Educator Understandings of Wellness: Barriers and Supports in Northern Alberta First Nations Schools

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School communities thrive when educators actively foster wellness. Educators working in First Nations communities conceptualize wellness in unique ways and are active agents in creating opportunities to meet their own wellness needs. This research explores conceptions, supports, and challenges related to wellness from the perspectives of teachers and educational assistants from three First Nation schools in northern Alberta. This qualitative case study includes interviews with 19 educators, and preliminary understandings revealed that educators situate their own wellness within the context of the school and larger community. They prioritize physical wellness and understand that emotional and psychological wellness are also often important. Finally, factors such as isolation, land, access, distance, and cost are seen as barriers to wellness by many. These same factors also represent opportunities to engage in wellness in ways that are less accessible to educators working and living in urban centers. We conclude that attention must be paid to the unique educator wellness needs in First Nations community schools as wellness-promoting initiatives are explored.

Les communautés scolaires s'épanouissent lorsque les éducateurs favorisent activement le bienêtre. Les éducateurs travaillant dans les communautés des Premières nations conceptualisent le bienêtre de façon unique et sont des agents actifs dans la création d'occasions pour répondre à leurs propres besoins en matière de bienêtre. Cette recherche explore les conceptions, les soutiens et les défis liés au bienêtre du point de vue des enseignants et des assistants pédagogiques de trois écoles des Premières nations du nord de l'Alberta. Cette étude de cas qualitative comprend des entrevues avec 19 éducateurs, et les résultats préliminaires révèlent que les éducateurs situent leur propre bienêtre dans le contexte de l'école et de la communauté dans son ensemble. Ils accordent la priorité au bienêtre physique et comprennent que le bienêtre émotionnel et le bienêtre psychologique sont aussi souvent importants. Enfin, des facteurs tels que l'isolement, le territoire, l'accès, la distance et le coût sont considérés par beaucoup comme des obstacles au bienêtre. Ces mêmes facteurs représentent également des occasions de s'engager dans le bienêtre d'une manière qui est moins accessible aux éducateurs travaillant et vivant dans les centres urbains. Nous concluons qu'il faut prêter attention aux besoins uniques des éducateurs en matière de bienêtre dans les écoles communautaires des Premières nations lors de l'exploration d'initiatives de promotion du bienêtre.

The wellness of Canadian educators is a rising concern across the country as work intensification builds, student needs soar, and the demands of education systems increase (Duxbury & Higgins, 2013; Froese-Germain, 2014; Wotherspoon, 2008). This concern is amplified for educators in Alberta, specifically those in First Nation schools, because there are additional expectations related to inclusive pedagogical practices, adjusting to northern living, relationship building expectations, and cross-cultural teaching (Alberta Education, 2020; Alberta Learning, 2002; Harper, 2020; Oskineegish & Berger, 2013). The added work-related expectations of First Nations school educators are responsive to additional policy mandates that prioritize the learning experiences and achievements of First Nations students (Assembly of First Nations, 2012; Auditor General of Canada, 2000; Canadian Council on Learning, 2009; Richards, 2008; Richards & Scott, 2009). In the Indigenous context of Canada, much of the educational work has focused on curriculum, culturally responsive programming, student engagement, workload, work intensification, teachers' roles, and the demands of practice (Battiste, 2000; Battiste & Barman, 1995; Cherubini, 2014; Oskineegish & Berger, 2013; Shockey, 2003; Toulouse, 2016; Wimmer et al., 2009; Wotherspoon, 2006, 2008). Additionally, existing literature shows a strong relationship between teaching effectiveness and student success (Chell et al., 2009; Darling-Hammond, 2000; Rowe, 2007), with this relationship being compounded for educators and students in First Nation schools (Association of Canadian Deans of Education, 2010).

Educators are at high risk for work life imbalance, compromised wellbeing, and, generally, negative impacts on educator wellness (Duxbury & Higgins, 2013; Froese-Germain, 2014). Despite the mounting demands and pressures on educators, the exploration of wellness implications for educators in relation to their work with students in First Nation schools remains largely absent in the literature. Thus, further exploration is needed to understand educator wellness and to identify barriers and supports, particularly, in northern First Nations schools where several other unique factors of access, housing, and geography can compromise resiliency and challenge the work of educators (Burleigh, 2020). This research seeks to address a gap in the literature by emphasizing the underrepresented perspectives of First Nations school educators on wellness.

