Newcastle University
Doctorate in Applied Educational Psychology
An exploration of teacher wellbeing.

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Overarching Abstract

Research suggests that teachers are amongst the most vulnerable occupational groups to work related psychological difficulties. Extant literature predominantly focuses on the structural dimensions of teachers’ wellbeing and is commonly associated with stress, burnout and staff retention. The first chapter critically reviews existing research using cognitive-behavioural therapy to support teachers’ wellbeing. Three conclusions were drawn from the systematic review: teacher wellbeing is a problematically defined concept; interventions based on cognitive-behavioural therapy were not effective in supporting teachers’ wellbeing and little emphasis was placed upon the impact of teachers’ environment. The conclusions of the systematic review informed three research questions addressed in the empirical paper using a qualitative methodology, in order to explore teachers’ experience of the phenomena under investigation. Subsequently, the transcripts of five semi-structured interviews with five primary school teachers were analysed using Interpretative Phenomenological Analysis to explore their wellbeing. Two superordinate themes were produced that encapsulate the teachers’ described experience related to their wellbeing. Due to the research design, this research offers novel findings about the nature of teachers’ wellbeing. It also offers a phenomenological model of teachers’ wellbeing and proposes that organisational and systemic change is required to support the social and emotional needs of school communities and their workforce.
Acknowledgements

I would like to thank all of my family and friends for their unwavering positivity and therapeutic wit. In particular I would like to thank Nicola for helping me to achieve balance.

I would also like to thank the DAppEdPsy tutor team at Newcastle University for their support, in particular Dr Richard Parker, my Research Supervisor, for his immeasurable support and good humour.

Thanks also to the teachers who kindly gave up their time to talk to me and answer my questions.
Disclaimer

I certify that this thesis is my own and has not been submitted as part of any other work.
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Chapter 1: A systematic review: what is the effect of cognitive-behavioural interventions on teachers’ wellbeing?

1.1 Abstract

Wellbeing is a complex construct with many widely accepted definitions, related to different domains of psychology such as happiness, potential and occupation. Previous research on teachers’ wellbeing has often focused on the presence of stress and burnout, indicating that teachers are one of the most vulnerable occupational groups to work-related psychological difficulties. Based on the proposal that teacher wellbeing is often defined in deficit terms (Roffey, 2012), this systematic review explores the effect of interventions based on cognitive-behavioural therapy (CBT) on teachers’ wellbeing. Using the method outlined by Petticrew and Roberts (2006), eleven studies were identified. This Review concludes that despite medium to strong effects immediately post intervention, cognitive-behavioural interventions were not effective in supporting the wellbeing of teachers long-term. The systematic review offers three conclusions: teacher wellbeing is a conceptually problematic construct; individual level intervention is not effective to support teachers’ wellbeing and little is known about the impact of teachers’ environment on wellbeing. Suggestions for further research are also considered.

1.2 Introduction

1.2.1 Wellbeing

Wellbeing has become an increasingly common research topic in the last 30 years (e.g. Diener & Suh, 1997; Keyes, Shmotkin, & Ryff, 2002; Seligman, 2011). However, great variance exists within extant literature as to its definition, dimension and measures. For example, wellbeing research spans two philosophical traditions: hedonism and
eudemonism, otherwise referred to as subjective and psychological wellbeing (Ryan & Deci, 2001). Subjective wellbeing and psychological wellbeing are the ‘overarching phrases most frequently used’ in studies investigating wellbeing (Keyes et al., 2002, p. 1007). Subjective wellbeing is concerned with an individual’s evaluation of their existence, consisting of life satisfaction, positive affect and negative affect (Lucas, Diener, & Suh, 1996). Life satisfaction is a long term judgement that reflects an individual’s perceived distance from their goals (Keyes & Lopez, 2005). The balance between positive and negative affect constitutes a person’s immediate lived experience; otherwise referred to as happiness (Bradburn, 1969). Psychological wellbeing concerns an individual’s perception of their own ‘engagement with existential challenges of life’ (Keyes & Lopez, 2005, p. 1008) and human growth and development (Ryff & Keyes, 1995). An outline of the model of psychological wellbeing proposed by Ryff (1989) can be found in Table 1 on page 3. However, contemporary commentary calls for a need to go ‘beyond an account or a description of wellbeing itself, and be able to make a clear definite statement of the exact meaning of the term’ (Dodge, Daly, Huyton, & Sanders, 2012, p. 222).

### 1.2.2 Occupational wellbeing

In contrast to the context-free descriptions of wellbeing described above, Warr (1987, 1994) proposed a mental health focused model within an occupational context, i.e. at work. Warr’s model suggests a stronger relationship between job related antecedents and job related wellbeing compared to context-free scenarios as, for example, Ryff (1989) and Ryff and Keyes (1995) suggested. Warr’s model has four primary dimensions: affective wellbeing (e.g. emotional exhaustion, job satisfaction and organisational commitment), aspiration (pursuit of challenge at work), autonomy (determination and authority) and competence (ability to cope with problems and act upon environment). The model also proposed a fifth dimension, integrated functioning that encompasses the other four dimensions and reflects the person as a whole. Van Horn, Taris, Schaufeli, and Schreurs (2004) proposed a five
dimensional model of occupational wellbeing, based on the multi-dimensional model of psychological wellbeing (Ryff, 1989; Ryff & Keyes, 1995) and Warr’s model of domain specific wellbeing (Warr, 1987; 1994). Van Horn et al. suggested occupational wellbeing comprises affect, motivations, cognitions, behaviours and self-reported physical health.

Table 1 Comparison of psychological, subjective and occupational wellbeing

|--------------------|---------------------------------------------------------------|----------------------------------------------------|-------------------|--------------------------------------------------|
| Dimensions or descriptions | Self-acceptance  
Positive relations with others  
Environmental mastery  
Autonomy  
Purpose in life  
Personal growth | Life satisfaction  
Positive affect  
Negative affect | Integrated functioning  
Affective  
Aspirational  
Autonomy  
Competence | Affective  
Cognitive  
Social  
Professional  
Psychosomatic |

1.2.3 Teacher wellbeing

Few studies examined the construct of teacher wellbeing itself without using other related concepts to define the term. For example, self-efficacy, satisfaction and autonomy are some of the constructs thought to determine teacher wellbeing (see Aelterman, Engels, Van Petegem, & Pierre Verhaeghe, 2007; Butt & Retallick, 2002; Yildirim, 2015). More commonly, teacher wellbeing is defined using ‘deficit terms’ (Roffey, 2012, p. 9). For example, according to The Teacher Support Network (2009), 60% of teachers reported that
their work caused feelings of anxiety, stress and depression. Similarly, stress, depression, anxiety and irrational beliefs have also been cited as having serious consequences for teachers’ capacity to perform their role, thus limiting the extent to which teachers can provide quality education for their students (Maag, 2008; Moriarty, Edmonds, Blatchford, & Martin, 2001; Robertson & Dunsmuir, 2013). Over a prolonged period, this can lead to burnout, job dissatisfaction and problems with staff retention, all of which negatively affect teachers’ wellbeing (Brouwers & Tomic, 2000; Kinman, Wray, & Strange, 2011; Kyriacou, 2001).

It has been acknowledged that teaching is a highly stressful profession (Kyriacou, 2001). High levels of teacher stress are associated with negative effects for both teachers and students (Collie, Shapka, & Perry, 2012). Conversely, teachers who report low stress levels have been linked with improved motivation for learning in a sample of kindergarten pupils (Pakarinen et al., 2010).

Burnout has been used as a determinant of teacher wellbeing. In their longitudinal study exploring the antecedents and consequences of teacher burnout, Burke and Greenglass (1995) found that anxiety and stress negatively affected emotional and physical wellbeing. Similarly, Brouwers and Tomic (2000) found that burnout was related to perceived self-efficacy and emotional exhaustion. Burnout has also been linked with reduced engagement and the intention to leave work (Schaufeli & Bakker, 2004). Due to the paucity of studies that offer positive conceptualisations of teachers’ wellbeing, the extant literature leaves little choice but to define teacher wellbeing in this systematic review using deficit-based terms, such as the presence of stress and related variables.
1.2.4 A vulnerable workforce

Recent government policy (Department for Education, 2010a) identified high quality teaching and discipline as the key to behaviour management and improving outcomes for children at school. This is seen as an extension of the Labour government’s standards agenda (Goodwin, 2011) and has led to an increase in teacher accountability and workload (Goepel, 2012). It is debatable whether teachers will be able to support the academic, social and emotional needs of their students if their own wellbeing is at risk (Weare & Gray, 2003).

Teachers are more vulnerable than many other occupational groups to work related psychological distress (Health and Safety Executive, 2014), work related stress and burnout (Johnson et al., 2005; Kyriacou, 2000). For example, extensive demands of preparation and planning, large class sizes, poor pupil motivation and pupil behaviour have been cited as causes of work related psychological problems (Clunies-Ross, Little, & Kienhuis, 2008; Hastings & Bham, 2003; Maslach & Leiter, 2008). Similarly, time pressures, administrative tasks, lack of human and technical resources and an imbalance between effort and rewards have also been found to be of concern to teachers (Burke & Greenglass, 1995; Byrne, 1991; Griva & Joekes, 2003; Kyriacou, 2001; Pithers & Soden, 1998; Unterbrink et al., 2007; van Dick & Wagner, 2001).

Moriarty et al. (2001) suggested that teaching quality is likely to be affected by teacher stress and dissatisfaction, meaning that student learning is likely to be influenced negatively. Similarly, Bernard and DiGiuseppe (1994) report that teachers may experience stress and frustration with both their students and the profession more generally if their negative affect is not addressed properly. Without suitable attention, such cognitive processes may influence teachers’ capacity to optimally perform their role and impact on their
psychological wellbeing. It is, therefore, important to address any reported concerns about teachers’ psychological distress in relation to personal disaffection with the job role or with student-based factors such as behaviour, in order to ensure that children have access to the best possible educational experiences. The following section focuses on an intervention that has been widely used to support the psychological needs of a range of adult groups including teachers.

1.2.5 Cognitive-behavioural therapy

Cognitive-behavioural therapy (CBT) was pioneered by Beck, Rush, Shaw, and Emery (1979) and is an umbrella term for a range of talk-based therapies, including rational emotive behaviour therapy and stress inoculation training (Dobson & Dozios, 2010). The aim of CBT is to modify cognitive processes, such as core beliefs, cognitive assumptions and negative automatic thoughts that precede or accompany events that may lead to emotional arousal or irrational thinking and change the way an individual responds through providing alternative reactions to threatening situations (Beck, 1995). I will use the term ‘cognitive behavioural approach’ throughout this systematic review to include interventions based on the CBT model.

CBT has been claimed to be effective in reducing a range of difficulties associated with mental health and wellbeing. For example, a meta-analysis found that CBT interventions had a strong effect on stress and anxiety related disorders in adults (Butler, Chapman, Forman, & Beck, 2006). Similarly, a systematic literature review found that CBT was effective in reducing depression in children identified as having depressive disorder (Harrington, Whittaker, Shoebridge, & Campbell, 1998). Although CBT has been traditionally considered a clinical mental health based practice, there is evidence of its application to the work of educational psychologists (EPs). For example, the resources produced by Stallard (2003) are
regularly used by EPs and Greig and Mackay (2005) demonstrate effective use of a CBT-based intervention with young people.

Occupational psychology literature indicates CBT is efficacious in alleviating work related psychological difficulties. According to a meta-analysis of the effect of cognitive-behavioural interventions on stress, van der Klink, Blonk, Schene, and van Dijk (2001) reported a medium effect size (d= 0.68; an explanation of Cohen’s d can be found on page 10). Similarly, Richardson and Rothstein (2008) reported a large effect (d=0.909) for cognitive-behavioural interventions on occupational stress. Both reviews indicate that the interventions based on the principles of CBT were amongst the most efficacious overall across professional groups. It should be noted, however, that only four studies across both meta-analyses involved samples of teachers.

1.2.6 The focus of this review

Whilst a growing body of literature investigates how teacher wellbeing is negatively affected by stress, anxiety and other harmful psychological difficulties whilst at work, there is need for further exploration. For instance, in light of the issues reported with teacher wellbeing there is comparatively little research available that attempts to evaluate how to improve outcomes for teachers, nor is there much research that looks to appraise the effectiveness of an intervention designed to reduce teachers’ work related psychological distress. Furthermore, though cognitive-behavioural approaches have been acknowledged as having a powerful effects (Richardson & Rothstein, 2008; van der Klink et al., 2001) on occupational stress, relatively little empirical evidence exists for teachers compared to other occupational groups. This review, therefore, will focus on the effect of cognitive behavioural interventions on teachers’ wellbeing.
1.3 Method

This review utilises Petticrew and Roberts’ (2006) systematic review method (see Table 2). The following sections provide detail of each stage.

Table 2 The systematic review stages (adapted from Petticrew and Roberts, 2006)

<table>
<thead>
<tr>
<th>Stage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 1</td>
<td>Formulate the research question</td>
</tr>
<tr>
<td>Stage 2</td>
<td>Determine the type of studies to be located in order to answer the question</td>
</tr>
<tr>
<td>Stage 3</td>
<td>Carry out a literature search for relevant studies</td>
</tr>
<tr>
<td>Stage 4</td>
<td>Screen relevant studies using inclusion criteria to identify those suitable for in-depth analysis</td>
</tr>
<tr>
<td>Stage 5</td>
<td>Map out study findings and appraise for quality</td>
</tr>
<tr>
<td>Stage 6</td>
<td>Synthesise findings</td>
</tr>
<tr>
<td>Stage 7</td>
<td>Disseminate findings of the review</td>
</tr>
</tbody>
</table>

1.3.1 Stage 1- Formulate the research question

The review question “What is the effect of cognitive-behavioural interventions on teachers’ wellbeing?” was chosen as I wanted to find out the effect of an efficacious intervention on variables associated with teachers’ wellbeing (see Table 3 on p. 9). Although I do not necessarily agree with conceptualising wellbeing using negative, deficit based language, extant literature left me with little choice. Therefore, it seemed logical to choose CBT as the independent variable due to its claimed efficacy, its foundation in psychological theory and its practical application by Educational Psychologists.
The outcomes terms presented in Table 3 reflect both the common foci of cognitive-behavioural interventions and the deficit-based determinants of teachers’ wellbeing.

1.3.2 Stage 2- Determine the type of studies to be located in order to answer the question

The terms in Table 3 were used to search electronic databases.

Table 3 Database search terms

<table>
<thead>
<tr>
<th>Target population terms</th>
<th>Teacher*/educator/school staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervention terms</td>
<td>Cogn* beh*</td>
</tr>
<tr>
<td>Outcome terms</td>
<td>Anxiety/<em>belief</em>/stress*1</td>
</tr>
</tbody>
</table>

In order to focus the review, initial screening was conducted to identify studies unrelated to the review question. The abstracts of related to the remaining studies were then screened using the following inclusion criteria:

- Target population- teachers from early years, kindergarten, primary/elementary, middle, secondary/high, college, sixth form, trainee (non-higher education).
- Publication- studies were published/had been accepted for publication. I did not set parameters for dates of publication.

