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The Impact of Teacher Well-Being and Mental Health on Pupil Progress in Primary Schools

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Context

The World Health Organisation (2014) defines mental health as:

> …a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community. Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

In England, the Green Paper on mental health in schools (DfE/DoH, 2017) identifies that one in ten children and young people has a mental health need and sets out an ambitious strategy to address this. However, it does not give any attention to the mental health of teachers and concerns have been expressed that the strategy will only be rolled out to a quarter of schools (Young Minds, 2019). The Royal Foundation has demonstrated its commitment to addressing the mental health crisis through its *Heads Together* campaign and it has endorsed the Mentally Healthy Schools website which been developed to support primary schools in addressing this aspect (https://www.mentallyhealthyschools.org.uk/).

The problem of teacher stress is pervasive; it is evident across all sectors of education and across countries (Gray et al, 2017) and results in burnout and lower job satisfaction. Teachers are consistently reported to experience an increased risk of developing mental ill health (Stansfeld et al, 2011; Kidger et al, 2016). It is reassuring that in England, the revised Office for Standards in Education (OfSTED) framework (OfSTED, 2019) gives greater emphasis during school inspections to ways in which school leaders have reduced teacher workload. Given the concerns relating to teacher stress this study sought to ascertain the impact of poor teacher mental health on teaching quality and children's learning and progress.

We adopted a multi-dimensional perspective on wellbeing which acknowledges the different dimensions of health i.e. physical, social, emotional, metal and psychological. These dimensions overlap and interrelate (Danby and Hamilton, 2016).

The Teacher Well-being Index by the Education Support Partnership in England (ESP, 2018) found that 36% of education professionals believed that taking time off work due to mental health symptoms had a negative impact on their students and a further 15% felt it impacted negatively on their students' results. Furthermore, 40% of both senior leaders and teachers were more likely to believe such absence would have a negative effect on students' studies than colleagues working in other education roles. Senior school leaders and teachers perceived that staff absence due to poor mental health had a detrimental impact on students' studies and their results (ESP, 2018). The study was based around the following three research questions:

1. What factors affect teacher wellbeing and mental health?

2. How does teacher wellbeing and mental health impact on the progress of students?

3. What resilience strategies are used by highly effective teachers with poor mental health to ensure that their students thrive?

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Literature

Teacher wellbeing is influenced by factors such as life satisfaction and personal happiness (hedonic perspective) and positive psychological functioning. Teachers are able to demonstrate positive psychological functioning when they are able to form good interpersonal relationships with others, have a sense of autonomy and competence and when they have opportunities for personal growth (Harding et al, 2019). School climate influences teachers' daily experiences in school. It is shaped by the school ethos which is established by the senior leadership team. Limiting teacher agency can result in diminished teacher wellbeing, which detrimentally impacts on teacher performance (Beck et al, 2011).

Research demonstrates that multiple factors impact on teacher wellbeing, including school climate (Gray et al, 2017). A negative school climate can lead to high rates of teacher absenteeism and staff turnover (Grayson and Alvarez, 2008). According to the Department for Education (DfE, 2018) 'The culture, ethos and environment of the school can have a profound influence on both pupil and staff mental wellbeing' (p.8). Positive teacher-student relationships support children and young people to be mentally healthy (Kidger et al, 2012; Plenty et al, 2014). These relationships help students to feel more connected to their school (Harding et al, 2019) and improve student wellbeing (Aldridge and McChesney, 2018) through fostering a sense of belonging. Research demonstrates that teachers with poor mental health may find it more difficult to develop and model positive relationships with their students (Kidger et al, 2010; Jennings and Greenberg, 2009). In addition, higher rates of teacher absence can impact on the quality of teacher-student relationships (Jamal et al, 2013).

