Studying = Students Dying!?

Students’ Wellbeing and Strains in Initial Teacher Education

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Abstract: Teachers’ wellbeing has for several years now been hotly debated. Teacher students as well as acting teachers have attained significantly worse average values in various national and international surveys on their (mental) wellbeing than students of other disciplines of study (particularly those of economics and languages) or other professional groups (e.g., civil servants, policemen, nurses) (HIS, 2010; Dür & Griebler, 2007; Schaarschmidt, 2004). Furthermore, a high percentage of teachers retire about ten years prior to the mandatory retiring age (Hillert & Schmitz, 2004), a lot earlier than other professional groups do. Considering those alarming results on teachers’ job satisfaction (with no improvement recorded over the last ten years; Rothland, 2013) and the need for resilient and engaged teachers due to their major responsibility, interventions are required. This paper explores study-specific factors that influence and modulate teacher students’ wellbeing during their time at university. The gained findings indicate a high level of (emotional and mental) stress, which teacher students linked to overall unsatisfactory study conditions (e.g., exam stress, organization of studies, final diploma thesis). Almost all of the respondents suffered from mood swings, frustration and loss of motivation at least once during their studies. The findings ought to enhance a better understanding of health affecting strains and challenges in teacher education and are supposed to promote the adaption or also extension of educational and curricular contents enhancing teachers’ resilience.

Key words: teacher students’ wellbeing, health affecting strains and resources in initial teacher education, resilience

1. Introduction

1.1 Teachers’ Wellbeing

More and more teachers feel heavily stressed, exhausted and decide to withdraw from teaching profession (Hillert & Schmitz, 2004; Sebinger & Gerich, 2007; Dür & Griebler, 2007). International surveys on teachers’ physical and mental health (Vandenbergh & Huberman, 1999; Griffith, Steptoe & Cropley, 1999; Kyriacou, 2001; Howard & Johnson 2004; Friedman, 2006; Lambert & McCarthy, 2006; Rothland, 2013) have shown that teachers compared to other professional groups (e.g., civil servants, nurses) suffer from poorer health, show higher rates of sick leave and retire about ten years prior to the mandatory retiring age (Hillert & Schmitz, 2004; Sebinger &
Gerich, 2007; Dür & Griebler, 2007). In 2000, Austrian teachers’ health was examined on a large-scale level (BMUKK, BMF & GÖD, 2000). Over 6000 Austrian teachers (N = 6861) were investigated on their stress perception and its impact on their health status. Although the gained results haven’t indicated the presence of a profession-specific disease pattern, more than half of the examined teachers claimed to feel highly stressed and showed at least one alarming laboratory value (e.g., iron deficiency, hyperlipidaemia). Similar results could be gathered in the course of the WHO health survey “Health Behaviour in School-Aged Children” (BMG 2007) in 2006, which, besides focusing on pupils’ health status, also collected data on teachers’ wellbeing. Only 50% of the investigated teachers claimed to feel completely healthy. 20% indicated to bear consistent back pain and 19% stated to suffer from daily or weekly states of exhaustion1. Overall, the recorded investigations uncover a high rate of psychosomatic and psychiatric disorders and excessive feelings of stress and exhaustion in teaching profession.

1.2 (Teacher) Students’ Wellbeing

In contradiction to those alarming results, university students have always been said to be healthy and carefree (TK, 2007). Early adulthood is often related to durability and resilience (Meier, 2009). Nevertheless, the myth of the joyful university student, who bursts with health and vitality, is weakened by innumerable studies on university students’ wellbeing and satisfaction (Ziolko, 1965, 1969; Moeller & Scheer, 1974; Ofer & Spiro, 1987; Hahne et al., 1999; Meyer, Milz & Krämer, 2007; HIS, 2010). Summing up the most import findings of the quoted studies, it was found out that:

- Students primarily suffer from mental impairments than from physical illness (Wöller 1978; Bachmann et al., 1999; Allgöwer, Stock & Krämer, 1995; Schaarschmidt, 2004; HIS, 2010). In particular, pressure to perform, depressive disorders, lowered self-esteem and exam nerves were mentioned most often (Bachmann et al., 1999; Allgöwer, Stock & Krämer, 1995; HIS, 2010).
- Especially the study entry and final phase of studies are important stages of transition with striking effects on students’ mental health (Wöller, 1978; Allgöwer, Stock & Krämer, 1995; Bachmann et al., 1999; HIS, 2010). Both phases require a high adaptability to unfamiliar situations like for example coping with the loss of friends, change of residence or occupational decisions.
- Although a high percentage of students suffers from mental impairment, only few undergo treatment to improve their mental health (HIS, 2010; Soeder, Bastine & Holm-Hadulla, 2001).
- A conscientious confrontation with and integration of health-related issues in the curriculum enhances positive health behaviour (Stieber, 2010; Maierhofer, 2005). Students who were confronted with health-promoting activities and contents in the course of their studies tended to exercise more often or underwent preventive medical check-up to a greater extent (Stieber, 2010; Maierhofer, 2005).

Research results on teacher students’ wellbeing and health status also raise high concern. The Austrian Student Social Survey (HIS, 2010) found out that teacher students complained more frequently about health impairments than students of other disciplines of study (e.g. students of medicine, languages, law). 20% stated to suffer from stress-related illnesses. 19% felt constantly anxious and 28% complained about concentration difficulties. Schaarschmidt (2004)2 investigated over 8000 teachers (N = 7693) and teacher students (N = 738) on their health-promoting and health-deteriorating patterns of behaviour and experience. The study pointed out that already one in four teacher students showed health-impairing behaviour with symptoms of burnout and conditions

1 A follow-up survey in 2010 came up with same results.
2 Schaarschmidt & Kieschke (2007).
of depressive mood. Characteristic features of their health-deteriorating behaviour and experience are claimed to be a low working engagement combined with reduced resistance to stress and a high level of negative emotions.

As those findings on teacher students’ health let assume, not only acting teachers seem to be vulnerable to physical and mental impairments, already teacher students suffer from stress-related disorders.

Therefore, there is an urgent need for interventions on the part of educational institutions, which could support students coping with their mental impairments and which integrate actions in university life to improve students’ wellbeing. In this context, the very crucial question arises, what kind of educational interventions and services university teacher education needs to offer, in order to foster resource-oriented health behaviour from an early stage on.

1.3 Teacher’s Wellbeing and Its Effects on Teaching Quality

Sick teachers, who receive expansive treatment and retire early, constitute a multi-billion problem (Hillert & Schmitz, 2004). At the same time, sick teachers are not only an economic but also an organisational burden, as teachers’ wellbeing is linked to teaching quality, performance and productivity (Bajorek, Gulliford & Taskila, 2014). Schools already lack motivated, resilient and healthy teachers, who perform to the best of their ability and are able to meet the requirements for effective teaching in the long run. Teachers who are ill at work may find it difficult to teach lessons, which are challenging, effective and creative (Bajorek, Gulliford & Taskila, 2014).

Simbula et al. (2012) found out that a high level of wellbeing generates a high level of engagement towards teachers’ work, which consequently has a positive effect on teaching. Ostroff’s findings (1992) support this notion and have revealed a statistically significant positive relationship between teachers’ job satisfaction and their teaching performance. Teachers who claimed to feel highly satisfied showed a higher level of commitment and were more likely to show effective working relationships with their pupils. Briner & Dewberry (2007) reported that even student examination outcomes could be attributed to teachers’ health and wellbeing. Due to teaching absence, which in most cases is linked to ill-health, supply teachers need to stand in. However, they are costly and in many cases not able to understand the needs and abilities of their pupils, which also results in limited pupil support (Estyn, 2013).

The necessity to preserve teachers’ wellbeing also results from the overall educational mission and objective to teach “health” in schools. The curriculum for secondary and upper secondary schools in Austria (BMBF 2016) states that every teacher is requested to consistently integrate health education in his or her lessons. He or she is committed to raise awareness about pupils’ responsibility for their physical, psychological and social wellbeing. Pupils ought to be encouraged to develop a health-conscious lifestyle, which should have positive effects on their environment (BMBF 2016). In order to fulfil this task, teachers need to be familiar with health-deteriorating and health-promoting strategies and ought to reflect on their own lifestyle. Consequently, teachers also function as important role models concerning their own health-related behaviour.

