

Faculty Resilience Survey: Preliminary Findings and Recommendations

December 2020



Faculty Resilience Survey

EXECUTIVE SUMMARY

Over the last few decades, adults at school have taken on increasing responsibility for supporting students' psychological well-being, and with the pandemic, demands on faculty and staff have grown considerably. Students report that school adults have been extremely helpful to them through stressors related to COVID-19.

In this report, the focus is on the well-being of these caregiving adults themselves. Two questions are addressed. First, **what are the possible costs to caregivers personally**, as they respond with kindness and dedication to their students through the pandemic? Second, **how can schools best help to foster resilience of these adults**, through the continued stressors stemming from the pandemic?

To address these questions, we surveyed **over 4,000 faculty and staff at over 50 schools across the US**, during distance learning in the Spring of 2020, using both quantitative and qualitative questions. Results showed that rates of **clinically significant burnout** were high between April and June, with **serious emotional exhaustion at work** reported by about 20% of males and 25% of females. Major dimensions that were implicated in well-being were support received from others, concern conveyed by administrators, clarity and flexibility of work expectations, maintenance of boundaries between work and personal time, and moderation in overall caregiving burden for students and other adults at school.

We discuss specific directions for interventions related to each of these risk and protective processes, highlighting the need for ongoing support of all adults, especially those with the charge of leading and supporting the school community through the continuing, serious challenges stemming from the pandemic.

MISSION STATEMENT

At Authentic Connections, we aspire to maximize well-being and resilience in school communities through data-driven insights.



INTRODUCTION

Authentic Connections (AC) is a team of leading scientists, clinicians, and consultants committed to helping schools measure, track, and improve the well-being and resilience of all members within their school community.

AC works with schools to identify and address critical mental health concerns by providing valuable tools rooted in cutting-edge science. These include measurement based on validated surveys, interactive presentation of results, and provision of actionable school-specific recommendations for practices and policies.

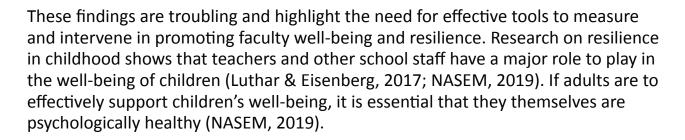
This document highlights the findings and results from the administration of the **Faculty Resilience Survey (FRS)** during Spring 2020, when schools were in distance learning due to the COVID-19 pandemic. The report begins by reviewing the current context surrounding faculty well-being and resilience. Next, it provides an overview of the scientific research underlying the **FRS**, and of the design and validation of the survey. It then presents findings from the most recent administration of the **FRS** in Spring 2020. The report concludes with a discussion of what we at AC believe schools need in order to support educators as they support students.

CHALLENGES TO FACULTY WELL-BEING AND RESILIENCE

Teaching is widely known to be a challenging– though rewarding– profession, and rates of **burnout**, **stress**, and **attrition** among teachers are high (Craig, 2017; Rajendran et al., 2020). The combination of long hours, low salaries, demanding workloads, limited resources, and inflexible policies can place educators at elevated risk for job burnout and mental health problems (Greenberg et al., 2016; Leutner et al., 2017; Luthar & Mendes, 2020; Parker et al., 2018).

Responses collected during the most recent administration of the *Teaching and Learning International Survey* in 2018 showed that on average, 49% of teachers worldwide and 52% of teachers in the United States reported experiencing *a lot* or *quite a bit* of **stress at work** (OECD, 2020). Furthermore, only 26% of teachers worldwide and 36% of teachers within the US *agreed* or *strongly agreed* that their **profession is valued by society** (OECD, 2020). Finally, 25% of teachers worldwide and 26% of teachers in the US reported the **desire to leave the teaching profession** within the next five years (OECD, 2020).





At AC, we believe that **the school adults charged with tending to children's wellbeing must receive ongoing support for their well-being** (Luthar et al., 2019a; Luthar et al., 2020; Luthar & Mendes, 2020). We are committed to helping schools **identify and mitigate stress and burnout among all caregivers** within the school community, including the teachers, coaches, counselors, administrators, and staff at school, as well as the parents and caretakers at home (Luthar et al., 2019b).

UNIQUE CHALLENGES RESULTING FROM COVID-19

The COVID-19 pandemic has resulted in increased burdens for all educators, given the unprecedented disruptions to school systems throughout the world. Data compiled by UNESCO show that over 63 million primary and secondary teachers in 194 countries have been affected by pandemic-related school closures (UNESCO, 2020; Teacher Task Force, 2020).

With the sudden shift to distance learning, educators have been faced with the additional demands of **learning to use new technologies**, **adjusting to working from home**, and **caring for children and other family members** even as they **provide vital emotional and academic support to their students** in distress. Additionally, as many schools negotiate the return to in-person learning, educators are anxious about the risk of exposure to themselves, their students, and their families, especially in cases where they are told to work despite ongoing– and sometimes growing– risk from COVID-19 (Teacher Task Force, 2020).

