Teacher Mental Health and Leaves of Absences: A Pilot Study Examining Gender and Care

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**Abstract**

The literature reports high levels of occupational stress for teachers, exacerbated by heavy loads of emotional labour in the classroom. We know less, however, about teacher mental health concerns as they relate to leaves of absences and returns to work, and the role gender may play related to leaves of absences and returns to work. Our pilot study aimed to address these gaps using a survey (n= 67) and follow up interviews (n = 8). We found that the stress teachers experienced at school often results from lack of support from administration, increased workload, lack of resources, violence, and isolation, which then impacts home lives. Over a quarter of teachers surveyed have taken a leave of
absence from work, with the majority being women. Female teachers often used sick days to care for ill children. Stigma surrounding teacher mental health and leaves of absence were both perceived as prevalent within the profession.

Key words: teacher stress, teacher mental health, leaves of absences, teaching as carework

Résumé

La littérature rapporte des niveaux élevés de stress professionnel chez les enseignants, exacerbés par les lourdes charges de travail émotionnel en classe. Toutefois, nous en savons moins sur les préoccupations en matière de santé mentale des enseignants concernant les congés et le retour au travail, ainsi que sur le rôle que peut jouer le genre en rapport avec les congés et le retour au travail. Notre étude pilote visait à combler ces lacunes en menant un sondage (n = 67) et des entrevues de suivi (n = 8). Nous avons découvert que le stress vécu par les enseignants à l’école provient souvent d’un manque de soutien de la part de l’administration, d’un surplus de travail, d’un manque de ressources, de la violence et de l’isolement qui se répercutent ensuite sur leur vie familiale. Plus d’un quart des enseignants interrogés ont pris une absence du travail, la majorité étant des femmes. Les enseignantes ont souvent utilisé les congés de maladie pour s’occuper d’enfants malades. La stigmatisation de la santé mentale des enseignants et des congés est perçue comme étant répandue au sein de la profession.

Mots-clés : stress des enseignants, santé mentale des enseignants, absences du travail, congés de maladie, l’enseignement comme travail de soins

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**Introduction**

Teaching has been described as a stressful profession (Naghieh et al., 2015) with little reprieve in sight. For instance, the Ontario Secondary Schools Teachers’ Federation reports that over 71% of secondary school teachers feel that their work stress has increased or significantly increased in the past five years (Johnston-Gibbens, 2014). There is little extant research, however, about the consequences of these high stress levels on teachers. This is concerning, because in any given week it is estimated that half a million Canadians take sick days because of mental illness (Howatt & Cowan, 2017), with media outlets reporting that teachers are using their sick days more now than ever before (Miller, 2018; Ouhit, 2019; Sarrouh & Rushowy, 2021).

Teacher absences are important to all stakeholders in education, not only for the economic impact in terms of lost work, supply teacher costs, and teacher turnover, but also because teacher absences are negatively associated with student achievement (Miller et al., 2008). Framed by perspectives that focused on the role of gender and carework involved in teaching, in this pilot study we provide a glimpse into the perceptions and experiences of teachers about teacher mental health and taking a temporary leave of absence from work.

**Reviewing the Research**

**Teacher Stress and Mental Health**

Stress is a normal part of life, caused by a variety of everyday situations and experiences. Depending on context and degree, stress can be a positive or negative force for mental health. Selye (1976) suggests some stress, known as eustress, is motivating to accomplish tasks. However, stress that is overwhelming can be dangerous and negatively impact mental health. When people are unable to cope due to unreasonable amounts of stress, stress becomes distress and can lead to depression, illness, or apathy (Cedoline, 1982). Occupational stress is the result of situations related to the workplace that disrupt or enhance the mental or physical condition of the worker (Cedoline, 1982). Importantly, overwhelming occupational stress can manifest as challenges in mental health in one’s work, social, and personal life (Cedoline, 1982). Teachers, like all professionals, experience occupational stress. Kyriacou (2001) defines teacher stress as “the experience by
a teacher of unpleasant, negative emotions, such as anger, anxiety, tension, frustration or depression, resulting from some aspect of their work as a teacher” (p. 28). Heavy loads of teacher stress impact teacher illness, and teachers can face a range of physical and emotional symptoms from stress overload (Naghieh et al., 2015).

Commonly cited sources of teacher occupational stress include student behaviour (Brunsting et al., 2014; Ferguson et al., 2012), working conditions (Stauffer & Mason, 2013), lack of administrative support (Brunsting et al., 2014), lack of resources (O’Donnell et al., 2008), and workload (Ferguson et al., 2012). Increased workload in particular appears at the forefront of much of the research on teacher mental health concerns. For instance, Duxbury and Higgens (2013) describe how workload is a significant cause for occupational stress, and the Saskatchewan Teachers’ Federation (STF, 2013) reports that teachers are experiencing significant role intensification at work. This sense of increased workload encroaches on home lives, increasing work/life stress (Duxbury & Higgens, 2013; STF, 2013). In fact, Froese-Germain (2014) finds that teachers are experiencing stress because of lack of time to spend with their own immediate families, for caregiving, or for their own personal or recreational interests. Furthermore Froese-Germain (2014) states that more female teachers than male teachers indicated that they experience stress related to not having enough time to spend with their own children. These feelings of time constraint and overload are supported by research by Richards and colleagues (2018), who describe how teachers in the midwestern United States experience role overload as work encroaches on family life. Further, high stress levels and workload stressors contribute to teacher attrition (Clark & Antonelli, 2009).

