

## The Condition of Education: Teacher Mental Health Absenteeism in the Aftermath of COVID-19

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### ABSTRACT

*The implications of teacher absenteeism are incommensurable. While absenteeism is a longstanding issue in education, there is a gap in the current literature addressing teachers' mental health and absenteeism after schools reopened following the first wave of the COVID-19 virus. This qualitative descriptive study is anchored on the Job Demands-Job Resources (JD-R) model of organizational stress and well-being. The purpose of the study was twofold: a) to describe teacher absenteeism related to teachers' mental health stemming from the pandemic's stressful job demands after schools reopened in the school year 2021-2022 in two Eastern regions of the U.S., and b) to describe the availability of job resources such as administrative mental health support after schools reopened in the school year 2021-2022 in two Eastern regions of the U.S. The study sample consisted of 12 educators: Four teachers and eight administrators were selected using a purposive sample strategy. Semi-structured interviews were carefully designed to extract relevant data in alignment with the research questions. Thematic data analysis was conducted based on the study's method and design. The study results revealed four themes: New and strenuous job demands, teachers' mental health decline, mental health absenteeism, and availability of mental health administrative support to mitigate mental health absenteeism.*

**KEYWORDS:** absenteeism, job demands, job resources, mental health

O'Sullivan (2022) referred to teacher absenteeism as "the elephant in the classroom" (p. 344). The metaphorical elephant aptly captures the scale and dimensions of the teacher absenteeism challenges confronting educational organizations in post-pandemic years. The phenomenon may overshadow the positive effects of teacher experience and pedagogical knowledge in the classroom (Clotfelter et al., 2009). Beyond the financial costs, absenteeism also erodes morale, negatively influencing the organization's overall climate (Utami & Harini, 2019). The phenomenon's metastatic consequences expand outside the schools' walls, adversely affecting society.

Although teacher absenteeism has long been a prevailing concern in education, the lingering impact of the COVID-19 pandemic has unveiled a marked exacerbation of this issue. Substantiating the previous assertion, federal data, as elucidated by Sparks (2022), attested that many educators nationwide missed 10% or more workdays after schools reopened for face-to-face instruction. The National Center for Education Statistics (2023) underscored a staggering 72% surge in teacher absenteeism, higher than in pre-pandemic years. Furthermore, the Institute of Education Sciences (2022) reported a noteworthy escalation in teacher absenteeism

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among educators within schools characterized by a predominant minority demographic and those situated in impoverished socio-economic contexts.

Absenteeism is higher in teaching than in other professions (Rosenblatt & Shirom, 2005) and has been directly linked to teacher mental health disorders such as depression and anxiety (Peele & Wolf, 2021). The nexus is further accentuated by the research of Schonfeld et al. (2017), revealing elevated rates of mental health disorders within the teaching profession compared to the workforce in other fields. The transformative impact of the COVID-19 pandemic drastically altered teachers' working conditions, shifting job demands coupled with a scarcity of job resources (Lang & Valk, 2022). Studies addressing teachers' mental health after the first wave of the COVID-19 virus showed that teachers' psychological well-being has deteriorated (Baker et al., 2021; Jakubowski & Sitko-Dominik, 2021; Kush et al., 2022).

The presence of teachers in the classroom holds paramount significance. According to Saenz-Armstrong (2020), mathematical proficiency is adversely impacted when teachers are absent ten days in a school year. The correlation between teacher attendance and math accomplishment is unsurprising, as research studies position educators as essential contributors to student achievement (Liu & Loeb, 2021; Miller et al., 2008). Considering the gravity of these assertions and the dearth of scholarly studies addressing teacher mental health absenteeism after schools reopened in the aftermath of the first wave of COVID-19, it becomes imperative to delve into this problem through academic inquiry to shed light on teacher absenteeism in times of crises.

The purposes of this qualitative study were (a) To describe teacher absenteeism related to mental health stemming from the COVID-19 pandemic's stressful job demands after schools reopened in the school year 2021-2022 in two Eastern regions of the U.S; and (b) To describe the availability of job resources such as administrative mental health support after schools reopened in the school year 2021-2022 in two Eastern regions of the U.S. In alignment with the research problem and purpose, the following research questions were developed:

1. How do middle school teachers describe teacher absenteeism related to mental health stemming from the COVID-19 pandemic's stressful job demands after schools reopened for the school year 2021–2022 in two different Eastern regions of the U.S.?
2. How do middle school administrators describe teacher absenteeism related to mental health stemming from the COVID-19 pandemic's stressful job demands after schools reopened for the school year 2021–2022 in two different Eastern regions of the U.S.?
3. How do middle school teachers describe the availability of job resources, particularly the support school administrators deployed towards teachers' mental health to mitigate mental health-related absenteeism after reopening schools for the school year 2021–2022 in two Eastern regions of the U.S.?
4. How do middle school administrators describe the availability of job resources, particularly the support school administrators deployed towards teachers' mental health to mitigate mental health-related absenteeism after reopening schools for the school year 2021–2022 in two Eastern regions of the U.S.?