A recent analysis of data from interviews with primary and secondary teachers reported that teachers felt **criticized** for questioning whether resuming in-person learning was a responsible and safe decision, **scapegoated** by media and politicians for prolonged school closures and distance learning problems, and **ignored** by policymakers during discussions and decisions about school reopening (Asbury &



Kim, 2020). However, a positive outcome emerging from the interviews is that teachers felt **home-school relationships had improved** during school closures, and that they **felt more highly valued than ever before** by their own school communities (Asbury & Kim, 2020).

Research by our group has shown that as schools take on the essential work of supporting student mental health through COVID and beyond, the faculty and staff members tasked with the emotional labor will require ongoing support for *their own* mental health and well-being (Luthar & Mendes, 2020; Luthar et al., 2020). AC is committed to carefully measuring the effects of prolonged COVID-related stressors on faculty mental health, and to collaborating with schools in fostering resilience with interventions tailored to the specific needs of their own school community (Authentic Connections, 2020; Luthar & Kumar, 2020).

THE BURDEN OF CAREGIVING

Adults in K-12 education – including teachers and administrators, counselors and therapists, and other school staff – are at risk for caregiving burden, just like professionals working in health care (Luthar et al., 2017; Luthar et al., 2019b). In addition to all the support they offer to students and colleagues at work, many of these school adults also take care of others at home, including children and adult family members; this can affect them negatively.

The **burden of caregiving** refers to the **considerable psychological costs** that come from caring for the physical and mental health and well-being of others in one's everyday life. As schools prioritize **social-emotional learning** and implement **trauma-informed practices**, school adults are increasingly taking on the emotional work of supporting student mental health (Luthar & Mendes, 2020; Borntrager et al., 2012; Caringi et al., 2015; Motta, 2012; VanBergeijk & Sarmiento, 2006).

For these caregivers, the emotional labor of supporting mental health and wellbeing can be both rewarding and exhausting (Kinman et al., 2011). Research from clinical and counseling psychology has long shown that a great deal of emotional work is required to be present for and engage with a child sharing experiences of distress and trauma (Knight, 2013; Sprang et al., 2018) and over time, this responsibility can result in **compassion fatigue** (Adams et al., 2006).

THEORETICAL FRAMEWORK FOR FACULTY RESILIENCE

The Faculty Resilience Survey (FRS) stems from decades of research conducted by developmental and clinical psychologists. In 1988, Dr. Suniya S. Luthar (Professor Emerita at Columbia University Teachers College; Co-Founder & Chief Research Officer at AC) first published a paper on resilience with Dr. Edward F. Zigler (Sterling Professor Emeritus of Psychology at Yale University). Since then, Dr. Luthar has continued to conduct scientific research and has been acknowledged as one of the world's leading academic experts on resilience in children and families. AC brings sophisticated techniques for data science and analytics to a strong legacy of theory and research on resilience, spanning decades of rigorous, peer-reviewed science.

RESILIENCE AND RELATIONSHIPS

Resilience is the process of adapting well in the face of adversity or stress. Evidence accumulated has shown that **resilience among children depends on the well-being of their adult caregivers**— a group including **parental figures** and also **educators** (see Luthar et al., 2015; Luthar & Eisenberg, 2017; NASEM, 2019). In parallel, just as children's resilience rests on the quality of their relationships with close adults, these caregivers' well-being is also maximized when they have positive, supportive relationships, at work and at home.

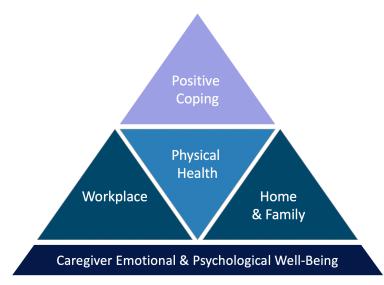


Figure 1. Protective Factors in Caregiver Resilience

Figure 1 illustrates the core components of resilience. When caregiving adults are psychologically healthy, the benefits spill over into various aspects of their everyday functioning, including the **quality of their relationships** with family members and friends and their **effectiveness at work**. They are also able to maintain **better physical health** and **positive personal coping** skills.



MENTAL HEALTH AND WELL-BEING

AC partners with schools to improve the mental health and well-being of faculty and staff by assessing **rates of clinically significant distress**, and identifying **factors likely to be major drivers of adults' well-being** within their own communities. The **FRS** measured well-being on two dimensions: **Burnout** at work and **Stress** in daily life.

BURNOUT AND STRESS

Burnout refers to a state of chronic workrelated stress characterized by exhaustion, depersonalization, and cynicism common among those in caregiving roles, including educators and healthcare providers (Maslach & Jackson, 1981; Luthar et al., 2019).

The combination of heavy planning, teaching, and grading loads with the need to balance multiple responsibilities at work and at home can increase risks for teacher burnout (Luthar & Mendes, 2020; Leutner et al., 2017; Richards et al., 2016).

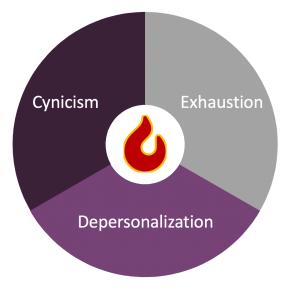


Figure 2. Components of Burnout

Recognizing these challenges, Dr. Luthar has previously developed and completed **randomized control trials of interventions designed to support the mental health of caregivers at risk for burnout**, including educators, mothers, and healthcare providers (Chesak et al., 2020; Luthar et al., 2019b; Luthar et al., 2017).