1 The * is used to retrieve variations on a distinctive word stem or root.
1.3.4 Stage 3 - Carry out a literature search for relevant studies

The following electronic databases were searched between 25\textsuperscript{th} September 2014 and 29\textsuperscript{th} October 2014 using the terms shown in Table 3: PsychInfo, PsychArticles, ERIC (Educational Resource Index and Abstracts), Web of Knowledge, Scopus, BEI (British Education Index).

After an initial 45 studies had been identified from the database searches, a further 37 (n=82 including duplications) studies were identified using hand searches of journals considered to be relevant to the review question: Cognitive Behavior Therapy, Journal of Cognitive Behavioural Psychotherapies, Journal of Rational-Emotive and Cognitive-Behavior Therapy, The Cognitive Behavioural Therapist, Educational Psychology in Practice, British Journal of Educational Psychology, School Psychology International, School Psychology Quarterly and School Psychology Review.

1.3.5 Stage 4 - Screen relevant studies using inclusion criteria to identify those suitable for in-depth analysis

To further refine the initial 82 studies, additional criteria were applied:

- Studies utilising a quantitative research methodology only. Mixed method and qualitative studies were excluded.
- Only empirical studies, reviews and commentaries were not included.
- Studies with a clearly-described intervention based on the model of CBT (see p. 6 for a definition) on either a group or individual, short or long-term basis.
• Studies explicitly stating that interventions were based on the principles of CBT, with populations of teachers.
• Treatment targets were explicitly stated and included at least one or more of the outcome variables related to the deficit-focused definition of teacher wellbeing (described on p. 3) and the commonly associated outcome variables of CBT: anxiety, stress, depression, irrational beliefs, anger, emotions.

At this stage, citation searches were conducted based on the reference lists contained in each of the relevant studies.

The first stage of screening the 82 studies for inclusion in the review involved searching through the titles, abstracts and keywords of the identified studies to exclude ineligible studies. The full texts of the remaining eligible studies (n=23) were read and the outstanding ineligible studies were excluded. At the end of the screening process, eleven studies were included for analysis in the review.

1.3.6 Stage 5- Map out study findings and appraise for quality

Eleven studies were mapped for exploration, focussing on the context of the research, type of intervention, study design, measures and outcomes. This information was then collated in Table 5 (see p. 16ff).

Table 5 also contains a calculation of effect size for each study’s outcome variables. Some studies provided their own measure of effect size using Cohen’s d. Cohen’s d is defined as the difference between two means (i.e. intervention group mean and control group mean) divided by their pooled standard deviations. This was selected as it is a widely utilised
measurement (Durlak, 2009), facilitating immediate comparison to other published papers. Cohen’s $d$ also provides defined parameters: 0.2 indicates small, 0.5 medium and 0.8 large effect sizes (Cohen, 1992). For control group studies that did not report an effect size, Cohen’s $d$ was calculated using the online effect size calculator provided by Becker (2000). For pre-post studies that did not provide an effect size, Cohens $d$ was calculated manually, subtracting the pre-intervention mean from the post-intervention mean and dividing the result by the baseline standard deviation as suggested by Durlak (2009) and Lipsey and Wilson (2001).

**WEIGHT OF EVIDENCE**

Each study’s Weight of Evidence (WoE) was judged (see Appendix 1 on p. 72), together with an overall quality judgement for each (see Table 4 on p. 13). Studies were analysed using the Evidence for Policy and Practice Information (EPPI) Centre WoE guidance, in order to determine the quality of evidence and relevance to this review (Gough, 2007). Each study is given an overall rating of low, medium or high, against twelve questions, broadly represented by the three questions below:

1. Can the findings be trusted in answering the study question?
2. How appropriate are the research design and analysis for addressing the question of this Systematic literature review?
3. How relevant is the focus of the study for addressing the question of this systematic literature review?

Table 4 shows that seven of the studies were of at least medium to high overall weight of evidence. All of these employed an experimental control group as part of their design. These
### Table 4: Weight of Evidence summary

<table>
<thead>
<tr>
<th>Study</th>
<th>(A) Trustworthy in terms of own question</th>
<th>(B) Appropriate design and analysis for this review question</th>
<th>(C) Relevance of focus to review question</th>
<th>(D) Overall weight in relation to review question</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Treatment v control</strong></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Bertoch et al. (1989)</td>
<td>Medium</td>
<td>Medium</td>
<td>Medium</td>
<td>Medium</td>
</tr>
<tr>
<td>Bora et al. (2013)</td>
<td>Medium</td>
<td>Medium/high</td>
<td>Medium</td>
<td>Medium/high</td>
</tr>
<tr>
<td>Forman (1982)</td>
<td>Medium</td>
<td>Medium</td>
<td>Medium</td>
<td>Medium</td>
</tr>
<tr>
<td>Cecil and Forman (1990)</td>
<td>Medium</td>
<td>Medium/high</td>
<td>Medium</td>
<td>Medium/high</td>
</tr>
<tr>
<td>Leung et al. (2011)</td>
<td>High</td>
<td>High</td>
<td>Medium</td>
<td>Medium/high</td>
</tr>
<tr>
<td>Salami (2007)</td>
<td>Medium</td>
<td>Medium</td>
<td>Medium</td>
<td>Medium</td>
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<tr>
<td>Shimazu et al. (2003)</td>
<td>Low/medium</td>
<td>Low</td>
<td>medium</td>
<td>Low/medium</td>
</tr>
<tr>
<td>Sharp and Forman (1985)</td>
<td>Medium</td>
<td>Medium/high</td>
<td>Low/medium</td>
<td>Medium</td>
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<tr>
<td><strong>Pre/post comparison</strong></td>
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<tr>
<td>De Jesus and Conboy (2001)</td>
<td>Low</td>
<td>Low</td>
<td>Medium</td>
<td>Low/medium</td>
</tr>
<tr>
<td>Forman and Forman (1980)</td>
<td>Low</td>
<td>Low</td>
<td>Medium</td>
<td>Low/medium</td>
</tr>
<tr>
<td>Schaubman et al. (2011)</td>
<td>Low</td>
<td>Low</td>
<td>Low/medium</td>
<td>Low</td>
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</tbody>
</table>
studies were generally more methodologically sound and therefore addressed the current review question with more rigour. The use of control groups allows for greater control of confounding variables by assessing pre-intervention and post intervention scores with non-treatment comparisons. The studies by Bora, Vernon, and Trip (2013), Cecil and Forman (1990) and Sharp and Forman (1985) were all rated as medium/high as they all took follow-up measures. Although Leung, Chiang, Chui, Mak, and Wong (2011) did not take follow-up measures, the study used the largest sample size of all those included in the review. The studies by Forman (1982) and Salami (2007) was rated slightly lower (medium) as the author did not compute effect sizes (Cohen’s $d$). Similarly, the study by Bertoch, Nielsen, Curley, and Borg (1989) was rated as medium due to methodological weaknesses. The study did not take follow-up measures, making it impossible to compare intervention effects over time. Of the three studies in the pre/post comparison design group, two studies (De Jesus & Conboy, 2001; Forman & Forman, 1980) made little attempt to establish validity or reliability of their methodological procedure or data analysis.

Each of the studies in the pre/post comparison design group was also limited by their trustworthiness of the findings, as well as experimental rigour. The study by Schaubman, Stetson, and Plog (2011) had a very small sample size of eight participants. The pre-post design used in these studies is vulnerable to problems with external validity (it is more difficult to generalise findings to broader populations) and threats to internal validity (such as selection effects). Generally, these studies appear to be less methodologically sound. For example, Schaubman et al. (2011) do not report any descriptive statistics and Forman and Forman (1980) have not presented detail of the procedure or sampling methods. None of the three pre/post design studies included a follow up, which makes it more difficult to know if intervention effects became part of the participant’s autonomous thoughts and behaviour. Each study in this group was rated as low to low/medium WoE.

With the exception of Leung et al. (2011) and Salami (2007), there were concerns about the generalisability of the samples in all studies. As is detailed in Table 5, Leung et al. (2011) and
Salami (2007) used the largest size samples in the review and included a similar number of males and females in each condition. In the remaining studies, the ratio of male to female participants was much less equal. For example, the study by Cecil and Forman (1990) included 52 females and two males (3.85%). Similar yet slightly less striking ratios are seen in the remaining studies, which limits the extent to which findings can generalised. This is not representative of the demographic of teachers in England, where males represent 34% of the workforce (Department for Education, 2010b).
Table 5 Summary of findings

<table>
<thead>
<tr>
<th>Study</th>
<th>Participants</th>
<th>Context</th>
<th>Intervention</th>
<th>Design</th>
<th>Methods/sources of evidence</th>
<th>Follow up</th>
<th>Gains (*= significant p&lt;0.05)</th>
<th>Effect size (d)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bertoch et al. (1989)</td>
<td>30</td>
<td>USA Middle and high public school teachers</td>
<td>15 control and 15 intervention, randomly allocated. 12 x 2 hour sessions</td>
<td>Non-treatment control design</td>
<td>Self-report surveys, video clinical interview (Independently rated)</td>
<td>No follow up reported but authors suggest further study will be conducted.</td>
<td>Structured clinical stress interview * Derogatis stress profile * Teacher stress measure* Occupational stress inventory*</td>
<td>1.22</td>
</tr>
<tr>
<td></td>
<td>(18 female, 9 male, Treatment 9, female 6, male Control 9, female 6 male)</td>
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<td></td>
<td></td>
<td></td>
<td>OVERAL STRESS 1.02</td>
</tr>
<tr>
<td>Bora et al. (2013)</td>
<td>40</td>
<td>Romania, no other data given</td>
<td>15 weekly meetings, over three months</td>
<td>Non-treatment control design, 20 in each condition</td>
<td>Self-report questionnaires</td>
<td>4 months Only worry (emotions) maintained</td>
<td>Irrational Beliefs* Locus of Control* Emotions* Behaviours*</td>
<td>1.94</td>
</tr>
<tr>
<td></td>
<td>(Experiential group 17, female and 3 male. Control 13, female 7 male)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>2.14</td>
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<td></td>
<td></td>
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<td>1.37</td>
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<td></td>
<td></td>
<td></td>
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<td>1.11</td>
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<tr>
<td>Study</td>
<td>Participants</td>
<td>Context</td>
<td>Intervention</td>
<td>Design</td>
<td>Methods/sources of evidence</td>
<td>Follow up</td>
<td>Gains (*=significant p&lt;0.05)</td>
<td>Effect size (d)</td>
</tr>
<tr>
<td>---------------</td>
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</tr>
<tr>
<td>Forman (1982)</td>
<td>24</td>
<td>USA One middle and one inner city high school.</td>
<td>6 weekly 3 hour group sessions</td>
<td>12 in each condition Non-treatment control design opportunity sample</td>
<td>Self-report for anxiety and stress Classroom observations of teacher behaviour</td>
<td>Yes Self-report maintained at follow up</td>
<td>State and trait anxiety* stress* No significant main effects for observation data</td>
<td>State Anxiety 1.01 Trait Anxiety 1.21 Overall anxiety 1.70 Stress 1.37</td>
</tr>
<tr>
<td>Leung et al. (2011)</td>
<td>124</td>
<td>Hong Kong secondary school teachers from across district</td>
<td>3 sessions, group based</td>
<td>Non-treatment control design opportunity sample</td>
<td>Self-report checklist</td>
<td>No</td>
<td>General stress* Depression* Anxiety* Stress* management behaviours Dysfunctional thoughts*</td>
<td>0.03 0.43 0.33 0.58 0.59</td>
</tr>
<tr>
<td>Study</td>
<td>Participants</td>
<td>Context</td>
<td>Intervention</td>
<td>Design</td>
<td>Methods/sources of evidence</td>
<td>Follow up</td>
<td>Gains (*= significant p&lt;0.05)</td>
<td>Effect size (d)</td>
</tr>
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</tr>
<tr>
<td>Salami (2007)</td>
<td>72 (35 male 37 female, randomly assigned to groups) CBT group - 11 male 13 female, RT group 14 male, 10 female Control 10 male 14 female</td>
<td>Nigerian trainee teachers</td>
<td>12 sessions, twice weekly</td>
<td>3 x 2 experimental control CBT / relaxation training / non-treatment control</td>
<td>Self-report checklist</td>
<td>Yes</td>
<td>Stress* Depression* Trait anxiety* State anxiety*</td>
<td>(Manually calculated) 4.62 5.4 3.16 4.12 Overall anxiety 3.64</td>
</tr>
<tr>
<td>Cecil and Forman (1990)</td>
<td>54 52 female 2 male CBT- 16 female 1 male CWS- 17 female 0 male Non-treatment control 19 female 1 male</td>
<td>USA, elementary and middle school</td>
<td>Stress inoculation training (CB) / co-worker support group / non-treatment group</td>
<td>Stress inoculation training (CB) / co-worker support group / non-treatment control group</td>
<td>Self-report for stress and coping skills</td>
<td>Yes</td>
<td>Self-report stress* Coping skills * Anxiety</td>
<td>(Manually calculated) Teacher stress self-report 0.07</td>
</tr>
<tr>
<td>Study</td>
<td>Participants</td>
<td>Context</td>
<td>Intervention</td>
<td>Design</td>
<td>Methods/sources of evidence</td>
<td>Follow up</td>
<td>Gains (*= significant p&lt;0.05)</td>
<td>Effect size (d)</td>
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</tr>
<tr>
<td>Shimazu, Okada, Sakamoto, and Miura (2003)</td>
<td>16 2 males and 6 females in each condition</td>
<td>Japan primary, junior and high school teachers</td>
<td>6 x weekly 90 minutes sessions</td>
<td>Waiting list control group design</td>
<td>Self-report</td>
<td>No</td>
<td>Anxiety 0.61</td>
<td>(Manual calculated) 0.2 -0.6 -0.2 0.6 0.16 0.28</td>
</tr>
<tr>
<td>Sharp and Forman (1985)</td>
<td>60 49 female 11 male CBT- 16 female 4 male CMT- 18 female 2 male Control 15 female 5 male</td>
<td>USA, elementary, middle and high school teachers</td>
<td>8 2 hour sessions, twice weekly Stress Inoculation or Classroom management training</td>
<td>20 subjects in each of three conditions CBT/classroom management/ non-treatment control</td>
<td>3 self-report measures and classroom observation schedule</td>
<td>Yes</td>
<td>Anxiety* State anxiety* Trait anxiety* Motoric manifestations of anxiety*</td>
<td>1.19 3.28 1.46 Overall 1.97 1.136</td>
</tr>
<tr>
<td>Study</td>
<td>Participants</td>
<td>Context</td>
<td>Intervention</td>
<td>Design</td>
<td>Methods/sources of evidence</td>
<td>Follow up</td>
<td>Gains (*= significant p&lt;0.05)</td>
<td>Effect size (d)</td>
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<tr>
<td>De Jesus and Conboy (2001)</td>
<td>25</td>
<td>Portugal, elementary and secondary school teachers</td>
<td>10x 90 minute group sessions</td>
<td>Pre post comparison, no control</td>
<td>3 self-report measures</td>
<td>No</td>
<td>Professional stress*</td>
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<tr>
<td></td>
<td>22 female 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Irrational beliefs*</td>
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</tr>
<tr>
<td></td>
<td>male</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>efficacy expectations</td>
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<tr>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>Emotional exhaustion</td>
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<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>Professional well-being</td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Intrinsic motivation</td>
<td>0.29</td>
</tr>
<tr>
<td>Forman and Forman (1980)</td>
<td>12 teachers and 5 guidance counselors</td>
<td>USA</td>
<td>10 90 minute sessions</td>
<td>Pre post comparison, no control</td>
<td>Self-report checklist</td>
<td>No</td>
<td>Irrational belief*</td>
<td>(Manually calculated) 1.75</td>
</tr>
<tr>
<td></td>
<td>No gender data</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1.75</td>
</tr>
<tr>
<td>Study</td>
<td>Participants</td>
<td>Context</td>
<td>Intervention</td>
<td>Design</td>
<td>Methods/sources of evidence</td>
<td>Follow up</td>
<td>Gains (*= significant p&lt;0.05)</td>
<td>Effect size (d)</td>
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</tr>
<tr>
<td>Schaubman et al. (2011)</td>
<td>8</td>
<td>No gender data</td>
<td>USA Intervention to explain challenging behaviour and therefore change teacher perceptions</td>
<td>1 x 75 minute session for 8 weeks consultation based (cognitive behavioural model)</td>
<td>Pre post comparison</td>
<td>Self-report</td>
<td>No</td>
<td>ADHD* Student characteristics* Total Stress* Teacher characteristics</td>
</tr>
</tbody>
</table>

NP= not possible to calculate
1.3.7 Stage 6 - Synthesise findings

GENERAL CHARACTERISTICS OF THE STUDIES INCLUDED IN THE SYSTEMATIC REVIEW

All studies included samples of teachers who took part in some form of cognitive-behavioural based intervention. However, there are considerable differences between the studies. Seven are controlled studies and four are uncontrolled. Seven studies were conducted in North America, two in Asia, two in Europe and one in Africa. Nine of the studies used purposive samples. This means that the participants were selected based on the ‘researcher’s judgement as to typicality or interest’ to the research question (Robson, 2011, p. 275). It is not clear how De Jesus and Conboy (2001) and Forman and Forman (1980) recruited their participants, thus limiting the extent to which both studies can be successfully repeated. The number of intervention sessions varied widely (range= 3 to 15). Sample size ranged from eight to 125 participants, session length ranged from 75 to 180 minutes and treatment programme duration ranged from three to 15 weeks. Only five studies included a follow-up.

