



Mental Health Experiences of Teachers: A Scoping Review

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Article abstract

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Mental Health Experiences of Teachers: A Scoping Review

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Abstract

Teacher mental health continues to be of concern in elementary and secondary schools; however, supporting teacher wellbeing is understudied (Parker et al., 2012; Roffey, 2012), particularly from a gender perspective (Bourgeault et al., 2021). Among professionals, teachers exhibit one of the highest levels of job stress and burnout on the job. (Hakanen et al., 2006; Stoeber & Rennert, 2008). This scoping review investigates and consolidates the existing research on teacher mental health, leaves of absences, and return-to-work. Work context and personal factors/family context contribute to teacher stress and attrition and by extension may impact temporary leaves of absence (Pressley, 2021). Several articles report on interventions with moderate success to reduce teacher stress, but no studies evaluated return-to-work interventions (Ebert, 2014; Kwak et al., 2019). The amount of stress teachers are experiencing and the pressure that is causing them to burn out is the most common narrative present in the literature. The review highlights gaps in the literature surrounding teacher mental health, leaves of absence, and return-to-work and a notable gap regarding the role of gender.

Introduction

It is often reported that approximately one in five people in Canada will personally experience a mental health illness or concern in any given year (Canadian Mental Health Association, 2021). Moreover, according to The World Health Organization, mental health disorders will be the world's leading cause of disability by 2030 (Bartha, 2018), and these projections predate the COVID-19 pandemic. Mental health is more than the absence of a mental health condition or illness: it is a positive sense of wellbeing, or the capacity to enjoy life and deal with the challenges we face (Canadian Mental Health Association, 2021). Mental health problems and illnesses represent a range of behaviours, thoughts, and emotions that can affect areas such as school, work, social, and family interactions.

Like all workers, teachers experience mental health challenges. The expectations and responsibilities placed upon teachers both at home and in schools has an impact on teacher mental wellbeing. Teachers are not only dealing with their own mental health issues; one in five children and youth under the age of 19 in Ontario has a mental health challenge. For teachers, this translates into 20% of students in an average classroom dealing with some type of mental health issue (Children's Mental Health Ontario, 2020). In addition, the COVID-19 pandemic created the need for school systems and teachers to move their education online. Little research has been published to investigate the mental health implications for teachers since COVID-19.

Stress in the Teaching Profession

Teaching is considered a highly stressful job with numerous stressors, resulting in a high risk of burnout (Friedman, 2003). Work-related pressures such as work overload, multiple demands, emotional labour, and a lack of psychological safety are among some of the challenges faced by teachers. Teacher stress has been defined as “the experience by a teacher of unpleasant, negative emotions, such as anger, anxiety, tension, frustration or depression, resulting from some aspect of their work as a teacher” (Kyriacou, 2001, p. 28). Stress is often the first sign that teachers may be struggling with mental health issues (Schonfield et al., 2017). Some stress in the workplace is necessary and even desirable, as stress may be motivating and enhance work performance—this is called eustress (Selye, 1976). But, in undesirable or unreasonable amounts, stress can have the opposite effect and become distress (Cedoline, 1982). Psychological distress stems from negative events over which a person has no control and manifests in two forms: depression and anxiety (Mirowsky & Ross, 2003). Teachers, who are constantly exposed to stressful situations, may “burnout” if these situations are not handled appropriately. Maslach (1999) defined this as a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that can happen among individuals who work with people in some capacity.

Work stress and burnout are significantly associated with negative psychological outcomes, absenteeism, low job satisfaction, and the intention to quit (Ogus, 2008). Stress in teaching is prevalent. The Ontario College of Teachers reports that 13% of teachers feel stressed all the time, compared to 7% of the general population (Jamieson, 2006). The Ontario Secondary School Teachers' Federation (Johnston-Gibbins, 2014) reports that 30.3% of their members felt a significant increase of overall levels of work stress in the past five years. These high levels of stress are of concern, as research indicates that teacher stress can negatively impact student learning (Borg & Riding, 1991; Brown et al., 2002; Herman et al., 2018; Manthei & Gilmore, 1996), organizational commitment and job satisfaction (Duxbury & Higgins, 2013), and teacher attrition (Clark & Antonelli, 2009; Naghie et al., 2015). The British Columbia Teachers'

Federation conducted a survey of public school teachers to assess working and learning conditions (Naylor & White, 2010). They reported that one in eight teachers surveyed was on a leave of absence in 2010 and about half of the teachers on leave indicated that workload issues contributed to their decision to take a leave (Naylor & White, 2010). In England, 1.3 million days have been taken off by teachers for stress and mental health reasons in the four years preceding 2018 (Asthana & Boycott-Owen, 2018). These findings have been exacerbated by the COVID-19 pandemic. In a recent *National Post* article, multiple teachers' unions said, "Our members are increasingly in need of leaves of absence due to mounting stress and burnout stemming from the health crisis" (Lorriggio, 2021).