These interventions— called **Authentic Connections Groups**— were offered in both inperson and online-only formats, and demonstrate that it is possible to support caregiver resilience and mental health in a way that is beneficial, low-cost, and convenient. The **Authentic Connections Groups** program has been recommended as an evidence-based, cost-effective, community-based intervention to foster caregivers' resilience by the National Academies of Science, Engineering and Medicine (2019).

THE FACULTY RESILIENCE SURVEY

The Faculty Resilience Survey (FRS) was designed to help schools assess the impact of disruptions resulting from the COVID-19 pandemic on the well-being and mental health of school faculty and staff. The FRS was designed to be a short survey that could be completed online by school adults in approximately 10 minutes. From early April through the end of June 2020, the FRS was administered to 4,337 faculty and staff members at 55 independent (private) and public schools across the U.S.

SURVEY DESIGN AND VALIDATION

The FRS is a mixed-methods survey that includes both quantitative and open-ended questions (Luthar, Ebbert, & Kumar, in press). Quantitative items used 5-point Likert scales to measure levels of symptoms as well as risk and protective factors. Risk factors are characteristics of individuals' lives and relationships that are negatively related to resilience and well-being; examples include conflicts at home or difficulties with colleagues. Protective factors are aspects of individuals' lives and relationships that are positively associated with resilience and well-being; examples include feeling supported by family, friends, colleagues, and superiors, and having positive views of personal accomplishment and efficacy. Qualitative free-response items were designed to capture faculty and staff feelings about what was going well at their school as well as concerns and suggestions, given the new and shifting demands and expectations at school and at home.

SYMPTOMS

The FRS measured two components of mental health: Burnout and Stress.

Three subscales measured the different facets of overall **Burnout**: **Emotional Exhaustion**, **Personal Accomplishment**, and **Depersonalization**. For each subscale, five Likert-scale items asked how true a statement was on a 5-point scale (1 = not at all true, 5 = extremely true). **Stress** was assessed using five Likert-scale items that asked respondents how frequently they had experienced feeling high levels of stress over the past two weeks on a 5-point scale (0 = never, 4 = very often). Table 1 lists measures and sample survey items for each symptom of faculty and staff mental health assessed on the **FRS**.

TABLE 1. SYMPTOM MEASURES AND SAMPLE ITEMS		
COMPONENT	MEASURE	SAMPLE ITEM
	Emotional Exhaustion	I feel depleted at the end of the workday.
Burnout	Personal Accomplishment	I feel I'm making a difference in other peoples' lives through my work.
	Depersonalization	My work at school has hardened me emotionally.
Stress	Perceived Stress	During the past two weeks, how often have you felt overwhelmed by your obligations and commitments?

RISK AND PROTECTIVE FACTORS

The **FRS** used Likert-scale measures to assess four categories of risk and protective factors: **Caregiving Burden**, **Quality of Relationships**, **Concerns Heard and Supported**, and **Job Expectations and Demands**. Table 2 on page 10 lists measures and sample survey items for each of these four categories as assessed on the **FRS**.

QUALITATIVE ITEMS

The **FRS** included four open-ended free response questions designed to capture respondents' feelings and insights about issues concerning them. Using data collected during a pilot study of the free response questions, a coding taxonomy was developed in order to capture distinct themes and non-overlapping categories. The coding taxonomy was refined and validated by our team in consultation with two external reviewers. One had significant expertise in developing systems for coding qualitative data, and the other had classroom teaching certification and experience. Two team members coded all open-ended responses, and Cohen's (1960) kappa coefficients were calculated to determine levels of agreement. Kappa coefficients for the free response questions were in the substantial agreement range of 0.61–0.80 (Viera & Garett, 2005). Tables 3 and 4 on page 11 list the free response prompts and the four overarching themes on the coding taxonomy, respectively.



COMPONENT	MEASURE	SAMPLE ITEM
Caregiving Burden	Children at Home	How many children do you have currently living at home?
	Help with Caregiving	Is there someone who takes care of them while you teach or have to do school-related work?
	Caregiving for Others	Please indicate whether you have significant responsibility for taking care of anyone else, who is not currently living with you.
	Support Requested	Are students sharing their feelings of distress with you (e.g., worry, sadness, fear)?
Quality of Relationships	Administrator Communications	How satisfied are you with the frequency of communications from administrators?
	Faculty & Staff Meetings	How satisfied are you with the regularity of faculty meetings?
	Colleague Connections	In the last week, how many times have you talked with any colleagues from school, by phone or video chat?
	Family & Friends	In the last week, how many times have you visited with personal friends or family on the phone or by video chat?
Concerns Heard	Support Received	Is there someone, currently, with whom you can comfortably share your innermost hurts, wishes, and fears?
and Supported	Concerns Heard	I feel like administrators are doing something about my concerns about school.
Job Expectations and Demands	Clear Expectations	Have administrators clearly conveyed changes in goals/expectations the amount of new material your students are expected to learn each week?
	Reasonable Expectations	Do you feel that your administrators' goals/expectations are generally reasonable in the amount of homework / assignments your students are expected to complete?
	Structure of Schedule	Does your day follow a set schedule with specific time set aside for you to relax/have fun?
	Teaching Efficacy	Do you feel you have all the resources and tools that you need to complete your teaching from home?

