results from workplace conditions and not necessarily individual factors (Maslach, 1976). Hence, the focal point of burnout examination should always be to assess workplace environments. However, this critical examination of

organizational dynamics and factors may be challenging if there is no fundamental understanding of burnout and what organizational factors contribute to its development. Gaining further knowledge and understanding about burnout may also help employers identify workers on the verge of burnout. Through this identification, they can have meaningful conversations with the employees on how they can best support them to alleviate any symptoms of burnout. Employers can provide further resources and support, such as recommending counselling services or offering paid leave time.

Section 5: Preventing Burnout

Context and Problem: Low Wages

Although we have explored recognizing and addressing burnout in the above sections, it is helpful to also think preventatively about what might help ELCC workers who are immigrants from developing burnout conditions in the first place. One of the most apparent solutions tied to preventing burnout is improving ELCC workers' financial situation (Ng et al., 2023; Schaack et al., 2020). As explored in the section below, wages disproportionate to the workload and responsibility of the job can lead to burnout. Consequently, increasing wages can also address burnout by removing the financial component that contributes to it. In the worklife model, which was thoroughly explored in the literature review, reward, or the lack of it, is one of the six factors contributing to burnout. Inadequate financial compensation for the work done can make an individual feel like their work is devalued (Maslach et al., 2001).

As shown in the literature review, lack of adequate compensation or wages is a key factor contributing to burnout for all ELCC workers (McLean et al., 2019; Schaack et al., 2020). In Canada, specifically Alberta, the average salary for an ELCC worker is about \$18.59/hour (ALIS, n.d.). The average yearly salary for ELCC workers is about \$33,564.00 (ALIS, n.d.). This

is slightly above the provincial minimum wage of \$15/hour for all jobs. Additionally, according to the ECE report published in 2022, about 1/3 of ELCC workers receive no health benefits (ECE, 2022). Considering the responsibilities that ELCC workers take on in their job—which include ensuring the well-being of children in various domains—these wages and average salaries are insufficient.

Low levels of reward or financial compensation, as a component of the worklife model, are linked to a sense of inefficacy (Maslach et al., 2001). For immigrant ELCC workers, this lack of reward or compensation can combine with pre-existing financial commitments to cause cumulative stress. For instance, they may have to send money back home to their family to support them financially (Statistics Canada, 2018). Depending on the region they are migrating from, immigrant families may vary in size, meaning extended relatives (such as grandparents) are also migrating (Mitchell & Li, 2023). Thus, immigrants' financial needs may change significantly depending on a multitude of factors. Immigrants experience many financial challenges, such as the potential for financial fraud, the inability to get credentials and qualifications approved, and a lack of financial knowledge (Bhabra, 2021). These factors may mean their income is disproportionate to the size of the family, leading to compounded financial difficulties. Further, studies have found that immigrant women in Canada will often take on the responsibility for finances for their entire family (Jagire, 2019; Okeke-Ihejirika et al., 2017).

Despite the lack of adequate wages, immigrant ELCC workers will continue to work in ELCC settings due to financial responsibilities. It is also important to note that historically, immigrants in Canada have been paid less compared to their counterparts (Crossman et al., 2021). This has implications for socioeconomic status and upward mobility, making it more challenging for immigrant workers to provide their families with a decent standard of living

(Wang & Palacios, 2017). It is imperative that federal and provincial governments increase minimum wages for ELCC workers by increasing funding provided to childcare services and implementing policies to ensure that funding is allocated towards addressing wages and not towards other administrative costs.

Mental Health Implications

The Government of Canada's Public Health Agency (2022) collected data on mental health inequalities by income. Data from Canada's Community Health Survey (2016-2017, 2017-2018) indicated that those in the lowest income group are 2.4 times more likely than those in the highest income group to have anxiety disorders (Government of Canada, 2022). This is in line with data from the Mood Disorders Society of Canada (2019), which found that those in the lowest income brackets are three to four times more likely than those in the highest income bracket to have poor to fair mental health. Moreover, women are twice as likely to have anxiety disorders as men, regardless of their income (Government of Canada, 2022). Data from the Mood Disorders Society of Canada (2019) indicated that immigrant women are more likely to experience emotional problems compared to immigrant men. Additionally, those in the lowest income group were less likely to have their mental health needs met compared to those in the highest income group (Government of Canada, 2022). This may seem like a more obvious outcome, but those in the lowest income group had lower life satisfaction compared to those in the highest income group (Government of Canada, 2022). Numerous studies have found a correlation between poor mental health and low income (Shields-Zeeman & Smit, 2022; Thomson et al., 2022).

As evidenced by the data presented in the literature review and summarized in this section, low wages can have detrimental impacts on mental health, predisposing those with low

income to develop a wide range of mental health issues. ELCC workers provide such vital services to our families, and it should not be the case that they are barely getting paid minimum wage and are subsequently developing mental health issues.