Mental Health in the Teaching Profession During the Pandemic

Teaching during a global pandemic has amplified the mental health issues that existed before COVID-19. The Canadian Teachers' Federation (2020) conducted a mental health check-in survey from 16–25 October 2020. They found that 69% of teachers had concerns about their mental health and/or wellbeing. Only 44% of teachers had these same concerns or questions regarding their mental health and/or wellbeing in a previous survey conducted in June 2020 (Canadian Teachers' Federation, 2020). The stress and burnout teachers felt prior to COVID-19 are currently being amplified as teachers do their best to maintain the safety of their students and themselves during the pandemic (Alberta Teachers' Association, 2020). Another Canadian study, for example, surveyed 1,278 teachers to examine burnout during the pandemic. In their research of Canadian teachers during the early months of the pandemic, Sokal et al. (2020) explained that when teachers are in the initial stages of burnout and exhibiting high exhaustion, mitigating the situation must involve decreasing demands and providing selected resources.

It is also important to recognize that teaching is gendered as a feminine profession (Drudy, 2008; Griffin, 1997), meaning women are still more predominant in the teaching profession than men (Schmude & Jackisch, 2019). According to data from Statistics Canada (2014), 59% of secondary school teachers are women, and this proportion increases to 84% in elementary school. Little literature discusses how gender structures teachers' mental health in a context of care at home. This knowledge gap is surprising, given the broader gender differences in mental health that exist in society and the disproportionate impact of the pandemic on women's mental health (Cabezas-Rodriguez et al., 2021; Thibaut & van Wijngaarden-Cremers, 2020).

Purpose

It has been well established that the teaching profession is an occupation with a high prevalence of work-related stress (Leung et al., 2009; Naghieh et al., 2015), yet its impact on leaves of absence and return-to-work has not been widely researched and reported. The purpose of this scoping review was to investigate and consolidate the existing research on teacher mental health, leaves of absences, and return-to-work. Specifically, we asked the following research questions about the literature on elementary and secondary teachers:

- Which teachers are leaving work for mental health reasons, and what are the key factors causing them to leave work?
- What factors help to foster return-to-work for teachers?
- What relevant details about gender, both in terms of participation and/or findings, are present?

Theoretical Lens

As a profession, teaching has been gendered feminine (Drudy, 2008; Griffin, 1997), which necessitates a theoretical approach that considers how gender structures teachers' mental health in the context of care. Gender is distinct from sex, which is biologically based. Gender "refers to the socially constructed roles, behaviours, expressions and identities of girls, women, boys, men, and gender diverse people" (Canadian Institutes of Health Research, 2015, para. 2). We draw from feminist care work literature to frame our study (Benoit & Hallgrimsdottir, 2011; Noddings, 2015). Care work is an appropriate theoretical framework for this study because it involves privileging processes and experiences of caring in the context of work. Using care work as a theoretical lens also underlines the role of gender in prescribing and maintaining unhealthy working conditions for teachers (Isenbarger & Zembylas, 2006). In particular, a care work theoretical lens exposes how gender interacts with common understandings of care/work that are attached to both teaching and motherhood and how this interaction can have a negative impact on teachers (Noddings, 1996).

Care can be described as a "species activity that includes everything we do to maintain, continue, and repair our 'world' so that we can live in it as well as possible" (Tronto & Fisher, 1990, p. 40): in other words, reproductive labour. We couple this understanding of care with a feminist definition of work as anything that involves "creating and serving for either one's own or one's dependents' direct consumption, in exchange for pay and/or other support" (Applebaum, 1992; Benoit & Hallgrimsdottir, 2011, p. 3). This complimentary understanding of care and work exposes the double burden of care work that exists for teachers who are also mothers—there is an expectation to care for students at work as well as perform a disproportionate amount of care work in the home.

Methods

The literature search was conducted with the assistance of a research librarian. Databases searched were MEDLINE(R) ALL via Ovid, APA PsycINFO via Ovid, CINAHL via EBSCO, and Sociological Abstracts via Proquest. The databases were searched on 12 May 2020. Searches were limited by language of publication (French or English) and date of publication (2005 to May 2020). The main search concepts were comprised of terms for teachers/educators, return-to-work, and leave of absence. See Appendix 1 for the search strategy employed by the research librarian. The initial library database search produced 1,015 references.

