Compassion Fatigue, Emotional Labour and Educator Burnout: Research Study

PHASE ONE REPORT: ACADEMIC LITERATURE REVIEW AND SURVEY ONE DATA ANALYSIS

Funding provided by the Alberta Teachers’ Association (ATA) and the Alberta School Employee Benefit Plan (ASEBP)
Compassion Fatigue, Emotional Labour and Educator Burnout: Research Study

PHASE ONE REPORT: ACADEMIC LITERATURE REVIEW AND SURVEY ONE DATA ANALYSIS

Funding provided by the Alberta Teachers’ Association (ATA) and the Alberta School Employee Benefit Plan (ASEBP)

Principal Researcher
Astrid Kendrick, EdD, University of Calgary

Research Assistants (Survey Coding)
Kate Beamer, MA, Doctoral Candidate
Beejal Parekh, BEd

Research Assistants (Interviews)
Kate Beamer, MA, Doctoral Candidate
Jhonattan Bello, BA
Emilie Maine, MA
Rachel Pagaling, BA, MSc
Beejal Parekh, BEd

Report Date: September 23, 2020
Preface

Education is ultimately a relational endeavour. It follows that anything that diminishes the relationships between teachers, students and parents diminishes the quality of learning.

The Alberta Teachers’ Association, 2013 Strategic Plan

The relational nature of learning requires significant emotional labour on the part of teachers, school leaders and other educational workers; however, the personal cost of this emotional labour and its impact on the psychological well-being of adults working in the Alberta public education system is not well understood.

Therefore, early in January 2020, the Association partnered with the Alberta School Employee Benefit Plan (ASEBP) to explore phenomena of emotional labour, burnout and compassion fatigue in education workers.

This partnership led to the establishment of a two-year research project designed and guided with the expert assistance of a group of researchers from the University of Calgary. This report is an initial product of this collaboration and provides insight into the first phase of this research project. It includes a literature review that explores the concepts used to frame this study as well as an analysis of the findings of an online survey conducted in June 2020.

The combined efforts of the research advisory committee have grounded this study and provided critical guidance in the development of the research instruments. I wish to thank all members below for their participation and input:

- C Volume-Smith, PhD (Cochair), Strategic Advisor, ASEBP
- Lisa Everitt, EdD (Cochair), Executive Staff Officer, ATA
- Astrid Kendrick, EdD, Principal Researcher, University of Calgary
- Ms. Genevieve Blais, MEd, Executive Staff Officer, ATA
- Heather Collier, BScN, Manager, Clinical and Early Intervention Services, ASEBP
- James Gerun, BEd, Teacher Welfare, ATA
- Phil McRae, PhD, Executive Staff Officer, ATA
- Sylvie Roy, PhD, Associate Dean, Research, University of Calgary
- Wendy Sheehan, Manager, Client Services ASEBP
- Shawn Vanbocquestal, Director, Clinical and Disability Services, ASEBP
- Cindi Vaselenak, EdD, Consultant, ASBA
Additionally, I wish to acknowledge the research team from the University of Calgary for its efforts to collate and make sense of the voluminous data collected during phase one of the research project. The research team was led by Dr Kendrick and included her research assistants Kate Beamer, Jhonattan Bello, Emilie Maine, Rachel Pagaling and Beejal Parekh.

Dr Kendrick took the information gathered by her team and authored the report before you. The Association Document production team led by Joan Steinbrenner, including Judith Plumb, Kim vanderHelm, Alexandria Bowes and Joanne Maughn, ensured that its presentation paid appropriate tribute to the impressive collective efforts that went into its creation.

Finally, I wish to recognize the 2,810 education workers who took the time to respond to the online survey in June. We do not tend to share freely how our work affects our inner lives to put our vulnerabilities on public display. Your willingness to share your experiences with respect to emotional labour, burnout and compassion fatigue is brave and helps the Association, ASEBP, other educational partners and, ultimately, your professional colleagues across the province to consider how psychological well-being of education workers can be protected at both an individual and a system level.

Dennis Theobald  
Executive Secretary, Alberta Teachers’ Association
CHAPTER ONE

Introduction and Key Concepts

Educational workers have increasingly felt occupational pressures created by societal disruption due to factors such as the COVID-19 crisis, reduced budget allocations from the government treasury, increased class sizes, and diverse and complex classroom composition. Members of educational advocacy and supporting organizations have observed an increased number of educational workers expressing mental health distress because of these factors.

In January of 2020, the Alberta Teachers’ Association (ATA) and Alberta School Employee Benefit Plan (ASEBP) determined that a research study was needed to gain more insights into education workers’ experiences with their occupational health. The decision to fund this study was made before the 2020 COVID-19 pandemic; however, with the quick pivot to emergency remote instruction in March 2020, the investigation into the impact of this crisis event on educational worker mental health became even more urgent. Specifically, these two organizations were concerned about the experience and scope of compassion fatigue and burnout for educational workers in Alberta.

Alberta is one of ten provinces in Canada and is home to over four million people (Government of Alberta 2020), with approximately 140,000 people working in educational services, which account for 6.7 per cent of employing industries (Treasury Board and Finance 2016). Educational workers include teachers, educational assistants, support staff, school administration and school district administration, as well as supporting employers such as the ATA and the ASEBP.

An extensive review of the experiences and causes of mental health distress in Albertan educational workers has not previously been undertaken. Mental health distress can take multiple forms and has complex causes, and more research is needed to determine the occupational factors that might be contributing to this distress. The purpose of this study is to investigate the lived experience of educational workers regarding three phenomena that are inextricably tied to working with people: emotional labour, compassion fatigue and burnout.
Key Terms and Definitions

EMOTIONAL LABOUR

The term emotional labour was first coined by Arlie Hochschild in her seminal exploration of the topic in The Managed Heart, first published in 1983. She described the phenomenon as the performance of expected emotional expression in a work environment (Hochschild 2012), and she suggested that employees were expected to manage their emotions in a manner that matched the organizational “feeling rules”—the spoken or unspoken expectations of how a “good” employee expressed or repressed their emotions when working with clients. Whether or not the employee genuinely felt these emotions was not of primary concern, leading to a potential disconnect between the organizational feeling rules and the employee’s authentic emotional state.

Hochschild (2012) suggested that two main elements composed emotional labour: deep acting and surface acting. With deep acting, the employee’s true emotional state aligns with the organizational feeling rules and provides a strong base from which to perform the emotional labour. The person feels a strong connection to their work and can identify with their job role as a part of themself. In the educational field, this person might feel a strong desire to positively influence children and youth or create an optimal school–work environment for staff and colleagues. Their individual passions and drive align with the expectations for their profession.

Superficial acting (Hochschild 2012) is required when a worker’s actual emotional state does not align with the organizational feeling rules. If an educational assistant, for example, tries to smile reassuringly to their student, but feels anger or trepidation about the potential actions of that student, they are acting out according to the feeling rules, rather than expressing their true emotion. Ongoing superficial acting has been linked to burnout (Bodenheimer and Shuster 2020; Noor and Zainuddin 2011) and compassion fatigue (Elliot 2017; Peate 2014); hence, understanding the role that providing emotional labour plays in the day-to-day work of educational workers is an important aspect of understanding their unique occupational experiences.

In education, organizational feeling rules are expressly written in professional codes of conduct, including documents such as the Teaching Quality Standard (TQS) (Alberta Education 2018b) and the Leadership Quality Standard (LQS) (Alberta Education 2018a). An example of an organizationally mandated feeling rule is outlined as one of the indicators of teacher effectiveness:

Fostering Effective Relationships: Achievement of this competency is demonstrated by indicators such as: (b) demonstrating empathy and a genuine caring for others. (Alberta Education 2018b, 4)
Following an organizational feeling rule is not problematic, and doing so promotes a calm, safe and emotionally healthy workplace. Particularly in the educational field, with educational workers working either directly or indirectly with vulnerable or malleable children and youth, the adults need to be good role models for safe work environments. As Kendrick (2018) found in her study of health champions and emotional labour, schools cannot be considered safe environments for children and youth if constantly disrupted by dysregulated adults.