## **Literature Review**

### **Teacher Absenteeism in Pre-Pandemic Years**

Diverse conceptualizations of absenteeism pervade the scholarly discourse in pre-pandemic years. Rosenblatt and Shirom (2005) construed teacher absenteeism as a failure of employees to report for work as scheduled, regardless of the reason. Frank (1998) contended that absenteeism encompasses controllable absences caused by attitudinal problems, illness, injuries, or preventable personal absences. Other scholars viewed absenteeism as a mechanism

to avoid discomfort on the job (Steers & Rhodes, 1978) and an intentional act of choice (Jacobson, 1990). Meanwhile, Jacobson et al. (1993) operationalized absenteeism as habitual or recurrent absences.

A significant trend in the literature on teacher absenteeism was the analysis of patterns related to teacher attendance. The research has been instrumental in understanding when or why absences occur. Previous research studies suggest that teacher absences can be influenced by personal factors, school characteristics, district characteristics, and policies (Miller et al., 2008). A typical pattern in teacher absences in the pre-pandemic literature was the high incidence of absenteeism on Mondays, Fridays, and days preceding a holiday (Miller et al., 2008; Winkler, 1980). Pitkoff (1993) noted that teachers holding tenure status employment were among those with higher absence rates.

Research has established a correlation between negative perceptions of the workplace and job satisfaction with employees' attendance (Utami & Harini, 2019). Other studies investigating variables related to teacher absenteeism suggest that age, gender, and other personal characteristics were directly linked to this problem (Ferris et al., 1988; Foldesy & Foster, 1989). Areas of contention in the literature revealed that some researchers in the 1970s and 1980s disagreed on whether age factored in teacher absenteeism (Winkler, 1980).

Studies conducted in the 1980s on burnout syndrome prompted educational researchers to investigate the connection between burnout and teacher absenteeism (Cunningham, 1983; Kahill, 1988). Maslach and Jackson (1981) asserted that burnout stems from teachers' stressful job conditions, leading to chronic emotional exhaustion, fatigue, negative attitudes toward students, and diminished feelings of accomplishment. Campbell (1983) suggested that the syndrome triggers adverse reactions in the nervous system in response to stress, resulting in physical, mental, and emotional ailments, potentially exacerbating absenteeism. For example, Foldesy and Foster (1989) and Elliott (1982) noted that inner-city schoolteachers working with minority and disadvantaged students exhibited higher stress levels and also exhibited increased absence rates. In past research, teacher absenteeism has been attributed to severe stress and anxiety (Pohl, 2001; Wiley, 2000).

### **The Pandemic and Teacher Absenteeism**

Data on teacher absenteeism before the pandemic showed a decrease in teacher absences in the last two decades before the emergence of the virus (Greene & Butcher, 2023). However, education leaders noted a surge in teacher absenteeism rates in 2022, which worsened in 2023 (Greene & Butcher, 2023). Data from New York City also indicated that teachers were exhausting their sick days, leading to more frequent absences (Elsen-Rooney, 2023). Daly (2024) also reported that teachers in Chicago Public Schools were absent at least ten times in the 2022 school year. While reports underscore the seriousness of the rise of teacher absenteeism following the initial wave of the pandemic, there is a scarcity of studies exploring this phenomenon. Therefore, questions linger regarding the surge of teacher absenteeism after schools reopened for face-to-face instruction in the school year 2021.

### **Examining the Literature on Teacher Mental Health Absenteeism**

The World Health Organization (2022a) explained that mental health conditions affect a person's capacity to participate in work, impacting performance, productivity, and rates of presenteeism and absenteeism. Ferguson et al. (2022) noted that many people use sick days because of mental illness. Therefore, mental health and work are integrally intertwined (World Health Organization, 2022a).