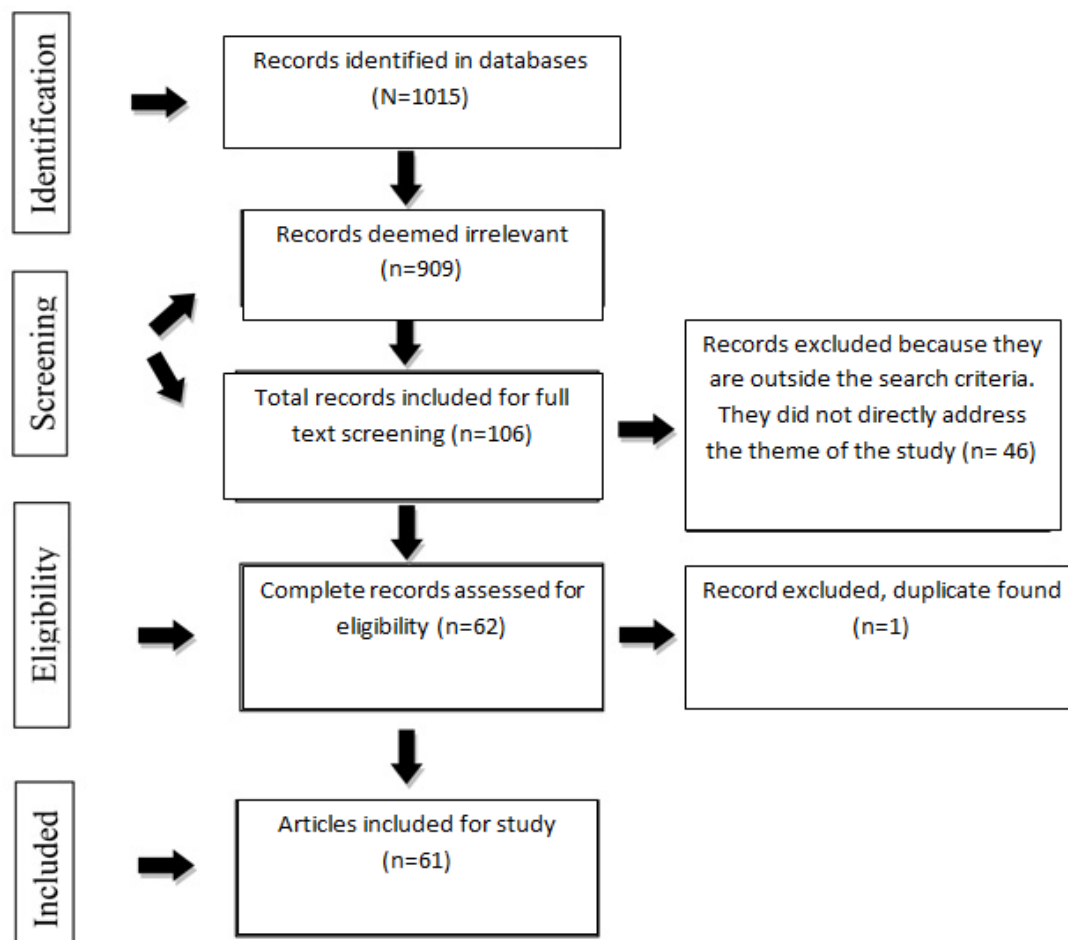
We utilized the software program Covidence to help systematically review the literature. All references were screened by the first author by reviewing the title and abstract. After the initial screening of the 1,015 references, a total of 106 studies were found to meet the inclusion criteria or were identified for further investigation to determine their relevance to the review. See Appendix 2 for the full inclusion and exclusion criteria. Most of the references that were excluded at this stage focused on student mental health. The first author read the full texts of 106 studies; after this screening, reading, and review, 62 articles met the inclusion criteria. A second reviewer screened and read over all 106 studies to confirm that each study met the inclusion criteria. One duplicate record was found at this stage; therefore, 61 articles were included in this review. The articles were sorted into the following categories based on identified keywords directly linked to

the research questions: presenteeism/absenteeism (22), stress/burnout (17), return-to-work/interventions (8), context/environmental factors (7), impact of gender (4), and leaves of absence (2). After conducting a title and abstract screening of the 28 references containing teacher mental health and COVID-19, only six articles went through to full text review. Of the six COVID-19 related articles, only one of them met the inclusion criteria for extraction.