Providing emotional labour is part of the role of an educational worker. Just as a construction worker needs to provide physical labour to build a house, educational workers need to provide emotional labour to build strong pedagogical relationships with their students or to construct effective leadership relationships with their staff and colleagues. Deep acting, the passion that drives educators to contribute their skills and abilities to create a better and more civil society, can, unfortunately, be eroded over time by the emotional exhaustion created by ongoing superficial acting. The consequences of not addressing this emotional erosion, particularly in stressful times, need to be studied further.

COMPASSION SATISFACTION

One of the main protective factors for people employed in caring professions is compassion satisfaction, the pleasure that the caregiver experiences from doing their work (Mathieu 2012; Steen 2019). Teachers are typically seen as having higher levels of compassion satisfaction related to their work because of less direct exposure to trauma than other caregivers (Teater and Ludgate 2014). Experiencing the positive outcomes related to helping work, such as positive feelings for colleagues, a sense that one’s own caring work benefits the common good for all society, or improving client health and well-being, can contribute to the “helper’s high” (Teater and Ludgate 2014, 113). Focusing caregivers on the successes of their clients and colleagues has been found to act as a buffer for carers experiencing compassion stress and to create a pathway to health for those people experiencing compassion fatigue (Mathieu 2012). Rather than being seen as the opposite of compassion stress and compassion fatigue, compassion satisfaction can be understood as a protective factor that exists on a continuum of occupational health (Geoffrion et al 2019).

COMPASSION STRESS AND COMPASSION FATIGUE

Compassion stress and compassion fatigue describe a continuum of the emotional toll felt by caregivers (Figley 2002). Compassion stress is used interchangeably with the term secondary traumatic stress (STS), and compassion fatigue is also referred to as secondary traumatic stress disorder (STSD). In both cases, the caregiver is deeply impacted when dealing with their clients’ trauma. Teater and Ludgate (2014) suggested that the risk factors for STS and STSD can be classified into three categories: personal, client and organizational/institutional (see Table 1). They suggested that the risk for experiencing STS or STSD increases due to personal factors including an individual’s
own experience with trauma; exposure to frequent, long-lasting and severe client trauma; and organizational/institutional factors including lack of preparation and professional learning related to trauma or an unhealthy workplace.

Table 1

<table>
<thead>
<tr>
<th>Personal</th>
<th>Client</th>
<th>Organization/Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-expectations</td>
<td>Suicidal</td>
<td>Nature and quality of supervision and mentorship</td>
</tr>
<tr>
<td>World view</td>
<td>Demographic match to therapist</td>
<td>Culture</td>
</tr>
<tr>
<td>Personal history including trauma</td>
<td>Personality</td>
<td>External supports</td>
</tr>
<tr>
<td>Use of adaptive or maladaptive coping skills</td>
<td>Use of adaptive or maladaptive coping skills</td>
<td>Flexibility of supervisor</td>
</tr>
<tr>
<td>Willingness to admit to needing and seeking of support</td>
<td>PTSD diagnosis</td>
<td>Caseload</td>
</tr>
<tr>
<td>Level of training</td>
<td>Age</td>
<td>Likelihood of encountering situational triggers</td>
</tr>
</tbody>
</table>

(from Teater and Ludgate 2014, 6)

The main difference is that when a person is experiencing compassion stress, they can still manage their daily workload and can rely on individual or workplace strategies to recover, what Joinson (1992) referred to as being “vertically ill” (p 119). In contrast, she suggested that an individual experiencing compassion fatigue becomes “horizontally ill,” requiring intensive interventions such as professional therapy, medication or a leave of absence from work to fully recover. Once an individual experiences compassion fatigue, they are no longer able to provide the emotional labour required to be effective with their clients, and they experience a shift in their occupational world view, losing the altruism and desire to make a positive contribution to society through their caring work (Catherall 1995; Dubois and Mistretta 2018).

Both compassion stress and compassion fatigue are associated with caregivers or helpers who have been exposed to trauma through their work with clients. Bearing witness to the traumatic experiences of others has a tremendous impact on the mental and emotional health of educational workers and is the “cost of caring” (Figley 1995, 7). Trauma occurs when “stress responses fail to re-establish prestress life-enhancing equilibrium” (Valent 1995, 28). A traumatic event is a life-changing and difficult experience that has a significant and disruptive impact on an individual’s everyday functioning. Traumatic events include natural disasters, death or significant injury, human-caused disasters, experiencing neglect or abuse, or civil discord (Figley 1995; Valent 1995).
STS and STSD are foreseeable and preventable outcomes of providing emotional labour in educational settings (Dubois and Mistretta 2018). Educational workers, by the nature of their profession, are likely to encounter students or colleagues who are experiencing trauma. They may act both as crisis workers (Beaton and Murphy 1995), by going through a traumatic event with students or colleagues, or trauma workers (Dutton and Rubinstein 1995), from hearing about a traumatic event from a student or colleague. Dubois and Mistretta (2018) suggested that educators experience secondary stress because of changes in student needs, a lack of professional support from school or system administration, and an increased caseload. As a result, providing effective professional development and assistance with developing self-care plans that address individual, professional and organizational interventions (Teater and Ludgate 2014) should be a part of educator education and professional learning programs.

For people engaged in helping professions, the toll of performing empathy and compassion when feeling otherwise can be stressful and lead to emotional exhaustion (Peate 2014). A strong stigma is attached to caregivers admitting to feeling burned out (Steen 2019), which can exacerbate the effects of compassion stress and compassion fatigue. Several reliable and validated tools exist that can help an individual to self-identify their compassion fatigue.

The ProQOL Survey Version 5 (Stamm 2012) is considered the strongest measure to assess an individual’s proclivity toward compassion satisfaction and compassion fatigue and has been used extensively for research purposes (Geoffrion et al 2019). It is not a diagnostic tool, but it provides some key information about what needs to be done by a therapist or organization to improve the professional well-being of an individual or group of people (Stamm 2010). Organizations that have high numbers of individual employees with compassion fatigue can use theoretical models to identify the common characteristics and interventions that should be used to help employees return to emotional and mental health.

In the nursing field, Peters (2018, 473; see Figure 1) and Coetzee and Laschinger (2018; see Figure 2) used extensive academic literature reviews to propose theoretical models for understanding STS and STSD. Although a comprehensive model does not appear to have been developed for educational workers, these two models are both useful for defining the major antecedents and consequences for professions that have compassion fatigue as a known occupational hazard (Peate 2014; Peters 2018). Further work needs to be done to adapt the nursing models to fit the unique settings and job expectations of educational workers.

To build a comprehensive model for educational workers’ compassion stress, compassion fatigue and burnout requires an answer to the question of what constitutes trauma and crisis work in the education field. Understanding the unique nature of educational workers’ crisis and trauma work is important, as these concepts have been defined mainly in reference to frontline workers, such as medical professionals (van Mol et al 2015), firefighters (Kim, Hee Ha and Jue 2020), therapists and psychologists (Craig and Sprang 2010), or social workers (Adams, Boccarino and Figley 2006), who
tend to deal directly with individual people experiencing trauma. Educational workers generally
work closely with large groups of children and youth and can be exposed to multiple crisis and
trauma situations during a school day. Phase two of this study will be focused on developing
examples of crisis and trauma work performed by educational workers.

In many school systems, access to highly trained crisis and trauma professionals has been severely
reduced due to governmental austerity measures (Statistics Canada 2019). As a result, educational
workers have been asked to take more responsibility for their clients’ mental and emotional health
(Leschied, Flett and Saklofske 2013) and are likely to have direct contact with child and youth crisis
and trauma given its prevalence in the population (Government of Canada 2018). Creating a similar
model to those used for nurses and other frontline workers would assist educational organizations
and academic institutions with understanding and preparing educators for response and recovery
when they encounter this phenomenon. Developing this model will be a focus of the second phase of
this research study.

**BURNOUT**

The combination of compassion stress or compassion fatigue with burnout can be devastating for
caregivers. Emotional burnout is a long-term process that occurs in caregivers as they help other
people (Maslach and Jackson 1981). Unlike STS or STSD, which can emerge after one exposure of
a caregiver to secondary trauma, burnout is a career-long process that grows in intensity over time
(Koenig, Rodger and Specht 2018). Exposure to a traumatic event in an individual who has already
been experiencing burnout is a combination that can result in devastating mental health distress.