The literature on mental health day absences remains limited in scope. Although anecdotal evidence exists regarding these absences, comprehensive research is lacking (Lamont et al., 2017). Similarly, health organizations such as Mayo Clinic Health Care System

(2022) recognized the benefits of taking time away from daily obligations, including work, to prioritize self-care. Mayo Clinic Health Care System (2022) defined Mental Health Day as a brief period away from regular obligations to replenish and revitalize mental well-being. A mental-health day absence deliberately alleviates distress, low mood, and diminished motivation (Mayo Clinic Health Care System, 2022).

Teachers experienced considerable stress from the COVID-19 pandemic (Kotowski et al., 2022; Pressley et al., 2021). Chronic stress, combined with a lack of support and resources, may have led teachers to experience burnout and adverse mental health outcomes (Baker et al., 2021). Recent research on teacher well-being during and after the pandemic highlighted the significant negative impact of heightened work demands and inadequate administrative support on the mental health of educators during this time (Baker et al., 2021; Ferguson et al., 2022; Santiago et al., 2023; Sokal et al., 2020). The results of recent research on teacher absenteeism and the deterioration of educators' mental health raise questions on whether educators in the U.S. may also be using more sick days in the form of mental health absences to alleviate the stress experienced throughout the COVID-19 pandemic.

### **The Job-Demands Model: Overview**

Educational researchers have widely used the Job Demands-Job Resources model (JDR) to examine teacher well-being and stress (Dicke et al., 2018; Lang & Valk, 2022). The model has assisted researchers in understanding the physical, psychological, and organizational aspects of the job requiring sustained emotional and cognitive effort (Bakker & Demerouti, 2007; Demerouti et al., 2001). One proposition of JD-R is that burnout or work engagement may result from an organization's working conditions, job demands, and job resources (Bakker & Demerouti, 2007).

Demerouti, Bakker, Nachreiner, and Schaufeli (2001) posit that job demands encompass the characteristics of the job necessitating mental or physical exertion of energy and are associated with deleterious physiological and psychological costs on the individual. Simbula (2010) suggested that elevated job demands can deplete employees' mental and physical resources, resulting in a health impairment process characterized by energy exhaustion. On the other hand, Demerouti, Bakker, Nachreiner, and Schaufeli (2001) referred to job resources as the physical, social, and organizational characteristics that may efficiently counterattack the adverse effects of the job (mental or physical) demands, thus leading to work engagement. Simbula (2010) explained that job engagement encompasses a persistent, pervasive, and positive motivational state of fulfillment.

### **Explaining Teacher Absenteeism Through the JD-R Lens**

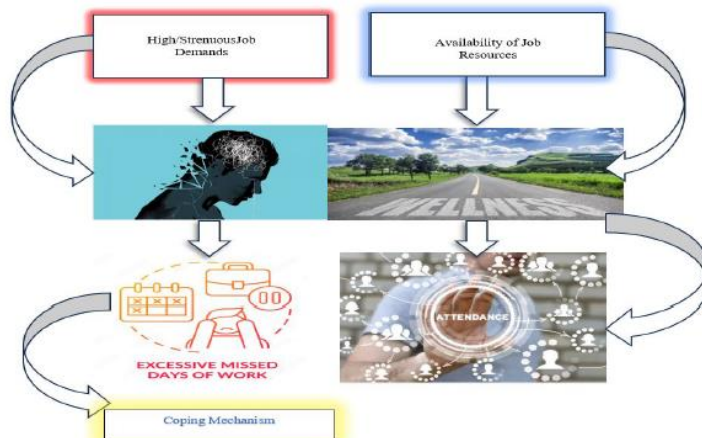
According to Schaufeli et al. (2009), the JD-R model is instrumental in explaining sickness absenteeism. Schaufeli et al. (2009) categorized the motivations to report ill-related absences under two umbrellas: Involuntary and voluntary. A motivational process catapults voluntary sickness absenteeism; therefore, employees may want to withdraw due to low job satisfaction and poor organizational commitment (Schaufeli et al., 2009). On the other hand, involuntary absenteeism is a response to stress induced by job demands or an inability to fulfill job requirements (Schaufeli et al., 2009). Schaufeli et al. (2009) employed a stress reaction hypothesis to demonstrate how absenteeism can be perceived as a coping mechanism to manage the stress of job demands. Hence, it is crucial to understand that, unlike voluntary absenteeism, involuntary absences are not solely a response to job satisfaction or organizational commitment but also a response to job strain (Schaufeli et al., 2009).

