



Promoting Teacher Wellness to Support the Implementation of Movement Integration in the Classroom

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Abstract

Background: Only 39 percent of Canadian children and youth are meeting Canada's physical activity (PA) guidelines. To address this, researchers and educators have developed movement integration (MI) opportunities to bring PA into the classroom in an attempt to reduce time spent sedentary (Webster et al., 2015). However, many teachers encounter intrapersonal barriers to implementing MI directly in their classroom. Currently, teachers are experiencing higher levels of occupational stress and burnout, which negatively affects their health, wellbeing, and job performance within the field (Turner & Garvis, 2023). Research suggests if teachers value their own PA, they are more likely to implement PA opportunities like MI for their students (Webster et al., 2013). The research purpose was to determine if enhancing teachers' own PA, health and wellness prior to a job-embedded MI intervention results in greater MI implementation in the classroom. The overall project consisted of three phases; however, this abstract will focus on the findings from phase two.

Methodology: Ethics was approved by the University of Saskatchewan's Behavioural Ethics Review Board. A sequential mixed methods study design consisting of two phases with an intervention component was employed. In phase one, teachers ($n = 6$) from one school participated in a 10-week behaviour change intervention consisting of a 1-hour weekly session informed by self-efficacy theory (Bandura, 1977) and movement based on teachers' preferences. In phase two, both teachers from the intervention school ($n = 6$) and a control school ($n = 8$) participated in a 12-week MI intervention consisting of two, 5-minute job-embedded MI sessions per week with a movement educator. All teacher participants were encouraged to then independently implement those two sessions that same week. Questionnaires were completed before and after the intervention and teachers were invited to a focus group interview regarding their experiences.

Results & Conclusion: The intervention school demonstrated significant differences in MI implementation ($p = 0.04$), perceived PA competence ($p = 0.046$), and perceived MI benefits ($p = 0.043$) compared to the control school. Teachers from the intervention school implemented MI 2 – 3 days per week compared to teachers from the control school, which was once per week. Three themes were generated from the focus group interviews including: (a) fun, fast, and functional, (b) seeing MI in action, and (c) innovative movement breaks. Supporting teachers' own health and wellbeing may positively influence the valuation and implementation of MI in schools.

Keywords: Teacher wellness; Movement integration; Professional development



References

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