Recommendation

1. Increase Wages. The solution to low wages is a simple one—increase the wages. This recommendation is not just specific to immigrant ELCC workers but all ELCC workers. Governments (federal or provincial) should take responsibility for increasing funding provided to private and public childcare settings (especially public) and ensure that funds are appropriately allocated to salary increases. This was touched on in the literature review. However, a key reason that those working in early childhood education settings get paid low wages is that the job can be characterized as reproductive labour, also known as social reproduction. Those who provide reproductive labour are most commonly women (Hester, 2018; Weiss, 2021). As such, historically, the economic value of such labour has also been diminished due to the assumption that it is females' “natural” responsibility to rear children and nurture them (Hester, 2018; Weiss, 2021). This is even though, from an economic perspective, reproductive labour contributes significantly to the paid economy. For instance, early childhood services such as daycares permit parents and guardians to work rather than stay home. Thus, based on the social and economic contributions that ELCC workers provide, it is important that they should be paid accordingly. It is unfortunate to see that despite the vital services that ELCC workers provide, they are living on minimal wages and potentially experiencing mental health problems and burnout as a result.

Therefore, this recommendation comes from a perspective of advocacy to governments to improve wages for those within this profession.

Context and Problem: Lack of Professional Development

Introducing professional development (PD) activities for ELCC workers will help prevent burnout. This aligns with burnout research and the worklife model, which indicates that exhaustion (one of the three components of burnout) can result from an individual's lack of resources and skills to meet job demands (Maslach et al., 2001). Research has indicated that one key contributor to burnout for ELCC workers is a lack of resources, professional knowledge, or opportunities for progress in their careers (Grant et al., 2019; Ng et al., 2023; Schaack et al., 2020; Stein et al., 2022). While no specific research is available for immigrant ELCC workers, the literature indicated that overall, ELCC workers lack opportunities for professional growth and development (Schaack et al., 2020). The scarcity of PD activities hinders further professional growth, limiting ELCC workers' resources to do their jobs, subsequently leading to exhaustion.

Mental Health Implications

Based on the evidence provided above and in the literature review, it is evident that a lack of opportunities for growth associated with professional development can negatively impact feelings of personal achievement and self-efficacy, no matter one's profession. However, this impact may be particularly salient for ELCC workers. Stagnancy in any profession can instill a sense of hopelessness and helplessness because individuals may feel they have no means of progressing. Additionally, if the complexity of the job increases, which can occur when working with children, an ELCC worker may feel as though they are not qualified enough to provide the highest standards of caregiving to the children. This situation can lead them to feelings of low

self-efficacy. Self-efficacy is defined as one's own belief in whether one has the resources, skills, and capacity to achieve a particular goal (Bandura, 1977). The presence of depressive symptoms and higher levels of anxiety are associated with low self-efficacy (Iancu et al., 2015). Inefficacy is also the third component of burnout, as defined by Maslach (1976).

Recommendation

1. Mandatory Professional Development Activities Across Jurisdictions. Professional development (PD) activities can help to address the lack of professional growth and allow ELCC workers to acquire new skills that can help them meet the demands of the complex nature of their job (Parsons, 2022). Professional development activities can benefit immigrant ELCC workers as, often, due to other socio-economic and cultural stressors they are experiencing, they have limited means to attend and utilize PD opportunities. Given the time demands they may be experiencing in their personal lives, a helpful way to access PD opportunities would be at work, during paid work time.

Professional development activities are immensely important for advancing one's career (Parsons, 2022). Such activities can equip ELCC workers with new skills, resources, and knowledge to enhance their caregiving ability and implement learning and developmental curricula (Jensen et al., 2019; Schwartz et al., 2019). A study by Jensen and Rasmussen (2019) found that professional development positively impacted outcomes for children in ELCC settings within the European context. Within the Canadian context, opportunities and funding available for professional development vary across jurisdictions and types of ELCC settings (private vs. public) (Employment and Social Development Canada, 2021).

A report by Employment and Social Development Canada (2021) indicated that most professional development activities for ELCC workers focus more on the number of hours

acquired rather than the type of content they are learning. Part of this recommendation is thus for standardization of the content of professional development activities and involves the following:

- 1) A federal mandate that ELCC settings (private or public) across all jurisdictions ensure that all their employees obtain a certain number of hours of professional development in a particular content area. One example of a specific area is workshops focusing on stages of cognitive development.
- 2) Ensure that these professional development activities occur during paid work time.
- 3) Standardize content taught and resources provided during PD workshops.
- 4) Hold provincial government, employers, and administrators accountable to this standard. For example, require that they submit documentation on whether each worker was allowed PD opportunities.
- 5) Ensure that employers and administrators inform all workers of opportunities and funding available for professional development.

Conclusion

In this chapter, I explored numerous ways that exist to address problematic workplace factors that may lead to burnout for ELCC workers. Furthermore, beyond workplace factors, there are ways to support immigrant ELCC workers with other socio-economic and cultural challenges they may be experiencing. The importance of the well-being of immigrant ELCC workers cannot be stressed enough—there needs to be more recognition of the immensely valuable resource these workers provide and the will to help them do their jobs with less stress and perhaps even flourish.