2. Purpose of the Study

In German speaking countries little research has been carried out on teacher student’s wellbeing so far. All of them (Wöller, 1978; Schaarschmidt, 2004) concentrated on measuring dimensions of students’ health problems on a large scale level, but none of them inductively investigated health-modulating factors, which seem to impede or promote teacher students’ wellbeing. This emphasizes the need of further research on that topic. Therefore, this research project aims at identifying difficulties and obstacles in the course of teacher students’ studies which are
supposed to have an influence on their wellbeing and satisfaction. In detail, this study is expected to cover four different aspects of interest. It aims at investigating:

(a) dimensions and characteristics of teacher students’ wellbeing and emotional satisfaction,
(b) difficulties teacher students have to face in the course of their studies indicated by their wellbeing as well as possible causes,
(c) teacher students’ strategies of coping with study-relevant stress and fatigue as well as
(d) health-promoting resources.

The gained results are supposed to uncover patterns of behaviour that might be considered to be obstructive for teacher students’ future work life and could impede their health. It is also supposed to give an answer to the question if university teacher education offers suitable support to master those strains successfully and if further intervention is necessary to reduce dropout rates and teacher students’ loss of motivation during their years of study.

3. Research Method

Due to missing reference studies on teacher students’ wellbeing, an inductive, qualitative approach was chosen in order to explore the range and multi-factor genesis of experienced strains and resources with health affecting effects. In particular, teacher students’ perception of their wellbeing is decisive for their resilience and endurance and therefore needs to be investigated when following a resource-oriented and salutogenic approach (Antonovsky, 1997).

One-hour lasting narrative interviews (Schütze) were conducted with teacher students who retrospectively looked back on health affecting challenges during their years of study. This approach aimed at capturing social reality from the subject’s perspective (Jakob, 2003) in order to reconstruct their understanding of life from the inside out (Küsters, 2006). Furthermore, teachers’ wellbeing (Suh & Koo, 2008) is a condition which is strongly influenced by teachers’ subjective evaluation and is measured by self-report rather than by laboratory values.

The collected data was analysed with MaxQDA (Kuckartz, 2010) following the methodological approach of the Grounded Theory (Strauss and Corbin 2010). Strauss and Corbin’s (2010) coding paradigm was enriched with Glaser’s (1998) coding families in order to be able to reconstruct effects, phases, characteristics and points of intersections of the identified strains.

4. Sample

In total, 41 graduates were asked to reflect on facets and dimensions of their wellbeing and satisfaction in the course of university teacher education. The selection of study participants followed Strauss and Corbin’s (2010) theoretical sampling guidelines. Teacher students’ study progress and sociodemographic and biographical information constituted an essential reference. It was assumed that graduates might have experienced a wider range of study-related strains and have had a better understanding of their seriousness and impact than entrants or students in the middle of their studies. Gender selection was based on statistical data on the overall distribution of

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3 Therefore, also teacher students’ terminology has been taken up. Nevertheless, the mentioned symptoms are not to be mixed up with a clinical diagnosis, which probably would have brought forth other designations.

4 A person might feel healthy but could get a worrying laboratory diagnosis. On the other hand, he/she might feel sick but laboratory findings are within the normal range.
university teacher students in Austria (about 70% female, 30% male). At the time of investigation, the interviewed students were about 26 years old (mean value: 26.14) and 73% (30 students) studied in their 12th semester (mean value: 11.6). In comparison to science students (29%), language students were overrepresented (54%).

5. Selected Findings

5.1 Impairments and Symptoms

In a first approach, the variety of mentioned impairments and symptoms were categorized into five thematic fields of disorders. Overall, restlessness, sleeping disorders, digestive problems, conditions of pain, immunological diseases and emotional/depressive states came up as areas affecting students' wellbeing (Table 1). The identified symptoms mainly manifested themselves on a mental and emotional level. All of the interviewed graduates (100%, 41) confessed to have suffered from emotional detuning/depressive mood at least once during their studies, whereof about 46% (19) claimed to have repeatedly lost motivation to study and 32% (13) stated to have thought of dropout. Almost 50% (20) of the respondents claimed to have constantly suffered from a cold after examination time5.