Research demonstrates that teachers with poor mental health may have less belief that they can support the wellbeing and mental health of their students (Sisask et al, 2014), particularly if they are struggling with their own wellbeing and mental health. Poor teacher wellbeing could therefore be problematic for student wellbeing (Harding et al, 2019). In addition, research demonstrates that teachers who demonstrate 'presenteeism' find it more difficult to manage their classrooms effectively (Jennings and Greenberg, 2009) and are less likely to develop positive classroom and behaviour management strategies (Harding et al, 2019). Presenteeism is evident when teachers with poor wellbeing and mental health continue to work. The quality of their work is reduced and this affects the quality of their relationships with their students (Jennings and Greenberg, 2009), student wellbeing (Harding et al, 2019) and overall teacher performance (Beck et al, 2011; Jain et al, 2013). There is an association between better teacher wellbeing and lower student psychological difficulties (Harding et al, 2019). There is also an association between lower teacher depression and better student wellbeing (Harding et al, 2019). In addition, there is an association between teacher presenteeism and student wellbeing and psychological difficulties (Harding et al, 2019). Thus, there appears to be a causal relationship between teacher and student mental health (Harding et al, 2019). However, there is limited direct evidence of a causal relationship between teacher wellbeing and student attainment and thus, this is an area for further research. There is also a paucity of literature which examines student perspectives on how the mental health of their teachers impacts on their learning and progress. This small-scale study therefore extends the existing research on teacher wellbeing by examining the perspectives of pupils on how they are affected by the mental health of their teachers

Research design

The research study was qualitative in nature and involved ten primary schools in England. Schools were selected that had wellbeing and mental health as part of their overall strategic development plans and were working with staff and pupils to raise awareness in this area. The ten participating

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schools were all at various stages of their mental health and wellbeing journeys. Due to the sensitive nature of this research, it was important to visit schools that had some level of general awareness around mental health and wellbeing.

At each school, semi-interviews were carried out, as a minimum, with:

> ➤ the Headteacher or a member of the Senior Leadership Team;
>
> ➤ a teacher who was considered at the time of the interview to be in good mental health; and
>
> ➤ a teacher who was considered at the time of the interview to have poor mental health.

There was a mix of urban and rural schools amongst the ten participating schools. Five schools were located in Yorkshire and five in the East Midlands. The majority of interviewees were female, reflecting the gender makeup of the primary sector, with just six interviewees being male, two of whom were headteachers.

Each school visit also included a pupil discussion focus group with children from Years 3-6. The teachers and pupils interviewed were selected by the Headteacher, or in their absence, a member of the Senior Leadership Team responsible for leading wellbeing and mental health at the school. In total, the research team interviewed 35 education professionals and 64 pupils. Of the 21 classroom teachers interviewed, eleven considered themselves to be in good mental health at the time of the interview, whilst ten considered their mental health to be poor or variable. Interviews were digitally recorded, transcribed and coded to generate themes.

Results and discussion

In this section the following acronyms are used: TGMH refers to 'teacher with good mental health'; TPMH refers to 'teacher with poor mental health'. CS refers to case study school.

Triggers

Teachers reported a number of factors that might trigger feelings of anxiety and stress, some of which were directly related to their professional lives, some to their personal lives and some that concerned both. Comments from participants are stated below:

> *It's never about the same thing. It can be about preparing for registration week, or complaints, it changes. Things change, they can pile on and pile on. Nothing is ever piled off. Things keep on being added.* (TPMH, CS1)
>
> *I've noticed everyone in my school is at that age where they have parents that are getting older, their children are growing up, so a lot of the mental health issues that you hear about are stemming from other things that they are having to cope with in their personal life. Three years ago, I had a bit of a blip. My dad's got Parkinson's and he deteriorated very quickly and needed support and I was having to go out of school in the day to go and help him.* (HT, CS7)
>
> *I suffered domestic violence for years. My partner used to stop me from sleeping. He did things like pour water on the bed so that I didn't get a good sleep and in the morning, I was exhausted so it definitely affected my teaching.* (TPMH, CS3)

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The impact of teacher wellbeing and mental health on teaching

Effect on teaching from a teacher's perspective

Teachers felt that performance and delivery in the classroom was below par at times of poor mental health with one commenting*: 'teachers who are not in a good state of mind cannot teach effectively'* (TGMH, CS6). Some senior leaders reported that a teacher's confidence might suffer or that pupil behaviour in the classroom might deteriorate. The general consensus was that to be fully effective teachers need to be in good mental health:

> *I tried my best to put the children first when I was in school. But my mind was elsewhere. I struggled for a couple of weeks. Then the Headteacher pulled me aside and said: "you're not alright are you?" I said no and it was the first time that I actually cried. Then I took some time off.* (TPMH, CS4)

Coping strategies

There were two types of strategies in place that helped teachers cope with their mental health and wellbeing; individual and school-based. Individual strategies included engaging in exercise and other hobbies and one school-based strategy included flexible working.