TABLE 2. RISK AND PROTECTIVE COMPONENTS, MEASURES, AND SAMPLE ITEMS

TABLE 3. FRS FREE RESPONSE PROMPTS	TABLE 4. THEMES IN CODING TAXONOMY	
These days, what are you most worried about?	Academic Delivery	Academic schedule, delivery, and student performance
In thinking about your school experience, what could your administrators/colleagues be doing to improve things for you?	Job Expectations	Amount of work and clarity of expectations
What are things that your school is doing well to support your overall school experience and well-being?	Support / Interpersonal	Personal connections, student emotional concerns, and connections with those at school
Anything else you'd like to share?	Well-Being	Personal physical and mental well- being, as well as well-being of friends, family, and others

The four overarching categories contained several clearly defined sub-categories. If responses mentioned multiple discrete themes, they were recorded within each of the categories referenced. Table 5 lists sub-categories within each theme.

TABLE 5. CODING TAXONOMY SUB-CATEGORIES BY THEME		
Academic Delivery	Structure / Schedule	Teaching Efficacy
	Technology Resources	Student Performance
	Extra Academic Support	Ethics / Cheating
Job Expectations	Professional Development	Clarity / Flexibility of Expectations
	Faculty Workload	
Support / Interpersonal	Student Peer Interactions	Flexibility with Students
	Student Emotional Support	Targeting Vulnerable Students
	Colleague Connection	Administration Concern / Support
	Activities, Athletics, Events	
Well-Being	Personal Well-Being	Others' Well-Being
	Home Life / Family	COVID-19 Health
	Personal Finances	Economy
	Future Uncertainty	

ASSESSMENT AND REPORTING

Interactive dashboards were created to present quantitative and qualitative findings to each participating school. The dashboards allowed school leaders to view salient findings for the school overall, and also separately for subgroups based on gender, ethnicity, role at school, and division (grades taught). The dashboards also allowed administrators to compare findings for their school to national norms based on AC's data from over 4,000 school faculty and staff across the U.S. who had completed the FRS during distance learning between April and June of 2020.

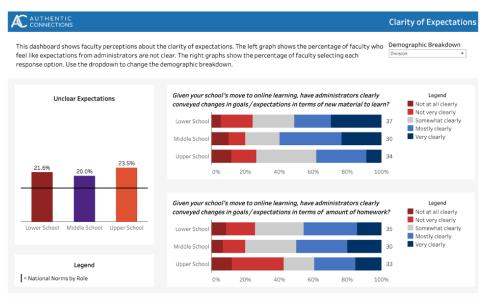


Figure 3. Sample dashboard.

THE 2019–2020 FACULTY RESILIENCE SURVEY

PARTICIPANTS AND METHODOLOGY

The analyses presented in this document are based on a sample of **4,356 faculty & staff** members at **55 schools** across the U.S. who completed the **FRS** between April-June of the 2019-2020 academic year. The **FRS** was administered virtually during regular school hours by school officials following the move to distance learning. School leaders obtained consent from respondents, giving them the option to decline to participate and assuring them of their confidentiality and anonymity.



Across all schools, 69% of respondents were female (n = 2,971), 29% were male (n = 1,268), and 0.3% identified as non-binary (n = 13). Because there are so few nonbinary respondents in the sample, they are excluded from the results reported here. Of the sample, 83% identified as Caucasian/White (n = 3,604), 5% as Latinx/Hispanic (n = 204), 4% as African American/Black (n = 177), 4% as Biracial/Multiracial (n = 165), 4% as Asian/Asian American/Pacific Islander (n = 160), 0.5% as Middle Eastern (n = 21), and 0.1% as American Indian/Native American (n = 4). In the interest of brevity, henceforth, the first five groups (with numbers large enough to make generalizations) are referred to as White, Hispanic, Black, Asian, and Multiracial.

TABLE 6. PARTI	CIPANTS BY ROLE	E(S) AT SCHOOL
Role(s) at School	N	Percent of Respondents
Teacher	3,243	74.8%
Coach	786	18.1%
Counselor	263	6.1%
Administrator	765	17.6%
Other	636	14.7%

The FRS asked individuals about their roles at school, allowing them to choose multiple options if applicable (e.g., Teacher and Coach). As shown in Table 6, most respondents indicated they were Teachers, followed by Coaches and Administrators.

RESULTS AND FINDINGS

SYMPTOMS

Analyses of the 2019-2020 **FRS** data showed that, across all schools, several faculty and staff reported experiencing clinically significant levels (i.e., levels that warrant clinical attention) of **Burnout** (measured by the **Emotional Exhaustion** subscale) and of **Stress**. On the two other subscales of **Burnout** (Depersonalization and Personal Failure), there were no respondents who reported levels that fell in the clinically significant range, so these are not discussed further in this paper. Figure 4 illustrates the percentage of faculty and staff with severe symptoms by role.