All 61 articles were extracted using the software program Covidence and compiled into an Excel table outlining the title, citation, aims/objectives/research questions, key findings, and commentary for each reference. The articles were then examined using a thematic analysis (Braun & Clark, 2006; Thomas & Harden, 2008). Our theoretical framework of care work guided our review of the articles. We approached teaching from the holistic perspective that teaching and care work naturally intersect and cause tension for teachers who are also mothers (Isenbarger & Zembylas, 2006; Noddings, 2015). Articles in each category were examined for themes, which involved coding for patterns. Searching for repetitive words and phrases helped create meaningful themes for each category. See Figure 1 for an outline of the systematic scoping review process.

Figure 1

Systematic Scoping Review Process



Findings

This scoping review illuminates the diverse experiences of teachers experiencing mental health issues, particularly when a gender lens is taken. The literature focusing on presenteeism/absenteeism continues to be a growing field; however, no particular group of teachers clearly leads in absentee rates. The amount of stress and pressure teachers are experiencing remains the most common narrative across the literature. Much of the literature discussing teachers taking a leave of absence focuses on the negative repercussions on student achievement. Little research exists that examines which teachers are returning to school after a leave of absence. The findings are presented by theme: stress and burnout in teaching, presenteeism/absenteeism, leaves of absence, and return-to-work/interventions.

Stress and burnout in teaching

The most common narrative found in the scoping review literature is the amount of stress teachers are experiencing and the pressures that are causing them to burn out (Chennoutfi et al., 2012; Dean, 2011; Green, 2014; Ogus, 2008; Yu et al., 2015). Concerns such as student violence against teachers (Dzuka & Dalbert, 2007; Longobardi et al., 2019; McMahon et al., 2014; Wilson et al., 2011), supporting the diverse needs of students (Brackenreed, 2011; Hassan et al., 2015; Kebbi, 2018), and the need to wear ‘multiple hats’ have negatively affected the stress teachers experience (Provencio, 2018; Olsen & Buchanan, 2017; Russel, 2009).

High levels of teacher burnout are also reported throughout the literature (Garcia-Carmona et al., 2019; Jeter, 2014; Ogus, 2008; Yang et al., 2011). In a comparative research study, Ogus (2008) determined that work stress and burnout are associated with negative psychological outcomes, absenteeism, low job satisfaction, intention to quit, and maladaptive coping. Ogus (2008) found teachers experienced significantly more negative outcomes, such as higher overall stress and burnout, emotional exhaustion, depression, job dissatisfaction, and absenteeism, compared to physicians and managers. This sentiment is in contrast to the results from a French cross-sectional survey, which established that teachers do not seem to have poorer mental health compared to middle-class civil servants (Kovess-Masfety et al., 2006). Results from a German study wherein teachers were compared to the general population found that teachers had a more healthful lifestyle and a lower frequency of cardiovascular risk factors; however, it was noted that mental and psychosomatic diseases were more common in teachers than non-teachers (Scheuch et al., 2015). Looking at these findings through a care work lens, female teachers may be expected to cope with stress by responding in more emotionally expressive ways than men (Chatmon, 2020).

A cross-national comparison on subjective wellbeing of teachers in Hong Kong and Italy revealed that country context can predict mental health and self-esteem (Benevene et al., 2018). Results found that the country plays the strongest predictive role on self-esteem and mental health. Higher levels of job satisfaction were found among Italian teachers, while teachers from Hong Kong were more satisfied in pay and promotion. Researchers established that job satisfaction and self-esteem seem to protect teachers from risk of mental ill-health (Benevene et al., 2018). The disparity in results demonstrates the effect that geography has on the educational landscape. Teaching workloads, schedules, funding, support systems, and system-wide policies vary from country to country.

Harassment at work creates hostile and unhealthy environments, not only for its direct targets, but also for teachers who observe the process (Astrauskaite et al., 2010). Astrauskaite et al. (2010) found that teachers who observed harassment reported higher levels of emotional

exhaustion. Exposure to mental abuse in the classroom also increases the risk of mental disorders, according to a Finnish research study (Ervasti et al., 2011). Researchers uncovered that special education teachers are at risk for violence at work, male teachers even more so than women (Ervasti et al., 2011). Few studies discussed how teachers effectively manage stress and burnout; Jeter (2014) reported teachers were using emotion-focused coping strategies to manage their work-related stress and burnout. Gender structures still view female teachers as nurturing and providing emotional support for others, which places a heavy emotional burden on this population (Isenbarger & Zembylas, 2006; Ott et al., 2017).