Vignoli et al. (2016) also explained that job demands pose a psychosocial risk factor, leading to adverse health conditions and causing depression-related absenteeism. Stewart et al. (2003) and Vignoli et al. (2016) found that, on average, depression-related absenteeism results in a

loss of productivity of one hour per week, thus equating to a loss of 8.3 billion U.S. dollars. Furthermore, Schaufeli et al. (2009) and Vignoli et al. (2016) also contended that job demands may cause work-family conflict as, in many cases, employers expect employees to put extra time into completing work-related tasks. However, the availability of job resources may buffer the impact of absenteeism (Demerouti, Bouwman, & Sanz-Vergel, 2011). Figure 1 depicts absenteeism through the lens of the JD-R model.

**Figure 1**

*The Job Demands-Resources and Emotion Regulation Theory: An Explanation of Absenteeism*



*Note.* Figure 1 illustrates how job demands and resource availability may affect employees' decision to be absent from work.

## Methodology

A description of phenomena in social research characterizes qualitative descriptive studies, and it is appropriate to gain insight from actors about a phenomenon that has not been widely understood (Kim et al., 2017). Qualitative descriptive studies do not require the researcher to commit to data interpretation or explain phenomena, as is the case in other qualitative designs (Lambert & Lambert, 2012). However, like any other qualitative research approach, qualitative descriptive studies aim to obtain data in its natural state, drawing from the tenets of naturalistic inquiry (Lambert & Lambert, 2012). A qualitative methodology and a descriptive design were deemed appropriate for this study as a description of teacher absenteeism due to mental health required gathering the perspectives of actors recounting the experience.

## Participants

After obtaining permission from the Institutional Review Board (IRB), recruitment of participants commenced. A total of 11 individuals voluntarily participated in the study. Four middle school teachers and eight administrators comprised a purposive sample. Teachers and administrators were included if they had more than three years of experience before the 2021-2022 school year. The ages of participants ranged from 35 to 60 years of age. Five participants were females, and seven were males.

## Data Collection and Data Analysis Protocol

After screening potential actors, consent forms were sent to each participant for signature as established by IRB protocols. Subsequently, interviews were individually conducted via the Zoom platform. An audio recording was obtained to ensure the accuracy of



**Table 1**  
*Themes in Alignment with the Research Questions*

Research Questions	Themes
R1- How do middle school teachers describe teacher absenteeism related to mental health stemming from the COVID-19 pandemic’s stressful job demands after schools reopened for the school year 2021-2022 in two different Eastern regions of the U.S.?	1-New and Strenuous job demands
R2- How do middle school administrators describe teacher absenteeism related to mental health stemming from the COVID-19 pandemic’s stressful job demands after schools reopened for the school year 2021-2022 in two different Eastern regions of the U.S.?	2-Mental health decline 3-Mental health absenteeism
R3- How do middle school teachers describe the availability of job resources, particularly the support school administrators deployed towards teachers’ mental health well-being to mitigate mental health-related absenteeism after reopening schools for the academic year 2021-2022 in two Eastern regions of the U.S.?	4- Availability of mental health administrative support to ameliorate mental health absenteeism
R4- How do middle school administrators describe the availability of job resources, particularly the support school administrators deployed towards teachers’ mental health well-being to mitigate mental health-related absenteeism after reopening schools for the academic year 2021-2022 in two Eastern regions of the U.S.?	

**Theme 1: Strenuous Job Demands**

Participants in this study concurred that job demands became strenuous following the reopening of schools after the initial wave of the COVID-19 virus. Some respondents observed that job demands became more taxing, surpassing the stress levels encountered during the first wave of the virus. T2 stated, “Middle school teachers had a hard transition coming back to teach face-to-face. I was certainly wearing different new hats than I previously wore.” T4 expressed frustration and stress and stated, “I had to ensure my students followed COVID protocols. That was stressful; they would constantly remove their masks.” A school administrator (A5) also explained, “The delivery methods changed significantly, as well as the needs of students who came back with deeper learning gaps.” A3 commented that technology was an issue. “I think those were really big things that created more stressors and made teachers feel like a fish out of the water.” All participants noticed a change in student behavior when referring to student discipline. For example, the following comment made by A2 sheds light on the issue: “Students acted as if they were uncivilized when they returned and had to be reintroduced into school again; they had to be reintroduced to school expectations again.”