Across all roles, rates of **Burnout** were considerably higher than rates of **Stress**. Rates of clinically significant **Burnout (Emotional Exhaustion)** ranged from 21% to 30%, and were highest among teachers. Rates of clinically significant **Stress** were also highest among teachers, ranging from 10% to 16%. For both **Burnout** and **Stress**, statistical



tests showed that symptom rates differed significantly by role. Subsequent analyses further explored which other subgroups at school (besides those defined by role) might be especially vulnerable to distress, beginning with consideration of rates separately by gender and by ethnicity. Figures 5 and 6 show rates of clinically significant symptoms, by gender and ethnicity, respectively.

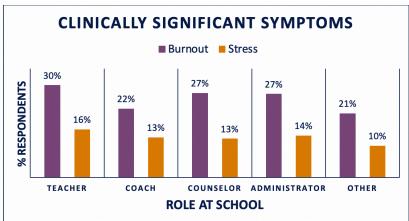
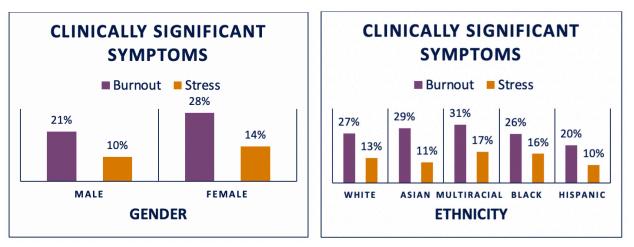


Figure 4. Percentage of Faculty & Staff Reporting Clinically Significant Symptoms by Role



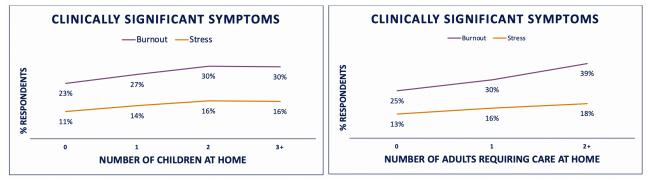
Figures 5 & 6. Clinically Significant Symptoms by Gender & Ethnicity

As shown in Figure 5, females had higher rates of severe **Burnout** and **Stress** than did males. Considering patterns by ethnicity (Fig. 6), **Burnout** was highest among Multiracial and Asian individuals, and **Stress** was highest among Multiracial and Black individuals. In all cases, group comparisons were statistically significant.

To examine serious symptoms relative to family roles outside of school, analyses considered caregiving burden in terms of both the number of children and also the number of adults cared for by the respondents. Results were consistent with the literature on caregiving burden. As the number of children and adult family



members requiring care increased, rates of serious **Burnout** and **Stress** increased, as shown in Figures 7 and 8. Again, all comparisons were statistically significant.



Figures 7 and 8. Percentage Reporting Clinically Significant Symptoms by Childcare and Adult Caregiving Responsibility

RISK AND PROTECTIVE FACTORS PREDICTING BURNOUT

Next, multivariate analyses considered all of the risk and protective factors assessed to address this question: When all of the variables measured are considered simultaneously, which ones are most strongly related to staff and faculty wellbeing? In other words, which modifiable aspects of their lives were most linked with high levels of **Burnout** at work?

The analyses focused on **Burnout** specifically in relation to work, since one of AC's overarching aims is to provide school leadership and administration with immediate, practical, and actionable steps they can take to improve the mental health and wellbeing of faculty and staff. Results of the statistical analyses revealed that the three key variables that most strongly predicted high symptoms of **Burnout** were **low levels of Feeling Heard**, **low Structure of Days**, and **high levels of Support Requested**.

Feeling Heard

The variable **Feeling Heard** was based on two questions: "In general, I feel like administrators are listening to my concerns about school" and "I feel like administrators are doing something about my concerns." Figures 9-11 show the percentages of faculty and staff who *disagreed* or *strongly disagreed* with each statement, considered separately by role, gender, and ethnicity.

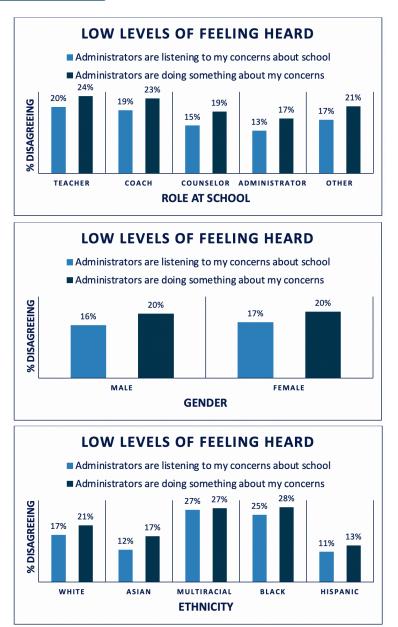




Figure 10. Percentage Reporting Low Levels of Feeling Heard by Gender



As shown in Figure 9, teachers were most likely to report feeling that their concerns were not being heard or addressed at school. The most positive responses (lowest percentages of feeling unheard) were generally from counselors and administrators.

As shown in Figure 10, low levels of **Feeling Heard** were more common among females than males. Across different ethnic groups (Figure 11), low levels of **Feeling Heard** were reported most often by Black and Multiracial respondents, and least often by Hispanic and Asian respondents.