Tei et al (2014) suggested that “individuals who are most vulnerable to burnout in human service
work are those who are highly motivated, dedicated and emotionally involved in their work”
(p 6). Three main aspects of burnout in the Maslach and Jackson Burnout Scale (1981) include
depersonalization, exhaustion and lack of accomplishment (see Table 2).

*Table 2*

<table>
<thead>
<tr>
<th>Depersonalization</th>
<th>Emotional Exhaustion</th>
<th>Lack of Accomplishment</th>
</tr>
</thead>
<tbody>
<tr>
<td>I treat my clients as if they were impersonal objects.</td>
<td>I feel emotionally exhausted from my work.</td>
<td>I do not deal very effectively with the needs of my clients.</td>
</tr>
<tr>
<td>I have become more callous towards my clients than I used to be.</td>
<td>I feel used up by the end of the work day.</td>
<td>I do not feel that I am positively influencing the lives of my clients.</td>
</tr>
<tr>
<td>I really don’t care about what happens to some of my clients.</td>
<td>I feel fatigued when I wake up and again by the end of the work day.</td>
<td>I lack energy.</td>
</tr>
<tr>
<td>I feel blamed by some of my clients for their own failures.</td>
<td>I feel frustrated by my job.</td>
<td>I do not feel that I have accomplished worthwhile things on my job.</td>
</tr>
</tbody>
</table>

(Indicators taken from the Maslach and Jackson Burnout Scale [1981])
Dubois and Mistretta (2018) described burnout for educational workers as “death by a thousand cuts” (p. 41). Currently, educational workers in Alberta experience a high caseload and an ever-increasing number of students or clients; an ever-decreasing number of supports and resources to assist them with meeting the needs of these clients; diminished administrative support and increased administrative tasks; a negative workplace or school culture; and high levels of daily stress (Alberta Teachers’ Association 2020).

A key symptom of burnout is depersonalizing the client, which for most educational workers would result in depersonalizing children and youth, which is damaging to students’ intellectual and mental health and academic success. Developing individual, site-based and organizational/institutional interventions to both prevent and assist with educational worker burnout is a necessary part of ensuring the academic success and overall well-being of students (Herman, Hickman-Rosa and Reinke 2018).
Interventions for Compassion Fatigue, Compassion Stress, and Burnout

A key understanding of the treatment for the phenomena of compassion fatigue, compassion stress and burnout is that these conditions are preventable. Through identifying the personal and organizational factors that can lead to these outcomes, both individuals and organizations can effectively prevent or treat people through professional development, self-care plans, effective mentorship and supervision, and the work culture.

PROFESSIONAL DEVELOPMENT

Preparing educational workers for the likelihood of experiencing compassion fatigue, compassion stress or burnout requires training them to recognize the risk factors within both themselves and their colleagues (Dubois and Mistretta 2018; Koenig, Rodger and Specht 2018). Ideally, caregivers would not be exposed to traumatized clients at all, and governments would work to mitigate the societal effects of natural disasters, domestic violence and other forms of human victimization, poverty, homelessness, and global conflict (Dutton and Rubinstein 1995) for the common good of society. Providing a strong social service network to assist people in need would prevent students from being traumatized in the first place.

However, until this ideal can be realized, providing caregivers with training and professional development in STS and STSD can assist them with recognizing and seeking help to cope before they become horizontally or vertically ill (Joinson 1992; Mathieu 2012; Teater and Ludgate 2014). As a part of this training, caregivers should learn about the adaptive and maladaptive coping strategies used by people experiencing stress, including rescuing, attaching, assertiveness, adapting, fighting, fleeing, competing and cooperating (Valent 1995). By recognizing their own and their colleagues’ stress responses, they can develop and enact their self-care plan before the STS becomes severe or intensifies into STSD.

SELF-CARE PLANNING

Caregivers should develop a strong self-care plan that includes a wide number of coping strategies and resources that an individual can access in times of stress (Dubois and Mistretta 2018; Figley 1995; Hydon et al 2015; Koenig, Rodger and Specht 2018). People in leadership roles in organizations and institutions that rely on employees providing emotional labour as a part of their job description should work to ensure that each employee has a self-care plan that includes individual, organizational
and professional interventions (Teater and Ludgate 2014). Compassion stress, compassion fatigue and burnout are not personal defects in individual caregivers—these conditions result from a wide variety of personal and professional circumstances and can impact any employee. In fact, “those who have an enormous capacity for feeling and expressing empathy tend to be more at risk of compassion stress” (Figley 1995, 1).

Within the education field, a workable self-care plan should be a part of formal education. Koenig, Rodger and Specht (2018) suggested that preservice teachers, for example, should develop a plan as a part of their teaching degree so that when they do encounter crisis or trauma work when they begin their teaching career, they have already determined the most effective steps for a return to their pre-exposure mindset. Stigma regarding mental health problems (OECD 2012) and the superhero teacher trope of a singular individual who can fix all the complex problems faced by students in schools (Brown 2013) can keep educational workers from admitting that they have the symptoms of compassion stress, compassion fatigue or burnout. If these phenomena are discussed as a natural consequence of exposure to caring work that can be treated, educational workers may be more inclined to seek help (Hydon et al 2015).

**IMPORTANCE OF MENTORSHIP AND SUPERVISION**

Providing caregivers with regular access to and communication with peers and mentors who have worked with traumatized clients is another way that organizational leadership can assist with preventing or treating compassion stress, compassion fatigue and burnout in their employees (Cerney 1995; Yassen 1995). Ineffective mentorship can lead to spreading “emotional contagion” (Hennig-Thurau et al 2006, 59) in which negative impacts of care work are amplified through interactions between disillusioned or burned-out colleagues and clients. Hennig-Thurau et al (2006) suggested that while emotional contagion can be positive if the main emotions that are amplified through interactions are joyous and cheerful, it can also be highly toxic if the spreading emotions are anger, frustration or sadness. Further, they found that when emotional labour is being provided, emotional contagion can pass from employee to client. In school settings, educators could make their own jobs more difficult by enabling their students to dysregulate their emotions.

However, through effective mentorship, colleagues and leaders can assist each other by problem solving for difficult clients (Cerney 1995), discussing the work-related events of challenging days to manage powerful emotions (MacLaren, Stenhouse and Ritchie 2016), or deconstructing a traumatic event to uncover adaptive or maladaptive coping strategies (Mathieu 2012). Mandated supervision in educational settings is focused primarily on the educational workers’ influence on students’ achievement in teaching and learning (Alberta Education 2018b). Very little attention is paid to the emotional influence of trauma or burnout on educational workers, which can lead to a problematic workplace culture.
WORKPLACE CULTURE

Organizations or institutions that rely on employees providing emotional labour to their clients have a responsibility to assist employees with creating and implementing their self-care plan. Compassion fatigue, stress and burnout are occupational hazards for careers that are dependent on caregiving (Mathieu 2012), so employers and leaders in caregiving settings should develop a workplace that creates physical and intellectual space, adequate time for emotional management and release, and opportunities for connection between employees to develop collegial relationships (Kendrick 2018).

Teater and Ludgate (2014) suggested that developing a healthy workplace culture includes ensuring that employees have access to supports and resources so that they can enact their self-care plan; providing training and professional development regarding compassion fatigue, compassion stress and burnout; and acknowledging that these phenomena are not individual failings or the results of a personal problem: these phenomena are the cost of caring and a consequence of working with traumatized people.

CONCLUSION

The three phenomena of emotional labour, compassion stress and fatigue, and burnout are closely linked. Although they often emerge independently of one another, distressing events, like the COVID-19 pandemic in 2020 or major natural disasters such as fires and floods, can include the potential for all three phenomena to collide, creating an overwhelming amount of emotional and mental health problems within caregiving systems.

