2023

NATIONAL AGENDA FOR WELLBEING IN TEACHER EDUCATION



INTRODUCTION

This document represents a National Agenda for the Teachers of Tomorrow initiative and network. The Teachers of Tomorrow initiative proposes an upstream approach to addressing student wellbeing through teacher preparedness, situating it both as a proximal factor with immediate student impact, and as a critical lever of systemic change utilizing a Comprehensive School Health (CSH) framework.

Health and education of children and youth are interdependent. Healthy students are better learners, and better-educated students are healthier [1, 2, 3, 4, 5, 6]. Schools, and the teachers working with children and youth, are an important component of healthy child development, impacting health outcomes later in life. However, many teachers in Canadian schools have not learned health promotion frameworks nor have the resources or skills to implement them. Little has been done to embed wellbeing within the curriculum or integrate a healthy settings approach within the environments of postsecondary institutions that educate future teachers [7, 8]. For students in both K-12 and postsecondary education (across educational tiers) to benefit from an increased focus on well-being in their respective educational settings, purposeful and meaningful interdisciplinary and cross-sector partnerships are needed to shift evidence into practice. This is the work of the Teachers of Tomorrow network.

This National Agenda was developed with the intention to outline a compelling case for action on the issue of wellbeing in Canadian teacher education programmes. It was co-constructed and mutually informed by participants of the National Forum on Wellness in Post-secondary Education 2023 in Lake Louise Alberta. Participants included a cross-section of interest-holders across educational tiers, including a Dean of Education, school trustees, government ministry representatives, faculty, instructors, students, and health partners. The sections below outline three priority areas, recommended actions and next steps for the network to consider as we work collectively to create healthy school communities, across the education continuum, and across Canada.



PRIORITY AREAS

Three priority areas were identified for inclusion in a National Agenda for Wellbeing in Teacher Education Programs. **Implementation** refers to the set of actions and activities to embed wellbeing in teacher education programs utilizing the Comprehensive School Health framework. **Research** includes activities intended to increase knowledge/evidence as it relates to Comprehensive School Health in teacher education programs. **Advocacy** refers to activities intended to highlight the importance of wellbeing in teacher education programs and increase faculty, university, public, provincial, and federal support for this work. The vision we hold for each of these priority areas is described below.

Implementation



Teacher preparation programs are accountable to the wellbeing of their interest-holders, are student-centred, developed with student voice, and promote equity, diversity, and inclusion. Collaboration across sectors and academics/ies is valued. Structural changes are mirrored across educational tiers.

Research



Data demonstrates the impact and value of health promotion, and this data is applied in practice across educational tiers. Robust, transdisciplinary research networks exist provincially, nationally, and internationally to support researchers to advance knowledge at every stage of their careers.

Advocacy



Educational policy-makers and leaders value wellbeing and employ a wellbeing policy framework in their decisions. Adequate funding is available and accessible.

RECOMMENDED ACTIONS

Through a process of discussion and selection, the following actions emerged as recommendations to bridge the current state of wellbeing in teacher education programs with the vision of the future.

Use common language and messages. Build a set of key messages with common language to mobilize advocates.

Collaborate more. Develop channels for deeper collaboration between and across faculties, institutions, partner organizations, allied movements (e.g., mental health), and educational tiers (e.g., advisory councils).

Increase leader readiness. Invest in professional learning around the value and practice of wellbeing for senior leaders and decision-makers within Faculties of Education.

Develop health-promoting policies. Shift local policy development to include diverse voices and perspectives, including those of health champions and students.

Innovate wellbeing research. Consider how technology like artificial intelligence and big data, including wearable technology and social media, can be used to advance wellbeing research.

Increase representation in decision-making. Maximize diversity of backgrounds, roles and lived experiences in decision-making processes so that they reflect the populations we seek to serve.

Amplify student voice. Centre the ways in which student voice informs all aspects of teacher education programs.

Transform academic culture. Consider and prioritize wellbeing in faculty norms, relationship dynamics, recruitment and hiring practices, incentivization, and career development.

Redesign teacher education programs. Consider curriculum selection and coursework, strengths-based and student-centered development, and pedagogical and assessment practices to support a wellbeing experience for students.

NEXT STEPS

This document is designed to inspire action on the issue of wellbeing in teacher education programs for individuals at any level of the system, and to guide collective action for networks working across the system.

Whether working individually or collectively, you are encouraged to identify 1-3 of the recommended actions to embed in your practice, plans, programs, and policies. Set specific, measurable, achievable, relevant, and time-oriented goals around your identified actions and be vocal about your commitment to achieving them. Re-assess often and actively maintain partnerships that grow your capacity toward collective action and increased sustainability.

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REFERENCES

- 1. Wong, C. A., Perrin, J. M., & Damp; McClellan, M. (2018). Making the case for value-based payment reform in children's health care. JAMA Pediatrics, 172(6), 513–514. https://doi.org/10.1001/jamapediatrics.2018.0129
- 2. Heckman, J. J., & D. V. (2007). The productivity argument for investing in young children. Review of Agricultural Economics, 29(3), 446–493. https://doi.org/10.1111/j.1467-9353.2007.00359.x
- 3. Dodge, R., Daly, A. P., Huyton, J., & Samp; Sanders, L. D. (2012). The challenge of defining wellbeing. International Journal of Wellbeing, 2(3), 222–235. https://doi.org/10.5502/ijw.v2.i3.4
- 4. World Health Organization. (1986 November 17-21). Ottawa Charter for Health Promotion: An international conference on health promotion: The move towards a new public health. Ottawa, Ontario, Canada. https://www.who.int/healthpromotion/conferences/previous/ottawa/en/
- 5. Dooris M., & Do
- 6. Rodger, S., Cummings, A., & Deschied, A. W. (2006). Who is caring for our most vulnerable children? The motivation to foster in child welfare. Child Abuse & Deschied, 30(10), 1129–1142. https://doi.org/10.1016/j.chiabu.2006.04.005
- 7. Dewhirst, S., Pickett, K., Speller, V., Shepherd, J., Byrne, J., Almond, P., Grace, M., Hartwell, D., & England, Roderick, P. (2014). Are trainee teachers being adequately prepared to promote the health and well-being of school children? A survey of current practice. Journal of Public Health (Oxford, England), 36(3), 467–475. https://doi.org/10.1093/pubmed/fdt103
- 8. Moynihan, S., & Damp; Mannix-McNamara, P. (2005). The inclusion of health education curriculum in initial teacher education: Exploring the possibilities. International Journal for Cross-Disciplinary Subjects in Education, 5(1), 1609-1617. https://infonomics-society.org/wp-content/uploads/ijcdse/published-papers/volume-5-2014/The-Inclusion-of-Health-Education-Curriculum-in-Initial-Teacher-Education.pdf

Contact

Dr. Shelly Russell-Mayhew

mkrussel@ucalgary.ca

Kerri Murray

kerri@everactive.org

Louise McClelland

louise@everactive.org

We thank you for your interest and contributions toward wellbeing in teacher education programs