Structure of Days

The second key predictor of **Burnout** was low **Structure of Days**. Respondents were asked whether they had specific times in their day for teaching/schoolwork and also for relaxing/having fun. Figure 12 shows the percentage of faculty who reported *low* or *very low* structure in their daily routines at home. The highest rates of lack of structure were among administrators and coaches.

Aside from role at school, it would make sense that low boundaries between work and home time would have been more difficult for individuals with caregiving responsibilities at home. In fact, analyses showed that as the number of children requiring care at home increased, faculty and staff reported less structure in their day (however, differences by number of adults cared for were not statistically significant).

Support Requested

The third major predictor variable linked with **Burnout** was high level of **Support Requested**. Three items asked faculty how frequently students, parents, and colleagues shared feelings of distress; results reported here are based on average scores across the three items. As shown in Figure 14, levels of **Support Requested** were highest among counselors, followed by administrators and teachers.

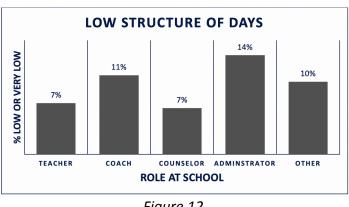
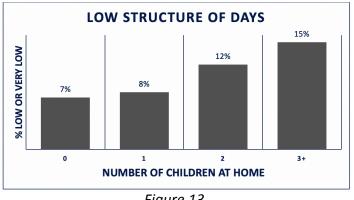
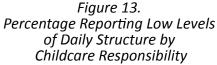


Figure 12. Percentage Reporting Low Levels of Daily Structure by Role





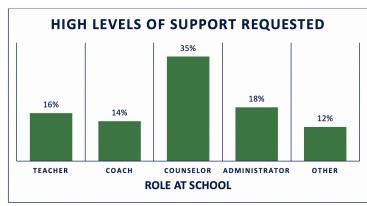
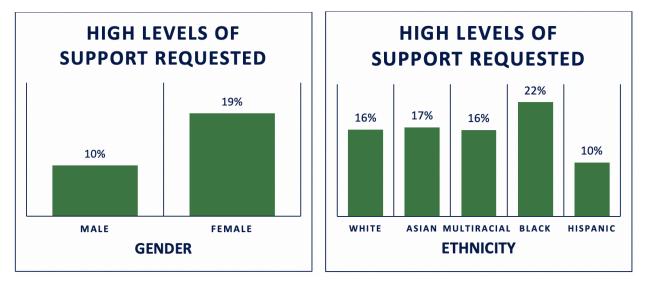


Figure 14. Percentage Reporting High Levels of Support Requested by Role

Figures 15 and 16 show the percentages of faculty reporting high levels of support requested by gender and by ethnicity.

Females indicated higher levels of support requested than males. Black respondents reported higher levels of support requested than other ethnicity groups.



Figures 15 & 16. Percentage Reporting High Levels of Support Requested by Gender & Ethnicity.

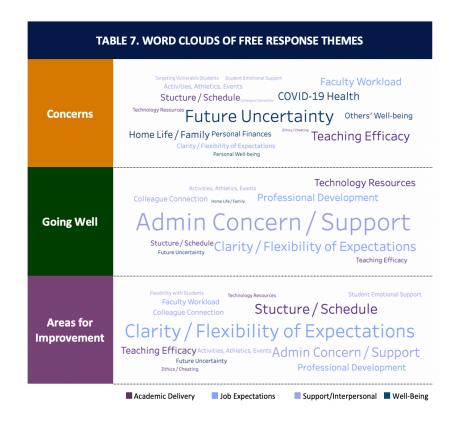
QUALITATIVE RESPONSES

Having considered results from the quantitative assessments in some depth, the next section of this report presents insights obtained from the three open-ended questions. The questions asked what individuals were most concerned about, what was going particularly well in their school community, and what they felt most needed improvement at their school. Table 6 presents selected faculty responses to the free response questions.

TABLE 6. EXCERPTED FACULTY RESPONSES TO FREE RESPONSE QUESTIONS

Concorne	"I am worried about the present the state of the world. I am also afraid for the future I just don't know how this will end."
Concerns	"I'm worried about children being carriers with no symptoms. I'm on the older end. I'm also worried about job security."
Going Well	"LOTS of tech support! Positive affirmations from
	Administration. Small giftsvery appreciated."
	"Keeping a positive attitude about everything, keeping us
	informed, and doing all they can to keep things semi-normal."
	"I don't know that they can do anything to help. There is too
	much time spent in logistics and parent communication than
	the actual lessons. It is hard to accommodate each familyno
	matter what is done, it doesn't please everyone. Sometimes we
Areas for	overburden ourselves trying to do that."
Improvement	"I'm not sure there is much they can do. I feel disconnected. I
	used to simply walk into an administrator's office or share my
	thoughts in the faculty lounge or go find a colleague in their
	classroom. In our current situation, I feel like my input isn't very
	important. I don't know that there is a resolution though."