**Theme 2: Mental Health Decline**

Participants emphasized changes in teachers’ mental health and described a noticeable mental health decline upon returning to school for face-to-face instruction. For example, T3 described episodes of high anxiety and panic attacks and stated, “I had heart palpitations, I was sweating and constantly thinking, worried. At times, I was drenched in sweat.” A7 purported, “I noticed a mental health decline in my teachers. There was a lot more anxiety and irritability, and teachers were leaving in masses due to the stress.” T1 lamented suffering from depression,

leading to a desire to quit teaching. “I felt empty, my mental health took a turn for the worse, and up to this day, I am on medication; I wanted to quit.”

### **Theme 3: Mental Health Absenteeism**

Words and phrases such as absenteeism, poor mental health, and mental health absences were pivotal in the identification of theme three. All participants, except A6, perceived mental health-related absenteeism as increasing in the 2021-2022 academic year after schools reopened. “ I think, you know, all teachers, you know, a few times a year take that quote-unquote, mental health day, but I didn’t see a number spike at all.” On the same subject, another A1 commented:

I would absolutely agree that absenteeism went higher, but not significantly higher, and teachers very comfortably verbalized in my presence and their colleagues that they were taking a mental health day, which was not, I guess, before COVID. That was not the practice. Even if you were taking a mental health day, you didn’t say anything; you just call it, you know, you called that sick, or they took a personal day, but you didn’t identify the part of taking the mental health day, I think that now, it’s more socially acceptable for teachers to make those statements. I don’t necessarily agree with sharing that information in that way because that’s not truly what a sick day is for, by definition; however, I understand that. I understand the need because of the stressful demands of a post-COVID world.

When describing mental health symptoms and making the decision to be absent, T3 said, “My anxiety levels were so high on certain days that I felt going to work was going to make it worse, so I stayed home.” T2 also added, “I dreaded going to work, and I immediately went into fight or flight mode, so I was absent a lot for my mental health.” Some participants also attributed some of the mental health absences as a result of a diminished work-home life balance. “I did not have time for my family. I had so much to do,” T4 stated.

### **Theme 4: Availability of administrative Mental Health Support to Ameliorate Teacher Absenteeism**

One of the study’s goals was to obtain a comprehensive description of job resources employed by school and district administrators to support and foster teacher mental health to mitigate absenteeism. Notably, the perception of support between teachers and school administrators was in stark contrast. Despite assertions of school leaders regarding the allocation of substantial resources to bolster teachers’ mental health and ameliorate absenteeism, teachers described those endeavors as insufficient or perceived school leaders lacking the capacity to furnish adequate resources.

A1 stated, “Safe spaces were created for teachers to vent, and resources such as mental health bulletins were available.”. In coordination with district leaders, other school administrators claimed to have provided teachers with Zen rooms, massages, meditation, and Yoga classes. A3 claimed: “I encouraged teachers to take a mental health day when needed.” Some administrators voiced apprehension regarding the potential establishment of a mental health day absenteeism pattern, thus affecting the organization’s climate: “We will have to find ways to break that habit the following school year. We simply do not have substitutes,” A7 stated.

Conversely, teachers expressed concern and dissatisfaction with administrators’ empathy levels. For example, T1 stated, “I told my school administrator I needed a mental health day, and I was told to put it in the system as a personal day, then the administration



denied it; there was no empathy; they did not care.” Another teacher, T3, said, “There was no support on the part of the administration; I don’t think they knew what to do or were prepared.”

Both teachers and administrators concurred that teachers were more open in acknowledging and availing themselves of mental health days. “In the past, teachers would put the absence quietly, and now they tell me, and that is different; teachers are more open to advocating for mental health days,” A5 commented. T2 also explained, “My colleagues would openly say they needed a day for mental health, and they would be absent the next day or when they needed it.”

## **Discussion**

The findings of this study are unique. While the extant literature addresses teacher mental health before and after COVID-19, no previous studies have directly addressed the topic of teacher mental health absenteeism during the pandemic when schools reopened for face-to-face instruction in the 2021-2022 school year. Hence its significance.

### **Theme One: Strenuous Job Demands and the Extant Literature**

In the present study, participants reported more taxing job demands following the reopening of schools for face-to-face instruction. However, the literature does not provide clear insights into whether job demands increased more during school closures or after schools resumed in-person teaching. For example, Jakubowski and Sitko-Dominik (2021) highlighted that during the first wave of the virus, the learning curve teachers experienced in terms of technology was steep, contributing to higher pre-pandemic levels of job-demands-induced stress. Similarly, Marshall et al. (2023) suggested that teachers worked longer hours in the initial phase of the pandemic.