In Hong Kong, teachers exhibited a moderately high level of recognition of mental disorders, but only 8.5% of those with these disorders sought help from mental health professionals because of concern over stigma (Lee et al., 2007). Teachers who experience a high degree of occupational strain (Yang et al., 2011) report chronic disease, taking sick leave, stressful life events, divorce, separation, role overload, and high levels of responsibility as factors that negatively affect their careers. Returning to the notion of care work, it is predominantly female teachers who experience disproportionate losses in household income and the burden of securing childcare in situations involving divorce or separation.

Presenteeism/Absenteeism

There is a growing body of research focusing on teacher absenteeism and sick leave. Presenteeism refers to diminished productivity and quality of work when a teacher is present at school while ill (Howard et al., 2012). Absenteeism is the habit of not reporting to work or school or can be defined as chronic missed days of work or school (Scott, 1998). A study in Germany found that more than half of the teachers reported sickness presenteeism (Dudenhofer et al., 2017). A study by Green (2014) established that 80% of teachers in New York wanted to take a sick day due to stress that they attributed to their work, with 40% having done so. Further, a study in Brazil discovered the prevalence of pressure to work when ill was higher among participants with children (Assuncao & Abreu, 2019). The literature highlights teachers who come to work when they are sick due to the pressure that they feel to get everything done (Panari & Simbula, 2016).

There is no consensus on which teachers display the highest rates of absenteeism (Albrecht, 2013; Dana, 2015; Dillehay, 2013; Holloway, 2011; James, 2018; Pitts, 2010; Russell, 2018). Dillehay (2013) concluded that more experienced teachers have higher absence rates, while Usman et al. (2007) found that contract and less experienced teachers have higher absence rates. Other researchers suggest working in a socioeconomically disadvantaged neighbourhood is associated with increased risk of sick leave (Ervasti et al., 2011; Dana, 2015; Virtanen et al., 2010). Three risk factors for work absenteeism were identified among Brazilian schoolteachers: lack of opportunities for new learning experiences, perception of heavy demands from tasks, and the experience of verbal or physical violence from students (Maia et al., 2019). McGalla (2009) found, however, that absenteeism and teacher wellness did not affect a teacher's performance in the classroom. From a care work perspective, McGalla's findings are not surprising, due to the fact that teachers are socialized to take care of others before themselves (Isenbarger & Zembylas, 2006; Noddings, 1996).

The type of leave policy that a school offers affects how many days teachers are absent. According to a study in New Mexico, teachers who worked in a school district that offered only unpaid sick leave had 4.7 fewer days of leave than teachers who work in a district that offered paid leave (James, 2018). Absence behaviours are contextual in nature; Pitts (2010) uncovered that

requiring teachers to report absences directly to the principal resulted in a reduction in short-term absenteeism.

Leaves of absence

In the teaching profession, the term leave of absence refers to any long-term time spent away from a teaching position with school board approval or as deemed necessary by a doctor (The Alberta Teachers' Association, 2020). Much of the literature discussing teachers taking a long-term leave of absence focuses on how it negatively affects student achievement (Brown & Arnell, 2012; Bruno, 2002; Lewis, 2020; Obeng-Denteh et al., 2011; Speas, 2010). One study compared a group of Spanish secondary school teachers who took a psychiatric sick leave with a second group of teachers who had no history of psychiatric sick leaves (Moriana & Herruzo, 2006). They discovered the most significant variables related to taking a psychiatric sick leave included competitiveness, hostility, and emotional exhaustion as a factor of burnout and job dissatisfaction (Moriana & Herruzo, 2006). A cross-sectional study in Germany found that teachers on long-term sick leave are impaired to a greater extent compared to their working colleagues not only mentally but also physically, based on their cardiovascular fitness (Brutting et al., 2018).

Return-to-work/interventions

Little research has been conducted to determine which teachers do or do not return to work after a leave of absence and what accommodations, if any, are being provided upon returning to the school environment. For our purposes, the term intervention refers to "an activity or set of activities aimed at modifying a process, course of action or sequence of events, in order to change one or several of their characteristics such as performance or expected outcome" (World Health Organization, 2011, p. 10). One research study evaluated the process of teachers returning to work and discovered that most teachers returned to work with unwanted and unfavorable health conditions (Silva & Fischer, 2012). Johnson & Birkeland (2003) believe in order to address return-to-work, it is necessary to examine the network of causes related to absenteeism. If teachers are returning to similar work environments to those that caused them to leave in the first place, the likelihood of a successful return-to-work is low (Johnson & Birkeland, 2003).