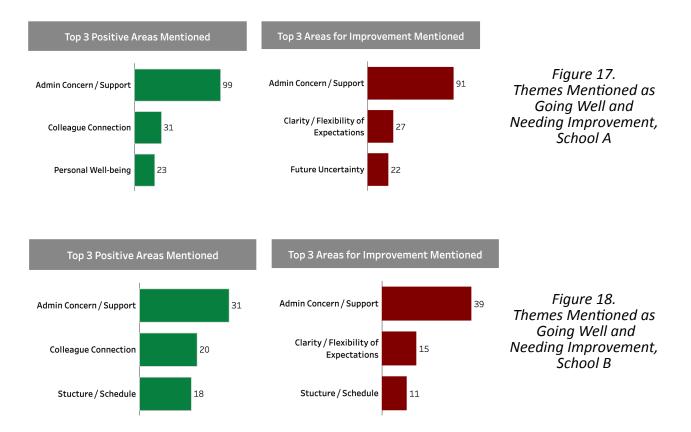
The major themes mentioned in response to the open-ended prompts fell into four groups: **Academic Delivery, Job Expectations, Support/Interpersonal**, and **Well-Being**. The different categories mentioned within each theme are shown in Table 7. In each word cloud, the size of the font indicates the frequency with which that topic was mentioned (i.e., the larger the word, the more often the topic was mentioned).





As shown in Table 7, by far the most commonly mentioned category under **Concerns**, across all schools assessed, was **Future Uncertainty**. Following this, major concerns pertained to **COVID-19**, **Concerns About Family**, **Teaching Efficacy**, **Personal Finances**, and **Lack of Structure/Schedule**. In response to the question on what was **Going Well**, most often mentioned was **Administrators' Concern and Support** for faculty and staff. Also commonly noted were **Clarity and Flexibility of Expectations** and opportunities for **Professional Development**. Interestingly, these **same top two themes were most often mentioned in response to what most needed improvement**. Across different schools assessed, there were differences in the relative proportions of people who mentioned the same issue as a positive (going well), as opposed to those who said it was something that needed improvement.

Results from two illustrative schools are shown in Figures 17 and 18. As shown, the proportion of positive to negative mentions for **Administrators' Concern and Support** were 99 to 91 people in the first case, and 31 to 39 respondents in the second. Considered in response to both these questions, it is clear that these issues were top of mind among faculty and staff, and thus need focused attention as COVID continues.





CONCLUSIONS AND RECOMMENDATIONS

Results of this study of over 4,000 school adults showed that rates of clinically significant **Burnout** were high during the first three months of the pandemic, at about 1 in 5 for males and over 1 in 4 among females. While all schools are unique, some general findings and recommendations emerged based on risk and protective processes that were most strongly linked with **Burnout**.

Quantitative analyses pointed to two broad themes, one pertaining to work issues and the other encompassing various aspects of relationships. The top three predictors for both **Burnout** and **Stress** included **structure of days**; faculty and staff did much better when there was a **relatively clear demarcation of hours for work** as opposed to personal time, during weekdays and weekends. The other three variables that emerged as important in quantitative analyses all had to do with **interpersonal support**. **Burnout** tended to be lowest among those who felt that that their **concerns were being heard and attended to** by the administration. Conversely, at greatest risk were individuals who felt that there was a **high amount of support requested** from them in the work setting, those who felt that **they themselves received low support** (in personal or professional life), and those who were **dissatisfied with how often they were connecting** with friends, family, and colleagues. In short, the findings indicated the need for these adults to be replenished themselves, in informal social gatherings, and in smaller support groups where they could share their concerns.

Responses to open-ended questions conveyed the same general messages as seen in the quantitative analyses. **Clarity and flexibility of expectations** was a common theme in open-ended responses, as was **concern and support from administrators**. Both topics were mentioned frequently in response to what was going well, and also in response to major areas that individuals felt needed to be improved; they were clearly of central importance during the first few months of the pandemic.

Who Among Faculty and Staff are Most Vulnerable to Burnout?

In terms of demographic subgroups that were especially vulnerable to **Burnout** and **Stress**, the findings pointed to faculty and staff who were **caregivers at home**—taking care of children or other adults. Considered by role, across all schools assessed, **counselors** most often reported high levels of support requested of them from students, parents, and colleagues at work, and were most likely to report low support received overall. **Teachers** were the highest on serious **Burnout** and **Stress**,





and most often felt that their concerns were not being heard or acted upon by leadership. Administrators had the lowest levels of structure to their days. By gender, women clearly had higher Burnout and Stress and great demands in terms of support requested. Considered by ethnicity, there were variations across groups depending on the domain assessed. A couple of striking findings, however, were that Multiracial respondents stood out as having low support received, and Black respondents stood out as having high levels of support requested (note that the timespan of surveys described here included the murder of George Floyd, Breonna Taylor, and others, and the national unrest that followed).

What are the Central Priorities for Enhancing Resilience at School?

Considering all quantitative and qualitative data and AC's interactions with over 50 schools, five broad features characterized those schools that demonstrated resilience in the face of the pandemic. These schools practiced **clear and consistent communication** about work, with **flexibility of expectations** built in; they fostered a **strong sense of community** and clearly **prioritized mental health of adults** as well as students; and leadership **frequently sought and addressed feedback** on major areas of concern among faculty and staff. Looking ahead to the summer and fall, they were already prioritizing next steps derived from the data, focusing on issues and subgroups most in need of support within their own schools. In the months ahead, it will be essential for leaders to prioritize addressing these five themes toward fostering resilience (Kumar & Luthar, 2020).