The Global Wellness Institute (n.d.) defines *wellness* as "the active pursuit of activities, choices, and lifestyles that lead to a state of holistic health" (para. 2). Although related constructs like happiness and wellbeing can be conceptualized as states of being to be achieved, wellness is having intentions, making choices, and engaging in actions that work toward an optimal state of holistic health (Global Wellness Institute, n.d.; Rachele et al., 2013). Scholars agree on several key facets of wellness: it requires balance across multiple dimensions (Diener et al., 2018; Martela & Sheldon, 2019), it involves integration, and it is holistic (Crowe, 2020; Oliver et al., 2018; Rachele et al., 2013). Additionally, studies have found that wholeness and balance are central to Indigenous conceptions of wellness, adding that cultural interconnectedness is also important (Gould et al., 2020; Kading et al., 2019). Throughout this article we use the term wellness because wellness has been understood to be active, multi-dimensional, and influenced by context. This understanding aligns most strongly with the research context as well as the perspectives of participants.

Educators working in northern communities often encounter unique challenges related to wellness. Distance from wellness-promoting resources, such as fitness facilities and equipment, food, and the availability of those resources can have a significant impact on educators and the communities. This results often in high attrition rates, particularly for new teachers. First Nations communities have long known that teacher retention is fundamental to creating schools that foster student success (Anderson et al., 2004; Burleigh, 2016; Wotherspoon, 2006). Teachers are often viewed as the nexus where policy, curriculum, relationships, and sites of intensification converge. The wellness of educators is therefore paramount.

Situating the Research Problem

Although strong connections in the literature are made about wellness and the teaching profession in general, understanding how educators in northern First Nations school settings negotiate and cope with wellness concerns has yet to be deeply explored. Educator wellness is an important element in the development and maintenance of successful school communities. This is especially true for educators working in First Nation communities who often encounter unique challenges related to wellness. Specifically, the historical and contemporary impacts of colonization, poverty, and the ongoing systemic oppression of First Nations education (Battiste, 2000; Battiste & Barman, 1995) can compound wellness needs and amplify the necessity for support. Distance from wellness-promoting resources and the availability of those resources can have an important impact on educators and the communities with which they teach. This often results in high levels of stress, high attrition rates, and early burnout, particularly for new teachers (Anderson et al., 2004; Burleigh, 2016; Wotherspoon, 2006).

The Research Questions

The overarching research question asks, how do educators in northern Alberta First Nations schools experience and understand wellness? And, more specifically, we ask, how do educators, in northern Alberta First Nations schools, define wellness? What are educators in northern Alberta First Nations schools' perceptions of supports and barriers to wellness? Considering educator experiences and understandings of wellness, how could wellness-promoting initiatives be designed to meet educator needs?

Purposes and Objectives

The purpose of this inquiry is to explore and better understand the contextual elements that influence educator wellness in northern Alberta First Nations schools with an aim of identifying targeted approaches to enhance and support wellness-promoting initiatives. Specifically, the primary objectives of this research are to a) understand how educators conceive of wellness, b) isolate existing supports and barriers, and c) identify targeted approaches to enhance and support wellness-promoting initiatives that meet educator needs.

The Research Site: KTCEA

The Kee Tas Kee Now Tribal Council Education Authority (KTCEA) was established in 2017 and is one of the initial First Nations Education Authorities in Canada. The Kee Tas Kee Now Tribal Council includes a group of First Nations in northern Alberta, located approximately 500 kilometers north of Edmonton. KTCEA believes that excellence in First Nations-based student education is the basis for Indigenous Canadians to achieve success and that teachers are the core of excellence in education. Committed to addressing the unique physical, mental, social, and spiritual wellness needs of teachers, KTCEA has expressed commitment to partnering with researchers in education and counselling psychology. A partnership was established with an aim to understand better the meaning of wellness to educators and to identify methods to improve wellness.