Chapter V: Discussion

Distribution of Recommendations

Academic Conferences

These recommendations will be disseminated at various academic conferences, contingent on the acceptance of abstracts. Tentatively, these recommendations will be presented at an upcoming Canadian Ethnic Studies Association (CESA) conference in November 2024. We (primary supervisor and I) have submitted our abstract for this conference, which is currently being reviewed. The purpose of presenting at an academic conference is to share this information with other scholars interested in the topic. Conferences can be beneficial for sharing new information succinctly and collaborating with other researchers, clinicians, and academicians. This information will be presented in different formats, such as posters and oral presentations; the format of the presentations will depend on the requirements of each conference.

Infographic for Psychological Association of Alberta

An infographic summarizing the literature review and recommendations will be assembled. As some of the recommendations in section three directly address mental health professionals, this infographic could potentially help other mental health professionals navigate their work with clients working in early childhood education settings. The recommendations also emphasize the importance of cultural competence when working with immigrant early childhood educators. They elucidate the ethical underpinning of cultural competence and how imbuing it in one's clinical practice is critical in maintaining the highest standard of care. This infographic will tentatively be available online for mental health professionals to access. Through the primary project supervisor's affiliation with the Psychologists' Association of Alberta, we will seek to upload this infographic for clinician use and viewing on their website.

Website and other online platforms

A website will be created to target larger audiences and make this information more accessible. The information on the website will be presented in an easily comprehended way. Additionally, online platforms can be accessed by those in different provinces and countries, allowing further propagation of this information. One of the underlying goals of this project was to bring awareness to the working conditions of immigrant early childhood educators. The utilization of a widely accessible online platform supports this goal.

Potential short presentations at different early childhood settings

It is important to note that not everyone will have access to the internet, infographics and academic conferences. Thus, I will attempt to present at different early childhood education settings by reaching out to various centres where I have contacts through my prior work experiences. Presentations to employers in early childhood settings will allow this information to reach many of the targeted audience members directly. However, the occurrence of presentations will be entirely subject to the interest and willingness of employers.

Limitations

Lack of discussion on differences between private and public settings

While it was touched on briefly, the project did not engage in a thorough discussion on the differences in private and public early childhood education settings. Private and public early childcare settings can differ in numerous ways, such as organizational structure, pay, mechanisms for reporting harassment and bullying, and job responsibilities (OECD, 2018). Private settings may have more control over funding allocation than public settings (OECD, 2018). However, they may also have fewer objective measures for quality control and fewer ways for employees to report their experiences. It would be important to consider these

differences between the two types of settings and how these differences could impact the experience of burnout in immigrant ELCC workers.

Limited discussion on working with children from vulnerable populations

Another limitation is the absence of discussion on the experiences of early childhood educators working with children experiencing socio-economic challenges and how that may impact the worker's burnout levels. It is purported that early childhood education settings can help to equalize some socio-economic inequities by providing standard, high-quality care and education to students who do not receive such care in their home environments (Leseman & Slot, 2014; McCain, 2020; OECD, 2018). Numerous studies indicate that quality early childhood education can help mitigate the negative impacts of poverty on learning and development (Barr & Gibbs, 2022; Leseman & Slot, 2014; McCain, 2020; OECD, 2018.). It is, therefore, worth discussing the emotional, cognitive and psychological demands on early childhood educators who provide additional support to students from stressful and difficult home environments. The project does not comprehensively examine how working with vulnerable populations may impact burnout levels in early childhood educators.

Limited Discussion on Gender Dynamics in Immigrant Families

The literature review, under the section "Intersectionality," does discuss gender dynamics within immigrant families. However, a more expansive discussion is needed. Gender dynamics may change depending on ethnic and cultural background. Hence, a more nuanced exploration is required for future work in this area. Gender dynamics could potentially influence the amount and type of work immigrant early childhood educators do. Additionally, there are inherent gender expectations within each culture and ethnic group that may influence immigrant early

childhood educators. Therefore, further analysis is needed to better understand how these gender expectations and dynamics may contribute to burnout.

Future Directions

A potential future direction involves conducting an exploratory qualitative study and then, empirical qualitative research. Exploratory studies are usually used to assess whether the research topic can be studied empirically and whether it is feasible to do so (Hunter et al., 2019). The goal of conducting these research studies would thus be to further investigate the experiences of immigrant early childhood educators, as they pertain to burnout. As such, participants could be asked to comment on their workplace experiences, as well as if their daily life stressors impede their ability to deal with workplace stress. Exploratory qualitative studies can also help researchers identify key themes that need further investigation, providing more guided directions for future research. Exploratory qualitative studies can involve focus groups where, in small group settings, individuals can speak about their experiences (Hunter et al., 2019; Stewart & Shamdasani, 2014). Once directions are established through exploratory work, further qualitative studies could further expand on themes identified within the exploratory qualitative study.

Concluding Statement

Through this comprehensive project, I hope that I have been able to shed light on some of the challenges that a vulnerable group of workers may experience. I also hope that the recommendations presented in this project have some utility and are able to address some factors that may lead to burnout for immigrant ELCC workers, who are vulnerable in a number of ways.

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