An additional distressing trend impacting Canadian teachers is the increase of violence in the classroom (Santor et al., 2019). According to Santor et al. (2019), since 2005, there has been a seven-fold increase of violence in the classroom against educators, with over half of Ontario educators experiencing physical violence during the school year. These acts of violence take a significant toll on educators’ physical and mental health and well-being (Santor et al., 2019). Moreover, Santor et al. (2019) found that the violence was gendered, in the use of the language, tropes and narratives, normalization, and blaming that occurred during and after violent acts.

Maslach and Schaufeli (1993) outline that burnout, an extreme manifestation of stress, consists of the symptoms of loss of personal accomplishment, depersonalization, and emotional exhaustion. Emotional exhaustion from stress among teachers erodes tea-
cher, student, and collegial relationships (Troman, 2000). However, school environments and cultures may play a key role in reducing teacher burnout. Richards et al. (2018) report that teachers with low levels of burnout experience affirmative school cultures with supportive administration and colleagues, as well as adequate resources and professional development. Ouellette et al. (2018) outlined how professional development for managing student behaviour is not an effective intervention to improve teacher mental health. Instead, organizational health is the best predictor of teacher stress levels and satisfaction: “It is possible that the most effective route for promoting healthy outcomes for teachers is to promote a healthy work environment, including a positive organizational climate, high levels of collegiality among teachers, adequate resources and support, and manageable workloads” (Ouellette et al., 2018, p. 504).

The literature presents inconsistent results in term of stress levels and burnout rates among women and men, with some studies finding higher rates among men, others among women, and some studies with no significant difference (Bermejo-Toro & Prieto-Ursúa, 2014). The literature is also equivocal in terms of which age group is most negatively impacted by teacher stress; some literature points to novice teachers experiencing more stress (Rieg et al., 2007; Skaalvik & Skaalvik, 2007; Ullrich et al., 2012), while other research reports that mid-career teachers are considering leaving the profession (Naylor & White, 2010). Teachers who teach outside of a regular classroom may also be prone to experiencing feelings of isolation and a lack of interaction with their teaching peers, as found by Mäkelä et al. (2014) in their study of physical education teachers.

There is emerging research about mental health coping strategies, such as mindfulness (Schussler et al., 2018; Taylor, 2015) and other factors that protect against overwhelming stress, such as sense of efficacy, community support, emotional regulation, and self-care (Schussler et al., 2018). Social supports in particular may have a buffering effect of teacher stress (Greenglass et al., 1994) as a feeling of community promotes positive teacher mental health, breaking the sense of isolation experienced by some teachers (Ouellette et al., 2018). Importantly, however, Ott et al. (2017) note that most education wellness programs have focused on stress reduction and coping strategies at the individual teacher level, rather than the external contributin structural and systemic factors in the workplace. In addition, most initiatives for school mental health and well-being focus only on students (Ott et al., 2017). Ott and colleagues argue that both work and worker-directed intervention are needed to make schools a place of wellness for all.
Sick Days and Sickness Presenteeism among Teachers

There is limited empirical research about teacher sick days and sickness presenteeism (i.e., those who should take a sick day/leave but continue to work), and the minimal research that is available offers differing views. In 2010, the British Columbia Teachers’ Federation (Naylor & White, 2010) found that teacher absenteeism because of illness was quite low, with most teachers absent less than five days during the school year. However, more recent pre-pandemic media reports may indicate that the number of sick days that teachers are taking is increasing. For instance, in Ottawa, Ontario, Miller (2018) noted that use of sick days in the Ottawa public school board has increased 38% in four years. Similarly, Ouhit (2019) reports that teachers in Waterloo, Ontario are taking more than 10 sick days on average per year, an increase of 30% from four years earlier. With the present Covid-19 pandemic, many teachers are absent from the classroom, school boards are reporting a shortage of supply teachers, and student teachers are now certified to work as supply teachers in some jurisdictions (Sarrouh & Rushowy, 2021).

Even less research focused on the influence of gender on teacher presenteeism. Bermejo-Toro and Prieto-Ursúa (2014) find no significant difference among male and female teachers in Spain in the number of sick days taken. However, the number one reason men took sick days was for otorhinolaryngology problems and the number one reason for women was psychiatric. Bermejo-Toro and Prieto-Ursúa (2014) call for more research to be conducted that examines gender variables (childcare and caregiving obligations, workload, etc.) rather than only gender variables. Moletsane et al. (2015) describe how South African teachers are absent from work because of high stress and high dissatisfaction levels. Principals in those schools stated that teachers used sick days to recuperate from high workload, stress, depression, fatigue, and burnout; clearly short-term sick leave is a stress-coping strategy for teachers. In their study of German teachers, Dudenhöffer et al. (2017) reported that exhaustion/fatigue predicted teacher sickness presenteeism. The researchers also found that less supportive supervisors, inappropriate administration efforts, and inappropriate recognition of performance predicted teacher sickness presenteeism. As well, those with less support and less cooperation with colleagues reported higher sickness presenteeism (Dudenhöffer et al., 2017).
Leaves of Absence