In stark contrast with these assertions, Lang and Valk (2022) noted that teachers reported increased working hours after schools reopened, stemming from extra planning for hybrid classes and teaching students with significant learning gaps. Consequently, teachers had higher job demands after schools reopened. Demerouti and Bakker (2023) and Ozamiz-Etxebarria et al. (2021) also affirmed that organizational job demands underwent drastic changes for educators upon returning to face-to-face instruction.

Demerouti and Bakker (2023) argued that the substantial confusion teachers experienced during the first wave of the virus, persisting upon returning to the classrooms, may have thwarted their experience and knowledge. A participant vividly encapsulated the new demands and abrupt cognitive challenges teachers encountered during this time, likening the experience to teachers feeling akin to “fish out of water.”

### **Theme Two: Mental Health Decline and the Extant Literature**

Similar to theme one, studies conducted during the pandemic are unclear on whether teachers’ mental health worsened after schools reopened in 2021, as reported in this study’s findings. For instance, Kush et al. (2022) found a higher prevalence of mental health symptoms among K-12 teachers who taught remotely compared to those teaching in person during the pandemic. On the other hand, Pressley et al. (2023) surveyed 830 PK-12 teachers nationwide and concluded that the challenges of closing the learning gaps and managing other job demands in the school year 2021-2022 resulted in low morale and a decline in mental health among teachers.

In alignment with the findings of theme two, the literature supports a high prevalence of teacher mental health erosion during all phases of the pandemic. Studies in China reported growing anxiety and post-traumatic stress disorder (PTSD) among teachers (Fan et al., 2021; Li, 2023). In other parts of the world, such as England, Spain, Poland, and North and South

America, teachers also reported more depression, anxiety, and other mental health problems (Hossain et al., 2022; Vargas-Rubilar & Oros, 2021).

### **Theme Three: Mental Health Absenteeism and the Extant Literature**

The results of theme three signaled that teacher absenteeism increased upon the reopening of schools in 2021. These findings are supported by the literature of different government and media sources (Greene & Butcher, 2023; National Center for Education Statistics, 2023; Sparks, 2022). However, the extant literature does not directly address absenteeism stemming from mental health issues, and studies focusing on this aspect are either scarce or based on data collected prior to the pandemic. For example, Ferguson et al. (2022) noted that in 2018, one out of every 83 teachers in England sought long-term leave due to stress and mental health concerns. The same study also highlighted gender discrepancy, with women utilizing sick leave for psychiatric reasons more frequently than men.

An examination of the existing literature revealed a concerning prevalence of anxiety, stress, and depression among educators during the return to in-person teaching amidst the pandemic, potentially contributing to a rise in mental-health-related absences among teachers (Ozamiz-Etxebarria et al., 2021). While mental health absenteeism in schools nationwide may have transpired into instances of leave of absence, it should be noted that, in the current study, teachers and administrators described mental health absenteeism without referencing or alluding to formal mental health leave of absence. The term used by participants was “mental health day.” This term was not identified in the formal literature addressing teacher absenteeism.

According to Mayo Clinic Health Care System (2022), workers may opt for a mental health day absence to distance themselves from stressful environments. Wong and Greenwood (2023) stated that as individuals recognize the importance of mental health, they reassess their choices. These assertions resonate with the accounts of the participants in this study, who candidly informed their administrators they were taking a mental health day off from work.

Teacher mental health-related absences can be categorized as involuntary absenteeism, as outlined in the JD-R model by Schaufeli et al. (2009). Involuntary absenteeism serves as a coping mechanism to navigate taxing job demands, reflecting the individual’s perceived incapacity to fulfill assigned tasks (Schaufeli et al., 2009). Nevertheless, it is also plausible that low job satisfaction could have prompted teachers to engage in voluntary absenteeism.

### **Theme Four Results and The Extant Literature**

At the core of the JD-R model is the conceptualization of job resources. Demerouti and Bakker (2023) explained that the overall well-being of an organization can be defined by the interplay of job demands and the accessibility of job resources. During periods of crisis, such as the COVID-19 pandemic, the availability of crucial job resources (e.g., supportive leadership) had significant implications for employees’ mental health and overall well-being (Demerouti & Bakker, 2023). When examining mental-health support trends during this period, Hesham Abdou Ahmed (2023) reported that administrators introduced psychological support services within teachers’ insurance plans following the reopening of schools.