The scoping review revealed some promising interventions being used to help improve teacher mental health and wellbeing. The Wellbeing in Secondary Education Project is a research study taking place at the University of Bristol and Cardiff University. The pilot study introduced and evaluated an intervention aimed at providing support for secondary school teachers' wellbeing and mental health. The intervention included 8% of staff receiving Mental Health First Aid as well as a confidential peer support service, training in Mental Health First Aid for adults working in schools, and a one-hour mental health awareness raising session delivered to all teaching staff (Kidger et al., 2016). Researchers reported teachers who received the training had greater mental health knowledge and had fewer stigmatizing attitudes regarding depression and anxiety. Staff who received training had high confidence in helping colleagues and students (Kidger et al., 2016). Kidger et al. (2016) acknowledge that the pilot study was small and the follow-up period was only six months, so little difference in staff wellbeing was found. According to Kidger and colleagues (2016), implementing the project on a larger scale and for a longer time period may produce more favorable results.

Since 2014, the British Columbia Teachers' Federation has offered an online mental health and wellness tool called *Starling Minds*. *Starling Minds* is a mental health promotion intervention,

not a specific return-to-work intervention. It is designed specifically for teachers to help them assess, monitor, and improve their mental fitness (British Columbia Teachers' Federation, n.d.). Starling Minds is also being used by the Northwest Territory Teaching Association, the Nunavut Teachers' Association, and the Quebec English Speaking Teachers' Association. According to the Starling Minds website, 80% of their users have reported an improvement in overall mental health, and 77% of users report lower stress, anxiety, and depression (Starling Minds, 2020).

One study currently being conducted among public primary school staff in Sweden aims to compare the effectiveness of a multifaceted implementation strategy versus a single implementation strategy for dealing with mental health issues within schools (Kwak et al., 2019). The single strategy involves a one-day educational meeting, whereas the multifaceted strategy consists of the educational meeting, establishment of an implementation team, and a series of five workshops aimed at the concept of SMART-goals, behavior change and barriers, facilitators that can influence behavior change, and strategies needed to target the identified barriers and facilitators. Researchers believe schools that receive support in implementing the multifaceted strategy will be more responsive to working with the management of social and organizational risks at their school and that this will reduce risk factors for mental ill health. According to Kwak et al. (2019), mental ill health is the leading cause of sick leave among the working population in Sweden. In their future research, Kwak and colleagues (2019) hope to gain more knowledge on strategies that prevent the occurrence of common mental disorders.

Very few studies offered strategies to help reduce teacher absenteeism and presenteeism. Dudenhoffer et al. (2017) highlighted the importance of developing a climate of support, encouraging supervisors to act as role models by staying home when ill, and reducing teacher workloads after sickness absence so teachers can catch up on work that was missed.

Discussion

The purpose of the scoping review was to highlight the existing research as well as identify gaps in the literature surrounding teacher mental health, leaves of absence, and return-to-work, paying explicit attention to the impact of gender. The scoping review reveals that, in line with the theoretical lens of psychological distress (Cedoline, 1982; Mirowsky & Ross, 2003), teachers are experiencing negative stress stemming from work. Stress and burnout impact teacher physical health and personal relationships (Garcia-Carmona et al., 2019; Jeter, 2014; Yang et al., 2011). According to Ogus (2008), teachers experience higher levels of stress, depression, emotional exhaustion, and absenteeism when compared to physicians and managers.

The literature also reveals that presenteeism and absenteeism exist across the education sector regardless of factors such as teaching experience, workplace conditions, or student population (Albrecht, 2013; Dana, 2015). Research should focus on making a connection between presenteeism/absenteeism and the mental health of teachers. If patterns of absence start to develop among individual teachers within a school, the focus could switch to prevention on a school level. Some school boards monitor leaves of absence at each school; however, this monitoring can be perceived by teachers as a punitive measure warning them not to take more time off (Uehara, 1999). In order to help administrators play a positive role in teacher mental health, the absenteeism tracking policies could be used to reach out and offer teachers support. Administrative support is an important factor in teacher wellbeing, and administrators can play a significant role in building resilient teams that perform well (Sokal et al., 2020). Prevention strategies might support teachers who are struggling with personal, familial, or work issues before they develop into something more serious that would require a leave of absence. Although school boards offer Employee Assistance

Programs (EAP), they are often utilized after teachers experience burnout or take a leave of absence. Teachers should receive clear orientation at the beginning of the school year on how to seek help when they need psychological or administrative support (Machado & Limongi, 2019).