Researchers in Relationship

As settler and Indigenous researchers, we value the opportunity to position ourselves within this inquiry as a means of outlining who we are in relation to the research. Not only is this an opportunity that we welcome but we feel it is necessary to ensure we communicate our relational approaches alongside principles of ownership, control, access, and possession (First Nations Information Governance Centre, 2014), and the ethical considerations outlined in Chapter 9 of the Tri-Council Policy Statement (Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council, 2018). Daphne Mai'Stoina is the Superintendent of the Kee Tas Kee Now Tribal Council Education Authority and is originally from Siksika Nation and has strong cultural ties with Siksika traditions. She has been in the education system for 34 years serving in various capacities such as a special education teacher, vice principal, acting principal and assistant superintendent, superintendent, and province-wide Special Education Director. Dawn, a settler, spent the first three years of her teaching career as a high school teacher in a Cree community in Ontario on the coast of James Bay and subsequently completed her PhD work with a focus on the work of teachers in northern First Nations communities. Elaine, also a settler, spent considerable time working in First Nations communities in Alberta's north alongside educators, families, and the community as a psychologist.

This project emerged out of a relationship between one of the primary researchers and the schools in the KTCEA. The researcher was originally contracted to work at the schools as a psychologist and the relationships that developed from that work led to mutual conversations regarding educator wellness. When KTCEA was established in 2017, these conversations continued and led to the identification of a need for KTCEA to better understand the perceptions of teachers regarding wellness. In the spirit of partnership and principles of ownership, control, access, and possession (First Nations Information Governance Centre, 2014) the primary researchers were invited to suggest an approach to research that may help to answer the primary research questions. As a partner in this work, KTCEA facilitated opportunities for the researchers to visit the school sites, meet with school-based leadership, and interview educators. An executive summary was shared with KTCEA, who also considered the findings in the development of their professional development plan, related to educator wellness, in 2018.

Case Study and Interviews

To address the research questions above it was necessary to ensure that a methodological framework was in place to allow for a deep and rich exploratory look into the wellness of educators. To achieve this depth, we adopted a case study approach (Merriam, 1998). Case study research has made significant contributions to the field of education and was employed for this research because our interest was in discovering the context of the educator experiences related to wellness rather than a specific variable. Using a case study approach for this research affords transferability to connect with broader provincial and national discourses about wellness, educators work, and Indigenous education. Additionally, a case study approach allows for a

bounded exploration of one education authority. This provided an opportunity to deeply understand contextual variables like proximity to supporting resources, food insecurity, and community supports that were uniquely specific to the educators involved.

Individual semi-structured interviews (Merriam, 1998) were the primary method of data collection because the aim was to generate deep insight, offer space for participant voice and experience, and provide flexibility to deviate from a structured sequence of questions. To ensure a conversational tone while still maintaining a focus on the essential research questions, an interview guide was used. Questions such as "what does wellness mean to you," "what barriers to your wellness do you experience," and "what supports for your wellness can you identify" were utilized in the guide as open-ended questions to allow for participants to explain experiences in ways other tools could not afford (Creswell & Guetterman, 2019). Although the results include summaries of the themes in the participant responses, the semi-structured nature of the interviews also allowed for participants to share what was most important to them about their experiences regarding wellness, even if it was not specifically prompted by one of the questions noted in the interview guide. This study was approved by the University of Lethbridge Human Subjects Research Committee.

Participants

Data was collected from teachers and educational assistants working in three schools in three different First Nations communities in one Education Authority in Northern Alberta. Interviews were conducted with 15 teachers and four educational assistants in March 2018. The participants were diverse and included both Indigenous and non-Indigenous teachers and educational assistants. To ensure full anonymity and maximize confidentiality we did not collect additional demographic information.

Data Analysis and Interpretation Strategies

To analyze the semi-structured interviews, a thematic qualitative analysis was undertaken, with an aim of generating trustworthy and insightful findings. Thematic analysis is a method for identifying, analyzing, organizing, describing, and reporting themes found within a data set (Braun & Clarke, 2006). Specifically, we utilized the six-step method proposed by Braun and Clark (2006), which included the following:

- 1. Familiarizing with the data through reading and rereading them.
- 2. Generating initial codes related to interesting features in a systemic fashion.
- 3. Searching for themes by ordering codes into potential themes.
- 4. Reviewing themes by checking functionality of the themes through developing a thematic map.
- 5. Refinement and naming of themes.
- 6. Producing the report as the final opportunity for analysis.

This six-step method of data analysis generated trustworthy findings that afforded clarity in answering the research questions posed.