However, the findings illustrated in theme four uncovered contrasting perspectives between teachers and school administrators regarding support. Administrators believed that teachers received ample support, whereas teachers perceived the opposite. The disparity of viewpoints is concerning, particularly in light of existing research underscoring the critical role of administrative support in teachers’ mental well-being and teacher absenteeism (Demerouti & Bakker, 2023).

The misalignment in perceptions may find its origins in various factors. Primarily, this generation of school leaders and teachers has never experienced a pandemic in their lifetime.

Consequently, leaders may have been unprepared to deal with the magnitude of the phenomenon, and the conventional problem-solving approaches employed before the pandemic proved ineffective (Cutt et al., 2021). The lack of preparation may have led to the absence of pandemic protocols, leaving teachers ill-equipped and at risk of burnout and mental health challenges. Additionally, opposing views between teachers and administrators may stem from a lack of comprehensive assessment of employees' needs.

### **Limitations**

The study is constrained by a limited number of participating teachers, with only four volunteers within this population. The scarcity of teacher involvement may be ascribed to potential hesitancy to disclose mental health concerns, possibly fueled by fear of adverse professional consequences, resulting in potential underreporting. Another limitation may stem from the possibility of inaccurate responses. For instance, both school administrators and teachers may have provided misleading accounts.

Data collection timing poses a limitation because the study is confined to the school year 2021-2022, raising the possibility of participants forgetting or omitting details. Additionally, the generalizability of results is hampered by the heterogeneous impact of the pandemic on organizations, resulting in varied demands and resource allocation. A challenge in qualitative data analysis is the inherent subjectivity introduced during coding and interpretation of the results, posing a potential risk of bias.

### **Implications and Recommendations**

The investigation into mental-health-related absenteeism among educators following the reopening of schools after the initial wave of the COVID-19 virus unveiled significant implications for the future of education. As educational institutions grapple with the aftermath of the pandemic, understanding the profound impact of teacher mental health on absenteeism becomes imperative for sustainable and effective educational systems. This section delves into the multifaceted implications of the study's findings, emphasizing the urgent need to incorporate immediate changes into practice, policy, and research. These adjustments aim to cultivate resilient and supportive educational organizations, prioritizing educators' well-being.

### **Reshaping Organizational Culture from Top to Bottom: A Paradigm Shift in Educational Practices**

Shifting organizational culture from prioritizing productivity over the well-being of employees to one that values people first is imperative for safeguarding mental health in the workplace (Wong & Greenwood, 2023). There is a pressing need to transition away from a culture that prioritizes the mental health needs of children over those of educators in the current educational discourse. It is becoming increasingly evident that fostering a balanced and equitable environment (Sahlberg, 2021) necessitates addressing the needs of both children and teachers. The proposed paradigm shift aligns with the principles of equity and inclusivity, recognizing the fundamental importance of valuing the well-being of all stakeholders (Campion et al., 2022) within educational institutions. While it is undeniable that the welfare and development of students are paramount, it is equally crucial to address the holistic needs of educators. Neglecting the mental health of teachers not only undermines their professional satisfaction but also jeopardizes the quality of the educational system.

Ensuring individuals have adequate livelihoods, job security, and favorable working conditions is essential (World Health Organization, 2022b). A pressing need exists for a transformative shift away from the prevailing culture of shame and stigma surrounding mental

health in the workplace (Greenwood & Anas, 2021). Employers must view mental health as a collective responsibility rather than an individual challenge. (Greenwood & Anas, 2021).

Senior leadership must publicly prioritize mental health and set the tone for the organization (Greenwood & Anas, 2021). Leading by example by prioritizing their mental health sends a powerful message that taking care of one's well-being is acceptable and encouraged (Greenwood & Anas, 2021). By openly acknowledging their mental health needs, leaders can create an open and accepting culture within the organization (Greenwood & Anas, 2021). Leaders caring for their mental health and well-being are better equipped to make strategic decisions (Greenwood & Anas, 2021).

### **How Local, State, and Federal Leaders Can Build Organizational and Employee Resilience**

Leadership that focuses on learning from experiences in the field can positively affect all stakeholders (Constantia et al., 2023). The COVID-19 pandemic can be considered among those experiences. Cohen-Fraade and Donahue (2022) proposed that school leaders should utilize the insights gained from the pandemic regarding teachers' mental health to implement zero-cost mental health programs for teachers. An initiative to consider is the presence of on-campus psychologists or counselors to support educators and reduce mental health expenses (Cohen-Fraade & Donahue, 2022).