EXPERIMENTAL DESIGN OF THE STUDIES INCLUDED IN THE REVIEW

Seven studies included a control group, with random assignment to groups in all but one case; Leung et al. (2011) allocated to groups based on the school in which they taught. There was variability in the function of the control group. Seven studies used a non-treatment control group (Bertoch et al., 1989; Bora et al., 2013; Cecil & Forman, 1990; Forman, 1982; Leung et al., 2011; Salami, 2007; Sharp & Forman, 1985)\(^2\), whereas Shimazu et al. (2003) used a waiting list control group. This raises issues of ethicality, as participants allocated to non-treatment control groups would not have been able to access intervention,

\(^2\) Bertoch et al., (1989) state that participants in the control group were first priority to take part in a treatment replication study. Forman (1982) states that control group participants would be included in a treatment group after the current study. Salami (2007) states that control group participants were offered counselling.
which may have had an effect on their wellbeing. Across the studies included in the review, other outcome measures were taken. For example, Bora et al. (2013) took measures for teacher behaviour and locus of control, whilst Cecil and Forman (1990) included coping skills as one of their dependent variables. Outcomes of these additional measures were not accounted for in this systematic review in order to establish the effect of interventions on teachers’ wellbeing, as described in the introduction. Other studies used the control group to evaluate the effectiveness of cognitive-behavioural approaches with other forms of intervention, such as co-worker support groups (Cecil & Forman, 1990) and relaxation training (Salami, 2007).

OUTCOMES AND EFFECTIVENESS

Table 5 shows that nine studies found that cognitive-behavioural interventions were effective immediately post-intervention, with the exception of De Jesus and Conboy (2001) and Shimazu et al. (2003). As reflected in the inclusion criteria on page 9, teacher wellbeing can refer to a range of outcome measures. Consequently, comparison between studies was problematic as different studies measured different variables, using a range of measurement tools. Furthermore, some of the studies included in the review do not include an effect size, nor can one be applied, making comparison of the effect of cognitive-behavioural interventions impossible.

Findings were further analysed according to the dependent variables in each study and the treatment targets identified in the inclusion criteria (see p. 9): anxiety, stress, depression, irrational beliefs, anger, and emotions. The results are presented in Table 6. Although outcome variables are coded together, each study uses different measures of outcomes such as ‘stress’ and ‘depression’. For example, Leung et al. (2011) used self-report measures of anxiety whilst Sharp and Forman (1985) used both self-report and observational
measures. Therefore, as the operationalisation of the outcome varies, any reasonable comparisons must be cautious.

The main outcome foci were stress (n=7), anxiety (n=6), irrational beliefs (n=3), depression (n=3), emotions (n=2), state anxiety (n=2), trait anxiety (n=2) and anger (n=1). Table 6 indicates that the majority of these outcome variables were affected in the short-term by cognitive-behavioural interventions. In most cases, effect sizes ranged from medium (n=5) to large (n=14).

Table 6 Results according to outcome variable (short-term)

<table>
<thead>
<tr>
<th>Outcome variable</th>
<th>Study</th>
<th>Significance</th>
<th>Effect Size</th>
<th>Follow up</th>
<th>Maintained</th>
<th>Effect size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stress</td>
<td>Bertoch et al. (1989)</td>
<td>Yes</td>
<td>1.08</td>
<td>No</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Forman (1982)</td>
<td>Yes</td>
<td>1.37</td>
<td>Yes</td>
<td>Yes</td>
<td>NP</td>
</tr>
<tr>
<td></td>
<td>Leung et al. (2011)</td>
<td>Yes</td>
<td>0.58</td>
<td>No</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Salami (2007)</td>
<td>Yes</td>
<td>4.62</td>
<td>Yes</td>
<td>Yes</td>
<td>8.53</td>
</tr>
<tr>
<td></td>
<td>Cecil and Forman (1990)</td>
<td>Yes</td>
<td>0.07</td>
<td>Yes</td>
<td>Yes</td>
<td>0.38</td>
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<tr>
<td></td>
<td>De Jesus and Conboy (2001)</td>
<td>Yes</td>
<td>0.33</td>
<td>No</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Schaubman et al. (2011)</td>
<td>Yes</td>
<td>NP</td>
<td>No</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Irrational beliefs</td>
<td>Forman and Forman (1980)</td>
<td>Yes</td>
<td>1.75</td>
<td>No</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td></td>
<td>Bora et al. (2013)</td>
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<td>1.94</td>
<td>Yes</td>
<td>No</td>
<td>NP</td>
</tr>
<tr>
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<td>De Jesus and Conboy (2001)</td>
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<td>0.75</td>
<td>No</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Emotions</td>
<td>Bora et al. (2013)</td>
<td>Yes</td>
<td>1.37</td>
<td>Yes</td>
<td>No*</td>
<td>‘Small’</td>
</tr>
<tr>
<td>Outcome variable</td>
<td>Study</td>
<td>Significance</td>
<td>Effect Size</td>
<td>Follow up</td>
<td>Maintained</td>
<td>Effect size</td>
</tr>
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<tr>
<td></td>
<td>De Jesus and Conboy (2001)</td>
<td>No</td>
<td>0.09</td>
<td>No</td>
<td>NA</td>
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<tr>
<td>Anxiety</td>
<td>Bora et al. (2013)</td>
<td>Yes</td>
<td>1.37</td>
<td>Yes</td>
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<tr>
<td></td>
<td>Forman (1982)</td>
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<td>1.70</td>
<td>Yes</td>
<td>Yes</td>
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<td>Leung et al. (2011)</td>
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<td>0.33</td>
<td>No</td>
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<tr>
<td></td>
<td>Shimazu et al. (2003)</td>
<td>No</td>
<td>0.6</td>
<td>No</td>
<td>NA</td>
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</tr>
<tr>
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<td>Cecil and Forman (1990)</td>
<td>No</td>
<td>0.61</td>
<td>Yes</td>
<td>Yes</td>
<td>0.71</td>
</tr>
<tr>
<td></td>
<td>Sharp and Forman (1985)</td>
<td>Yes</td>
<td>1.26</td>
<td>Yes</td>
<td>Yes</td>
<td>0.93</td>
</tr>
<tr>
<td>State anxiety</td>
<td>Sharp and Forman (1985)</td>
<td>Yes</td>
<td>3.28</td>
<td>Yes</td>
<td>Yes</td>
<td>2.22</td>
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<tr>
<td></td>
<td>Salami (2007)</td>
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<td>4.12</td>
<td>Yes</td>
<td>Yes</td>
<td>5.31</td>
</tr>
<tr>
<td>Trait anxiety</td>
<td>Sharp and Forman (1985)</td>
<td>Yes</td>
<td>1.46</td>
<td>Yes</td>
<td>Yes</td>
<td>1.82</td>
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<td>Salami (2007)</td>
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<td>3.16</td>
<td>Yes</td>
<td>No</td>
<td>6.60</td>
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<tr>
<td>Dysfunctional thoughts</td>
<td>Leung et al. (2011)</td>
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<td>0.59</td>
<td>No</td>
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<tr>
<td>Anger</td>
<td>Shimazu et al. (2003)</td>
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<td>-0.6</td>
<td>No</td>
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<td>NA</td>
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<tr>
<td>Depression</td>
<td>Leung et al. (2011)</td>
<td>Yes</td>
<td>0.43</td>
<td>No</td>
<td>NA</td>
<td>NA</td>
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<tr>
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<td>Salami (2007)</td>
<td>Yes</td>
<td>5.4</td>
<td>Yes</td>
<td>No</td>
<td>4.18</td>
</tr>
<tr>
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<td>Shimazu et al. (2003)</td>
<td>No</td>
<td>0.16</td>
<td>No</td>
<td>NA</td>
<td>NA</td>
</tr>
</tbody>
</table>

*Authors report a specific aspect of emotions (worry) was maintained at follow up, although overall scores did not maintain*

NA- not applicable    NP- not possible to calculate
Cohen’s (1992) benchmarks indicate some effect sizes are small. Small effects were reported for: stress (Cecil & Forman, 1990; De Jesus & Conboy, 2001); emotions (De Jesus & Conboy, 2001); anxiety (Leung et al., 2011) and depression (Leung et al., 2011; Shimazu et al., 2003). This means that treatments had nominal effects on teachers’ wellbeing, despite some authors reporting statistical significance.

Whilst effect size is a common form of comparing the impact of an independent variable, it can be problematic. Effect size does not consider the impact or usefulness of an intervention on the individual and therefore implies a universal group effect. Furthermore, the majority of the studies included in the in-depth review do not include values that represent confidence intervals for effect size. Without this information, effect sizes should be interpreted cautiously.

OUTCOMES AT FOLLOW-UP

Five of the eleven review studies included a follow-up measure as part of study design. The effect of cognitive-behavioural interventions had a more irregular pattern at follow-up compared to measures taken immediately after intervention.

It is difficult to compare the studies with a follow up as there is variance between the length of time between data collected immediately after the intervention and follow-up data collection. The longest follow-up period was included in the study by Bora et al. (2013), who found that each of the measures did not maintain at follow up. Salami (2007) found that at the twelve week follow-up, measures of stress and state anxiety maintained, but those for depression and trait anxiety had not. Forman (1982) found that measures of stress and anxiety had reduced further from post-intervention at a six week follow up. The two shortest follow-up periods were four weeks (Cecil & Forman, 1990; Sharp & Forman, 1985). In both cases, all significant gains were maintained at follow-up. Therefore, findings suggest
that the longer the follow-up period, the more likely that any intervention effects will diminish.

However, Bora et al. (2013) collected follow-up data at the beginning of the academic year. The authors suggest that this time of the year was known to be the busiest and most stressful time of the school year. The authors state that this had implications on the participants’ responses, therefore suggesting that the data collected at follow-up is confounded by extraneous variables.

1.3.8 Stage 7- Disseminate findings of the review

I drew three conclusions from the existing literature concerning the effectiveness of cognitive-behavioural interventions on teachers’ wellbeing. First, the majority of the studies included in the review found that CBT was effective in improving measures of stress, anxiety, depression, anger, emotions and irrational beliefs immediately after intervention. Medium to large effects were found across all outcome variables, with the exception of stress (Cecil & Forman, 1990; De Jesus & Conboy, 2001); emotions (De Jesus & Conboy, 2001); anxiety (Leung et al., 2011) and depression (Leung et al., 2011; Shimazu et al., 2003) and depression (Leung et al., 2011; Shimazu et al., 2003). This conclusion should be cautiously interpreted due to the degree of variation between the review studies. The studies differ greatly in reference to their methodology and the delivery of treatment, making it difficult to identify specific causal mechanisms for successful intervention.

Secondly, cognitive-behavioural interventions are not effective in improving teachers’ wellbeing over a long-term period. The studies in this review show there is a negative correlation between the period from the end of intervention to follow-up and the effects of the intervention. This suggests that changes to teachers’ cognition did not become part of
their autonomous pattern of thought, indicating that interventions based on cognitive-behavioural approaches may not be an effective long-term solution for teachers’ wellbeing. In light of evidence suggesting that teachers face challenges to their wellbeing on a day to day basis (Goepel, 2012; Kinman et al., 2011), it may be that interventions designed to change the person are naïve in their intention. It may be that we need to know more about teachers’ lived experiences and the approaches that teachers take to keep themselves well in order to help improve wellbeing. Cognitive-behavioural interventions focus on changing the way individuals think about and appraise events in their lives. For teachers, this within-person focus can sometimes lead to blame for loss of wellbeing, further exacerbating entrenched difficulties (Margolis, Hodge, & Alexandrou, 2014). Holmes (2005) cites increases in accountability and aspects of teachers’ physical and social environment as alternative threats to teacher wellbeing. This suggests that the foci for intervention might be systemic in nature, rather than individually targeted. We may also need to know more about the impact of the work environment on teachers’ wellbeing before we can develop intervention to improve the organisation or environment (Holmes, 2005). It is reasonable to suggest, therefore, that EPs are well placed to support teachers’ wellbeing, due to their unique position within school systems and their experience of group and organisational intervention.

This review has defined teacher wellbeing in deficit terms such as stress, anxiety and depression. The studies in the review have used a range of measures and operationalisations of the treatment outcomes, making it difficult to reliably compare effectiveness across studies. My third conclusion therefore, is that that teacher wellbeing is conceptually problematic. As discussed in Chapter 3 (see from p. 64), great debate exists within contemporary wellbeing literature as to whether wellbeing can actually be defined. For example, Seligman (2011, p. 15) states that wellbeing is a ‘construct... which in turn has several measureable elements, each a real thing, each contributing to well-being, but none defining well-being’. Similarly, occupational psychology and teacher wellbeing literature
largely offers descriptions of the dimensions of wellbeing (see Aelterman et al., 2007; Van Horn et al., 2004; Warr, 1994; Yildirim, 2015) with little agreement across studies as to its exact nature.