While the literature is also scant in terms of which teachers are taking a temporary leave of absence and then returning to the profession, Harvey (2004) stated that teacher stress-related long-term disability is a third higher than other professions in Ontario. A study conducted by the British Columbia Teachers’ Federation reported that one in eight teachers was currently on a leave of absence at the time of the study, and those currently on leave are more likely to be women between 35 and 44 years of age (Naylor & White, 2010). Mäkelä et al. (2014), reported that family status had a large impact on teachers leaving the profession; the likelihood of attrition is higher among teachers who are married and who have at least one child. While Mäkelä et al. (2014) examined those teachers permanently leaving the profession, by extension it is possible that issues related to care and gender impact short-term absences as well. Increase in workload was a reason for the leave cited by approximately half of the teachers currently on a leave (Naylor & White, 2010). More recently, an article in The Guardian stated that in England, one out of every 83 teachers was on a long-term leave due to stress and mental health issues (Asthana & Boycott-Owen, 2018). This emerging research on gender-related leaves of absence makes examining the phenomenon from a carework perspective critical.

Teaching as Carework

Teaching is a profession imbued with emotion and care, yet this carework has been devalued as professional labour because caring has not traditionally been valued financially (Warin & Gannerud, 2014). Noddings (2015) writes that an ethic of care in teaching exists in the relationship between teachers doing the caring and students being the ones receiving care. Similarly, as Isenbarger and Zembylas (2006) explain:

Taking the time to listen to students’ problems or worries, giving advice or guidance to them, and showing warmth and love are all examples of emotional work in teaching. Thus, emotional work is clearly one of the ways caring is built in relationships between teachers and students. Emotional work involved many emotional costs, and is often invisible, unacknowledged, or devalued. (p. 123)
There has been little research that examines the emotional labour of caring in teaching. Caring relationships in teaching can be positive in that teachers may gain a significant amount of professional and personal satisfaction in helping students and improving their lives, but caring in teaching can be negative when teachers experience stress, strain, and anxiety from these relationships (Isenbarger & Zembylas, 2006). Isenbarger and Zembylas (2006) argue that caring teaching requires a significant amount of emotional labour; teachers change, hide, underplay, or overplay their emotions when interacting with students in order to advance educational goals. Teachers “are expected to be exemplary in controlling their negative emotions—e.g., their anger and frustration—in their desire to be better teachers and only display the positive emotions associated with caring” (p. 132). Caring teachers are in a receptive mode, attending to students and their needs, rather than their own (Noddings, 1996).

Suppression of negative emotions can have detrimental effects for teachers. Ott et al. (2017) argue that the caregiving role of the teacher has been further disregarded systemically, as a trend toward managerialism in education further silences educators’ emotions and care toward students. Lee (2019) states that surface acting (Grandey & Gabriel, 2015), wherein teachers change their outer expression without changing their inner emotions, is positively related to teacher burnout among physical education teachers. Moreover, Lee (2019) reports that teachers who use surface acting to suppress negative emotions are more likely to indicate their intention to leave the profession.

**Purpose of the Study**

Our pilot study adds to the literature on teacher mental health and teachers who are taking a temporary leave of absence from the teaching profession, through an explicit gender lens that takes the carework context into consideration. We asked: Which teachers are temporarily leaving work, and which factors affect this decision? This study is a part of a larger study exploring mental health, leaves of absences, and returns to work across seven different professions. Only the data about elementary and secondary teachers are presented in this article.
Methodology

In order to answer the research questions, this study used a two-step, or sequential, mixed-methods approach.

Survey

A short online survey was developed to address the mental health, leave of absence, and return to work experiences of different professional workers; the survey was hosted by FluidSurveys in the summer of 2017. Participants were recruited by posting links to the survey on social media (Twitter and Facebook). Sixty-seven Canadian teachers completed the survey (49 elementary, 18 secondary), of which eight were male and 59 were female. Figure 1 shows a summary of the demographic information of the participants.

As a literature search revealed no existing instrument to measure teacher leaves of absence, the research team developed a survey heuristically (McMillan & Schumacher, 2001; Mills & Gay, 2016). The survey consisted of five sections. In the first section, teachers were asked about the amount of stress they experience—stress in their work lives, stress facing the profession, and the causes of stress. In the second section, teachers were asked about their knowledge and perceptions of policies, programs, and services for mental health issues. Perceptions of leaves of absence due to mental health and those taking leaves were the foci of the third section. The fourth section asked teachers about their own personal experiences taking leaves of absence and about return-to-work policies and programs. The final section elicited demographic information.

Interviews

At the end of the survey, participants were asked if they would be willing to participate in a follow-up interview. The format for the interviews followed Patton’s (2015) standardized open-ended interview, where questions were prepared in advance and the interviewer asks the same questions in the same order. Sample questions about work context, mental health, and leaves of absence included: “How would you describe the quality and quantity of your work in general?”; “Can you describe any personal mental health issues you have faced while working in your profession or that affected your immediate family?”; and “Can you describe the arrangements for your leave?” Eight teachers parti-
icipated in follow-up interviews (four elementary school teachers, four secondary school teachers; seven female teachers, one male).