When using the six-step method proposed by Braun and Clark (2006) for thematic analysis,

is it important to clarify that a theme is a construct that "captures something important about the data in relation to the research question and represents some level of patterned response or meaning within the data set" (Braun & Clarke, 2006, p. 82). The themes were generated by ordering and categorizing the codes. The codes were developed in a framework directly related to the overall and specific research questions. Hierarchical coding afforded the opportunity to analyze texts with varying degrees of specificity, capture the richness in the data, and allowed for distinction to be made both within and between codes (King, 2004). Reviewing and defining themes was an iterative process that required the researchers to assume a reflective position, invest significant time, and engage in ongoing discussion, diagramming, and note taking (Nowell et al., 2017). Ultimately, the codes and generated themes are represented as the results of this research.

Educators Defining Wellness: Balanced and Interrelated

Although academic and grey literature define wellness in various ways (Diener et al., 2018; Martela & Sheldon, 2019; Rachele et al., 2013), we have asked, as a central question in this research, how educators define wellness. As such, it is vitally important that the participant's conceptions of wellness be explored and privileged. In the spirit of reciprocity and relevance, to develop and support wellness-promoting initiatives that are responsive to educator needs, the conceptions of wellness for these specific educators are necessary and foundational building blocks of understanding. Participant conceptions of wellness as both balanced and interrelated will be explored in addition to the wellness supports and barriers identified by the educators.

Wellness as Balance

Balance was a key concept for all educators that was emphasized repeatedly, but further details about the factors requiring balance were unique and specific to each individual. Educators commented generally that "balance between work and your social life and your health and the financial too—that is wellness," "it's taking care of my body and my spirit," and "wellness is mental health and physical health and psychological health." Most often included by participants were physical elements of wellness such as healthy food choices, and access to exercise spaces and equipment. In terms of mental or psychological wellness, educators emphasized the importance of managing stress levels, connecting with people, and feeling content or happy. However, when educators were prompted to elaborate on their label of mental or psychological wellness, they often provided more detail and picked apart connections to spiritual wellness, social belonging, financial wellness, job security, and a sense of purpose. In addition, cultural and spiritual connection was evident in the conceptions of wellness for some educators. Elements of holism, relationality, and faith-based practices were identified as being central to how some educators understood and explained their conception of wellness. For example, one participant explained that,

Because I'm First Nations, I've been taught the balance system. When I say balance, it's taking care of your mental self, your emotional self, physical self, and spiritual self. So because that was engrained in me, rooted in me as a child and that's just the normal thing for me and I've applied it across everything that I do and it helps me. You can't be well if you are not balanced.

Balance was seen as integral to wellness for all educators. Specifically, for Indigenous educators, the elements of their culture relating to their mental, emotional, physical, and spiritual wellness were emphasized as essential building blocks for their wellness.

We need cultural programs because, through cultural programs, the roles are defined and respected. It's not, 'oh jeez, how come the girls have to do this?' It's not anything like that. Cultural roles, you need to bring back cultural programming. We have language, but the cultural programming needs to be in place because we need to honour our roles once again. Those roles are gone, we don't have that honour. I'm just being flat out straight forward.

Participants emphasized the importance of more intentional cultural programming as an important way that components of wellness can be understood and facilitated in the communities.

Wellness as Interrelated

In all cases, educators situated their sense of balance among dimensions of wellness alongside student, school, and community contexts. The division between home and school is blurred for educators in northern First Nations communities (Burleigh, 2020), and, as a result, the way educators discussed their wellness was also deeply integrated in their school lives. When educators are living and working in close proximity to one another, their personal wellness was compounded and integrated with and, in some cases, entirely encased in the wellness of their students and school community. For example, one teacher articulated, "when I am doing and feeling well it's mainly the health part but also it's how I feel about the school and the wellbeing of the school."

Many First Nations communities experience the ongoing trauma of colonization, which compromises overall wellness (Kirmayer et al., 2009). An Indigenous educator said that "nowadays, I always say residential schools have succeeded in the goals of breaking the family unit. There's no such thing as a 'family unit,' anymore. That support system that should be there is gone." Further, suicide rates were a primary indicator for some participants of compromised wellness at both an individual and community level in terms of the lasting impacts of grief and trauma: "There's suicides here. Every First Nation that you go to, you'll see that they have suicide, and we have the highest suicide rates." The impact of trauma poses a significant challenge in addressing both the individual and collective wellness of educators and their students.