LIMITATIONS OF THIS REVIEW

This review includes 457 participants from a small number of studies. This confines the extent to which it is possible to generalise the findings of this review as external validity is limited (Petticrew & Roberts, 2006). This is exacerbated as none of the studies included in the review are based on UK populations, making it difficult to apply the conclusions of this review to the UK context. Furthermore, only 2 of the 11 studies were conducted in the last five years, indicating a dearth of contemporary literature concerning the use of cognitive-behavioural approaches with teachers.

Further caution is necessary in interpreting the results of this review. The majority of studies included employed purposive sampling, making conclusions vulnerable to bias. For example, Forman (1982) discussed how of an initial sample of eighteen participants, only twelve were consistent in their involvement. It is possible that those who withdrew from the study did not find the intervention useful, or that the intervention prevented them from doing their job effectively. This may have influenced the results, if only those who found the intervention helpful or convenient were included in the data analysis, therefore biasing claims and conclusions. The same can be said regarding the samples in each of the other studies included in the review, except Bertoch et al. (1989), as the absence of a randomised sample of teachers from a whole school population, the extent to which conclusions can be trusted is limited. It would be useful to gain an understanding of why those who did not participate fully chose to withdraw in order to identify potential motivational factors that encourage participation and change.
This review has several limitations. It is vulnerable to the file drawer effect (Rosenthal, 1979), whereby studies that generate significant results are more likely to be published and therefore included in a systematic review in comparison to studies that confirm null hypotheses. As a consequence, it is likely that conclusions from this review are susceptible to bias as unpublished studies were excluded from the literature search.

Furthermore, this paper is limited by the process by which the studies were coded and rated. Although measures was taken to adhere to the seven step method (Petticrew & Roberts, 2006), certain aspects such as the attribution of WoE are potentially unreliable. If multiple researchers had rated the weight of evidence (see Table 4 on p. 13) for each study, the conclusions of this review could be stronger.

Further limitations to this review regard context and the samples used in each of the studies. The eleven studies in the review spanned four continents and included teachers from primary through to secondary schools. As the total number of studies included in this review is relatively low, the inclusion and exclusion criteria presented earlier in the report do not specify a geographic location or target teachers form a particular type of school. Therefore, generalisation of the conclusions of this review to specific populations of teachers from the UK should be made cautiously.

1.4 Directions for future research

This review points to various directions for future research. The database searching process found one empirical qualitative study. Willig (2008) argues that quantitative approaches are vulnerable to issues associated with validity; citing rigid data collection procedures, ecological validity and a lack of reflexivity as contributing factors. Furthermore, Willig argues that quantitative methodologies are also prone to problems with reliability. Qualitative
researchers are less concerned with reliability, as this type of research design is more concerned with “unique, phenom[en]a or experience[s]” (Willig, 2008, p. 25) than measuring a particular characteristic of behaviour or cognition in large numbers of people. The cognitive processes related to wellbeing referred to in this review could be considered to be idiosyncratic elements of teachers’ lives that perhaps warrant exploration using qualitative methodologies.

None of the eleven studies was conducted in the UK. Research conducted in this country would extend the currently small knowledge base and would increase the ecological validity of findings and conclusions, allowing for safer generalisation to the practice of teachers and EPs in this country.

In light of the conceptual concerns related to the construct of wellbeing highlighted in this review, it would also be useful to explore the lived experience of teachers in order to attempt to gain an understanding of what individual teachers say and think about wellbeing and being well (Smith, 1996) (please refer to p. 35 for a discussion of this realist approach). Without a valid understanding or definition of teachers’ job related wellbeing, it is unsurprising that interventions such as those included in this review, are not effective in supporting teachers on a long-term basis. Therefore, more research is needed that explores what teachers do in their own lives to safeguard, protect and enhance wellbeing, to develop a model of good practice.
Chapter 2: Bridging document

2.1 Formulating the empirical research question

2.1.1 Forming a connection between the SR and the ER

The systematic review raised a number of issues:

- The majority of the studies included in the review found that intervention was effective in ameliorating measures of stress, anxiety, depression, anger, emotions and irrational beliefs. However, intervention effects diminished over time, suggesting that cognitive-behavioural interventions were not effective in improving teachers’ wellbeing over a long-term period.
- Teacher wellbeing is a conceptually problematic construct and further research is needed in order to develop understanding.
- The studies focused solely on altering the participants’ autonomous patterns of thought and cognition, whilst failing to emphasise the impact of the workplace environment.

These issues highlight the potential for further exploration of teachers’ wellbeing. Consequently, this chapter is designed to connect the conclusions from Chapter 1 with my chosen research methodology and method in Chapter 3 and overarching research questions.

As discussed on page 27, cognitive-behavioural interventions were shown to have no long term effects on teachers’ wellbeing. Although cognitive-behavioural interventions have been found to be amongst the most effective in the reduction of occupational stress (Richardson & Rothstein, 2008; van der Klink et al., 2001), the systematic review raises
questions over the suitability of CBT with populations of teachers to improve their mental health and wellbeing. The Royal Society for Public Health (2013) suggests that many wellbeing determinants are socioeconomic and environmental, rendering within-person forms of intervention problematic. This is described as a ‘macro-micro phenomenon’ (Margolis et al., 2014, p. 392), whereby stress and anxiety are conceived to be intra-psychological, but in fact stem from social and organisational processes (Ratner, 2013). This is particularly prevalent in education, as blame and responsibility is too often attributed to individual teacher characteristics, whilst the impact of the environment and structure is subdued (Kennedy, 2010).

CBT has a historical association with clinical contexts and was initially developed from therapeutic work for the treatment of depression (Beck et al., 1979). Typically, a cognitive-behavioural therapist would “‘treat’ mental ‘disorders’ and make ‘diagnoses’” (Squires, 2010, p. 280). This medicalised language commonly associated with CBT would have greater semantic and axiological congruence with the treatment of formal mental health disorders. Similarly, the ‘deficit-focused’ (Roffey, 2012, p. 9) definition of teacher wellbeing used in the systematic review and the associated database search terms outlined in Table 3 (p. 9) could be seen to reflect the language associated with mental health disorders. This might be seen to assume a within-person, deficit based view of wellbeing, which does not allow for the impact of the environment or socio-cultural influences. From the perspective of current educational psychology discourse (e.g. see Kelly, 2008; MacKay, 2007), the conceptualisation of teachers’ wellbeing used in Chapter 1 is problematic. Therefore, it seemed useful to explore teacher wellbeing in a different way, in order to discover what teachers themselves had to say about what it means to be well.

The participants included in the studies in the systematic review did not have formally identified mental health difficulties, according to guidance from DSM-V (American Psychiatric Association, 2013). The objective, quantitative data produced by the studies in
the systematic review directly represents pathological labels used to quantify mental health and wellbeing. The World Health Organisation (2005) stated that wellbeing is not merely the absence of mental illness. Therefore, in light of the previously discussed issues with teacher wellbeing as a construct, it was appropriate to use a qualitative research method, in order to explore what teachers say about their own wellbeing and contribute to a much needed definition.

As discussed earlier (on p. 1), some researchers have conceptualised wellbeing as a hedonic, subjective construct (Lucas et al., 1996). This is juxtaposed with the objectivist stance that ‘remains the predominant view... [of] clinical psychology... exemplified by CBT’ (Woolfolk & Murphy, 2004, p. 169). Similarly, using a medically embedded form of intervention in an educational context may have contributed to a lack of efficacy, as concluded in Chapter 1. Educational discourse often conceptualises Special Educational Needs and mental health using social constructionist and interactionist based approaches (Squires, 2010). Using the same logic, teacher wellbeing could be constructed in a similar socially and systemically embedded context. Therefore, acquiring a deeper understanding of wellbeing according to teachers and the impact of their workplace environment may lead to greater positive change than attempts to change the individual.

The conclusions from the systematic review helped shape the three research questions addressed in Chapter 3 (see p. 38 for an overview of each question).
2.2 Methodology

2.2.1 Ontology and epistemology

![Diagram showing the interrelationship between ontology, epistemology, methodology, method, and data.]

Figure 1 The interrelationship between the building blocks of research (from Grix, 2002, p. 180)

I chose a qualitative research design for my empirical research because this reflects my ontological and epistemological stance. This section will illustrate how my ontology led to my method, as is shown in Figure 1. The concept of wellbeing is formed at the subjective, phenomenological level (Rath & Harter, 2010); therefore I believe that a qualitative methodology would allow greater capacity to explore individual experiences compared to quantitative methods. My research intends to build on the studies included in Chapter 1, each of which used a quantitative methodology, in order to extend teacher wellbeing literature.

As Figure 1 demonstrates, ‘ontology is the starting point of all research, after which one’s epistemological and methodological positions largely follow’ (Grix, 2002, p. 177). Broadly speaking, an individual’s ontological position lies within the perspectives objectivism and constructivism. Bryman (2012) suggests constructivism assumes social phenomena and their meanings are continually produced through social interaction by social actors. On the other hand, objectivism implies that social phenomena and their meanings exist independently of social actors. As I subscribe to objectivism, my epistemology reflects critical realism,
asserting that there are ‘objects in the world, including social objects’, which exist whether we know about them or not (Scott, 2005, p. 635). My critical realist position conceives that there is a reality, but its exact characteristics are dependent upon the individual in context. Therefore, my ontology logically precedes my epistemology.

Critical realism is inherently critical as it assumes that knowledge is fallible. Researchers can only engage with the world by describing it from a third person perspective. Therefore, it is not possible to reveal the exact nature of the social world. That is to say, critical realism does not maintain non-realist assumptions, as Scott (2005, p. 635) asserts that ‘a world independent of particular human endeavours to describe it does exist’. Fallibility renders our understanding of the world as a subjective construction, influenced by our own experiences, in turn influenced by our language and social interaction. Critical realism, therefore, lends itself to interpretivist methodologies that focus on an individual’s subjective experience of a phenomenon. This is reflected by my use of Interpretative Phenomenological Analysis (IPA), as discussed in the next section.

2.2.2 Interpretative Phenomenological Analysis

By definition, IPA is based on three inherent principles: interpretivist, phenomenological and idiographic.

‘IPA is phenomenological in that it is concerned with exploring experience in its own ‘terms’ (Smith, Flowers, & Larkin, 2009, p. 1).

The way in which individuals make sense of their experience shares the interpretivist theoretical axis of IPA. IPA acknowledges that recognition of any experience is dependent upon the mechanism of interaction. This is termed a ‘double hermeneutic’ (Smith et al.,
2009, p. 3), in that the researcher makes an interpretation of the participant’s interpretation of their experience. There are other interpretivist approaches that are interested in addressing questions of meaning and understanding that are also attuned to a critical realist epistemology (Starks & Brown Trinidad, 2007). The main differences between discourse analysis, grounded theory and IPA are displayed in Table 7 on page 38. However, I decided to use IPA because it is suited to the phenomenological focus of the research.

Central to IPA is the assertion that there are real things in the world, but the manner in which an individual interprets these things will determine their meaning. In their discussion of IPA, Larkin, Watts, and Clifton (2006, p. 107) state ‘what is real is not dependent on us, but the exact meaning and nature of reality is’, thus demonstrating congruence with critical realism. Therefore, IPA and critical realism both assert that there will be a range of subjective views of an objective reality (Willig, 2008).

Critical realism and IPA share further assumptions, as they both accept the impossibility of obtaining an objective view of reality. The inter-connection between people’s talk, emotions and thought underpinning IPA is inherently complex, as drawing meaning about experience is complicated (Smith, 2015). Similar difficulties can be found with the critical realist position on what is real, due to its assertion about the fallible nature of reality (Scott, 2005).

In light of the conclusions in Chapter 1, IPA lends itself well to the kind of knowledge that I want to produce in the empirical research. IPA is a qualitative research methodology that is concerned with ‘how people make sense of their major life experiences’ (Smith et al., 2009, p. 1). Therefore, IPA is a suitable tool to explore how teachers make sense of their experiences and the impact of their work environment on wellbeing.
Table 7 Summary of three interpretivist methods, adapted from Starks and Brown Trinidad (2007)

<table>
<thead>
<tr>
<th></th>
<th>Phenomenology</th>
<th>Discourse Analysis</th>
<th>Grounded Theory</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal</strong></td>
<td>Describe the meaning of a lived experience of a phenomenon</td>
<td>Understand how people use language to create and enact identities and activities</td>
<td>Develop and explanatory theory of basic social processes</td>
</tr>
<tr>
<td><strong>Research question</strong></td>
<td>What is the lived experience of—the phenomenon of interest?</td>
<td>What discourses are used and how do they shape identities, activities and relationships?</td>
<td>How do the basic social processes of x happen in the context of Y environment?</td>
</tr>
<tr>
<td><strong>Analytic method</strong></td>
<td>Identify descriptions of the phenomenon; cluster into discrete categories; taken together, these describe the essence or core commonality and structure of the experience</td>
<td>Examine how understanding is produced through a close look at the words. Interested in how the story is told, what identities, activities, relationships and shared meanings are created through language</td>
<td>Open, axial and selective coding; examine concepts across their properties and dimensions; develop an explanatory framework that integrates concepts into a core category.</td>
</tr>
<tr>
<td><strong>Product</strong></td>
<td>A thematic description of the pre-given essences and structure of lived experience.</td>
<td>Description of language-in-use; identify how different discourses shape how identities, relationships and social processes are negotiated and produced.</td>
<td>Generate theory from the range of the participants’ experiences.</td>
</tr>
</tbody>
</table>

2.3 Method

‘The method(s) chosen for a research project are inextricably linked to the research questions posed and to the sources of data collected’ (Grix, 2002, p. 179)

Based on the findings from the systematic review and the assumptions of critical realism and IPA, I devised the following research questions:

1. What do teachers say about what it means to be well?
Although wellbeing has been referred to as ‘optimal human functioning’ (Ryan & Deci, 2001, p. 142), research into the teacher wellbeing has not shared the same positive outlook. As reflected in the search terms used in Chapter 1 (see p. 9), teacher wellbeing is often referred to using deficit terms. Concepts such as burnout, disengagement and stress are central to some of the extant models of teacher wellbeing (e.g. Bermejo-Toro, Prieto-Ursúa, & Hernández, 2015; Jackson, Rothmann, & van de Vijver, 2006). Similarly, the studies included in the systematic review focus on mental health related labels such as stress, anxiety and depression (e.g. Bora et al., 2013; Shimazu et al., 2003), despite research suggesting that ‘wellbeing is not the absence of mental illness’ (Ryan & Deci, 2001, p. 142). Through this question, I intended to explore the lived experience of individual teachers’ wellbeing at work, seeking to uncover the interactive psycho-social factors that impact on their lives, to gain a better understanding of the phenomena under investigation.

2. What do teachers say about how they improve their wellbeing?

Despite evidence that suggests CBT is an effective form of intervention for occupational stress (Richardson & Rothstein, 2008; van der Klink et al., 2001), the systematic literature review suggests that CBT does not improve teachers’ wellbeing on a long term basis (see p. 22). This question, therefore, intends to explore how individuals have tried to improve their own wellbeing (or maintain motivation) in light of their occupational context. I acknowledge that this question inherently assumes that teachers do go about maintaining or enhancing their wellbeing. Based on the previously discussed evidence about teacher retention (TDA, 2011) and work related psychological difficulties (The Teacher Support Network, 2009), one could assume that teachers may have views on strategies and methods that serve to enhance their wellbeing. It would be interesting to find out about teachers’ experiences of how they make themselves feel better, in light of their demanding occupational context.
3. What do teachers say about their work environment that they think has an impact on their wellbeing, and what would they change?