**Figure 1**

*Demographic Information of Survey Respondents*

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<th>Teacher Respondent Demographics</th>
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<th>Employment Status</th>
<th>Total Number</th>
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<tr>
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<tr>
<td>TOTAL</td>
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<td>5</td>
<td>31</td>
<td>17</td>
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*Note: Two female respondents did not disclose location.*
Data Analysis

The data collected from the questionnaires were input into an Excel spreadsheet. Because this study was a pilot study with a small sample size, only descriptive statistics were calculated. Qualitative data obtained from the open questions on the survey and from interviews were sorted and coded using a constant comparative method (Glaser & Strauss, 1967). This allows researchers to compare identified topics and their characteristics continuously while data are placed into appropriate categories (Miles et al., 2014). Two researchers individually read all qualitative data, and data were inductively sorted into categories and further organized with specific codes (Bogdan & Biklen, 2007; Merriam & Tisdell, 2016). For example, under the category of “Return to Work” some example codes include “stigma,” “accommodations offered by employer,” and “lack of support for return” (Bogdan & Biklen, 2007; Merriam & Tisdell, 2016). The two researchers then met and compared categories, codes, and data. If there was a disagreement over the coding of data, the raw data were read again by both researchers, and data were labelled with mutually agreed upon codes. Using the coded data, the two researchers then identified themes that emerged (Bogdan & Biklen, 2007) allowing the researchers some confidence that exploring the same set of data acts as a “form of analytical triangulation” (Patton, 2015, p. 554).

Results

Survey

Of the 67 teachers who completed the survey, 62 described their employment status as “employed,” whereas two were supply teachers, one was currently unemployed, and two were on a leave of absence (both were female). The majority of teachers responded that life in general was “a bit stressful,” and stress in their work life was most often cited as “quite a bit stressful.” Figure 2 illustrates a breakdown by gender and stress in work life and life in general. Most teachers identified stress as the one of the most challenging mental health issues facing the teaching profession, followed by burnout, anxiety, depression, addiction, and other, as shown in Figure 3. As Figure 4 illustrates, the respondents largely cited work circumstances as a of cause mental health issues.
In terms of taking a leave for mental health, over a quarter of respondents had personally taken a leave from work, whereas the majority had not, as shown in Figure 5. Of those who indicated that they had taken a leave, 15 were female and four were male. Of the 19 teachers who reported taking a leave, 10 teachers reported taking a leave of absence (less than a month to six months) because of stress. Three reported taking a leave for other reasons, such as catching up on work at home and familial issues (less than a month to three months). Two respondents took a leave of less than three months for anxiety. Three other teachers took leaves for up to three months for addiction, burnout, and suicidal ideations, respectively. One teacher did not indicate a reason for his/her leave.

Teachers were also asked their perceptions of those teachers taking leaves of absence due to mental health issues. This question was to help address a gap in the leave of absence literature, particularly from a gender lens. Female respondents believed that women were more likely than men to take a leave due to mental health issues, whereas fewer females thought men and women were equally likely to take a leave, and no female respondents believed men were more likely to take a leave. Male teachers generally agreed; most male teachers felt that women were more likely to take a leave due to mental health issues. For a breakdown of perceptions of gender and leaves of absences by gender of respondents, see Figure 6.

In terms of age, female teachers felt that those in the 31–40 age bracket were more likely to take a leave because of mental health issues, followed by those between 41–50 years of age, under 30 years of age, and 51–60 years of age, respectively. Male teachers’ perceptions of those who were more likely to take a leave by age for mental health issues varied slightly; most felt that those between 41–50 years of age were most likely to take a leave, followed by 31–40 years of age. For a summary of perceptions of ages being more likely to take a leave of absence due to mental health issues, see Figure 7.
Figure 2
Teacher Stress by Gender

Note. Percentages may not add up to 100% due to rounding.
Figure 3
**Perceived Most Challenging Mental Health Issues Facing the Teaching Profession**

Note. Respondents were instructed to “select all that apply.”

Figure 4
**Attributed Mental Health Issues by Gender**

Note. Respondents were instructed to “select all that apply.”
Figure 5
Leaves of Absence for Mental Health Issues

![Pie charts showing leaves of absence for mental health issues for females and males, and all respondents.](chart.png)
Figure 6
Perceptions of Gender and Those More Likely to be Affected by Mental Health Issues to the Extent of Taking a Leave of Absence

Note. Nine participants did not respond.

Figure 7
Perceptions of Age Most Likely to be Affected by Mental Health Issues to the Extent of Taking a Leave of Absence

Note. Nine participants did not respond.
Regarding work factors, most respondents felt that those teachers with work overload were most likely to take a leave of absence for mental health issues. Poor relations with administration were the next most cited work factor for a leave of absence, followed by poor relations with students, and poor relations with co-workers, respectively. See Figure 8 for a breakdown by gender of the respondents. Both male and female teachers felt that those teachers with children were more likely to face mental health issues to the extent of causing a leave than those caring for older adults and those caring for a partner. Teachers could also indicate “Other” as a personal or familial factor influencing taking a leave and write in a response; “Other” factors stated by the respondents included items such as “all of the above,” “single parents,” and “both children and older adults.” Figure 9 illustrates the perceptions of personal and familiar factors likely to influence mental health issues to the extent of taking a leave of absence.

**Interviews**

**Sources of stress.** Teachers stated a number of factors contributed to high levels of stress at work. Workload was a major stressor for six of the eight teachers. The job felt as if it were expanding and impacting home life, as Louise (all names are pseudonyms), an elementary school teacher, explained,

> We’re getting asked to do more and more from the parents, and from the board, and from our administrators; we’re getting loaded with more and more things that we’re expected to do, and more and more of these things take time out of our personal lives…. I think that has a huge impact on our mental health and our ability to disconnect from work and to actually just go home.