Understanding the scope and nature of these three phenomena in Alberta, Canada, can provide decision makers and advocates for a strong public education system with the knowledge needed to develop healthy educational workers and a culture of safe and caring schools for adults and children alike.
CHAPTER TWO

Survey One Data Analysis and Findings

RESEARCH METHODOLOGY

Because of the size and scope of this research project, the chosen methodology was mixed methods using a social justice design (Creswell 2015). The project will be using both quantitative and qualitative data collection and analysis to determine the nature of emotional labour provided in Alberta; the extent of compassion fatigue, compassion stress and compassion satisfaction experienced by educational workers in Alberta; and the prevalence of educator burnout in educational workers in Alberta. Following the completion of this study, the intent is to use the data to improve the working conditions and the emotional and mental health of educational workers.

Data about the three phenomena will be gathered from June 2020 to February 2021 through two online surveys constructed through Survey Gizmo and forty hermeneutic individual interviews with participants from across Alberta and in different educational roles. Ethics approval for this study was received from the University of Calgary in June 2020.

The first survey launched on June 10, 2020, and gathered responses until July 3, 2020. Participants were recruited through an online social media campaign promoted by the research study funders, the Alberta Teachers’ Association (ATA) and the Alberta School Employee Benefit Plan (ASEBP). The target population of this survey was educational workers in Alberta with the focus on the membership of the ASEBP, which includes teachers, educational assistants, school administrators and support staff. Based on the ASEBP member totals, the population that could be reached through the study advertising campaign was approximately 60,339, of which 79 per cent identify as female (e-mail message from C Volume-Smith, September 19, 2020).

This survey was designed to gather quantitative data regarding the extent of the three phenomena across several different educational roles and sectors. Survey questions were designed using the ProQOL Version 5 (Stamm 2012) to measure compassion stress, compassion fatigue and compassion satisfaction; the Maslach and Jackson Burnout Inventory (1981) to determine symptoms of burnout; and open-ended questions about appropriate and inappropriate emotional expression to determine organizational feeling rules in educational settings, based on the work of Kendrick (2018).

Initial data analysis of the first survey consisted of generating quantitative graphs representing the overall impact of the three phenomena across the education sector. Open-ended text questions were coded qualitatively using the constant comparison thematic analysis (Creswell 2015), first by the
principal investigator and then by a research assistant, and responses were grouped using the “text bucket” function in Survey Gizmo as themes emerged. The survey had a 73.3 per cent completion rate, with 2,061 complete responses and 749 incomplete responses, for a total of 2,810 participants. Given this response rate, this survey has a confidence level of plus or minus 2.5 per cent, 19 times out of 20 (Creative Research Systems 2012).

The final question of this survey was used to find volunteers for the interview portion of the research study. A participant pool of 258 volunteers was generated from this initial survey. Using convenience sampling by identifiable job role, the volunteers were listed by job role and were contacted by the research assistants. Once consent was obtained, interviews were held between July 3, 2020 and August 31, 2020 by five research assistants to understand the lived experience of educational workers with the three phenomena. Interview questions were generated from the initial survey with a focus on what constitutes crisis and trauma work in educational work settings, the nature and extent of burnout by the interview participants, and the types of professional development and self-care strategies that were required to improve the occupational health of the participants. The data from these interviews will be analyzed between September and December 2020 using constant comparison analysis and presented in the phase two report. Initial themes were identified by the research assistants and provided to the principal investigator, who compared these emergent ideas to codes that had emerged in the survey data and information known about the three phenomena from the literature review.

A second survey will be designed from the findings of the first survey and interview data, and will be released in January 2021 to determine the stability of the findings from these first two data sources. The first survey was released during a particularly difficult time for educational workers as they had to pivot suddenly on online instruction. Therefore, the findings may be limited due to the intensity of uncertainty and trauma created by the COVID-19 pandemic. The COVID-19 pandemic is a traumatic event that likely intensifies the experience of STS and STSD as well as burnout. The intent of the second survey is to determine the extent to which the data generated by the first survey produce findings that are consistent across time.

SURVEY ONE DATA ANALYSIS

Respondent Profile

The respondents for the survey represented a cross-section of the education sector workforce in Alberta. As expected, the majority of the respondents identified as cisgender women (see Table 3) living in an urban setting (see Table 4) and acting in a teaching role (see Table 5), which is representative of the educational workforce (Treasury Board and Finance 2016). Representation from a variety of areas of the province of Alberta was present; however, the urban centre Edmonton was overrepresented in the data. The number of years in the educational workforce was split somewhat
evenly among 0–5, 6–10, 11–15, 16–20 and 20+ years of employment (see Table 6). The majority of respondents worked primarily with kindergarten to Grade 12 students (see Table 7).

The survey data are robust and can indicate trends within the educational workforce with a sample size error of ±2 (Creswell 2015). When looking at the trends for specific job roles, the data have a much lower confidence interval, suggesting that more respondents are needed for the second survey to generalize job specific results. Specifically, the data from system-level leadership and school board elected officials are underrepresentative of the influence of the three phenomena on these educational workers. Additionally, while the respondents represent a geographic cross-section of the province of Alberta, data drawn from specific areas or locations cannot be taken as representative of the experience of the phenomena in those locations.

For the follow-up survey in January, more effort should be made to gather data from these underrepresented groups for a better understanding of the scope of compassion fatigue, compassion stress, compassion satisfaction and burnout within these subgroups and locations. Further information about the influence of the three phenomena will also be gathered from the analysis of the interview data.

Caution should be taken not to apply the overall quantitative analysis to individuals, specific job roles or locations within Alberta. Further, the first survey results should be approached as providing overall trends or themes within the education sector for further exploration.

**Table 3. Gender Profile**

<table>
<thead>
<tr>
<th>Value</th>
<th>Per Cent</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>12.2%</td>
<td>318</td>
</tr>
<tr>
<td>Female</td>
<td>86.8%</td>
<td>2,260</td>
</tr>
<tr>
<td>Transgender</td>
<td>0.1%</td>
<td>2</td>
</tr>
<tr>
<td>Prefer not to answer</td>
<td>0.7%</td>
<td>18</td>
</tr>
<tr>
<td>Not Listed</td>
<td>0.2%</td>
<td>6</td>
</tr>
</tbody>
</table>

Total: 2,604
Table 4. Work Role Representation

<table>
<thead>
<tr>
<th>Value</th>
<th>Per Cent</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nonteaching support staff (such as librarian, administrative assistant) in a school</td>
<td>2.5%</td>
<td>64</td>
</tr>
<tr>
<td>Educational assistant</td>
<td>7.3%</td>
<td>189</td>
</tr>
<tr>
<td>Teacher</td>
<td>73.6%</td>
<td>1,918</td>
</tr>
<tr>
<td>School administration (such as principal, assistant principal, instructional leader)</td>
<td>7.3%</td>
<td>189</td>
</tr>
<tr>
<td>K–12 system administration (certificated teacher acting as consultant, specialist, system principal, superintendent)</td>
<td>2.6%</td>
<td>68</td>
</tr>
<tr>
<td>Elected school leader (such as a school board trustee, member of parent council)</td>
<td>0.1%</td>
<td>3</td>
</tr>
<tr>
<td>Support staff (such as administrative assistant, call centre, financial officer) in a system-level environment (school board, ATA, ASEBP)</td>
<td>1.6%</td>
<td>41</td>
</tr>
<tr>
<td>Leadership in a system-level environment (school board, ATA, ASEBP)</td>
<td>0.9%</td>
<td>23</td>
</tr>
<tr>
<td>Other—write in</td>
<td>4.2%</td>
<td>110</td>
</tr>
</tbody>
</table>