Studies in the systematic review did not acknowledge the impact of the workplace environment on teachers’ wellbeing, focusing only on within-person change. The third research question therefore explores teachers’ beliefs about the impact of their environment on their wellbeing.

Following Grix’s logic (see Figure 1 on p. 35), this section focuses on my choice of method, based on my methodology and the above research questions.

2.3.1 Semi-structured interviews

IPA is primarily concerned with rich detail and stories of a participant’s lived experiences. It demands a method of data collection that allows the researcher and participant to engage in a ‘conversation with a purpose’ (Smith et al., 2009, p. 57), in order to elicit first-person accounts of thoughts and feelings about a particular phenomenon. Therefore, I used semi-structured interviews to collect the data in Chapter 3. Semi-structured, one-to-one interviews are a common method for data collection in IPA studies, as they are easily managed and allow in-depth discussion between the researcher and participant (Reid, Flowers, & Larkin, 2005).

I devised an interview guide based on my research questions and the guidance provided by Smith et al. (2009). Table 8 (see p. 41) demonstrates the link between the types of questions that are suited to semi-structured interviews (see Smith et al., 2009, p. 60), the research questions from the empirical paper in Chapter 3 and the questions from the interview guide.
Table 8 Interview guide, question type and research question

<table>
<thead>
<tr>
<th>Interview question</th>
<th>My research question</th>
<th>Type of question</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can you tell me about how you came to be a teacher?</td>
<td>What do teachers say about what it means to be well?</td>
<td>Narrative</td>
</tr>
<tr>
<td>How would you describe the way your job makes you feel?</td>
<td>What do teachers say about making themselves feel better?</td>
<td>Evaluative</td>
</tr>
<tr>
<td>Can you tell me about the main differences between a good day at work and a bad day at work?</td>
<td>What do teachers say about what it means to be well?</td>
<td>Contrast</td>
</tr>
<tr>
<td>Can you tell me about how do you feel after a day at work?</td>
<td>What do teachers say about making themselves feel better?</td>
<td>Evaluative</td>
</tr>
<tr>
<td>What does being well at work mean to you?</td>
<td>What do teachers say about what it means to be well?</td>
<td>Evaluative</td>
</tr>
<tr>
<td>How would you view your ability to perform your role when you feel at your best?</td>
<td>What do teachers say about what it means to be well?</td>
<td>Evaluative</td>
</tr>
<tr>
<td>Can you tell me about a recent time when you feel that your wellbeing had been affected at work, positively or negatively?</td>
<td>What do teachers say about making themselves feel better?</td>
<td>Narrative</td>
</tr>
<tr>
<td>Can you tell me about how you might change things at work, if you had the opportunity?</td>
<td>What do teachers say about their work environment that influences their wellbeing?</td>
<td>Comparative</td>
</tr>
<tr>
<td>What do you think other people, either at work or away from work, would say about your wellbeing?</td>
<td>What do teachers say about what it means to be well?</td>
<td>Circular</td>
</tr>
<tr>
<td>Is there something else that you would like to say? Has anything occurred to you over the course of our conversation that you think might be relevant?</td>
<td>What do teachers say about what it means to be well?</td>
<td></td>
</tr>
</tbody>
</table>

Any interview guide, by design, could be seen to lead the participant to talk about particular issues. The questions above and my interaction with the participant during the interview could conceivably have an influence on the nature of the data produced. This is acknowledged by the assumptions of semi structured interviews, IPA and critical realism (Smith et al., 2009). IPA allows for the role of the researcher in the interpretation of participants talk. Critical realism accepts the impossibility of acquiring an impartial, objective understanding of reality. Although semi-structured interviews ask participants to discuss
specific aspects of their experience, they also allow for open discussion and exploration as deemed appropriate by both the researcher and the participant (Willig, 2008).

2.3.2 Ethics

Each participant provided full informed consent before participating in the study. I provided a written consent form (see Appendix 3 on p. 83), which was openly discussed prior to each interview. The participant was also invited to seek further clarification at any point during or after the data collection.

I deliberately maintained an open and honest stance throughout the research process. In some instances, participants raised concerns about their answers in relation to the leadership within their schools. I provided an information sheet that detailed the aims and structure of the research. This also explained the measures taken to ensure anonymity and confidentiality. Each participant was informed that they could withdraw from the research at any point up until four weeks after their interview date. This was to allow adequate time for participants to reflect on their participation. Duncombe and Jessop (2002) argue that fully informed consent is almost impossible as participants have no prior knowledge of the exact questions and the degree to which they might be asked to reveal personal accounts of about their lives. However, I believe that I considered the issue of informed consent with clarity.

Whilst the ethical considerations above are helpful in order to minimise harm to the participant, it is a risk to assume that all ethical issues and concerns can be satisfied through planning (Brinkmann & Kvale, 2008). Willig (2008, p. 20) called for qualitative researchers to remain ‘ethically attuned throughout’, to acknowledge and act upon ethical dilemmas as they arise over the course of the research processes. Although I take every possible step to
enable equal power dynamics between myself and everyone with whom I work with in my practice, it is reasonable to assume that I could be perceived differently. For example, EPs regularly work with members of school leadership and could foreseeably be constructed hierarchically. In the interview context, issues of acquiescence to those considered to have greater social status or authority are particularly pertinent (Heal & Sigelman, 1995). It is therefore reasonable to assume a power imbalance may have existed between myself and each participant during the interview, particularly those who worked in schools I also worked in my capacity as a trainee EP. I therefore acknowledge the role of power dynamics and external influences on the research process as it is unclear how my position as a representative of the Local Authority impacted on the responses given. I believe, however, that I responded to all such issues throughout the interview process through building rapport.

2.3.4 Participants

Research samples in qualitative studies depend on the scope of the study, the nature of the topic, the quality of the data and the study design (Morse, 2000). Interview studies commonly adopt ‘purposive sampling methods to recruit participants who have experiences of the phenomenon under study’ (Starks & Brown Trinidad, 2007, p. 1374). For professional doctorate IPA researchers, Smith et al. (2009) recommend four to ten interviews. They stress the importance of allowing ample time to analyse interview transcripts, as reflection and dialogue are central to successful research. Consequently, I conducted a single interview with five participants.

In my role as a trainee EP, I have been able to establish positive working relationships with staff from a number of schools. I contacted the Head teachers of three schools who each agreed for me to speak to teachers at a staff meeting and invite them to participate in my
research. This helped me to initially recruit four participants. In order to increase my sample, I also asked my EP colleagues if I could contact schools they worked with. I was then able to recruit one more participant. After discussion with my supervisor, it was agreed, due to the length of time it took to collect my data, five interviews in total was suitable, as my aim was to not to provide a representative sample of all teachers in the Local Authority, but to explore the lived experience of a small group of teachers.

2.3.5 Reflexivity

Qualitative research demands an awareness of the impact and role of the researcher on the research process. Throughout the data collection and analysis process, I regularly reflected on how my interests, beliefs and experiences contributed to the research process. Willig (2008, p. 10) highlights the need for ‘personal reflexivity’ in order to recognise these demands during the research process. For example, I found that the research process was influenced by my prior knowledge of teacher wellbeing literature and my preconceptions and experiences of teachers. Although every attempt was made to prepare a value-free interview guide, I acknowledge that the questions could have been interpreted in a different way than was intended. However, many researchers still strive to provide value-free descriptions of their respondents’ experience through a process known as ‘bracketing’ (Ahern, 1999, p. 407). Through bracketing, qualitative researchers accept the impossibility of total objectivity (Crotty, 1996), sharing the concept of fallibility which is central to critical realism (see p. 35).

Personal reflexivity also considers how the research process influences the researcher (Willig, 2008) My previous roles in schools allowed me to take the position of an outsider looking in on the complex world that teachers face each day. This research has helped me to gain a greater insight as to how the job affects individuals, which will serve to improve my
ability to develop and maintain professional and personal relationships in my capacity as an EP.

In my practice, I consider the majority of my conversations with teachers to be ameliorative in nature. My discourse is heavily influenced by problem analysis frameworks and solution-oriented forms of thinking, aimed at encouraging change and developing intervention. Across each interview, I felt that my instincts to reframe and paraphrase (see Rogers, 1951) distracted from the research goals. The research questions, informed by IPA, demanded a certain style of elaboration and clarification which was not necessarily ameliorative per se, in order to seek further detail about the thoughts and feelings of the participants in relation to their job. Personal reflexivity highlights the role of the wider social aims of the researcher. Therefore, I acknowledge that my previous experiences and values, shaped through the development of my professional identity influenced the way in which I engaged in the research process. This reflects the assumptions of critical realism, as the interpretation of something real is influenced by individual experience, culture and history.
Chapter 3: Empirical Research: What can teachers tell us about their wellbeing?

3.1 Abstract

Research suggests teacher wellbeing affects social, emotional and academic outcomes for children and young people. Furthermore, extant literature indicates teachers’ wellbeing also has grave financial implications and should be considered a priority for parents, educationalist, politicians and economists alike. This research used Interpretative Phenomenological Analysis to explore three research questions based on the conclusions from a systematic review, investigating the meaning of teacher wellbeing, how to improve teacher wellbeing and the impact of environmental factors. Five primary school teachers completed semi-structured interviews which were analysed to seek an understanding of their experience of wellbeing. During the analysis the data evolved into two superordinate themes ("that’s what’s important" and "is there anybody else that works this hard"), broadly representing social, physical, psychological and environmental factors that mediate teachers’ wellbeing. In the discussion the teachers’ described experiences are compared with extant literature. This comparison highlighted similarities between the themes and extant definitions of wellbeing and models of motivation. This research offers a phenomenological model of teachers’ wellbeing and illustrates organisational and systemic changes required in order to support the social and emotional needs of school communities.

3.2 Introduction

Teachers’ wellbeing is relevant to educationalists, policy makers and schools, given its impact on children’s learning and educational quality (Yildirim, 2015). Teacher wellbeing has been shown to directly influence pupils’ attainment and social and emotional development. For example, Briner and Dewberry (2007) found average teacher wellbeing accounted for 8% of variance across subjects in Standard Assessment Tasks (SATs) results in
over 400 UK schools. In spite of historical concern about their wellbeing (Kyriacou, 2001), teachers are expected to maintain the wellbeing of their pupils (Brennan, 2006; Hargreaves, 2000) and model emotional control (Beatty, 2000). This could be perceived as an insuperable task, if teachers ‘own emotional and social needs are not met’ (Weare & Gray, 2003, p. 7).

Furthermore, central government apportioned over £700m in 2010 for initial teacher training (TDA, 2011). Despite this financial investment of public money, approximately half of newly qualified teachers in the UK either do not take up employment or leave the profession within 5 years (Hayes, 2004). The Department for Education (DfE) (2015b) indicates that in the academic year 2013-14, 55% of teachers took at least 1 day of sickness leave, with an average of 7.9 days lost due to illness.

The maintenance, enhancement and development teachers’ wellbeing should therefore be considered a priority for economists, politicians, school leadership, parents and teachers themselves (Caprara, Barbaranelli, Steca, & Malone, 2006; Cheng, 1996). Failing to safeguard the wellbeing of the teaching workforce is not only damaging to children, but to the individual and the public purse.

### 3.2.1 Wellbeing

The sometimes contradictory body of wellbeing research has largely focused on descriptions or structure, rather than on providing a definition of the term per se For example, Ryff (1989) identified six dimensions of psychological wellbeing (see Table 1 on p. 3), whilst Diener and Suh (1997, p. 200) proposed that subjective wellbeing consists of ‘life satisfaction, pleasant affect and unpleasant affect’. Other wellbeing researchers have drawn constructs such as quality of life (Shin & Johnson, 1978) and positive functioning
Furthermore, Keyes (2002) used flourishing and languishing to describe wellbeing, which influenced Shah and Marks’ (2004, p. 2) manifesto of wellbeing for ‘a flourishing society’. However, this is another example of a ‘description rather than a definition of wellbeing’ (Dodge et al., 2012, p. 225).

3.2.2 Professional wellbeing

Professional wellbeing is a domain specific derivative of wellbeing research, used to describe how people gain confidence to take on new roles and deal with challenge throughout their professional development (Butt & Retallick, 2002). Although theoretically divergent to global models of wellbeing (e.g. Diener & Suh, 1997; Ryff, 1989), professional wellbeing research shares focus on the operationalisation of measurable variables, rather than defining the term. Compared to studies of global conceptualisations of wellbeing, research into professional wellbeing is scarce. Among these, a relatively small number of studies focus directly on teachers’ wellbeing. As discussed earlier, some studies use negative, deficit based measures of wellbeing, such as burnout, stress and anxiety (see Chapter 1 from p.3).

There is little agreement among researchers into teacher wellbeing as to its exact nature. For example, Yildrim’s (2015) study of Turkish teachers proposed the main determinants of teacher wellbeing are self-efficacy, job satisfaction and recognition. Similarly, Aelterman et al. (2007) suggested that job satisfaction, self-efficacy, trust and autonomy were positively related to teacher wellbeing. Butt and Retallick (2002) also proposed a link between teachers’ sense of professional wellbeing and feelings of trust, respect, autonomy and efficacy. The above studies share the assumption that wellbeing is defined by objectively measurable variables, such as those included in inclusion criteria in the systematic review (see p. 10). Still, the lack of agreement amongst researchers as to the operationalisation of
teachers’ wellbeing suggests further research is needed in order to gain a better understanding of the phenomenon.

Three research questions (see p. 50) were devised in light of the conclusions of the systematic review, aforementioned extant literature and my epistemology (see p. 35) in order to understand (1) the meaning of wellbeing from teachers’ perspectives, (2) how teachers’ enhance their wellbeing and (3) the impact of their work environment. A qualitative methodology was necessary to explore teachers’ experience of the phenomena under investigation, as such approaches are suitable for ‘describing and interpreting the personal and social experiences of participants’ (Smith, 2015, p. 2). As the main aim of this research is to explore teachers’ experience of wellbeing, I chose IPA as the analytic method. IPA is underpinned by symbolic interactionism, which proposes the meanings people give to their experience are only acquired through a process of interpretation of a verbal or written account (see Smith, Flowers, & Osborn, 1997). Therefore, IPA is a suitable methodology for researching teachers’ experience of wellbeing by offering a procedure that can be used to develop a thematic exploration of the phenomena.

3.3 Method

3.3.1 Sample

In order to select participants on the basis that they ‘can grant us... access to a particular perspective on the phenomenon under study’ (Smith et al., 2009, p. 49), contact was made with the Head teachers of four schools. Five teachers volunteered to take part in the study. This sample was obtained from a small number of schools in a city in England and only basic demographic information is reported in order to protect participant’s anonymity. The participants had had two to fourteen years teaching experience. All five participants taught primary aged children. Three of the five participants have children who live with them at
home. Participants’ names and other identifiable information have been changed to preserve their anonymity. Please refer to Chapter 2 (p. 38) for additional discussion.