The growing workload was viewed almost as an impossible challenge; Michelle stated, “the expectation of the job just continues to grow; you’re expected to be all things to everybody.” Teachers interviewed also felt extracurricular activities, marking, and communication with students and parents took up a significant amount of time, adding to work overload.

Lack of administrative support was also mentioned by six of the eight teachers. These teachers felt that their administration did not support them enough. For instance, Holly, an elementary school teacher stated:
I reached out to the board, to the union, to the principal, to HR [human resources] for any kind of support, whether it was resources or training, like behaviour management training, anything like that, any ideas any suggestions. And pretty much all anyone said is, “Get through until June, and then you can leave.”

Patrick, a high school teacher, did not feel his work was valued or supported: “I was questioning the profession I was in…. I didn’t feel like my contributions were being acknowledged, or were supported, or fostered in any way.” Only one of the eight teachers who were interviewed felt supported by the school principal, saying “He’s very caring and he’s been there for us.”

**Figure 8**

*Perceptions of Work Situations More Likely to be Affected by Mental Health Issues to the Extent of Taking a Leave of Absence*

*Note.* Ten participants did not respond. Percentages may not add up to 100% due to rounding.
Figure 9
Perceptions of Personal and Familial Factors Likely to be Affected by Mental Health Issues to the Extent of Taking a Leave of Absence

Note. Nine participants did not respond. Percentages may not add up to 100% due to rounding.

Five teachers also mentioned that a lack of resources was a major stressor. These resources included funding for educational assistants for students with special needs (e.g., “there’s not enough funding for support”), or physical resources used for teaching (e.g., “There’s no money…the added stress becomes that the belongings that we bring into our classroom are purchased by ourselves to make up for the major gap in funding”).

Four teachers also said violence in their schools was a major stressor. For the teachers who personally experienced violence, it was a very traumatic experience. Amy said “that something broke inside of me” as she experienced violence frequently in her classroom:

He would punch me and kick me. Another student would bite me, spit in my face, kick me in the shins. She completely trashed my classroom. So, would
knock all the books off the shelves, all my objects, everything, and then run away, run out into the schoolyard or run out to the parking lot and into the street…. And then the other student would throw objects at me, stapled my teaching partner’s hands, punched, kicked, spit, name calling.

The two teachers who taught outside of the regular classroom felt that isolation was a significant stressor for them. For instance, Michelle stated, “I feel like an outsider.” Michelle wanted to see her colleagues more, for more peer interaction, but her physical space was isolating: “There’s never a collegial team working together. There’s no teacher prep room. There’s no space to come together.” Other workplace stressors mentioned by individual teachers included student behaviour, taking on leadership roles in the school, curriculum and assessment, lack of autonomy, and cell phones in the classroom.

Teachers felt that the negative stress from the classroom impacted their home lives. As Louise said, “It did affect my family life. That obviously comes home; it doesn’t just stop at the door.” Balancing home and work life was a challenge: “knowing where to draw the line and to stop and say enough is enough and to live my personal life.” Two of the female teachers discussed the role of gender and mothering and work/life stress. Alexis explained this conflict:

I think female teachers have a lot of extra pressure on them too: their families. So, on top of working, you’re dealing with everything else. Most have another part-time job of driving their kids around and bringing them to activities, and then you’re not getting stuff done, and you’re not getting dinner on the table, and you’re not getting your house cleaned, and you’re not lesson planning, and the list goes on, with the stuff that you’re not doing.

Michelle felt the same, stating, “I think too just being a working mom, and a female, can add to mental health, just stress in general. Being responsible for everything.” Two of the interviewees had ailing parents and were involved in their care (e.g., “I’m part of the sandwich generation”), while five interviewees spoke about caregiving for children in their families (e.g., “I have a son with severe mental health issues”).

Age was discussed by two teachers; both felt that teachers in all career stages were impacted by stress overload. For example, Patrick felt that more experienced teachers took on more responsibilities within the school and community and that caused
more stress. Holly believed that stress impacts teachers of all ages because of workload issues: “I don’t really think that it [teaching] gets any easier as the years go on.”

**Mental health and leave of absence experiences.** Teachers who participated in interviews experienced mental health issues of anxiety (N = 2), depression (N = 2), insomnia (N = 1), post-traumatic stress disorder (N = 1) and feeling physically ill due to stress (N = 2). Half of the interviewees sought care for mental health issues, such as seeing a counsellor or a doctor. Access to care was an issue for Eve, who taught in an elementary school in a rural community where services were a two-hour drive away. Supportive colleagues were also valuable for three of the teachers. For instance, Patrick stated, “There was one particular staff member who acted as my work mom.” Teachers used other personal interventions to cope with stress, such as yoga, mindfulness, exercise, going on a holiday, engaging in hobbies, and being a part of a professional organization. One interviewee, Louise, stated that having these activities outside of school “makes a big difference” for coping with stress. Two teachers mentioned how the schools are focusing on student mental health, but teacher mental health is not a priority. Holly stated, “It’s focused on the students and it doesn’t recognize that teachers need this help also.”