Total: 2,605
### Table 5. Geographic Location

<table>
<thead>
<tr>
<th>Value</th>
<th>Per Cent</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural—geographic area outside of a town or city</td>
<td>27.6%</td>
<td>718</td>
</tr>
<tr>
<td>Urban—geographic area within a town or city</td>
<td>72.4%</td>
<td>1,881</td>
</tr>
<tr>
<td>Total: 2,599</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Value</th>
<th>Per Cent</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calgary</td>
<td>22.4%</td>
<td>584</td>
</tr>
<tr>
<td>Edmonton</td>
<td>38.9%</td>
<td>1,012</td>
</tr>
<tr>
<td>Red Deer</td>
<td>8.9%</td>
<td>232</td>
</tr>
<tr>
<td>Lethbridge</td>
<td>9.4%</td>
<td>244</td>
</tr>
<tr>
<td>Medicine Hat</td>
<td>7.0%</td>
<td>182</td>
</tr>
<tr>
<td>Grande Prairie</td>
<td>4.0%</td>
<td>103</td>
</tr>
<tr>
<td>Cold Lake</td>
<td>1.7%</td>
<td>44</td>
</tr>
<tr>
<td>For McMurray</td>
<td>1.0%</td>
<td>26</td>
</tr>
<tr>
<td>High Level</td>
<td>1.6%</td>
<td>41</td>
</tr>
<tr>
<td>Jasper</td>
<td>0.6%</td>
<td>16</td>
</tr>
<tr>
<td>Lloydminster</td>
<td>1.0%</td>
<td>26</td>
</tr>
<tr>
<td>Not listed</td>
<td>3.6%</td>
<td>93</td>
</tr>
<tr>
<td>Total: 2,603</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Table 6. Years of Service in Education Sector

<table>
<thead>
<tr>
<th>Value</th>
<th>Per Cent</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>0–5 years</td>
<td>22.2%</td>
<td>579</td>
</tr>
<tr>
<td>6–10 years</td>
<td>21.2%</td>
<td>551</td>
</tr>
<tr>
<td>11–15 years</td>
<td>18.9%</td>
<td>491</td>
</tr>
<tr>
<td>16–20 years</td>
<td>15.5%</td>
<td>404</td>
</tr>
<tr>
<td>21+ years</td>
<td>22.2%</td>
<td>579</td>
</tr>
</tbody>
</table>

Total: 2,604

### Table 7. Primary Client Group

<table>
<thead>
<tr>
<th>Value</th>
<th>Per Cent</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>I work primarily with K–12 students.</td>
<td>82.2%</td>
<td>1,883</td>
</tr>
<tr>
<td>I work primarily with adults.</td>
<td>3.1%</td>
<td>72</td>
</tr>
<tr>
<td>I spend most of my day in a leadership capacity with adults.</td>
<td>3.8%</td>
<td>86</td>
</tr>
<tr>
<td>My day is split between working with K–12 students and colleagues.</td>
<td>11%</td>
<td>251</td>
</tr>
</tbody>
</table>

Total: 2,292
EMOTIONAL LABOUR AND ORGANIZATIONAL WORK RULES

The survey data indicated that educational workers in Alberta, Canada provide emotional labour as a part of their work commitment. The respondents in the survey indicated that strong organizational feeling rules exist within their workplaces and that they feel compelled to provide superficial acting to present as their ideal educational worker.

The text analysis of the open-ended question How would you describe someone who is “good” at your job? suggested that educational workers have internalized several key components of their professional obligations as presented in both the Teaching Quality Standard (TQS) (Alberta Education 2018b) and Leadership Quality Standard (LQS) (Alberta Education 2018a), with the competencies of Demonstrates a professional body of knowledge (Alberta Education 2018b) and Fosters effective relationships (Alberta Education 2018a) emerging as the key aspects of professional identity. Of the thirteen competencies outlined in the TQS and LQS, two appear to be the foundation of excellence in the education sector (see Table 8).
Responses coded as *Demonstrates a professional body of knowledge* included the following:

Participant ID 18: “Someone who works hard, is organized, flexible and dedicated.”

Participant ID 25: “Able to completely focus on their students and have lots of engaging classroom activities. Able to give each student what they need.”

Participant ID 183: “Living a balanced life. Lessons are well planned, kids are happy, engaged and learning. Get along well with colleagues and admin. Keeps up with marking assignments.”

### Table 8. Initial Coding “Good at your job”

<table>
<thead>
<tr>
<th>Value</th>
<th>Per Cent</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fosters effective relationships</td>
<td>75.5%</td>
<td>1,316</td>
</tr>
<tr>
<td>Engages in career-long learning</td>
<td>3.2%</td>
<td>55</td>
</tr>
<tr>
<td>Demonstrates a professional body of knowledge</td>
<td>14.3%</td>
<td>249</td>
</tr>
<tr>
<td>Establishes inclusive learning environments</td>
<td>6.1%</td>
<td>107</td>
</tr>
<tr>
<td>Adheres to legal frameworks and policies</td>
<td>0.2%</td>
<td>4</td>
</tr>
<tr>
<td>Understands and responds to larger societal context</td>
<td>0.1%</td>
<td>1</td>
</tr>
<tr>
<td>Models commitment to professional learning</td>
<td>0.1%</td>
<td>1</td>
</tr>
<tr>
<td>Embodies visionary leadership</td>
<td>0.3%</td>
<td>5</td>
</tr>
<tr>
<td>Leads a learning community</td>
<td>0.2%</td>
<td>3</td>
</tr>
<tr>
<td>Manages school operations and resources</td>
<td>0.1%</td>
<td>2</td>
</tr>
</tbody>
</table>

**Total: 1,743**
Participant ID 2655: “Organized, meets deadlines, good relationships with students, able to be flexible to meet student needs.”

Participant ID 2739: “Proficient skills to do job, hard worker, good communicator, can collaborate, completes quality work.”

Responses coded as *Fosters effective relationships* included the following:

Participant ID 27: “Someone who is compassionate, emotionally stable and confident. Someone who is able to remain calm in stressful situations and take control or maintain control when others are feeling dysregulated. Someone who maintains professional boundaries but provides compassion and listens to families and students.”

Participant ID 2514: “Caring, companionate, insightful. Excited to guide students to recognize their worth and their ability to learn. Forge positive relationships with all students in order to ‘meet them where they are’ and guide development. Enjoy the wonder of children!”

Participant ID 2653: “Engaging, easy to talk to, polite, organized, prepared, ready to roll with the punches—all the time, no matter where the punches land, compliant, loves the kids no matter what the behaviour, works well with everyone else, adaptive, sense of humour.”

Participant ID 2809: “Someone who is able to relate to students’ needs whatever they may be, someone who is responsive to the ever-changing dynamic of teaching, someone who can adjust to (and adjust) the norms of the classroom/school culture, someone who does not let their challenges get in the way of their students.”

From the overwhelming agreement among survey respondents (75.5 per cent), the TQS and LQS competency most valued by educational workers appears to be *Fosters effective relationships*. In the context of determining the scope and extent of compassion stress and fatigue in educational workers, this professional value takes on additional importance, as it indicates that caregiving is a valued part of the Alberta education profession, and if individuals feel that they are failing to build effective relationships with their clients, they may be at higher risk of STS or STSD.

Further, the open text responses suggest that educational workers have internalized the hero educator as a necessity for success in their profession. The “good” educator is described using terms that would suit an educational superhero, capable of building a perfectly calm and ordered classroom while effectively engaging students and colleagues under any circumstance.

Participant ID 57: “Someone who manages to balance the myriad of expectations from admin, other staff and students, who hones their craft, creating a sense of enthusiasm for learning while meeting diverse emotional, physical, mental and social needs of children. One who is curious and a lifelong learner, with a sense of humour because some days are just absurd.”
Participant ID 67: “Patient, overall positive attitude, strength-based, student-focused, compassionate, empathetic, flexible, passionate about learning, passionate about inspiring growth, well read and versed in pedagogy.”

Participant ID 101: “Someone who is good at my job inspires students to be amazing at whatever it is they want to do. They are a content expert but have the soft skills to guide the majority of students in the right direction.”

Participant ID 145: “A ‘good teacher’ respects students, creates a sense of community and belonging in the classroom, is warm, accessible, enthusiastic and caring, sets high expectations for all students, has their own love of learning, is a skilled leader, can ‘shift gears’ and is flexible, collaborates with colleagues on an ongoing basis, and maintains professionalism in all areas.”

Meanwhile, educators who are having trouble with maintaining their optimism and high levels of organization feel as though they are not adequate or measuring up to the high standards set both by the profession and by themselves.

Participant ID 37: “I feel tired and right now I feel that I am not as good as the other consultants. I know at this time comparing is not the way to go but I feel inadequate.”