3.3.2 Procedure

A semi-structured interview guide (Table 8 on p. 41) was designed incorporating Smith et. al’s (2009, see p. 59) guidance, the systematic review findings and relevant literature. I conducted the interviews, recorded using a Dictaphone and transcribed verbatim. As I am interested in understanding teachers’ experience of wellbeing, the interview did not follow the guide exactly. It provided prompts to delve for clarity and meaning, yet allowed the interview to reflect a participant led conversation (Smith et al., 2009). The interview reflected the funnelling technique (Smith et al., 2009), whereby a question initiated a broad, descriptive account of participants’ experience, before follow-up questions sought specific details, where necessary, focusing the interview on salient aspects of their experience. This created a deeper hermeneutic cycle, as I was able to access richer accounts of the participants’ lived experience, upon which to base my own interpretation. This method fits with my critical realist epistemology, as it acknowledges that what is known is only real for that individual, and that I can only offer a second-hand account of somebody’s experience (Smith, 1996).

Based on the findings from the extant literature, systematic review and the assumptions of both critical realism and IPA (see p. 35), I devised the following research questions (see p. 50):

1. What do teachers say about what it means to be well?
2. What do teachers say about how they improve their wellbeing?
3. What do teachers say about their work environment that they think has an impact on their wellbeing, and what would they change?

3.3.3 Analysis

I chose to analyse the data using an established IPA process (Smith et al., 2009), in accordance with my epistemology (see p. 36). Smith and colleagues acknowledge that their process is not a prescriptive account, with no rules as to what might be commented on. They state it is vital that all interpretations of the data should ‘arise from attending to the participant’s words’ (Smith et al., 2009, p. 90).

The first stage involved rereading each transcript to become familiar with the data. I initially listened to the audio recording whilst reading the transcripts to understand the context. This allowed me to begin my analytical interaction with the data. In the next stage, I made initial annotations and comments on the transcripts. The semantic content and use of language in the data were highlighted at an exploratory level. This enabled initial identification of the ways in which the participant understands the issue. I then made descriptive, linguistic and conceptual comments in the right hand margin of the transcript. In the third analysis stage, I developed emergent themes based on the conceptualisation of the initial notation. IPA acknowledges the role of the researcher in co-constructing themes and analysis (see Smith et al., 2009). This reflected a ‘synergistic process of description and interpretation’ (Smith et al., 2009, p. 92); whereby my interpretation of the participants’ description generated a second-order analysis, reflecting the double hermeneutic process (see p. 36).

The double hermeneutic process allowed me to develop superordinate themes in the fourth stage of the analysis, by identifying commonalities across emergent themes. These higher
order themes reflect my most important and interesting interpretations of the participants’ accounts of their lived experience. As acknowledged by Smith et al. (2009), some emergent themes were set aside, as they were not immediately relevant to my questions. The first four steps were repeated for each transcript, producing five sets of superordinate and emergent themes. I regularly checked that themes linked to the transcripts in order to enhance the validity and reliability of the analysis. This helped me to preserve the voice of the participant in the analysis, as their first order sense-making is central to successful IPA research (Smith et al., 2009).

The final step of the analysis saw the development of patterns across cases. I was able to identify relationships between the superordinate themes through a process of relabelling and reconfiguring original themes. This deeper level of analysis produced two final themes (see Table 9 on p. 53). These themes were checked against the original data in order to ensure the participants’ described experience had not been lost through the interpretative process. The themes bring together the findings of the systematic review, quotes from the participants’ accounts of their lived experience and my interpretation.

3.4 Findings and a reconsideration of literature

I have merged the findings section with the discussion, following Smith et al.’s (2009) precedent enabling triangulation of the raw data, my interpretation of the teachers’ described experience and extant literature. This section reflects my phenomenological lens in the broadest sense, discussing two superordinate themes that broadly represent the teachers’ described experience.
3.4.1 “That’s what’s important” (Alex)

The teachers frequently talked about the different elements central to their experience of wellbeing.

Table 9 Final themes

<table>
<thead>
<tr>
<th>Superordinate themes</th>
<th>Master grouped themes</th>
<th>Emergent grouped themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘That’s what’s important’</td>
<td>Relationships</td>
<td>TAs, colleagues, leadership, home, children’s wellbeing</td>
</tr>
<tr>
<td></td>
<td>Physical</td>
<td>Diet, sleep, exercise</td>
</tr>
<tr>
<td></td>
<td>Work-life balance</td>
<td>Work-life balance, weekend work, work at home</td>
</tr>
<tr>
<td>‘Is there anybody else who works this hard?’</td>
<td>Time</td>
<td>Lack of time</td>
</tr>
<tr>
<td></td>
<td>Tiredness</td>
<td>Exhaustion, tired all the time, too tired to engage in positive behaviours</td>
</tr>
<tr>
<td></td>
<td>Impact on family</td>
<td>Family worse off, guilty about own children</td>
</tr>
<tr>
<td></td>
<td>Effort-reward imbalance</td>
<td>Who for?, long hours, Ofsted</td>
</tr>
</tbody>
</table>

Importance of relationships

This theme emphasises the value placed upon relationships by teachers in the experience of wellbeing, inside and outside school. Relatedness is one of the three basic psychological needs underpinning motivation and wellbeing (Deci & Ryan, 2002), otherwise known as Self Determination Theory (SDT). According to SDT, relatedness refers to an individual’s need to
feel connected to others, their community and to give and receive care with others (Deci & Ryan, 2002).

“*The people around you, you feel part of a team, an organisation*”

2.23.711

Additionally, Bobby’s comment above suggests positive relationships with colleagues reinforced a sense of membership to their community of practice (Lave & Wenger, 2002), serving to enhance their sense of social identity (Turner & Brown, 1978) and belonging (Osterman, 2000).

The teachers frequently referred to the importance of Teaching Assistants (TAs). Interestingly, their importance was often reinforced through the impact of their absence.

“This children have done two years with me now so if I had these adults with me two years it would take a lot of pressure off, as I say it’s like having another child and I don’t mean that awfully, I just think having to teach somebody things is hard” 5.46.1415

This highlights two issues. First, participants highlighted a lack of consistency in support staff. Other comments suggest this made planning more difficult, leading to an external perceived locus of control (PLOC) (Dweck & Reppucci, 1973). Secondly, TAs need extra training and support in order to provide effective classroom support, which can add stress to teachers’ workload. This reflects research suggesting TAs work most effectively in highly

3 Indicates the location of the quote in the transcript. For example, 2.23.711 means interview 1, page 23, line 711. In the text, I used pseudonyms instead of the participants real names, in order to protect their anonymity
structured settings with high-quality support and training (Blatchford, Russell, & Webster, 2012). The authors also suggest when TAs are deployed in unstructured, informal roles, they can have a negative effect on outcomes for children. Therefore, my interpretation suggests the quality of the professional relationship between teacher and TA mediates teacher wellbeing.

Comparisons can be drawn with claims about leadership. The teachers stated how an affable, personable approach from school leaders served to promote wellbeing.

... I had done somethings effectively, that you’ve made a difference, empowered almost, you do get feedback from the Head” 1.3.67

Supportive school leadership has been linked with teachers’ increased sense of efficacy (Brown, 2012); a main determinant of teachers’ professional wellbeing (Yildirim, 2015). Conversely, teachers claimed a lack of support from leadership can negatively affect wellbeing.

“The Head has become much more business-like, she used to be much more personal in her dealings with you” 1.12.369

Teachers’ conception of a lack of appreciation from leadership negatively affects wellbeing through depersonalisation and reduced self-efficacy (Brown, 2012). This reflects other claims made by the teachers which highlight how communication difficulties and within-group conflict with staff can strain teacher wellbeing. My interpretation suggests teachers’ perception of the quality of their relationship with leadership, similar to TAs, mediates their wellbeing.
This theme reflects wider occupational research referring to relatedness with colleagues; however, studies involving teachers refer to relatedness with students (Klassen, Perry, & Frenzel, 2012). This reflects teachers’ claims of a relationship between their wellbeing and their pupils’ wellbeing. This echoes attunement, whereby teachers share their pupil’s positive experiences in the classroom and an emotional sense of relatedness (Deci & Ryan, 2002). Attunement between teachers and pupils has also been shown to correlate with enhanced academic performance (Poulsen & Fouts, 2001).

“... whenever you could see that they’ve really got something and enjoyed it and achieved... great moments that you have with them” 3.24.734

Similarly, teachers’ wellbeing is influenced by their sense of satisfaction from successful pedagogy.

“but they do it in the end and then they felt good after it, and then you’ve had a good day because they’ve gone home happier” 5.41.1258

Emphasis was also placed on the role of relationships outside of the classroom. Married participants frequently cited the importance of their partner.

“...helped because he cooks and I have my dinner every night ready for me, which is fab. He makes me go out for a walk despite the fact I don’t want to” 1.6.147

As 45% of Newly Qualified Teachers are aged 25 or below (National College for Teaching and Leadership, 2014), it is possible that many individuals entering the profession are yet to
develop their own family. As such, the youngest participant, Bobby, asserted the importance of parents and family in the development and maintenance of wellbeing:

“My parents had to pull me out of loads of little ruts last year” 2.22.694

**Importance of physical wellbeing**

Most participants referred to the impact of physical health when considering their wellbeing generally. The value placed upon physical wellbeing was emphasised most when participants talked about strategies typically associated with maintaining physical health.

“sleep, eating like a normal person, drinking like normal person. Those things. The physical comes first” 2.22.665

The participants’ focus on healthy eating and the importance of exercise in enhancing their wellbeing characterises the physically demanding nature of teaching. It is important to acknowledge the lengths teachers go to, or aim to achieve, in order to protect and enhance their overall wellbeing, by safeguarding their basic needs.

Historically, the association between wellbeing and physical health has emphasised a disease-based model (Boehm & Kubzansky, 2012). However, contemporary research asserts the relationship between wellbeing and physical health (specifically cardio-vascular) is mediated by the presence of restorative processes and the absence of deteriorative processes (Boehm & Kubzansky, 2012). For example, positive psychological wellbeing is linked with restorative health behaviours such as the consumption of fruit and vegetables (Smith & Baum, 2003). The authors also claim positive wellbeing is linked with reduced likelihood of engaging in deteriorative behaviours such as excessive alcohol consumption.
This reflects my interpretation of the teachers’ claims, as the extent to which they engage in restorative processes, such as “normal” sleep, diet and exercise mediates their wellbeing.

Work-life balance

The pursuit and development of a work-life balance was central to most of the participants’ described experience. In practice, the participants’ experiences are more representative of a work-life imbalance. This is characterised by long hours and a high volume of work.

“I would dream of having a work-life balance. I’ve tried and tried for years
to have one” 1.6.182

Whether they had achieved a work-life balance or not, participants frequently asserted its importance to wellbeing. My interpretation of the claims about work-life balance suggests they find it hard to achieve a sense of stability. This reflects Herzlich (1973), as individuals seek to attain or keep a sense of equilibrium in order to feel well. This is central to a definition of wellbeing (Dodge et al., 2012, p. 230), which proposed wellbeing is achieved when ‘individuals have the psychological, social and physical resources they need to meet a particular psychological, social and/or physical challenge’, and reduces when the see-saw becomes unbalanced (see Figure 2 on p. 59).

“I’m not asking for the world. Just asking for a wee bit of time. It’s a work
life balance” 3.30.930
3.4.2 “Is there anybody else that works this hard?” (Chris)

The second superordinate theme focuses on the various barriers and challenges faced by teachers affecting their wellbeing.

**Time**

Time was the most common theme across the interviews and was invariably discussed in relation to other challenges, such as Ofsted:

“...one of the first questions they [Ofsted] ask you is if the children are happy. Well, you know, I know they would be happier if I could spend more time with them on the things they like to do” 3.29.883
Policy makers and school leaders may be able to improve teacher and pupil wellbeing through adjusting their working conditions e.g. additional PPA time. This could serve a range of functions for Ofsted, including improving children’s happiness, which would be particularly relevant in light of their recent publication, The Children’s Happiness Scale (OfSted, 2014).

“I literally have not had time, I have done a, b and c... and there’s always that thought in the back of your mind about what you haven’t done”

1.7.193

Alex suggested a lack of time meant that teachers’ workload was unmanageable. Other comments suggest the volume of work was unsustainable, irrespective of time. Nevertheless, Danny suggested a lack of time is not exclusive to workload.

“If teachers had, for example, an extra hour every night to just have a shower or go to the pub and wind down, I think everyone would be just that little bit happier”

4.35.1073

This suggests that through affording teachers to enjoy more spare time, they could achieve a balanced wellbeing.

“I would say to everyone...I’d say you’re not allowed to do any work beyond 5pm. You’re not allowed to do any work at home. Right. You’ve got 9-5, any time you come in, directed time starts at 8”

3.29. 893

According to the DfE (2015a, p. 52), ‘a teacher must work such reasonable additional hours as may be necessary to enable the effective discharge of the teacher’s professional duties’.
In my interpretation, reducing the ambiguity associated with directed time could enhance wellbeing. Chris said teachers’ “planning would be more efficient” and their marking “more precise”. This reflects Parkinson’s Law, which proposes ‘work expands so as to fill the time available for its completion’ (Parkinson & Osborn, 1957, p. 3). Therefore, school leaders and policy makers may be able to support teachers’ wellbeing by amending the guidance related to directed time and supporting efficient practice by reducing time stressors.

Tiredness

“you have the most enthusiastic, bright minded little people in the world
potentially being taught by the most exhausted, jaded, cynical people in
the world” 3.28.844

Tiredness is common amongst teachers (Miryala & Chiluka, 2012), and has associations with burnout, reduced engagement and stress (Hakanen, Bakker, & Schaufeli, 2006). Chris’ comment above describes a dilemma faced by teachers, questioning the sustainability of current practice and policy. The analysis highlighted teachers’ commonly associated tiredness with reduced wellbeing. In light of the importance attached to physical wellbeing described earlier, participants recalled how tiredness affected their capacity to make positive choices in order to support their physical wellbeing.

“But I’m not great at that as I am that tired when I go in that I, you know, I
don’t eat properly” 1.6.166

Impact on family

As discussed earlier, participants considered relationships with family to be important to wellbeing. However, I interpreted the participants’ described experience suggests that teaching places a strain on family life:
Social identity theory suggests that the groups people belong to, including family, are viewed as a source of pride and self-esteem (Tajfel & Turner, 1979). Chris’ powerful claim suggests his job challenges his identity as a father and undermines his wellbeing. The participants also frequently stated they work at weekends, which reinforced earlier discussion about time, workload and work-life balance.

**Effort-reward imbalance**

Two distinct perspectives about teaching were raised by all participants in relation to how they felt about their job. Participants described excessive demands and a diminished sense of wellbeing. Teachers’ accounts also depict a deeply rewarding, positive narrative.

“I like love the job more than just a job” 1.7.212

Although the teachers spoke about the less favourable aspects of their work more often, the positive aspects of teaching were often reinforced with claims relating to their sense of self.

“They’ve observed already and told me I’m really good. It’s added to my confidence” 2.19.587

My interpretation suggests teaching can enhance teachers’ sense of competence, accomplishment and their ability to achieve at work. This in turn develops a positive sense of self-efficacy (Bandura, 1997; Pajares, 1996), a main determinant of teacher wellbeing (Yildirim, 2015). Participants also claimed teaching serves to fulfil their need to provide “maternal” care and complements their identity as a “helper”.
In shaping their positive sense of self and fulfilling their needs, teaching may facilitate intrinsic autonomous motivation (Gagné & Deci, 2005). This contrasts with the discussion about the influence of Ofsted and external PLOC (see below).