Only one of the eight teachers used sick days as a way to cope with stress: “I’ve had a stressful time; I just needed a day to refresh myself and recharge those batteries.” Alexis and Michelle both discussed using sick days to care for sick children at home. Despite having three family illness days in both of their contracts, three days were not enough for their children’s illnesses and therefore they had to use personal sick days. Alexis explained, “I have come to school sick every time I’ve been sick this year because I need my days if my kids are sick.” She felt guilty about staying at home with sick children and noted that female teachers using their own sick days to care for children is “a big gender thing” because women do most of the carework at home. Both Alexis and Michelle had meetings with administration for using a significant portion of their sick days. Michelle explained, “I was called into the office, which was the weirdest thing, to discuss my use of sick days…. At the time, I was still a mom with young children and the main caregiver for the kids for their health.” She noted, “I had to make a step-by step plan of how I would do better with my sick days or something along those lines.” Michelle acknowledged that the principal was following policy: “He felt like a jerk for asking. So, we just said I’d wash my hands and wouldn’t get sick again, because I don’t know what kind of plan they actually wanted, and he felt awful having to do it.”
Half of the teachers had taken a formal leave of absence from work, ranging from three weeks to five months, for mental health issues stemming from anxiety, violence, curriculum and planning, post-traumatic stress disorder, and a false accusation of assault from a student. One of the teachers, Amy, who was pregnant at the time and experiencing workplace violence, said, “No way was I going to lose my baby over this kind of situation.” Three of the four teachers found the leave process to be clear, despite the inconvenience of having to provide medical documentation continually. Michelle found the process was not well explained and that “it all seems so secretive.” Another teacher (Patrick), who did not take a leave, felt retrospectively that he should have, but he was always trying to reach a milestone in the school year: “Wait it out until the end of the month, wait it out until the end of semester, then we’ll wait it out until the end of the year.” Patrick also felt a leave would be a financial burden for his family. In addition, Patrick and Louise both stated that they would have felt guilty for leaving the students if they had taken a leave, feeling like they were “abandoning the kids.”

The stigma of teacher mental health issues and taking a leave of absence was a significant theme for seven of the eight interviewees. As Holly described, “There’s a lot of stigma attached to taking a leave, whether it’s from the teaching, society, or from family members. You get the feeling that people think you can’t hack it and that you can’t cut it.” Teachers frequently mentioned the idea that taking a leave meant the perception that “you can’t handle your work.” Louise described the stigma as “that you’re a wimp, maybe you’re not in the right profession. There’s no one saying this, but it’s the general impression you get.” A few teachers also mentioned that those on leave become a topic of gossip; for instance, Alexis said, “there’s a lot of whispering going on about them. What’s going on with them? Did they go crazy?”

This feeling of being judged caused some teachers who took a leave to not talk to colleagues: “I didn’t really want the judgement, so, I just didn’t say anything to anyone” (Holly). For some teachers, the stigma was enough to never take a leave: “I would just suck it up” (Alexis). Michelle also questioned the impact and protocol of sickness presenteeism, when teachers should take a leave for mental health issues but do not:

When teachers are unhealthy yet they’re still in the classroom, in charge of legal care of thirty kids…what do you do when you know your teaching partner, or your teaching co-worker, is mentally unwell and maybe shouldn’t be with children?
One teacher, Roberta, felt that male teachers may find it more difficult to take a leave because the stigma to admitting to mental health issues is something “older and male co-workers would have difficulties with.” Another teacher also felt that leaves for mental health were abused by some teachers as a way to protect themselves from poor teaching evaluations and capabilities. She said:

It becomes this really unfortunate thing where people who need help, don’t want to be stigmatized by getting it, and people for whom it’s not really about mental health are using that system to avoid dealing with legitimate critiques of their teaching.

She also believed that sometimes a leave was “a get out of jail free card if things are not going well professionally.”

Sometimes the stigma also came from the teachers themselves; for instance, Holly stated, “It took me a while to actually myself be okay with making use of that time off.” There was a sense that teachers were professionals and were not susceptible to mental health issues. Eve stated, “I think it’s different for teachers or any professional, because the idea of having a vulnerable mental health, people think it can’t live together, those two ideas. You can’t be a credible teacher and deal with depression, right?” While neither Louise nor Alexis had taken a leave, they felt that a reason for not taking one is that family would judge them: “It would be a huge stigma if I said to my family that I was taking a mental health leave. No, you get up, and you get moving, and you’ll feel better.”

**Discussion**

Similar to other studies (Duxbury & Higgens, 2013; STF, 2013), the majority of teachers in our pilot study reported their work life as “quite stressful” or “extremely stressful,” with stress being identified as the most challenging mental health issue for teachers. This stress from work life also impacted teachers’ home lives, a finding supporting the research of Duxbury and Higgens (2013) and the Saskatchewan Teachers’ Federation (2013).

In terms of stressors, we found from our survey that poor relationships with administration, other teachers, and students were causes for teachers to take leaves of absence. This is in line with Richards et al. (2018) and Ouellette et al. (2018) who found that posi-
tive school cultures, relationships, and collegiality are paramount to healthy mental health outcomes for teachers. Similar to the literature, isolation for teachers working in specialized spaces was also a stressor for teachers who were interviewed in this study (Mäkelä et al., 2014). Interview participants reinforced the importance of supportive colleagues in positively impacting teacher mental health, akin to the research that social supports may have a buffering effect for teacher stress (Greenglass et al., 1994). With the current pandemic, it might be reasonable to anticipate that teachers may be facing even more isolation stressors than before. Ouelette et al. (2018) also state a level of adequate resources as a factor that makes for a healthy teaching organization. Teachers who were interviewed echoed this, stating that a lack of resources, whether it was staff resources, funding, or physical resources, was a significant negative stressor in their work lives. Finally, school violence was a disturbing finding from the teacher interviews, with half of the teachers interviewed stating that violence was a significant stressor and, for some, a cause for taking a leave. Our results align with previous research that finds that violence in the classroom has been increasing at alarming rates in Canada and has a significant impact on educator well-being, as well as the education system (Santor et al., 2019).