As the recruitment and retention of teachers to northern First Nations communities is often an ongoing challenge faced by education authorities (Assembly of First Nations, 2012; Wootherspoon, 2006; 2008), teachers are often recruited from urban areas and other provinces, away from their networks of support, which can include their families, and their familiar surroundings. One teacher explained his family situation: "I'm away from my family, my wife, three kids, and a grandson. It's not easy leaving them." Living in the community, often in supplied housing in very close proximity to the school, teachers find their professional and personal lives becoming deeply integrated. One teacher describes their housing situation as follows:

I live with other teachers and anytime I need help of any sort, I can call the teacher next door and they are very supportive here. Even the principal because one time I had an accident, and I went to the hospital and my principal was there for me.

Known always as educators, identities are heavily centralized in their professional roles, relationships, and capacities. A novice teacher centralized her identity in her role when she said, "I'm not here to be trekking all over the place. I'm not here for Chief and Council. I'm here for the kids, they are like my little life, they are my goals right now." Friendships and relationships are often within the educational sphere with other educators, who might also be housemates or neighbours. These close relationships provide a foundational level of support, common experience, and contextual understanding. A new teacher in the community and early career teacher described her reliance on the veteran, more experienced teachers: "I was lucky enough to become friends with some of the teachers and most of the mental support came from them." This community integrated context generates a specific and important wellness dynamic for northern teachers.

These balanced and interrelated conceptions of wellness have implications for the potential development of wellness supporting initiatives. For these educators, the balance of individual and independent wellness dimensions must be addressed alongside a broader school-wide approach to support student wellness, and addressing one without the other is a half measure due to the interrelated nature of how wellness is conceived of by the participating educators.

Educator Perceptions: Wellness Supports and Barriers

The educators talked about their perceptions accessing wellness supports. They expressed awareness of a number of existing supports that provide opportunities to engage in wellness supporting activities. These activities included: community mental health services (i.e., a counsellor at the health centre, school psychologist, and the employee assistance program), peer support (educator colleagues and administrators), family and friends, elders, self-care activities (e.g., yoga, prayer, and meditation).

Educators also identified wellness supports that they would like to have access to, but currently find inaccessible to them, including a fully equipped gym facility (with treadmills, weights, and a pool), organized extra-curricular activities (e.g., game nights), teacher representation regarding setting education authority policies and decisions, staff wellness retreats, online wellness coaching and counselling, and community meeting places (other than the school building).

The participants also spoke about their perceptions of the barriers that contribute to challenges accessing wellness supports both within and outside of the local community. These barriers included financial costs associated with accessing services or amenities for relieving stress, concerns around confidentiality, perceived stigma associated with accessing wellness supports, poor road/travel conditions to access services available out of community, unreliable internet service, infrequent access to community mental health services, and workload intensification.

Many of the participants' identified access as a primary barrier which was often exacerbated by time and distance requirements.

Let's say if I'm having a stressful time—it's report card season, I need to talk to—we do have the health clinic there, and you can always go talk to somebody, only on Thursdays, though. So, having to take a day off to work can exacerbate the stress of having to get all those sub plans in and making sure there is a sub for my class so, it's usually easier to not access that support.

Although many participants acknowledged that working in a First Nation community afforded opportunities that may not be available in more urban settings (e.g., time spent on the land), doing so also presented challenges to accessing services that were often interrelated. For example, a participant may decide that they need to travel outside the community to access a particular service for a number of different reasons (i.e., concerns about confidentiality, lack of existing services, and financial considerations). Regardless of the reason, travelling to access services was seen as a barrier because of the time, costs, and risks associated with travel. At times, these challenges were perceived as manageable but, at other times, they presented barriers that prevented participants from being able to access the services they felt they needed.

Participants identified a number of barriers and supports that either inhibited or afforded access to wellness promoting initiatives. Despite ongoing barriers such as time, costs, distance, stigma, confidentiality, and work intensification, the educators also identified important supports such as community mental health services, peer support, Elders, self-care, and the employee assistance program. Based on the identified barriers and supports, the next aim of this research is to consider how wellness supports for educators might be enhanced through school and school authority initiatives.

Discussion: Enhancing Wellness Supports

Considering educator experiences and understandings of wellness, how could wellnesspromoting initiatives be designed to meet educator needs? Educator conceptions of wellness along with the supports and barriers identified have been taken into consideration. In addition, the practical and existing programming structures already in place in KTCEA have been used as possible pathways.