Participants also talked about the less favourable aspects of their work. I interpreted a distinction between teachers’ described experience about teaching and non-teaching activities.

In my interpretation, Rogers’ (1951) ideal-self is inherent to the perceived disparity between teaching roles. Rogers asserts that when the ideal-self and self-image are congruent, an individual will achieve self-actualisation, achieving their goals. This reflects hedonic wellbeing and the need for satisfaction and positive affect (Margolis et al., 2014). Thus, some teaching activities may serve to reinforce teachers’ ideal-self, such as “delivering lessons”, whilst other activity, such as “stuff” referred to below, undermines their ideal-self. In much the same way, teaching could be interpreted as rewarding activity, whereas non-teaching activity could be seen as effort. Teachers may struggle to achieve their ideal-self, as it is estimated less than half of their weekly working time is spent teaching (School Teachers’ Review Body, 2008).
The teachers also claimed preparing for inspection took time and effort away from the classroom. There is a common belief among teachers that school inspection leads to increased workload and negatively affects wellbeing due to excessive workload and bureaucracy (NASUWT, 2014). Alex implies the extra work for inspection lacks value and reduces wellbeing, as time and effort could be better spent on more rewarding work. My interpretation of the participants’ described experience suggests teachers do not consider additional work to satisfy Ofsted inspection as a form of rewarding activity (therefore tipping the effort-reward balance). Perceived effort-reward imbalance has been associated with high rates of burnout and reduced wellbeing in teachers (Unterbrink et al., 2007). Parallels can be drawn with cognitive evaluation theory (Gagné & Deci, 2005), which asserts that external factors such as surveillance and evaluation can diminish feelings of autonomy, leading to an external PLOC.

3.5 Discussion and Conclusions
The two superordinate themes described in the previous section reflected my broadest phenomenological lens and my summation of the teachers’ experience. It included discussion of each grouped master theme (see Table 9 on p. 53) and extant literature. The following section focuses on this middle unit of analysis.
3.5.1 Phenomenological model

I was struck by the recurrent concept of balance throughout the analysis. Not only is balance explicitly linked to two grouped themes (see Table 9 on p. 53), it is implicitly linked to my interpretation of the whole data set and extant theory. My interpretation of the data is therefore drawn to a balance apparatus often used in primary maths lessons (see Figure 3). The grey makeweights are positioned in way that achieves balance.

![Figure 3 Phenomenological model of balanced teacher wellbeing](image)

Figure 4 shows how the balance can tip. The same logic can be applied my construal of the teachers’ claims using the grouped themes as makeweights (see Figure 5 on p. 67)

![Figure 4 Phenomenological model of imbalanced teacher wellbeing](image)
The model adopts the concept of balance used in the see-saw definition of wellbeing proposed by Dodge et al. (2012) (see Figure 2 on p. 59). My model does not use Dodge et al.’s concept of resources and challenges, as each end of the balance is value free rather than rendering one side positive and the other negative. Figure 5 (see p. 67) suggests teachers may be able to experience positive (balanced) wellbeing despite a negative experience of most of the grouped master themes. For example, teachers’ perceived ‘work life balance’ and ‘physical health’ balance could counteract their poor experience of the remaining five grouped themes.

It would be useful to develop the model further. Future research could explore whether some of the makeweights are more important than others. This would examine whether or not some makeweights have more balancing power than others in helping to achieve wellbeing.

Whilst not readily generalisable to a wider population of teachers, these findings may have value in highlighting factors to be considered in the development of future practice. The findings add to a body of literature that attempts to offer a definition of teachers’ wellbeing using research methods which, by design, negate the subjective and phenomenological nature of wellbeing. The findings also increase understanding of the nature and definition of teacher wellbeing, serving to strengthen any interpretation of the phenomenon and its implications.

The claims made by individual teachers about the nature of their wellbeing and the behaviours and resources influencing their experience have further implications for the education system. In light of the current agenda focusing on attainment and teacher accountability, policy makers should consider prioritising the wellbeing of its workforce. This
Figure 5 Phenomenological model with example and grouped master themes
research advocates the voice of the teacher, which could otherwise be ignored within the complex systems that govern their occupational experience.

Furthermore, this study demonstrates the efficacy of IPA as a phenomenological approach to research, as it provides an in-depth account allowing researchers and educationalists to understand individual experiences (Pringle, Drummond, McLafferty, & Hendry, 2011). This has implications for educational policy makers, school leaders, Initial Teacher Training and teachers themselves, in order to ensure the complex balance of challenges, demands, resources and rewards are appraised appropriately. This research also adds to the extant body of teacher wellbeing literature and may be used to inform intervention or policy at an organisational or national level.

3.5.2 Limitations

This study used a small sample (see p. 49), limiting the extent to which findings can be generalised to wider populations. Furthermore, the participants’ shared similar characteristics, such as ethnicity and demographics, further reducing the generalisability of the findings to different cultural and geographical groups. However, IPA is inherently idiographic and committed to understanding individual’s lived experience (Smith et al., 2009). Therefore, whilst this research may lack generalisable conclusions, similarities across interpretations embolden insight into wellbeing, leading to wider implications (Reid et al., 2005).
The interview guide used in this study (see Table 8 on p. 41) was based on guidance (Smith et al., 2009) in an attempt to ensure the questions were open ended in order to explore teachers’ lived experience. However, the questions were predetermined, shaped by my subjectivities and knowledge of the phenomenon under examination. This may have shaped the teachers’ responses, potentially reducing overall quality. However, IPA is underlined by the complicated chain connection between people’s talk, cognitions and emotions (Smith, 1996, 2015). From a critical realist perspective, accessing reality is also complicated, giving rise to its transitive and fallible assertions about knowledge. Although the guide is inherently subjective, it yields data congruent with my epistemological position.

In conducting this research, I aimed to explore teachers’ experience of wellbeing by asking three research questions intended to (1) investigate the meaning of teacher wellbeing, (2) how wellbeing can be improved and (3) teachers’ views on the impact of their environment on wellbeing. These are addressed below.

1. What do teachers say about what it means to be well?

Teachers’ described experience suggested wellbeing is complex and multifaceted. Figure 5 on p. 67 demonstrates how their described experience determines their sense of wellbeing. Following the model’s premise, teachers’ experience of each grouped theme (see Table 9 on p. 53) mediates their wellbeing. The model could be used as part of a problem solving framework by EPs to help individual teachers make sense of their experience of wellbeing.

2. What do teachers say about how to improve wellbeing?
The value placed on physical health subsequently led to an emphasis on fitness-related strategies to enhance wellbeing. Teachers commonly cited the significance of diet, exercise and sleep in describing their wellbeing. I also interpreted teachers’ described experience to suggest social support networks served to improve wellbeing. I interpreted positive, supportive relationships with colleagues and leadership to increase teachers’ sense of relatedness, belonging and enhance their sense of self. Similarly, teachers’ relationships with their families provided emotional stability and enhanced their work-life balance, therefore contributing to an enhanced wellbeing.

3. What do teachers say about their work environment that they think has an impact on their wellbeing?

The teachers interviewed in this study suggested their work environment affected wellbeing in a number of ways. Unmanageable workloads, unrealistic demands of the school inspection procedure and a perceived lack of time to complete their daily activities were all claimed to affect wellbeing. Similarly, teachers also claimed their social environment influenced wellbeing, emphasising the importance of attunement and relatedness with their pupils. Furthermore, a lack of support and training for TAs was associated with a reduced sense of wellbeing. These environmental factors served to influence the teachers’ PLOC, their sense of motivation, engagement and ultimately wellbeing; positive environmental factors supported an internal PLOC and vice versa.

This study has reiterated that teacher wellbeing is a complex, multi-faceted phenomenon. The findings support evidence highlighting the impact that teachers’ work has on their wellbeing and the consequent effect on children, retention and government budgets. This study contributes to a body of literature that intends to influence positive change for schools, their workforce and our children. In their role as systemic change agents in schools,
EPs could apply the findings of this study to inform and develop staff wellbeing policies and guidance. Furthermore, the findings could be used by EPs to inform individual and whole school consultation to support teacher wellbeing, school improvement and most importantly, positive outcomes for children.
## Appendix 1 - Weight of Evidence assessment

<table>
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</thead>
<tbody>
<tr>
<td>Yes, some concerns, The study used a non–treatment control group, meaning that those participants would not have been able to potentially benefit from intervention.</td>
<td>Yes, some concerns, The study used a non–treatment control group, meaning that those participants would not have been able to potentially benefit from intervention.</td>
<td>Yes, some concerns, The study used a non–treatment control group, meaning that those participants would not have been able to potentially benefit from intervention.</td>
<td>Yes, some concerns, The study used a non–treatment control group, meaning that those participants would not have been able to potentially benefit from intervention.</td>
<td>Yes, some concerns, The study used a non–treatment control group, meaning that those participants would not have been able to potentially benefit from intervention.</td>
<td>Yes, some concerns prior to study. The study used a non–treatment control group, meaning that those participants would not have been able to potentially benefit from intervention.</td>
</tr>
</tbody>
</table>

| 2. Were students and/or parents appropriately involved in the design or conduct of the study? | n/a | n/a | n/a | n/a | n/a |

| 3. Is there sufficient justification for why the study was done the way it was? | Yes- information obtained was important to the research question | Yes- information obtained from participants was important to the research question. Discussion of relevant theory and literature included. | Yes- information obtained was important to the research question. Explanation of purpose and literature provided. | Yes- information obtained was important to the research question | Yes- information obtained was important to the research question. Explanation of purpose and literature provided |

| 4. Was the choice of research design appropriate for addressing the research question(s) posed? | Yes- design allowed for research questions to be tested using a treatment/control design. | Yes- design allowed for intervention to be compared to a non-treatment group | Yes- design allowed for intervention to be compared to a non-treatment group | Yes- design allowed for intervention to be compared to a non-treatment group | Yes- discussion of rationale provided, convincing argument for methods and sources of data |

<p>| 5. Have sufficient attempts been made to establish the repeatability or reliability of data collection methods or tools? | Yes some attempt- good, good test re-test reliability and internal reliability. No pilot or repeated measures | Yes some attempt- good, Chronbach’s alpha and factor analysis data reported. No pilot or repeated measures | Yes some attempt- good discussion of reliability of observation criteria. No reliability score provided for psychometric tool. No pilot or repeated measures | Yes some attempt- good, good test re-test reliability and internal reliability. No pilot or repeated measures | Yes some attempt- good, Chronbach’s alpha reported, measures cited as reliable, clear description of procedure and sample for repeatability. No pilot or repeated measures |</p>
<table>
<thead>
<tr>
<th>6. Have sufficient attempts been made to establish the validity or trustworthiness of data collection tools and methods?</th>
<th>Yes good- validity for each measure reported. Procedure for establishing validity also reported for Structured Clinical Stress Interview</th>
<th>Yes some attempt, little discussion of access and methods of approach of participants. Good description of procedure</th>
<th>Yes some attempt, discussion of attrition and its potential impact on conclusions. Little discussion of validity.</th>
<th>Yes good, validity scores provided for some measures. Good description of sampling</th>
<th>Yes good- validity discussed in relation to each measure used. Good description of method of approach</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Have sufficient attempts been made to establish the repeatability or reliability of data analysis?</td>
<td>Yes- explanation of t-test and ANCOVA procedures</td>
<td>Yes- explanation of t-tests and tests of significance</td>
<td>Yes- full analysis explained</td>
<td>Yes- clear explanation of analytic process and multiple ANOVA.</td>
<td>Yes- full analysis explained</td>
</tr>
<tr>
<td>8. Have sufficient attempts been made to establish the validity or trustworthiness of data analysis?</td>
<td>Yes some attempt, analysis is justified and valid. Limitations are stated. Discussion of concerns about regression of post-treatment means in relation to control. No follow-up measures taken</td>
<td>Yes good- results section includes commentary on process</td>
<td>Yes good- results section includes commentary on sample and limitations are stated</td>
<td>Yes good- analysis is justified and valid. Limitations are stated.</td>
<td>Yes good- discussion of control of confounders Discussion of patterns at baseline in all groups</td>
</tr>
<tr>
<td>9. To what extent are the research design and methods employed able to rule out any other sources of error/bias which would lead to alternative explanations for the findings of the study?</td>
<td>A little, discussion of end of treatment coinciding with 'stressful' end of year. Participants were aware that they were not in treatment group, which may have led to bias.</td>
<td>A little, the authors discuss the implication of the month of data collection on teachers' responses. Participants were aware of participation in treatment group, which may have led to bias. Authors' discuss some likelihood of bias due to the samples of teachers from different schools.</td>
<td>A lot, discussion of attrition and implications on evidence, discussion of group allocation</td>
<td>A little- discussion of possible bias presented (subject selection and design issues)</td>
<td>A little- discussion of potential score discrepancies between groups, participants were aware of participation in treatment group, which may have led to bias.</td>
</tr>
<tr>
<td>10. How generalisable are the study results?</td>
<td>Poor- small sample size of teachers from one part of Utah, USA, however thorough explanation of sample and treatment provided</td>
<td>Poor- small sample size of teachers from one part of Romania, however thorough explanation of sample and treatment provided</td>
<td>OK sample from USA, but thorough explanation of sample and treatment provided</td>
<td>Poor- very small sample from USA, but thorough explanation of sample and treatment provided</td>
<td>Good- larger sample than others in review. Close to equal male/female ratio between treatment and control groups</td>
</tr>
<tr>
<td>11. In light of the above, do the</td>
<td>N/A</td>
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<tr>
<td>Low trustworthiness- few links between data and conclusions. Conclusions are not explicitly stated- hard to distinguish between findings and conclusions.</td>
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<td>High trustworthiness- clear links provided between data and conclusions, discussion of how interpretation is assigned to specific sections of data</td>
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<tr>
<td>Medium trustworthiness- conclusions link to results section but little clear comparisons made. Discussion of trends in data and implication.</td>
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<td>High trustworthiness- clear links provided between data and conclusions, discussion of how interpretation is assigned to specific sections of data</td>
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<tr>
<td>High trustworthiness- clear links made between original data, conclusion and theory. Authors warrant the discussion with data and commentary</td>
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<tr>
<td>Yes, some concerns The study used a non – treatment control group, meaning that those participants would not have been able to potentially benefit from intervention.</td>
<td>No- written consent was gained prior to study. Waiting list control group access intervention shortly after initial data collection.</td>
<td>Yes, some concerns The study used a non – treatment control group, meaning that those participants would not have been able to potentially benefit from intervention.</td>
<td>No, teacher consent gained</td>
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<td>Yes- information obtained was important to the research question. Explanation of</td>
<td>Yes- information obtained was important to the research question. Explanation of</td>
<td>Yes- information obtained was important to the research question. Explanation of</td>
<td>Yes- measures were used to answer the research question</td>
<td>Yes- measures were used to answer the research question</td>
<td>Yes- the information obtained was important to the research question</td>
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<table>
<thead>
<tr>
<th>why the study was done the way it was?</th>
<th>Shimazu et al. (2003)</th>
<th>Sharp and Forman (1985)</th>
<th>De Jesus and Conboy (2001)</th>
<th>Forman and Forman (1980)</th>
<th>(Schaubman et al. (2011))</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explanation of purpose and literature provided</td>
<td>purpose and literature provided</td>
<td>research question. Explanation of purpose</td>
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4. Was the choice of research design appropriate for addressing the research question(s) posed?