Presenteeism also was mentioned by teachers who participated in interviews in this study. These teachers felt that, retrospectively, they should have taken a leave but did not, feeling guilty for leaving the students and the classroom. This concept of sickness presenteeism—reporting to work when one should be off—among teachers has been reported by Dudenhöffer et al. (2017) and is related to stressors reported in the survey and interviews, such as lack of supportive administration and less cooperation with colleagues. One interviewee raised the important point for consideration: Should a teacher who is mentally unwell be with students in the classroom?

Over one quarter of the teachers surveyed had taken a leave of absence from work, with the majority of respondents stating the reason for the leave being stress. While our survey and interviews may have attracted participants who have taken a leave, we feel that these numbers are on par with the literature. Previous research by Naylor and White (2010) and an article from The Guardian (Asthana & Boycott-Owen, 2018) only report on those teachers who are currently on leave (one in eight and one in 83, respectively). Our study results indicate that when we consider teachers who have taken a leave due to stress at some point in their career, leaves of absence due to stress may be more common among teachers than perceived or widely recognized. Increased workload was
the most commonly cited reason for taking a leave from work, aligned with previous research studies that found workload for teachers is intensifying and causing high levels of stress (Duxbury & Higgens, 2013; Richards et al., 2018). Half of the interviewees had taken a leave from work ranging from three weeks to five months, for reasons such as anxiety, PTSD, false accusations from a student, curriculum and planning, and violence. Expanding on the discussion of Ott et al. (2017), there is perhaps only so much coping teachers can do at the individual level, as wellness interventions in schools do not generally address the work context or even teachers themselves (instead focusing only on students). Teachers may feel that the only work-directed intervention for mental health wellness is to physically leave the workplace by the means of a leave of absence. The process of taking a leave of absence was clear for most interviewees who took a leave; however, they felt burdened by continually providing documentation to support the leave.

Perceived stigma of teacher mental health challenges reinforces the extant research that stigma is common among teachers (Ferguson et al., 2012). Seven of the eight teachers we interviewed spoke at length about the stigma of teacher mental health issues and taking a leave. Teachers feel judged and that they “can’t hack it” if they openly discuss stress or were to take a leave of absence. These teachers also perceived their own mental health challenges negatively, with some stating they could never take a leave. Another teacher openly expressed the feeling that some teachers are abusing leaves of absences, using mental health as an excuse for taking a leave while the real reason for the leave is professional incompetence. Stigma of mental health challenges clearly remains an issue within the teaching profession.

Our survey indicates that female teachers were perceived as more likely to take a leave; indeed, our survey found that over 78% of those who took a leave were female and all four interviewees who took a leave were also female. It is plausible that women may face certain gendered impacts in the workplace (caregiving, childcare, etc.); it is also plausible that, as one interviewee stated, men may perceive more stigma about taking a leave than their female colleagues. The stigma of teacher mental health challenges has been reported in the literature (Ferguson et al., 2012) and the gendered perception of those taking a leave of absence is a unique contribution of our study. Certain age groups of teachers were also more likely to be perceived to take a leave. Female teachers felt that those who were 31–40 were more likely to take a leave, while male teachers thought that those aged 41–50 were more likely to take a leave. Interviewees felt that teachers
of all ages experience stress and that as teachers gain more experience, they also gain more responsibilities and therefore more stress. These findings are similar to the work of Naylor and White (2010) who reported that female teachers aged 35–44 were more likely to be on leave. This suggests that while some research finds more stress among new teachers (Rieg et al., 2007; Skaalvik & Skaalvik, 2007; Ullrich et al., 2012), mid-career teachers may experience more stress, causing them to take a leave. This is perhaps a result of stress from those in what is commonly called “the sandwich generation” (Naylor & White, 2010, p. 3), having responsibilities of both parenting children and caregiving for their own parents.

In addition, our survey found that teachers perceived teachers with children as more likely to take a leave. This element of caregiving permeated the follow-up interviews with female teachers. While news articles have reported that teachers are using more sick days than ever before (Miller, 2018; Ouhit, 2019), only one teacher who was interviewed stated that they used sick days to cope with stress. Instead, female teachers used sick days to care for children who were ill. Two female teachers who were interviewed had mandatory meetings with the administration about the use of their sick days and had to create a plan to use fewer days. Being a caregiver at home for children and ailing parents, while still being caring teachers, was discussed by most teachers during interviews. This idea that they “were responsible for everything” contributed to emotional exhaustion among interviewees.

This interview data fits with the theory that teaching is a caring profession (Isenbarger & Zembylas, 2006; Noddings, 1984, 1996, 2015) and that teachers must suppress their own emotions and personal lives when providing an ethic of care toward students within their classrooms (Noddings, 1996). Some interviewees stated that the needs of their students come before their own needs, and they would feel like they were abandoning their students if they were to take a leave, even though previous studies tell us that suppression of their emotions and surface acting may lead to burnout (Grandey & Gabriel, 2015) and teacher attrition (Lee, 2019). Our finding that caregiving is a cause of stress complements prior research that found married teachers with a child are more likely to leave the profession (Mäkelä et al., 2014) and female teachers experience stress because of insufficient time to spend with their own children (Froese-Germain, 2014). We agree with Bermejo-Toro and Prieto-Ursúa (2014), who call on future teacher mental health researchers to examine gendered impacts (e.g., childcare and caregiving obligations, workload, etc.)
beyond simply sex or gender identity. Highly gendered carework variables are complex and can impact both men and women; additional studies are needed to explore the links between a teacher’s carework obligations and mental health challenges.