As we have learned more about these issues at Authentic Connections, we have compiled a list of recommendations for schools who are looking to promote resilience among faculty and staff based on research conducted during the pandemic. Table 8 presents each of the major areas that have been highlighted as needing attention. Along with each of these, we summarize some actionable steps that can be taken to address each of the major themes discussed.

How Can Schools Support the Well-Being of Adults at All Levels?

As all of these findings and recommendations are considered, it is critical to recognize that some of what is called for will be emotionally challenging, and will **require ongoing support for all adults at school** – **including those ultimately responsible for community well-being**. Science has clearly shown that it is impossible for anyone to



effectively foster the well-being of many others under high stress if they are not replenished themselves (NASEM, 2019). Our own findings during the pandemic underscore the urgency of this issue. As we have engaged in conversation with individual schools about their particular findings, we have learned about multiple strains these "caregiving adults" are experiencing through COVID. Besides decisions about modifying academic curricula and grading policies, they are dealing with shifting decisions around instruction in-

TABLE 8. EXAMPLES OF ACTIONABLE NEXT STEPS BASED ON FRS FINDINGS	
Communication	As a department faculty, proactively define changed expectations (given challenges of the pandemic) with regard to curriculum content, expectations for mastery in a course, and workload for assignments.
Flexibility	Have ongoing communication from leadership about changes made, and those anticipated, in accommodating to shifting needs and challenges in the community. Get a team of volunteers to help ensure ongoing updates.
Community Cohesiveness	Schedule times for faculty and staff to connect socially e.g., coffee hours or happy hours. Have folks bring ideas for 'fun Zoom activities' that have worked well with others.
	Have faculty / staff offer weekly lessons to interested others, e.g., baking, yoga exercises, mindfulness, refinishing furniture, knitting.
Mental Health	Ensure support especially for those who are the 'mental health pillars' of the community – adults to whom colleagues, students, and parents bring their distress.
	Designate 'no email' times for evenings and weekends.
Feedback	Regularly reach out to school adults to assess their own well-being; they very much appreciate being asked! Consider what they say about what's going well at school and what they want improved and bring back your proposed action steps, so they feel heard.
	Maintain ongoing assessments as COVID-related stressors continue to present shifting sets of challenges for school communities, locally as well as nationally.

person, virtually, and in hybrid format. There are complex decisions to be made and enforced around masks, social distancing, sanitizing, and contact tracing. Whichever decisions they make, the result is that some subgroup of people becomes angry. There are concerns about declining enrollments as parents consider home-schooling, and concerns about faculty turnover. Following divisive events nationally, there can be rancor among students and adults. As we see in the findings here, faculty and staff burnout is high and rising, and the entire school adult community wants support from administrators.

Given the many complex issues described, two interventions are essential from the standpoint of community well-being (apart from financial aid where feasible). The first is that divisiveness among adults must be directly addressed and contained, and the second is that there must be institutional psychological support to reduce **burnout**. On the former issue, it can be helpful for school communities to involve experts who are trained to build community cohesiveness and empathy for others,



and to minimize reduce divisiveness due to discrimination, racism, blaming, and bullying. On the second issue, it is essential to **provide support programs within school communities**, rather than urging greater "self-care" (to a group already exhausted). Models of programs implemented within institutions can be seen in the Authentic Connections Groups program designed to reduce burnout among physicians and educators (Luthar et al., 2017; 2019; NASEM, 2019). On at least a weekly basis, school-based adults must be able to share their concerns – personal and professional – in regular small group meetings, and where necessary or appropriate, in the form of individual consultation. With confidentiality assured, such services must be available for adults in all roles, including teaching and non-teaching staff, as well as people in positions of leadership.

CONCLUSION

Looking ahead, we at Authentic Connections remain committed to maintaining the highest rigor of science in learning about how communities can best foster resilience. Based on data from over 75 schools assessed in the Spring of 2020, our team has worked to refine our Faculty Resilience Survey (FRS) and the companion Student Resilience Survey (SRS) for middle and high school students. We also refined the High Achieving Schools Survey (HASS) to incorporate questions that are responsive to recent times, spanning issues of diversity, equity, and inclusion as well as social justice. Given needs directly expressed by schools, we designed and pilot tested the Children's Resilience Survey (CRS) for younger students in grades 2-5, as well as the Parent Resilience Survey (PRS) for parents and families. Thus, as the strains from the pandemic continue, schools will now be able to get a comprehensive view of functioning across children and adults in their communities.

In conclusion, the AC team looks forward to continued collaborations in maximizing the well-being of all school community members, using rigorous research tools to provide actionable school-specific recommendations about practices and policies that address major needs. We are extremely grateful to our partner schools for joining with us in this crucial work to foster resilience among children through the stressors of COVID, while, at the same time, actively promoting positive well-being among all those adults who provide students with critical ongoing support.

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For schools interested in partnering with us, we would be happy to conduct a resilience survey for your students, faculty/staff, or parents, along with an interactive report of findings and at no charge. Please contact us at AC@AuthConn.com.