<table>
<thead>
<tr>
<th>Yes- 3x2 factorial pre/post test experimental control design allowed for the effectiveness of the intervention to be evaluated</th>
<th>Yes- design allowed for intervention to be compared to a non-treatment group</th>
<th>Yes- design allowed for intervention to be compared to a non-treatment group</th>
<th>No- the study does not include a control group to compare intervention effects</th>
<th>No- in order to evaluate if RET program works, a control/comparison group is required</th>
<th>No- the study does not include a control group to compare intervention effects</th>
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<tbody>
<tr>
<td>Yes some attempt- good, test-retest and internal consistency scores reported for all measures. Details of procedure and sample reported. No pilot or repeated measures</td>
<td>Yes some attempt- some attempt, description of procedure, treatment and sample reported. No reliability or internal consistency reported. No pilot or repeated measures</td>
<td>Yes some attempt- good, sample and procedure reported, reliability and internal consistency values presented. No pilot or repeated measures</td>
<td></td>
<td>No none, little discussion of sampling technique. No pilot or repeated measures</td>
<td>No none- little discussion of sampling techniques. No reliability or internal consistency of measures reported. No pilot or repeated measures</td>
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</tbody>
</table>

5. Have sufficient attempts been made to establish the repeatability or reliability of data collection methods or tools?

<table>
<thead>
<tr>
<th>Yes good- construct validity established, good description of methods of approach</th>
<th>Yes some attempt- construct validity established</th>
<th>Yes, some attempt, Moderate reliability of measures. Very little explanation of procedure; no description of sampling technique. No pilot or repeated measures</th>
<th></th>
<th>No none- little discussion of methods of approach</th>
<th>Yes some attempt, Scant comment on validity of measures but good discussion of intervention procedure.</th>
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<tbody>
<tr>
<td>Yes good- discussion of what tools measure and how they have been used.</td>
<td>Yes good- construct validity established, good method of approach</td>
<td>No non- little discussion of how methods may have affected participation or influence on data. No description of methods of approach</td>
<td>Yes good- concurrent validity scores reported. Good description of methods of approach</td>
<td>Yes some attempt- scant discussion of implicit or explicit findings.</td>
<td>Yes some attempt- little discussion of findings</td>
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7. Have sufficient attempts been made to establish the repeatability or reliability of data analysis?

<table>
<thead>
<tr>
<th>Yes- discussion of sample and design. Explanation provided at each level of analysis</th>
<th>Yes clear use of ANOVA and MANCOVA</th>
<th>No, very little discussion of data analysis.</th>
<th>No- very little detail of analytical procedure</th>
<th>No- poor discussion of analytical procedure or descriptive statistics</th>
<th>No- poor discussion of analytical procedure or descriptive statistics</th>
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</thead>
<tbody>
<tr>
<td>Yes good- analysis is justified and valid. Limitations are stated.</td>
<td>Yes good- analysis is justified and valid</td>
<td>Yes some attempt- scant discussion of implicit or explicit findings.</td>
<td>Yes some attempt- little discussion of findings</td>
<td>Yes some attempt – results section includes commentary</td>
<td>Yes some attempt – results section includes commentary</td>
</tr>
</tbody>
</table>

8. Have sufficient attempts been made to establish the validity or trustworthiness of data analysis?

| Yes good- analysis is justified and valid. Limitations are stated. | Yes good- analysis is justifed and valid | Yes good- analysis is justified and valid | Yes some attempt- scant discussion of implicit or explicit findings. | Yes some attempt- little discussion of findings | Yes some attempt – results section includes commentary |
|---|---|---|---|---|---|---|
| A little discussion of raised stress at pre-test, controlled for. Participants were aware of participation in treatment group, which may have led to bias. | A lot, authors provide discussion of alternative explanations for findings. | A little, participants were aware of participation in treatment group, which may have led to bias. | Not at all- no discussion of negative cases or outliers | Not at all, little- minimal discussion of error/bias or alternative explanations | Not at all. little- minimal discussion of error/bias or alternative explanations |

<table>
<thead>
<tr>
<th>10. How generalisable are the study results?</th>
<th>Good- Comparatively good sample size, from Nigeria, close to equal male/female ratio in treatment and control groups</th>
<th>Poor- findings apply to teachers from small area of Japan</th>
<th>Poor- small sample size from one area of USA</th>
<th>Poor- small sample. No control comparison group</th>
<th>Poor- small sample from USA, no comparison group</th>
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<tbody>
<tr>
<td>N/A</td>
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<tr>
<th>11. In light of the above, do the reviewers differ from the authors over the findings or conclusions of the study?</th>
<th>N/A</th>
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<tr>
<th>12. Have sufficient attempts been made to justify the conclusions drawn from the findings, so that the conclusions are trustworthy?</th>
<th>High trustworthiness - clear links made between original data, conclusion and theory. Authors warrant the discussion with data and commentary</th>
<th>Medium trustworthiness- conclusions link to results section but little clear comparisons made. Discussion of trends in data and implication</th>
<th>Low trustworthiness- few links between data and conclusions. Conclusions are not explicitly stated- hard to distinguish between findings and conclusions.</th>
<th>N/A</th>
<th>Low trustworthiness</th>
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<td>N/A</td>
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<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>Medium trustworthiness</td>
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<td>Superordinate theme</td>
<td>Grouped master</td>
<td>Theme</td>
<td>Quotes (participant.page.line)</td>
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<td>That’s what’s important</td>
<td>Importance of relationships</td>
<td>Leadership</td>
<td>5.46.1395 “I’m fortunate to say, if someone was to come in and it wasn’t working I could go to the Head say its not working for me or the children, but it’s got to work.</td>
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<td></td>
<td></td>
<td>Colleague support</td>
<td>3.27.827 “Well yeah, relationships with other member of staff can be really tricky</td>
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<td>Teaching Assistants</td>
<td>5.46.1415 “ These children have done two years with me now so if I had these adults with me two years it would take a lot of pressure off, as I say it’s like having another child and I don’t mean that awfully, I just think having to teach somebody things is hard</td>
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<td>Personal relationships</td>
<td>4.38.1169” You deal with 30 little cherubs every day, and sometimes its harder communicating with your TA than with the kids</td>
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<td></td>
<td></td>
<td>Family</td>
<td>1.7.413 “it was the perfect working environment. But for 2 and a bit years, it’s been different. You’ve got no control and you can start the year thinking right- TAs will have this to do and that to do. And that will take work from me and then you realise that the TAs can’t actually do those things. They are going to finish at 3.30, walk out the door.</td>
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<td>Children’s wellbeing</td>
<td>4.35.1072 “The TAs could possibly be better organised and have more support, so that they can take initiative</td>
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<td>1.6.147 “**** is home at the moment which has helped because he cooks and I have my dinner every night ready for me, which is fab. He makes me go out for a walk despite the fact I don’t want to.</td>
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</table>
2.22.694 “My parents had to pull me out of loads of little ruts last year but they do do it in the end and then they felt good after it, and then you’ve had a good day because they’ve gone home happier. Definitely.

5.21.642 “If they’re in good spirits. That’s what makes you feel well.

3.24.740 “When they have that trust with you, that relationship is still there. I guess I’m talking about being valued for what you do

5.45.1311 “But at the end of the school day, for me I’ve got a supportive family,

5.43.1331” It is really important. If being well means that I can walk and talk and be happy and be animated and lively, read a story with the right emotion that is well you’re feeling well. If you’re feeling unwell, if I had a headache or coming down with something, I’m very rarely ill, but if I was feeling ill and I came in I don’t think id be able to do my job.

5.40.1209 “I think the tiredness comes from constantly emotionally and physically on the go.

4.34.1041 “I always try to eat well, in the week at least. And I try to walk, run, swim, and gym

3.26.801 “trying to maintain fitness whenever you work every night until 9 is a bit of a pain
| Work Life balance | Work-life balance, weekend work, work at home | 2.22.665 “getting enough sleep, eating like a normal person, drinking like normal person. Those things. The physical comes first, then it’s generally like are you happy
1.6.166 “I try to really eat properly
3.27.814 “There is a lot that goes into it. And also, on weekends, I try to at least make sure I have Saturday and Friday night that are kind of free
5.43.1312 “Yeah, obviously work-life balance is really important because my son is only 13 and he’s really important to me and I have to make sure that his needs are met as well. So and my husband, you’ve got a family who get your support and your attention, so but yeah I’ve got a good work-life balance. I feel I have
1.6.182 “I would dream of having a work life balance. I’ve tried and tried for years to have one.
5.42.1298 “Well some days when I’m having a day when I’m really busy, and it might be lunchtime, I sometimes go and sit in the car and I put radio 2 on and I sit in the car for 20 minutes and I can’t come back into school. |
<table>
<thead>
<tr>
<th>Is there anybody else that works this hard?</th>
<th>Time</th>
<th>Lack of time, too much work</th>
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<tbody>
<tr>
<td></td>
<td>3.29.893 Right, in my little dictatorship. I would say to everyone, involve the governing body that I wanted to do an experiment for a term. I’d say you’re not allowed to do any work beyond 5pm. You’re not allowed to do any work at home. Right. You’ve got 9-5, any time you come in, directed time starts at 8. 5.46.1403 ”I would have another person in the classroom. An extra body. Just so that I’m not always spinning plates. 3.29.883 ”Yeah, one of the first questions they [OfSted] ask you is if the children are happy. Well, you know, I know they would be happier if I could spend more time with them on the things they like to do.</td>
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<td>5.38.1147 “you can’t help but feel a bit knackered and a bit sour. 1.6.166 “But I’m not great at that as I am that tired when I go in that I, you know, I don’t eat properly 4.33.1005 “Well I feel tired. Exhausted. Auto-pilot. Unenthusiastic 5.39.1193 “But I do feel tired. I’m exhausted everyday when I get in. 5.38.1150 “Other people don’t necessarily appreciate what it’s like. 3.28.844 “you have the most enthusiastic, bright minded little people in the world potentially being taught by the most exhausted, jaded, cynical people in the world</td>
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<tr>
<th>Tiredness</th>
<th>Exhaustion, tired all the time, too tired to engage in positive behaviours</th>
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<tbody>
<tr>
<td></td>
<td>5.38.1147 “you can’t help but feel a bit knackered and a bit sour. 1.6.166 “But I’m not great at that as I am that tired when I go in that I, you know, I don’t eat properly 4.33.1005 “Well I feel tired. Exhausted. Auto-pilot. Unenthusiastic 5.39.1193 “But I do feel tired. I’m exhausted everyday when I get in. 5.38.1150 “Other people don’t necessarily appreciate what it’s like. 3.28.844 “you have the most enthusiastic, bright minded little people in the world potentially being taught by the most exhausted, jaded, cynical people in the world</td>
</tr>
</tbody>
</table>
| Impact on family | Effort-reward imbalance | 3.26.777 “Sometimes I can feel frustrated, sometimes I feel a little bit like my kids get the worst deal.  
1.10.286 “I’d had to take a little bit of time off to drag my son through his GCSEs kicking and screaming. I was part-time for three months. I think I started to feel very guilty, he needed a lot of input, he wasn’t a self-studier as otherwise he would have got Us and Es. And I felt, I think a felt just everything was going into the job.  
5.47.1441 “you send certificates home and they’ve still in the book bag unopened… that does break my heart  
4.35.1073 “If teachers had, for example, an extra hour every night to just have a shower or go to the pub and wind down, I think everyone would be just that little bit happier.  
1.16.497 “, it could be such a fabulous and rewarding job, and such a pointless amount of stuff stops it from being and actually makes it become a really, really negative stressful job and it shouldn’t be.  
5.39.1190 “I skip to work. I skip home from work. I feel that I’m making a difference everyday. The children make me feel so happy, it doesn’t matter what mood I’m in, what’s happened at home.  
1.14.436 “the teaching bit isn’t the bit that stresses me, it’s all the bits outside that stresses me | Family worse off, guilty about own children  
Who for?, Long hours, Ofsted, sense of self, “stuff” |
4.33.1011 “Well, the hard stuff like the extra work and the tiredness and the uninspiring outlook is opposite to the good bits like the positive interaction, seeing lovely changes, seeing development.

3.25.773 “I can see the value and the merit in preparing a lovely lesson, because that’s what would want for any kid, I can see the value and merit in giving a kid feedback in understanding... I’ve no problem with than, but a lot of this other stuff piled on you that gets in the way of doing that good job I want to do it seems a little bit unnecessary

1.14.446 “It’s getting in the way of being the teacher I want to be

1.1.32 “By teaching I found that these maternal feelings that kind of, my children were growing up and I didn’t really want... well AAAAA didn’t really want more

1.3.66 “so when I came back to the job it did the great thing of giving me some confidence and making me feel like I had done somethings effectively, that you’ve made a difference, empowered almost

4.35.1070 “Maybe if we had more time to do our bit, the planning and delivery of good quality lessons with a range of materials
Appendix 3- Participant information sheet and consent form

Research Project- Teacher Wellbeing
Participant Information Sheet

Introduction
I am a Trainee Educational Psychologist (TEP) from Newcastle University, currently working on placement in Newcastle Educational Psychology Service. I hope to carry out interviews with 4 to 6 teachers as part of my doctoral thesis.

What is the purpose of the research?
My research question is: “what do teachers say about being well?”
Teachers are one of the most vulnerable occupational groups to work based psychological illness. In the long term, this has been shown to be strongly related to job dissatisfaction, burnout and staff turnover. I shall use semi-structured interviews to explore the lived experience of a small group of teachers in order to find out about their wellbeing. It is hoped that this study will contribute to a body of research that intends to promote positive change within the profession.
I hope you feel you will be able to support this.
I will go through the information sheet and consent form when we meet.

What will this involve?
The research will involve a single semi-structured interview with the researcher, which will last for approximately 1 hour.

What happens to my information?
All information will remain entirely confidential. Once data has been collected, it will be stored on a password protected computer to ensure confidentiality. Only myself and my research supervisor will have access to the data have access to the data. Any personal identifiers will be removed and the audio recording securely destroyed once the data has been transcribed and the report has been written.

Thank you for reading this information.

Please feel free to contact me if you have any further questions and if you would like to participate. My email address is d.small@newcastle.ac.uk and my supervisor’s email is richard.parker@newcastle.ac.uk.
You are under no obligation to take part and may withdraw from the study up until 4 weeks after the interview date.

**Consent form**

- Have you read and understood the information pack provided? (please circle where applicable) 
  
  YES / NO

- Have you had an opportunity to ask questions and been given satisfactory responses?
  
  YES / NO

- Are you aware that at any time, up until the formal report is completed, you can withdraw from this study?
  
  YES / NO

- Do you give your permission for the interview to be recorded (audio recording only) and be transcribed for the purpose of this study only?
  
  YES / NO

- Are you happy to take part in this study and give your informed consent?
  
  YES / NO

Name: _________________________

Signature:_______________________ Date:____________________________
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