Participant ID 67: “I think more time needs to be spent on this in teacher training. Student teachers and first-year teachers are not adequately prepared for this, in my experience. We also accept our roles and workload as ‘normal’ and often tell younger teachers that ‘burnout is just how it is’ and that ‘they’ll adjust.’ I know I have done this in the past. In the last year or two I have come to realize that maybe the roles and expectations are not as normal as I once thought. I also think some of the mindset around education and what it’s for needs to shift. Are we holding students accountable to an outside standard? Are we working on helping them to become healthy, functional humans? Are we trying to walk somewhere in the middle? Teachers are often teaching, parenting, leading, coaching, providing informal counseling, managing behaviour, supporting learning differences, and creating learning tasks that are both subject-based and engaging, all at the same time. In the same breath. I don’t know that those outside the field understand the complexity of the job, and since it is a caring profession, it is not well received when a teacher mentions these things. I adore my job. I wouldn’t do anything else. BUT I think it could be made better. (Apologies for the rant.)”

Participant ID 2678: “I feel the need to give more than is possible and it always feels like it is never enough.”

The feelings of inadequacy intensify the experience of providing emotional labour as the educational worker is acting the superhero but feeling the villain because they cannot give the heart and care that they once could.
Emotional Feeling Rules

*Emotional feeling rules* are the spoken or unspoken expectations for emotional regulation and expression at a workplace (Hochschild 2012). Survey respondents were asked to name three emotions that they felt comfortable expressing at work (Table 9) and three that they repressed while at work (Table 10). Emotional regulation at work and school is important because educational workers act as role models for appropriate and inappropriate emotional behavior (Kendrick 2018). When they do not feel the expected emotions, educational workers are expected to provide superficial acting in order to maintain a safe and caring environment for students.

Because respondents were asked to name three emotions, the percentage of responses does not equal 100. In the survey, the overwhelming emotional expectation for educational workers was to appear joyful, cheerful or happy, as shown in Table 9. Of the total 1,910 responses to this open-ended question, 1,679 respondents indicated that expressing joy and happiness was an expectation at work. The counts were split more evenly with emotions hidden at work. Of the 842 codeable responses to the question, the respondents were split among anger, sadness and frustration, with hopelessness and fear also generating several mentions. Feeling, but not healthily expressing, hopelessness and fear is related to the development of STS and STSD (Figley 1995).

*Table 9. Emotions Comfortable to Express at Work*
Table 10. Emotions Hidden from Others at Work

<table>
<thead>
<tr>
<th>Emotions Hidden from Others at Work</th>
<th>Number of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anger</td>
<td>500</td>
</tr>
<tr>
<td>Sadness, depression</td>
<td>450</td>
</tr>
<tr>
<td>Frustration</td>
<td>350</td>
</tr>
<tr>
<td>Anxiety, worry, hopelessness</td>
<td>250</td>
</tr>
<tr>
<td>Fear</td>
<td>150</td>
</tr>
<tr>
<td>Stress</td>
<td>100</td>
</tr>
<tr>
<td>Overwhelmed</td>
<td>50</td>
</tr>
<tr>
<td>Grief</td>
<td>20</td>
</tr>
<tr>
<td>Loneliness</td>
<td>10</td>
</tr>
<tr>
<td>Rage</td>
<td>5</td>
</tr>
<tr>
<td>Shame, guilt</td>
<td>2</td>
</tr>
</tbody>
</table>
COMPASSION SATISFACTION, COMPASSION STRESS AND COMPASSION FATIGUE

The principal investigator obtained online permission to use the ProQOL Version 5 as a self-assessment tool. This tool was developed specifically to measure professional quality of life in occupational settings (Stamm 2012). For the purposes of keeping the survey short and easy to maneuver, the 27-point assessment scale was separated into two Likert-style questions, with the first set comprising 14 statements related to compassion satisfaction and the second set comprising 13 statements related to compassion fatigue. Survey respondents were then asked to use their results to decide if they felt compassion satisfaction or compassion fatigue (Table 11). Providing respondents with the opportunity to self-assess based on their results may be a limitation of this survey, as self-assessments do not always generate reliable data; however, the ProQOL is a reliable and validated tool (Geoffrion et al 2019), giving the numbered results in Tables 12 and 13 more credibility.

Overall, of the 2,113 respondents who completed both parts of the ProQOL assessment, 50.4 per cent of respondents (1,064) identified their mental state as consistent with compassion satisfaction and 49.6 per cent (1,049) selected compassion fatigue.

Table 11. Based on ProQOL Survey, Respondents’ Self-Identification of Mental State

<table>
<thead>
<tr>
<th>Value</th>
<th>Per Cent</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compassion Satisfaction</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>50.4%</td>
<td>1,064</td>
</tr>
<tr>
<td>Compassion Fatigue</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>49.6%</td>
<td>1,049</td>
</tr>
</tbody>
</table>

Total: 2,113
Self-Identification of Mental State

Upon closer analysis of the numbers generated by the ProQOL, of those who expressed that they felt compassion satisfaction, the majority of respondents scored between 23 and 33 (see Table 12), which is within the moderate score. The lower the score, the higher the level of compassion satisfaction. In this survey, the average score of the respondents was 30.8, which indicates that they were experiencing trouble with aspects of their job (Stamm 2010).

Table 12. Compassion Satisfaction Scored Results (ProQOL Version 5)
Coded responses (844 total) to the open-ended question *Why do you feel more compassion satisfaction related to your work?* revealed that positive feelings for clients or students (35.2 per cent) and the positive outcomes of doing helping work (35.1 per cent) were by far the most cited reasons for this emotional state. The finding that compassion satisfaction was related to close contact with children and youth aligns with Teater and Ludgate's (2014) suggestion that teachers tend to feel less compassion fatigue than other caring professions because of their proximity to children and youth.

Participant ID 33 noted that they primarily felt compassion satisfaction because “I love working with kids. Their enthusiasm for learning excites me and gives me satisfaction.”

Participant ID 42: “Students are always happy that I’m the sub that is in their classroom, or tell me they are hoping I will be in their classes when they see me on campuses. Even when I clash with students, they often apologize for not doing their assignment, being quiet/rude, and we chat about how they are feeling and why they might have been acting out. I truly want to see every one of them succeed in life, and it makes me very proud to see them do so. I feel as though the students and I form stronger bonds than I do with other staff members at the schools, which makes sense. As a substitute, I spend most of my time with students and support staff, rather than collaborating with other teachers.”

Participant ID 246: “I think being a teacher is an extremely important job. I enjoy my work, and I love working with kids. I care deeply about them but I’ve learned that there has to be balance in my life. I don’t get hung up on the things I can’t change about my job. I do my best but I also save some of my energy for my family and my personal life. I think it’s important to focus on the good things about my job (and there is a lot) and I don’t sweat the small stuff (or try not to!).”

Participant ID 2833: “I make a difference and I can see that. I try to focus on the ways in which I can help those around me. Sometimes I get bogged down by paperwork that I feel takes away from helping others, but the majority of my time, I focus on the success of what I do.”

Of concern is that, of the actual count of respondents according to the ProQOL measure, the bulk of participants fell within the compassion stress zone (see Table 13). When scoring the responses to the ProQOL survey, scores under 22 indicate a low risk of compassion fatigue, 23–42 indicates a moderate level (compassion stress), and 43 or more indicates a high level (compassion stress) (Stamm 2012). The majority of the 2,140 responses, as shown in Table 13, cluster participants into the range of 19–37, with the average score being 30.6.
Coding the 917 open-ended text answers to the question *Why do you feel mainly compassion fatigue related to your work role?* revealed that the five primary antecedents impacting the respondents’ emotional state were unsupportive or unhealthy workplace culture (35.1 per cent), work intensification (26.4 per cent), indirect exposure to client trauma (26.2 per cent), changed world view regarding own ability to make the world a better place (16.5 per cent) and the current COVID-19 pandemic (16.4 per cent).