The literature on leaves of absence and return-to-work was scant. The lack of published literature, in terms of which teachers are taking leaves of absence and why, is not surprising, considering the overall scarcity of research focusing on return-to-work interventions. Much of the literature focuses on how teachers' taking a leave of absence negatively affects student achievement (Brown & Arnell, 2012; Bruno, 2002; Lewis, 2020; Obeng-Denteh et al., 2011; Speas, 2010).

There are promising interventions being used to improve teacher mental health and wellbeing, such as the Wellbeing in Secondary Education Project that provides Mental Health First Aid to adults working in schools (Kidger et al., 2016). Researchers reported teachers who received the training had fewer stigmatizing attitudes regarding depression and anxiety. It is promising to read about interventions supporting teacher mental health; however, more research is needed to evaluate the effectiveness of each intervention and if it can be operated on a larger scale to reach more educators. Knowing how to handle a teacher's return from leave can help manage the feelings of all parties involved and would benefit teachers, students, and school systems.

We cannot afford to lose large numbers of teachers to burnout. Orienting strategies on the need for teachers to "fix themselves" is less effective (and indeed unethical) when the source of the problems is in the structure of school systems. The findings from our knowledge synthesis strongly suggest that developing a climate of support starts at the top with administrators (Dudenhofer et al., 2016). Having a supportive principal contributes to teachers' job satisfaction and their intentions to remain in schools (Jackson, 2018).

Our review also suggests that providing return-to-work strategies that recognize the influence of gender on this process may benefit female teachers who are struggling with care work and could use additional support strategies. Care work is continuous in nature, causing many female teachers to dedicate their time away from the classroom to aging parents, children, or the continued performance of teaching duties from home (e.g., report cards, communicating with the teacher covering their leave, etc.). Female educators with children often take sick time to care for their children, leaving them with little to no time for their own sick days. Taking maternity leave can also have negative implications for female teachers, as they may be overlooked for promotions or leadership positions within their school or board. From a care work perspective, many female teachers who end up taking a leave of absence are not taking care of themselves while off work. Many female teachers are not offered a gradual return-to-work or cannot financially afford to do so.

We were surprised the literature did not focus on the gendered dimension of teaching in particular as a form of care work (Benoit & Hallgrimsdottir, 2011). The complimentary understanding of care and work can expose the double burden of care work that exists for women who are also mothers; there is an expectation to work as well as perform a disproportionate amount of care in the home (Bratberg et al., 2002; Chen et al., 2020). It would be interesting to explore how COVID-19 has affected parents as they negotiate teaching in a virtual or face-to-face classroom, accessing childcare, and the mental health implications that surface as work/home life become blurred.

Limitations and Recommendations for Research and Practice

This study is limited by the fact that scoping reviews do not assess the quality of the data collected in the found studies. Rather, scoping reviews seek to map out the landscape of the extant research on a topic (Arksey & O'Malley, 2005). Forward and backward snowballing techniques were not utilized to ensure that all possible eligible articles were captured. Another limitation of the study is the lack of published research in the area of teacher leaves of absence and return-to-work. While the extant literature on teacher stress is plentiful, research on teachers who are temporarily leaving the workplace due to stress and returning to work has not been deeply explored by researchers. Therefore, the pool of articles drawn from in this scoping review tend to focus mostly on teacher mental health and stress and their potential links to teachers taking a leave of absence. In turn, leaves of absence and return-to-work among teachers are crucial areas that warrant future research. Given media reports that sick days are continually increasing among teachers (Loriggio, 2021; Macintosh, 2021; Miller, 2018) and that teachers are taking long-term stress leaves for mental health and stress (Asthana & Boycott-Owen, 2018), more research is needed. We urge educational researchers to look closely at worker mental health, the reasons why teachers are taking leaves, and how teachers can return as healthy and satisfied employees back at school.

More longitudinal research needs to focus on the factors leading up to teacher burnout and leaves of absence so that preventative strategies can be implemented, as well as the offering of different interventions. If teachers are provided with appropriate coping and resiliency resources, the incidence of burnout and work-related stress could be reduced. Schools need to be a well place for everyone, and mental health initiatives should focus on teachers, students, and the school environment (Ott et al., 2017). Ott et al. (2017) suggest, "The way forward is not to funnel more knowledge about mental health and wellness into educators, but to develop communities of practice with them" (p. 23). Additional research needs to explore the factor(s) that cause teachers to request leaves of absence and how schools can better support teachers when they are ready to return to their positions. Further research focusing on gender and other social identities is needed to understand and address the gendered expectations that still exist in today's 21st century classrooms.

Finally, the COVID-19 pandemic has added an additional layer of stress to the teaching profession. We need additional research on its impact so we can better support teachers and ensure their mental health is well taken care of.