Arteaga-Cedeño et al. (2022) asserted that socio-emotional skills may assist individuals to adapt to challenging situations. Training teachers in socio-emotional skills holds enormous potential in boosting teachers' emotional intelligence (Arteaga-Cedeño et al., 2022). Persich et al. (2021) found that emotional intelligence training effectively maintains mental health well-being amid real-life crises.

While interventions are essential, addressing the root of the problem is necessary: unfair working laws and legislation. According to the World Health Organization (2022b), over half of the global workforce works in an environment lacking protection, accommodations, and support for mental health. A review of the current literature yielded no results on specific laws in the U.S. protecting employees' mental health. Information from the U.S. Department of Labor (n.d.) indicates that employees covered under the Family Medical Leave Act (FMLA) may take leave for mental health reasons. However, FMLA does not guarantee paid leave or paid mental health care (U.S. Department of Labor, n.d.).

After the COVID-19 pandemic, attention to mental health problems in the workplace has gained traction (Bryan et al., 2022; Fisher et al., 2021). While the existing laws may touch on aspects of mental health in the workplace, reviewing these laws to identify gaps and failures in protecting and supporting educators is necessary. Therefore, a need exists for specific, comprehensive legislation addressing such gaps to provide employers with clear guidelines. New bills should be drafted and introduced to the House of Representatives or the Senate to start the process of changing laws that keep teachers' mental health unaddressed and unwell.

### **The Job Demands-Resources Theory Implications for Leadership Development**

The Job Demands-Resources theory was successfully utilized in this study to investigate the interplay of job demands and resources, such as administrative support, in explaining teacher mental health-related absenteeism during the school year 2021-2022. Educational leaders should acknowledge the impact of the JD-R principles on employee well-being. Consequently, integrating the relevant theoretical foundations of the model into leadership programs and professional development should be part of the agenda. Understanding organizational theories such as the J-DR may equip educational leaders with frameworks to analyze and comprehend the complexities of educational institutions. The knowledge may also have implications for future informed decision-making.

## **Job Demands-Resources: Policy Implications Teacher Mental Health Absenteeism**

Future research on the JD-R tenets is essential for developing, refining, and discovering solutions and policy modification for teacher mental health absenteeism. Based on this study's results, further studies should be conducted to test the correlation of the role of specific job resources in alleviating a specific job demand. Similarly, it is crucial to test the efficacy of allocated resources to counterattack the harmful effects of the demands and implications for employees' mental health-related absenteeism. Equipped with the results of those studies, educational institutions should develop new initiatives to deter teacher-related absences.

Reducing the workweek may also help with work-life balance and the stress caused by the different demands of the job (Chakraborty et al., 2022); ongoing research on the potential advantages of implementing a four-day workweek for teachers remains crucial. Kamerāde et al. (2019) suggested that diminishing work hours could positively impact employees' mental health, a notion further supported by Vidat (2023), who found that reduced weekly hours correlate with decreased sick leave usage and heightened productivity.

## **What Teachers Can Do to Improve Mental Health**

Through research, scholars have identified strategies teachers can employ to enhance or ameliorate the impact of job-related stress on their mental health. In a study conducted by Hidalgo-Andrade et al. (2021), teachers outlined various methods that contributed to maintaining their mental well-being. Among the most frequently reported strategies were seeking social support and engaging in activities promoting physical health (Hidalgo-Andrade et al., 2021). Teachers also self-reported other self-care strategies, including meditation (Matiz et al., 2020). Lesh (2020) suggested keeping a gratitude journal, adhering to a balanced diet, spending quality time with family, incorporating pet therapy, and celebrating personal accomplishments.

## **Conclusion**

The purpose of the study was twofold: a) to describe teacher absenteeism related to teachers' mental health stemming from the pandemic's stressful job demands after schools reopened in the school year 2021-2022 in two Eastern regions of the U.S., and b) to describe the availability of job resources such as administrative mental health support after schools reopened in the school year 2021-2022 in two Eastern regions of the U.S. The findings of the study showed that in the 2021-2022 academic year, the mental well-being of teachers suffered as they faced heightened job demands coupled with a lack of administrative mental health support.

The adverse effects on educators' mental health manifested, as described by the participants in this study, in using mental health days as a means of self-care and stress relief. Addressing teacher mental health absenteeism requires a multifaceted approach, beginning with local leadership and extending to state and federal levels. Furthermore, individuals can take proactive steps to prioritize mental health, incorporating research-based self-care practices into daily routines.

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### Notes on Contributors

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