<table>
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<th>Field of disorder</th>
<th>Percentage&lt;sup&gt;a&lt;/sup&gt;</th>
<th>Symptoms</th>
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<tr>
<td>restlessness</td>
<td>22% (9)</td>
<td>nervousness, racing heart, internal tension, reduced ability to concentrate</td>
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<tr>
<td>sleep</td>
<td>22% (9)</td>
<td>sleeplessness, nightmare, poor quality of sleep, insufficient duration of sleep</td>
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<tr>
<td>digestion</td>
<td>12% (5)</td>
<td>loss of appetite, sickness, queasy feeling</td>
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<td>fatigue</td>
<td>37% (15)</td>
<td>tiredness, lethargy, weariness</td>
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<tr>
<td>pain</td>
<td>27% (11)</td>
<td>back pain, stomach pain, lung pain, toothache</td>
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<td>immune system</td>
<td>51% (21)</td>
<td>fever, herpes, a cold, neurodermatitis</td>
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<td>emotions/depressive mood</td>
<td>100% (41)</td>
<td>dissatisfaction, mood swings, annoyance, feeling of losing control, consternation, fear of failure, frustration, despair, loss of motivation, intention to drop-out</td>
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Students linked their impairments to a variety of study-related strains and challenges, which were supposed to causally and conditionally have had influence on their wellbeing. According to the interviewed teacher students, failing an exam more than once caused for example severe nervous restlessness that led to a loss of appetite, sleeplessness, heart racing and exhaustion (Figure 1). One female student referred to her fear of having to repeat a failed exam as follows:

Once it happened that I passed my learning folder and my heart began to palpitate insanely. I felt nervous, agitated and I felt obliged to learn. But I didn’t really want to learn and to repeat the exam in that moment (I8:TI, l/w/E & F).7

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5 Studies have shown that long-term stress lowers immune defence (Lüder-Lühr, 1998), which seems to explain the overall susceptibility of stressed students to infectious diseases.

6 multiple responses, rounded value.

7 interview code.
5.2 Strains in Initial Teacher Education

After multiple steps of combining and bundling data in the course of setting up main categories for the mentioned challenges, 13 study-related strains were identified ranging from problems concerning study entry, strive for perfection, bad study conditions, doubts concerning adequacy of one’s job choice to problems with study organization or experiences of discrimination. In a final step, the identified strains were categorized according to their duration and field of appearance (Table 2).

Several of the mentioned challenges seem to be superficially relevant at university (e.g., unsatisfactory study conditions), others occurred due to subject-specific idiosyncrasies (e.g., aversion to reflective writing). Some of the strains students’ were confronted with came up just once in the course of their studies (e.g. urge to end up studies), others on the contrary worried students permanently (e.g., problems with study organization).

<table>
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<th>Table 2</th>
<th>Overview on Teacher Students’ Strains</th>
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<td></td>
<td>unspecific</td>
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<td><strong>sporadic</strong></td>
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<td></td>
<td>problems concerning study entry (reorganization, reorientation, relocation, resocialisation)</td>
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<td>problems in writing the final diploma thesis (own expectations, writing difficulties)</td>
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<td><strong>phasic</strong></td>
<td>consistent strive for perfectionism/perfectionist working behaviour</td>
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The appearance of those strains was modulated by a variety of different factors. Doubts concerning the adequacy of students’ study and job choice for example arose due to social, individual, content-related conditions (Figure 2). Lack of interest in study contents, the complexity of learning contents and a missing reference to school practice were mentioned to have caused severe questioning of one’s study and job choice as well as
inconvenient future working conditions and a noticed devaluation of the teaching profession by friends and family members:

I got little encouragement from my friends and family members. None of them found it superb that I wanted to become a teacher. Many of them asked me why I decided for this profession and they tried to convince me to do something more reasonable. […] There was always someone who said that I should reconsider my job choice and then you really start to think about it (I22: TI, II/m/Geo & E).