**Limitations and Areas for Future Research**

Our pilot study has a number of limitations that should be considered. First, due to the small sample size engaged in both the survey and the interviews, the results should be interpreted with caution. Analysis beyond descriptive statistics was not possible due to the small number of respondents; a greater pool of respondents would enhance the results and allow for further statistical analysis. There were also only eight male teachers who completed the survey; while teaching, particularly at the elementary level, is populated by more females than males, men are indeed underrepresented in the sample. There is also a different gender composition of elementary and high school teachers, with women being more represented at the elementary level and more gender parity at the secondary level. We intend to build on these data and encourage other researchers to do the same in developing larger-scale studies that investigate teacher mental health, leaves of absences, returns to work, and the impact of gender variables (childcare and caregiving obligations, workload, etc.). In our subsequent larger study, for instance, regression analysis may reveal if being a caregiver for dependent adults or children predicts taking a leave of absence.

A survey represents one moment in time, and the timing of the survey may have impacted the results. We conducted the survey in the spring and summer of 2017 and interviews in the fall of 2017. It is possible that teachers may be more or less stressed at different times throughout the year, due to factors such as report cards or summer break. Teaching assignments, administration, and workloads can also vary significantly year to year, and this not only impacts mental health but also possibly the need to take a leave of absence. Future research should consider samples of teachers in various locations at different times to broaden our understanding of teacher mental health and provide a deeper understanding of contextual factors. For example, different school districts in different regions and countries have different policies and collective agreements surrounding short-term leaves and sick days. In addition, as one teacher we interviewed and Ott et al. (2017) note, most school wellness programs focus on students and/or interventions at the individual teacher level (e.g., yoga or mindfulness), rather than the work environment or context.
that may be the root cause of mental health challenges. In our forthcoming study that this pilot study informs, we will be implementing interventions to examine improving teacher mental health and a healthy return to work after a leave of absence from a broader systemic perspective. Future research needs to explore larger policies or interventions that promote whole school wellness, rather than improvement only at the worker level.

In addition, there remains a stigma to both mental health and disclosure in the workplace (Chai, 2017; Stuart, 2005) and the teaching profession is no exception (Ferguson et al., 2012). It is possible that even though the surveys were voluntary and anonymous, teachers may not be willing to complete a survey or participate in an interview due to social desirability (Mills & Gay, 2016); many teachers were not interested or willing to participate in a follow-up interview when contacted, even though they had indicated their interest to do so on the survey. It is plausible that those teachers experiencing high levels of stress and mental health challenges and issues did not participate in the study due to lack of time, emotional energy, workload, and stigma of mental health issues. Future studies should consider that teachers with mental health issues could be a difficult population to access. Studies should be designed to facilitate teachers participating and consider providing release time, childcare, or financial incentives.

Finally, the Covid-19 pandemic, which has drastically changed education and teaching, cannot be ignored. There is emerging research about teacher mental health and wellness during the pandemic and the toll the pandemic is taking on Canadian educators (Alberta Teachers’ Federation, 2020; Sokal et al., 2020). As the Alberta Teachers’ Federation (2020) states, the pandemic may amplify teacher stress and mental health issues. While our pilot study was conducted prior to Covid-19, it is plausible that during the pandemic the rates of leaves of absences due to mental health challenges may be even higher. Caregiving remains a challenge, as teachers may also be absent to care for ill children or for children that must self-isolate. As recent media has reported, teacher absences have been so high during the pandemic that occasional teachers are in short supply (Sarrouh & Rushowy, 2021); however, the causes of teacher absences (whether due to Covid-19, mental health challenges, or other factors) are unclear. Therefore, the need for further study on teacher leaves of absences and a healthy return to work is higher than ever before, and we aim to contribute to this area with our forthcoming larger study.
Conclusion

Our study provides a glimpse into teachers’ mental health and leaves of absences. The strain of overwhelming teacher stress can impact teachers’ health and wellness, absenteeism, and turnover (Harris, 2011; Naghieh et al., 2015). In addition, the negative impacts on teacher stress and strain are felt in the classroom in terms of negatively impacting student learning and outcomes (Naghieh et al., 2015). Neglecting teacher mental health is of high cost in terms of physical and emotional health for teachers as workers, but also for school systems in terms of finances and human resources, as well as student performance. As Ott and colleagues (2017) argue, to have healthy schools and students, teachers must also be healthy.

From a carework perspective, it is evident that teachers engage in carework both at home and school, and this, too, takes its toll on teacher mental health. As a caring profession, teachers bear a burden of undervalued emotional labour and suppressing their own negative emotions every day in the classroom. It is clear that more research is needed, not only about the factors that cause unbearable levels of stress, but also related to the implications of this stress for teachers in terms of presenteeism, taking a leave of absence, and effective and healthy return-to-work policies. With a spotlight currently on mental health during the Covid-19 pandemic, we feel that now, more than ever, teacher mental health is integral to whole-school philosophy of wellness.

References


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