Conclusion

Awareness surrounding teacher mental health is growing; however, more could be done to mitigate the mental health challenges and support those who are struggling. The dominate narrative is that we need to monitor and improve the mental health and wellbeing of teachers because it may affect the mental health and wellbeing of students. Instead, the narrative needs to change to reflect the fact that teacher mental health is human mental health. In addition to individual stress interventions at the worker level, systemic changes are needed to mitigate teacher stress. Teachers require emotional support, mental health resources, and healthy relationships with administrators and school boards. School climate affects everyone in the school, so more training needs to be provided to the leadership team in each school. The scoping review reveals that mental health, leaves of absences, and return-to-work are understudied among teachers and therefore deserve further research. In addition, the role of gender and care and their relationship to teacher mental

health remain understudied in the literature (Ferguson et al., in press). COVID-19 continues to pose a range of challenges to educators and has added more stress to an already high-stress profession. Now, more than ever, we need to support teachers as they adapt to ensure learning can continue both during and post-pandemic. Although individual mental health strategies can be effective in supporting some educators, a multi-layered approach is necessary in order to target systemic changes in the education sector. Focusing on organizational- and systemic-level strategies to improve teacher mental health has the ability to create long-lasting changes that teachers deserve.

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Appendix 1

Database Search Strategy

#	Searches
1	exp coronavirus infections/
2	exp coronavirus/
3	(coronavirus* or covid).ti,ab.
4	or/1-3
5	limit 3 to yr="2019 -Current"
6	((mers adj5 (coronavirus* or virus* or disaster* or crisis or emergency or outbreak*)) or mers-cov or middle east respiratory or middle east virus).ti,ab.
7	((sars adj5 (coronavirus* or virus* or disaster* or crisis or emergency or outbreak*)) or sars-cov or severe acute respiratory syndrome*).ti,ab.
8	((((wuhan or shanghai or seafood or beijing) and (coronavirus* or covid)) or 2019-nCoV or 2019nCoV or nCoV2019 or nCov-2019 or COVID-19 or COVID19 or SARS-CoV-2 or HCoV-19).ti,ab.
9	or/5-8
10	family leave/ or sick leave/
11	absenteeism/ or presenteeism/
12	(absentee* or presentee*).ti,ab.
13	leave-of-absence*.ti,ab.
14	((sick or family or stress) adj2 leave*).ti,ab.
15	10 or 11 or 12 or 13 or 14
16	return-to-work/
17	(return-to-work or back-to-work).ti,ab.
18	((return* or back) adj2 (work or job* or position*).ti,ab.
19	accommodation*.ti,ab.
20	16 or 17 or 18 or 19
21	teaching/
22	School Teachers/
23	(teacher* or educator*).ti,ab.
24	((teach* or education*) adj2 (assistant* or aid?)).ti,ab.
25	or/21-24
26	9 and 25
27	limit 26 to (yr="2005 -Current" and (english or french))
29	15 and 25
30	limit 29 to (yr="2005 -Current" and (english or french))
31	20 and 25
32	limit 31 to (yr="2005 -Current" and (english or french))
33	30 or 32

Appendix 2

Inclusion/Exclusion Criteria

	INCLUSION CRITERIA	EXCLUSION CRITERIA
DATE	- Published between 2005 and 2020 for all Canadian and international literature	- Published before 2005
LANGUAGE	- Published in English or French	- Published in languages other than English or French
DOCUMENT TYPE/STUDY DESIGN	- Academic literature (empirical or review papers including systematic methodologies)	- Does not meet document type/study design criteria
POPULATION	- Primary and secondary teachers (both male and female) experiencing personal mental health issues	- The other types of workers who are not in the specified sectors and specified occupations/professions within these sectors (e.g., childcare workers will be excluded from the search for the education sector)
COUNTRY	- The scoping review will capture all Canadian-based as well as a broader international literature - Included is literature from all countries, especially those with human rights legislation	- No country excluded
CONTENT	<p>- MH literature: Addresses mental health (MH) issues, leaves of absence (LOA) and return-to-work (RTW) experiences of teachers including (but not limited to)</p> <ul style="list-style-type: none"> • interventions, • the impact that gender has on these dimensions, and • the impact of mental health issues and leaves of absence on teachers, their work, students, colleagues, supervisors, and organizations <p>- Covid-19 related literature: Addresses how Covid -19 has impacted on MH issues, LOAs and RTW experiences among teachers</p>	<p>- Does not meet content criteria</p> <p>- Does not meet content criteria</p>