Other solutions included increasing access to local community services that are not available currently (e.g., fitness facilities and group gathering spaces that are separate from the school). It must be acknowledged that increasing access to supports like fitness equipment and gym space is a significant challenge. Procuring, storing, and maintaining equipment requires sustained budgetary support in addition to ongoing staffing. Because participants view wellness in a holistic sense, access to various wellness supports was important to them. Not all participants had the same needs, and not all communities had the same challenges of individual educators and communities, is important to meet the needs of educators. One teacher positioned the challenges with accessing space and equipment as follows:

Well, a lot of teachers like to work out. There's a health clinic there but the setting is extremely poor. There's a room little room no bigger than a bathroom, there's no windows, there's no ventilation. There's one piece of equipment. So you have to drive to [urban centre] to work out. So, an hour to 2.5 hours to go to a gym, to exercise. So, I would say one of the biggest things for staff wellness, is to have a place, within the community to work out.

Initiatives that support wellness for educators working in First Nations communities are best designed to meet the specific needs identified by those educators and communities. It is important that the design of these initiatives be characterized by flexibility and responsiveness to changing needs and emerging challenges while also taking into account the systemic barriers resulting in budget and resource constraints.

Communities of Practice and Professional Learning Communities

Communities of practice (Wenger et al., 2002) have been used in education systems to promote and enhance professional development of educators. A wellness-oriented community of practice may be developed whereby educators who have similar or complimentary wellness related considerations connect with one another. Facilitated by a wellness coordinator, each community of practice group may identify and work with their schools, communities, and education authority to advocate for the resources required to meet their unique wellness needs and goals. The primary focus in a community of practice is the practitioner who volunteers their participation and builds connections and relationships within the community over time (Blankenship & Ruona, 2007).

Due to the integrated nature of student and educator wellness, professional learning communities (PLCs) could also serve to support school wide wellness initiatives. PLCs are sitebased and student-focussed where teams of practitioners work collaboratively on a common goal that enhances their classroom practice and benefits students (Blankenship & Ruona, 2007). KTCEA has chosen PLCs as a core support for teachers' professional development. Well implemented and sustained PLCs have a track record of improving student learning, teacher efficacy, and teacher wellness (Vescio et al., 2008; Voelkel & Chrispeels, 2017). Effective PLCs exhibit shared values and vision, a supportive environment, reflective professional inquiry, collaboration, and collective responsibility (Bolam et al., 2005; Toole & Louis, 2002). The success of PLCs is also dependent on flexibility and responsiveness to the specific needs of each community. Strong professional learning networks can enhance many aspects of teacher wellness indirectly through supporting professional development, providing a sense of belonging, sharing resources, and providing meaningful professional support to one another.

Communities of practice and PLCs are both valuable tools to enhance wellness for educators and their students. Adopting either or both approaches attend to the expressed needs of educators while also accounting for the nuanced nature of educator wellness as being both individual and collective.

Resources

In collaboration with communities and education authorities, educators' advocacy efforts may be supported to enhance the resources needed to meet their unique needs. For example, educators identified the need for clear prioritization of wellness as a value represented in school and education authority policy and decision-making processes. Participants described challenges they experience (e.g., isolation) and identified instances when timely access to support was needed: "The mental health aspect of being so isolated is significantly important because you see a lot of teachers coming to an isolated place, not really realizing how isolated it is in every single sense of the word." When educators were engaged with wellness-promoting opportunities their perspectives shifted, and they felt valued. One educator commented that "year after year, that's how I feel, is that we are robots and for the first time I'm actually viewed as a human-being and I have a voice."

The integrated nature of how educators conceive of wellness can have mutual benefit for students. Teachers often situated their wellness alongside the wellness of the students and school community. As a result, wellness initiatives with and for educators can benefit students directly and indirectly. One early career teacher emphasized the integrated nature of wellness when they commented,

Well, not just for myself, but for the kids as well, having things to do, physically. Not just a square gym. Having a rock-climbing wall, or having the gym with the equipment in there, or offering extra-curricular classes partnered with maybe the health centre. Or having a yoga night, or having a work-out night, or having teacher game night. Just things like that, where there's more opportunities, not just for teachers but for the kids as well, because when the kids are involved, I'm there. So, it's also motivation for me too.