> *Making lists, I'm very good at making lists and prioritising. That way I can see that all the things I'm stressing about can actually be achievable and put into some sort of logical order. Sometimes you think I've got this to do and that to do, when am I going to do this and when you actually start and write it down you think, it's not actually that bad.* (TPMH, CS2)

> *It's the realisation that you can't do everything 100%. I think I came into the job 8/9 years ago, thinking, right, I'm going to do everything, 200%, fire it out all of the time, but then it takes over your life so you have to say right, what's the priority?* (TPMH, CS8)

Accessing support

Most teachers knew where to go to for support should they need it. Many felt comfortable approaching their Headteacher or a member of their senior leadership team. CS2 had recently conducted a psychologically-safe staff survey which found that all staff at the school knew who to go to and felt comfortable going to that person to talk about their mental health should they need to. One teacher stated that: *'Professionally, my first port of call would be my Headteacher, because I respect his opinion. And I think he will actually think about my wellbeing and the wellbeing of the children'* (TGMH, CS6). However, this was not the case for everyone. One of the teachers with poor mental health at CS1 clearly felt their current Headteacher was not as open or approachable as they could be, and commented that '*In terms of leadership, I don't think anyone dare go and knock on the door and say it is all a bit too much'.*

Understanding wellbeing and mental health: the pupils' perspectives

The majority of children who took part in the pupil discussion groups were familiar with terms such as mental health, stress and anxiety, even where their school was only at the beginning of their

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wellbeing journey. They were less likely to have heard of 'depression'; some schools used different terminology calling it 'having a grump on' or perhaps being in a blue mood.'

> *Mental health is something that you can't see but that you have. You feel like you are stuck in a wall.* (Pupil, CS5)

Pupils talked most about their teachers being stressed. They were able to identify immediately at the start of the day what sort of mood their teacher was in. They picked on their teachers' facial expressions, particularly whether or not they came in with a smile or, in one case, dancing. Children also picked up teachers' mannerisms and general attitude towards the class.

> *Sometimes when you're doing something wrong, they get angry. Their facial expressions. You can see from their face if they are angry or happy.* (Pupil, CS2)

> *When she can't find the rubber, "where's the rubber, I can't find the rubber." When people take her white rubber. Sometimes she starts to shout when she is stressed.* (Pupil, CS4)

> *Sometimes they start telling people off more frequently because they are having a hard time so some of the kids get a hard time.* (Pupil, CS7)

> *When they are happy they will shout in a good way like when we win or something like, 'yesssss, we did it' [hands up in the air – victory shout]. When they are stressed, it is more of a "what are you doing?" shout.* (Pupil, CS6)

> *At the start of the year they are really energetic, but when it gets later on in the year they get less [energetic]. Towards test times for KS1 and KS2, they get stressed.* (Pupil, CS7)

> *When she's like frustrated, in the morning I can tell because she's normally really happy. She's frustrated because she is trying to hide it. But because I've been with her for nearly two years, I can sense it. I'm just like; I know it's not going to be a good day.* (Pupil, CS8)

Pupils proved to be quite attuned to the mood of their teacher. Some pupils felt an obligation to try and make things better for the teacher, the class and themselves.

> *When our teacher is having a bad day, we just try to help them. We don't want to make it worse so we just get on with our work.* (Pupil, CS9)

When their teachers are happy and in a good mood, pupils said their lessons were more creative, fun relaxed and they were given more interesting work to do. Children were keen to impress their teacher and work hard for them. They all felt they made more progress when their teacher was in a good mood. However, when their teacher was in a bad mood and stressed, children felt it had a detrimental effect on their learning. Children reported that, at such times, they often worked in silence and they tried not to upset their teacher further. Their learning '*slowed down*', they found it difficult to concentrate and the quality of their work was not as good as usual. This was because they tried to finish their work quickly: *'it makes me rush. So that I don't get told off for not finishing It'*, (Pupil, CS8). When the teacher was stressed, some children were left not knowing what they were supposed to be doing, they became confused or got '*a bit muddled*' (Pupil, CS4).

Impact on pupils' progress from the teachers' perspective:

Teachers were asked about the short and long-term impact on pupils as a result of having a classroom teacher who suffers from poor mental health, or indeed from a teacher being off for a

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substantial amount of time in any given school year, regardless of the reason. Interviewees, especially Headteachers, were more likely to report a short-term negative effect on pupil progress as a result of classroom teachers being absent than they were a long-term detrimental impact.