Regarding an unhealthy workplace, an interesting trend emerged in that respondents felt their workplace was not only the physical location in which they performed their daily tasks, but also the wider provincial context. Some respondents spoke specifically of school or site-based organizational culture:

Participant ID 27: “I work with children with complex special needs. Often we deal with difficult family situations, or traumatic situations in the classroom where I am expected to carry on as soon as the incident is resolved. My work involves long hours because I feel like I have many families depending on me to help them and their children achieve a life of independence and safety.”

Participant ID 183: “I had to leave my worksite. I loved that school, but couldn’t take the stories of the kids anymore. You find yourself jaded and desensitized and angry. I don’t have as many of those experiences at my new school, but you can get bogged down worrying about at-risk students.”
Participant ID 194: “Working with refugee families. Not enough support for them. Some of their stories are horrific.”

Participant ID 2716: “Because of the lack of empathy and general human emotions displayed by my colleagues and parents.”

Others spoke more generally of their role in society:

Participant ID 142: “The top-down philosophy of education. People who haven’t been teaching for decades keep pushing more and more ‘new regulations, best practices, etc’ onto the teaching staff. There is no connection with what we can realistically do in a classroom with the time/curriculum we must teach.”

Participant ID 393: “Political climate, lack of professional discretion and autonomy in the eyes of the public, lack of support and funding, not feeling the humanity in the system—‘just a number,’ parents are always critical rather than supportive, too many diverse learning needs in too big a class size—pouring from an empty vessel.”

Participant ID 449: “Because the scope of the work continues to increase, the complexity of the students continues to increase, the number of students continues to increase, and the public support, government support, board/division support and subsequent supports in schools continue to decrease. Teaching is like running on a treadmill toward problems that we aren’t equipped, trained or expected to solve—but those problems deeply impact student learning, and the best teachers will die trying to remove barriers to student learning.”

Participant ID 2626: “Because the system doesn’t allow me to help people the way they really need due to high work volumes and systemic issues.”

Participant ID 2824: “I feel like every year I need to do more with less. I feel very stressed that I cannot reach every student as much as they need. I get overwhelmed with the sheer number of needs to be met and trapped in a system that cannot offer enough support. There are not enough resources to meet everyone’s needs and I feel partly to blame because I just don’t have the ability to be everything to everyone. I am burned out. With our current political climate, I have a lot of anxiety about how little of the work teachers do is really understood or valued. It is demotivating. I give my heart and soul to each of my kids, but it never seems to be enough.”

The problem of work intensification (Apple 2004), which is the gradual increase of workload to unsustainable levels, is not a new concept. It clearly has not been addressed adequately in the educational sector. Participants explained:

Participant ID 111: “There are too many things to keep on top of. The expectations keep coming and when they are not done to the satisfaction of others it becomes more stress. Checking three
e-mail accounts and answering all questions and providing feedback has taken over my day. I went from being a passionate teacher, excited to try new lesson ideas, to now just scraping by. I do not feel supported by admin. The lack of standards across schools and districts makes following policies confusing. Being in a small old portable with black marks all over the ceiling for the last three years has left me with adult onset asthma and a chronic cough for two years. The hiring process to leave a school under poor management is very difficult, leaving me feeling stuck. Having to be a mental health specialist, teacher of all grades and abilities, entertaining, focused, tech savvy, and a pseudo parent for some students has me at my breaking point.”

Participant ID 454: “Work load leads to little time to fill my cup and complexity of students continues to increase but there is little time/support for learning to support these students. Also, the process of applying for a new position each year and starting over is exhausting. After five years, I’ve decided to look for another career.”

Participant ID 472: “The system expects a tremendous amount of accountability. I get bogged down in paperwork at times. I feel that the time to do the accountability takes away from planning, supporting and having my own work/life balance.”

Participant ID 555: “I have been handed an assignment I knew was too much for me. I taught over 80 students in multiple different grade levels this year. My brain was constantly trying to catch up to what age I was dealing with and what information I was to teach them, let alone dealing with behaviour in various ways. I expressed it affected my mental health and despite that they handed me a similar assignment again for the following school year.”

Participant ID 2623: “My workload is very high and it gets worse every year. I feel as though I cannot do a good job because I’m overworked.”

Participant ID 2735: “Lack of resources, lack of help (EAs), feeling guilty to take days off, working all the time.”

As would be expected from caregivers experiencing compassion fatigue, direct or indirect exposure to client trauma also emerged as a theme in coding. The participants described several incidents of both crisis and trauma work:

Participant ID 533: “I work in a low-income school where many students are faced with verbal/physical abuse. I feel traumatized through their experiences and lose sleep over their well-being. I worry about the days they have to spend at home with violent and often drug-addicted family members. I don’t know if they are eating or being cared for. The school has limited funding for breakfast club and brown bag lunches, which can be taken advantage of by more well-off students. I feel disconnected to the staff since many cliques exist and my role is so versatile that I do not fit in. I don’t feel heard and when I am, I am afraid to ask questions of administration. I am often pushed into roles that I don’t have a lot of experience with and feel very stressed out and
overwhelmed when I am at home. I have some dependence issues which get worse close to parent-teacher interviews or report card time. I struggle to care for myself adequately (exercise/healthy foods)."

Participant ID 647: “It seems that, no matter what I do, I just cannot help those students who need it the most: abuse, neglect, hunger, parental refusal for much-needed mental health supports. I carry them home with me every night. I often feel inadequate and ineffectual. I stock my office, weekly, with food that is utilized by numerous students. I often feel like it is my responsibility to teach parents how to parent … I am not qualified to do that, but I do it regularly. I make many calls to Child Protection Services, and have discussed with my husband taking on students in my school as foster children because my heart can’t take the thought of these kids going home to the lives they live. His response is no because he knows how hard it would be on me. He’s right, but I feel like I should do more, but my hands are tied.”

Participant ID 760: “My students’ trauma weighs on me and affects my mental health. Memories and imagined scenarios of some past/current aggressive students have caused loss of sleep. I have been diagnosed with and am being treated for depression and anxiety, and find it often challenging to find time and energy to practise self-care after a full day of balancing the needs of others and helping students with emotional regulation. Regardless of what emotional state I am in, I feel it necessary to be positive and energetic for my students.”

Participant ID 2636: “No matter what you do in this field, there is always more you could possibly do, but you are limited to services provided. I had a student this year that could not handle being in a classroom and beat up teachers on a regular basis, leaving bruises, and he was still allowed to come back. There is no support for students like him.”

Participant ID 2676: “During this pandemic, there were two families from my class that were struggling for food. One single mom ended up getting COVID and stayed in the hospital for a month. We fed supper to this family for six weeks. I worried constantly about the children and I believe this may be the first time I have ever experienced compassion fatigue. It was mentally draining. I felt really burnt out.”

Participant ID 2711: “I work in an affluent area of the city, yet I still have a couple of students whom I’m worrying about. In the past month I ended up contacting Child Protective Services twice about one particular student. Online learning has increased this to a certain extent as I now have difficulty staying in contact with these vulnerable students.”

Participant ID 2819: “I work in a very diverse school with a lower socioeconomic student body. There is a lot of trauma to unpack and deal with for several of the students I am connected with.”

Finally, a common concern was the disconnect felt between the caregivers and their clients or students because of the COVID-19 pandemic. While the pandemic was cited by several respondents
as a trigger for their compassion fatigue, many also reflected that the changes intensified their already diminished mental state.

Participant ID 630: “Perhaps because of the uncertainty of our current times and the amount of people I am trying to support. It’s definitely impacting every facet of my life and my mental health. There are so many things beyond my control, and although rationally I know I should dismiss them, I’m constantly working out scenarios in my mind. It’s exhausting!”

Participant ID 2567: “This period of COVID quarantine has prevented the satisfaction I get from observing and feeling progression in students’ learning. This is what I consider the biggest reward emotionally from my job.”

Participant ID 2614: “Remote emergency teaching while also parenting my own children has been exhausting. The group of students whom I worked with (low cog) was exhausting because I didn’t feel that I was making a difference for them. They didn’t retain information from day to day.”