Figure 2  Modulating Factors and Causes of Doubts Concerning Job Choice

Almost all of the identified strains were interrelated to one another. Problems concerning the organization of studies, unsatisfactory study conditions and failing an exam aggravated doubts about the adequacy of one’s study and job choice. Distinctive strive for perfection, problems in writing the diploma thesis and organizational challenges intensified students’ urge to end up their studies. A decisive role can be ascribed to students’ perfectionist working behaviour, as it modulated the genesis of a wide range of strains. Problems in writing the diploma thesis, a felt urge to end up studies, organizational problems and failing an exam were notably influenced by students’ extent of perfectionism. It seemed to trigger off a high range of study-related complications. Therefore, particular attention needs to be drawn to those issues when attempting to improve students’ wellbeing in initial teacher education.8

5.3 Resources

According to the interviewed students, important resources, which helped to overcome fatiguing strains, were for example the feeling of being successful (e.g., good marks, positive feedback), students’ progress in studies, positive teaching experience, a balanced integration of spare time activities in university life, enthusiasm for the subject of study, staying abroad and social interchange with other students. Almost all of the respondents stated that the exchanging of information, views and experiences with other students was the most important resource to overcome several moments of crisis (e.g., intention of drop-out):

I had lots of people who supported me. I had friends who had experienced the same as I had. They were like companions; they had to overcome the same obstacles. I think talking to them helped me the most because they knew how it all worked. (I27: TI, II/w/I & E)

8 Also Schaarschmidt (2004) found out that perfectionist working behaviour had a decisive influence on teachers’ wellbeing.
Also the proof of teacher students’ occupational aptitude during their internships at school as well as their personal ambition and endurance played a crucial role when finishing up their studies. Factors, which were mentioned to have prevented discontent and emotional and mental stress during study time, were an optimistic attitude to life, a high degree of self-efficacy expectation, a quick adaption to unfamiliar circumstances and the ability to relax and to dissociate easily from study-related difficulties in one’s spare time. Specific attribution patterns also seem to have had an influence on student’s wellbeing. In contradiction to female students, male students tended to attribute failure to difficult circumstances rather than to their own missing capacities (e.g., I got a bad mark because the exam was too difficult versus I got a bad mark because I haven’t learned enough.) and therefore, showed a higher degree of self-confidence and self-esteem.9

6. Discussion and Recommendations

The gathered findings indicate that teacher students have to deal with a variety of strains with adverse effects on their wellbeing before entering work life. Students have experienced a wide range of impairments during study time that predominantly can be allocated to students’ emotional and mental wellbeing. Strains which were linked to students’ health relate mostly to general and personal problems including for example clarifying study and job doubts, organising one’s life, dealing with setbacks or lowering one’s high aspirations. This might indicate that university teacher education needs to provide additional time as well as a special kind of mentoring to guarantee better support for teacher students’ personality development (Neuß, 2009; Hericks, 2006). Especially female students’ tendency to show perfectionist working behaviour needs to be addressed, as it constitutes, as Schaarschmidt (2004) pointed out, a profession-specific hazard for teachers’ wellbeing. Supervision training, which supports students to cope with profession-related stress and strengthen their resilience, needs to be offered to a higher extent (Schaarschmidt & Kieschke, 2007). Teacher students also need to be encouraged to participate in those trainings for a longer period of time. Furthermore, it also needs to be discussed if supervision on teacher students’ wellbeing and self-development should become an integral curricular element in teacher education.

Moreover, it turned out that social interchange, especially with fellow students (function: collective lamenting, feeling of being integrated, getting support etc.), and study-integrated practical training (function: confirmation of job suitability, enhancement of positive anticipation concerning occupational future, experiences of success) represent important resources. Therefore, social interchange especially between novices and experienced teacher students has to be promoted (e.g., ceremonies or intensified tutoring) and study-integrated practical training phases need to be maintained or even increased.

A desideratum in scholarly research remain national and also international surveys on teacher students’ wellbeing, which analyse to which extent study conditions and personality traits trigger off overstress which manifests itself during initial teacher education and remains a health affecting problem also within the further professional career. Also gender differences and their connection to emotional/mental wellbeing need to be investigated more accurately, as this empirical study has identified striking gender-related disparities in perceiving and assessing one’s self-efficacy and self-esteem.

Keeping teachers’ high responsibility in mind, these results also need to be discussed in the scope of the current reformation process of teacher education in Austria and should have an influence on the shaping of

9 As the sample of this investigation was not big enough to make valid statements on gender-specific differences, further research on that issue is needed.
curricular contents. Against the backdrop of Arthur Schopenhauer’s saying, “Health isn’t everything, but everything is nothing without health”, it should be realized that teacher education ought to support students’ professional development and wellbeing in order to promote a successful work entry and to lay the foundation for a satisfied and healthy future work life.

References