> *It is a very hard one to measure. But I believe that if a teacher has poor mental health it is going to impact on their work. They're not going to be in the right frame of mind.* (HT, CS4)

> *When I had poor mental health, I was not able to focus on my teaching. I found it difficult to concentrate on my planning and I struggled to teach with a clear mind. However hard I tried, the other things going on in my life were still there. I couldn't forget about them just because I had walked into school. They were always on my mind.* (TPMH, CS4).

Resilience strategies used to mitigate the effects of poor teacher mental health on pupils

One of the research questions asked: *What resilience strategies are used by highly effective teachers with poor mental health to ensure that their students thrive?* Evidence from the study showed that this was not usually viewed as the responsibility of the teacher who was experiencing poor mental health. Rather, it was dealt with as part of the school's strategic approach to general staff illness and absence.

One of the main strategies that teachers used with pupils was not to let the children see that they were struggling to hide their feelings. Some teachers talked about hiding behind a mask once they walked into school, having a '*work face'* or '*work persona'*. However, it is clear from the children's interviews earlier, that this is not usually successful.

 Teachers themselves explained how they tried to hide their feelings:

> *I do try and not let it affect the children at all. I don't think it is fair on them. They've not come to school to think, "Oh, she's got a problem today." So, I do try very hard to be my normal jolly outgoing self in the classroom. But when the children have left the room that's when I might just have a minute's reflection time or time away.* (TPMH, CS2)

> *The only way I could cope was to go down to three days so that I could focus on my ill parents. When I was doing five days, I wasn't giving my best because I had no time to plan lessons and mark work. That helped me to stay in teaching otherwise I would not be here.* (TPMH, CS4)

There was evidence in the data that teacher presenteeism had a detrimental effect on pupils. This is consistent with research by Jennings and Greenberg (2009). Pupils identified how this impacted negatively on their learning and they responded to the teacher's mood by negotiating their own behaviour. Teachers also identified how their mental health negatively impacted on the way they managed classes, the quality of their relationships with pupils and their teaching. This is consistent with the literature (Harding et al, 2019). Pupil data indicate that pupils thought that the use of substitute teachers to cover absent teacher had a detrimental impact on their learning.

There was less evidence of actual impact of teacher mental health on pupil attainment data, although this was evident in one of the case study schools. This is an area for further research.

The teachers identified a range of strategies that they drew on to improve their resilience. These included personal actions (such as exercise), prioritising tasks, support from significant others and colleagues, whole school strategies and accepting that the pursuit of perfectionism is impossible. It

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has been argued that teacher resilience is a relative, dynamic and developmental process (Day and Gu, 2007), involving interaction between individual, relational and contextual/organisational conditions. Some teachers in this study were able to demonstrate greater resilience than others due to the supportive context in which they worked. This is consistent with literature which demonstrates that resilience varies across contexts rather than being fixed. Bonnet and Bernard (2012) view resilience as the ability to recover from an adverse situation and Taket et al (2012) argue that 'resilience is more appropriately conceived of as a human capacity that can be developed and strengthened in all people' (p.39). For some teachers, their resilience was tested when they experienced a 'tipping point'. This was usually an external factor (such as the death of a parent, domestic violence or a family member becoming ill).

Some researchers have defined resilience as a personal quality (Brunetti, 2006) whilst others have raised concerns that a focus on individual characteristics fails to recognise systemic influences on human experience (Johnson and Down, 2013). Greenfield's model of teacher resilience (Greenfield, 2015) demonstrates how resilient teachers have a sense of hope and purpose and belief in themselves as teachers (self-efficacy). These core beliefs are individual characteristics which play a critical role in resilience. The model also demonstrates how resilient teachers form meaningful relationships with others within their professional context and undertake actions to effect change and mediate challenges. For the participants in this study the support from friends, colleagues, the school and their family members was vital in supporting their resilience.

Conclusion

This small-scale exploratory research into the effects of teacher mental health and wellbeing on pupil progress in primary schools provides a valuable snapshot of some of the current issues facing teachers and their potential impact on pupils in the classroom. This research study has a number of implications for a range of stakeholders, including those delivering initial teacher-training programmes, senior school leaders and those involved with continuing professional development. Initial teacher training programmes and continuing professional development courses should include practical strategies on managing mental health. Senior leaders should take steps to reduce teacher workload and implement temporary and/or permanent flexible approaches to working for teachers who are experiencing poor mental health.

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