Access

Despite some educators understanding that they had access to mental health resources through their employee assistance program, others were either unaware of the program or described how the program was not able to meet their needs. Awareness of existing wellness related resources and engagement in improving the quality and access to these resources may benefit educators.

Within the school, we have part of our pension and group insurance plan, we have a group called LifeWorks. I've tried to contact them a few times, but they say everything is basically online or automated, so you don't really get a face-to-face person to talk to, and they say that, the few times that I've tried, when I was under extreme amounts of stress, would have been that they've got high caseloads and will be getting back to you shortly.

Educators also talked about ways that barriers might be reduced by increasing access to services that are more accessible. For example, consistent internet access allows educators to connect with their families and friends "back home," and permits access to other internet-based wellness resources such as online counselling, peer support, communities of interest such as a fitness classes, physical activity resources, and entertainment opportunities. Some participants noted that access to online resources (i.e., health and wellness supports, counselling, peer support, and communities of practice) may be one way to design wellness supports that are more accessible.

Every day I go home with a headache and a heavy heart, and I'm so wiped out. Sometimes I'm just angry. Yesterday I was so angry. So angry. I'm happy that my husband listens to me. He will sit there and listen to me and let me talk and I'll just let it all out, but I shouldn't have to be taking that crap with me. Every day it's like that and I'm at a point right now where I don't know if I'm going to last till the end of the year. That's how I feel. It's hard. It's very hard.

Where transportation was identified as a barrier, community-organized transportation or coordination of transportation opportunities may help to ameliorate travel as a barrier to access (e.g., grocery trips may be coordinated to facilitate nutritional health, and carpooling may encourage engagement with wellness related activities in urban centres). A veteran educator detailed the challenges to transportation and the implications on their access to physical wellness supports.

Yeah, because it's expensive to get anything here. So, if I wanted to get a treadmill, I'd probably have to pay double just to get it up here. So, that's a significant issue, and that would be coupled with the cost as well. For example, I go down south every two weeks, just to go to the gym, or rock climbing, or go to the pool. I go to [major urban center, a four-hour drive away] because that's where I have a place to stay, because otherwise I'd have to pay for a hotel, just to go to a pool.

Understanding and addressing issues related to access is an essential element in wellnesspromoting initiatives. Specific attention paid to the contextual variables described above such as distance, modes of transportation, cost, confidentiality, and time when developing sustained efforts to mobilize wellness initiatives with educators will result in a stronger and more sustained initiatives.

Conclusion

Although strong connections in the literature can be made between wellness and the teaching profession in general (Duxbury & Higgins, 2013; Froese-Germain, 2014; Wotherspoon, 2008) a better understanding of how educators in First Nations education settings understand wellness has motivated this research, has the potential to improve educator retention, and can further enhance strong, trusting school dynamics. In this research we asked a central question: How do educators in northern Alberta First Nations schools experience, understand, and define wellness? Additionally, we asked educators about their perceptions of supports and barriers related to wellness. Finally, we explored how wellness-promoting initiatives might be designed to meet educator needs, based on their understanding of wellness and the supports and barriers they identified.

Participants defined wellness as balanced and interrelated with physical, mental, and psychological health being highly valued. The role of cultural connectedness and financial stability were also unique factors for educators in the First Nations community schools. Identified supports include community mental health services, the employee assistance program, self-care activities such as physical fitness programs, and peer, family, and Elder support. Identified barriers included confidentiality concerns, stigma, travel and transportation, workload intensification, and financial costs for access to facilities, equipment, and transportation. However, cutting across both supports and barriers, the themes of access and resources became factors that either enhanced or reduced the supports and barriers identified by educators. As a result, the considerations offered about enhancing wellness-promoting initiatives at KTCEA accounted strongly for access and resources with principles of flexibility and specificity included.

Improving the wellness of educators has been shown to improve teacher health and retention in schools (Acton & Glasgow, 2015). When educators thrive, so do schools and students. Wellness is particularly important in First Nations schools where teacher retention is often a challenge that can be compounded by barriers to wellness. Enhancing wellness-promoting initiatives for educators that address their conceptions of wellness and that attend to the specific barriers and supports in each community is one pathway to sustain retention efforts and build strong school dynamics.

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