Participant ID 2644: “The expectations of next year. Being forced to provide both in-classroom and online learning of equal quality. Being forced to provide programming for home schooling children that I have never met.”
EDUCATOR BURNOUT

The initial survey demonstrates that educational workers are experiencing the emotional and cognitive symptoms of burnout; however, few respondents suggested that they were depersonalizing their clients or students. When asked to select all the symptoms of burnout, the respondents expressed symptoms consistent with emotional and physical exhaustion, as well as a lack of accomplishment (Maslach and Jackson 1981; see Table 14). Because the respondents were asked to choose from a list of symptoms, the response count adds up to more than 100 per cent.

Table 14. Symptoms of Burnout

<table>
<thead>
<tr>
<th>Value</th>
<th>Per Cent</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of energy</td>
<td>89.1%</td>
<td>1,792</td>
</tr>
<tr>
<td>Exhaustion</td>
<td>81.0%</td>
<td>1,629</td>
</tr>
<tr>
<td>Concentration problems</td>
<td>68.5%</td>
<td>1,378</td>
</tr>
<tr>
<td>Reduced initiative to complete work-related tasks</td>
<td>65.7%</td>
<td>1,322</td>
</tr>
<tr>
<td>Sleep disorders</td>
<td>54.3%</td>
<td>1,092</td>
</tr>
<tr>
<td>Reduced performance of work-related tasks</td>
<td>52.4%</td>
<td>1,053</td>
</tr>
<tr>
<td>Reduced imagination or creativity</td>
<td>51.6%</td>
<td>1,037</td>
</tr>
<tr>
<td>Memory problems</td>
<td>50.3%</td>
<td>1,012</td>
</tr>
<tr>
<td>Inability to make decisions</td>
<td>38.3%</td>
<td>770</td>
</tr>
</tbody>
</table>

Did not answer: 68

Total: 2,011
Of concern, of the 2,011 participant responses, 1,792 selected a “lack of energy” (89.1 per cent), 1,629 selected exhaustion (81.0 per cent), 1,378 respondents (68.5 per cent) chose “concentration problems” and 1,322 respondents (65.7 per cent) chose “reduced initiative to complete work-related tasks.” Given that the outcomes of burnout include increased absence from work, physical illness and employee attrition (Salvagioni et al 2017), these percentages suggest that a large portion of survey respondents are at risk for negative mental and physical health outcomes as a result of ongoing work stress. The combination of the high level of compassion fatigue with high levels of employee burnout is a highly concerning finding of this survey data that needs to be addressed.

Some participants attributed their overall lack of energy and tiredness to the time of year that the survey was administered, suggesting that high levels of exhaustion are common at the end of the school year. This survey was administered early in the COVID-19 pandemic, providing a snapshot of burnout and compassion fatigue at that time. This response suggests that respondents have normalized the symptoms of burnout, attributing them to the time of year or the COVID-19 crisis rather than as a systemic or workplace problem to be solved.

Participant ID 658: “Typical June burnout plus strain of emergency remote teaching plus parenting/teaching my own child (guilt over feeling I’m neglecting him).”

Participant ID 672: “I think if we weren’t in the middle of a global pandemic, doing emergency remote teaching, I would be in compassion satisfaction. This time has been really hard and draining and has taken away the parts of my job that I get the most satisfaction from, and added more of the ‘bogged down by the system’ that leads to fatigue.”

Given this limitation that the findings might be related to the time of year, the second survey will be administered in the middle of the school year, which is January. There was also some suggestion that these symptoms were the result of the COVID-19 pandemic and the sudden switch to online learning. The midyear survey should provide more information about the scope of this problem, and key exploration of the stability and longevity of these findings could as well provide insights into educational worker resilience.

### Prevention and Treatment Strategies Employed by Respondents

Despite compassion stress, compassion fatigue and burnout being classified as occupational hazards in other caring professions, overall this survey’s responses indicate that these emotional and mental states are being primarily treated as an individual problem by educational workers.

The self-care prevention strategies are primarily individual interventions. Of 1,837 responses to the question *Which strategies or activities do you use to feel better?* 98.4 per cent listed self-directed strategies or individual interventions. These interventions included such activities as going to a
health club, walking the dog, taking a yoga class or trying to eat healthy foods. The second-highest form of self-care was organizationally directed interventions, which formed 11.7 per cent of responses and included accessing personal benefit plans for massage or other treatment options. Ten per cent of respondents used professional interventions (such as medications, family doctor or registered psychologist), 9.3 per cent cited community-based interventions (such as church) and 7.9 per cent used peer/supervisor-directed strategies (such as in-school mentorship programs) (see Table 15).

**Table 15. Supports and Resources Accessed**

<table>
<thead>
<tr>
<th>Value</th>
<th>Per Cent</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Online therapy services</td>
<td>24.1%</td>
<td>494</td>
</tr>
<tr>
<td>Phone help line</td>
<td>4.3%</td>
<td>89</td>
</tr>
<tr>
<td>Personal support network (friends, family)</td>
<td>86.4%</td>
<td>1,773</td>
</tr>
<tr>
<td>Active support network (gym, run club, yoga class)</td>
<td>61.2%</td>
<td>1,257</td>
</tr>
<tr>
<td>Employer benefits or assistance program</td>
<td>34.3%</td>
<td>704</td>
</tr>
<tr>
<td>Family physician</td>
<td>36.7%</td>
<td>754</td>
</tr>
<tr>
<td>Massage, chiropractic services or physiotherapy services</td>
<td>74.2%</td>
<td>1,524</td>
</tr>
<tr>
<td>None of these supports or resources</td>
<td>2.0%</td>
<td>41</td>
</tr>
<tr>
<td>Other—write in</td>
<td>12.8%</td>
<td>263</td>
</tr>
</tbody>
</table>

Did not answer: 8

Total: 2,053
Given the high number of survey respondents expressing STS, STSD and symptoms of burnout, a more concerted effort to connect educational workers with expanded prevention and treatment supports might be a necessary outcome of this research study. Because this is a social justice mixed-methods study (Creswell 2015), ignoring this call to action from the study participants would become a study limitation.

**DISCUSSION AND CONCLUSION**

The initial survey detailed in this phase one report suggests that the phenomena of emotional labour, compassion stress and compassion fatigue, and burnout are a concern within the educational sector. Phase two of this research project will include gaining a richer and more complete understanding of the occupational experiences of specific groups of educational workers, such as educational assistants, teachers, school administration, system leaders and support staff, through an analysis of the interview data. The interview data should provide a stronger sense of the nature of crisis and trauma work in school and other education field settings.

The next steps should also explore and define optimal and suboptimal work cultures to improve the mental and emotional state of educational caregivers; helpful educator philosophies and world views to assist educational workers with preventing STS and STSD and burnout; and ways to engage educational workers with developing self-care plans that include organizational and community supports in addition to individual interventions. Further, postsecondary education programs and educator support networks in Alberta should begin to incorporate more awareness of emotional and mental occupational hazards present within the educational sector to promote the health and wellness of educational workers.

The findings of the first phase of this study provide a strong foundation for continued research into the scope and lived experience of educational workers with compassion stress, compassion fatigue and burnout in Alberta. As the COVID-19 pandemic continues to impact the daily work of caregivers in schools, the subsequent phases of this study should provide not only more knowledge about the three phenomena, but plausible and easily integrated plans for relieving the mental health distress of educational workers in Alberta. As eloquently described by Participant ID 355,

“IT’S NOT ALWAYS ABOUT THE BIG EVENTS OR STUDENTS WITH BIG TRAUMA. IT’S THE DAY-TO-DAY EMPTYING OF MY BUCKET WITH NO ONE THERE TO FILL IT, DECREASING UNDERSTANDING AMONG ADMINISTRATORS ABOUT THIS, AS WELL AS DECREASING RESPECT FOR TEACHERS FROM THE GENERAL PUBLIC. WHEN I ACTUALLY GET TO TEACH AND HELP, I LOVE IT. THE GUILT OF NOT BEING ABLE TO DO IT ALL IS EXHAUSTING.”
References


Teater, M, and J Ludgate. 2014. Overcoming Compassion Fatigue: A Practical Guide. Eau Claire, Wis: PESI.


Figures

Figure 1

(Peters 2018, 473)