

Title

Effect of a pandemic on well-being at work of ECEC managers from Quebec: Longitudinal study

Authors

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Theoretical Framework

The COVID-19 pandemic has brought many challenges to early childhood education and care (ECEC) managers. They had to continually adapt their service offerings to comply with the sanitary measures of Quebec's public health authorities, as well as transform their management of the spaces in their establishments, their equipment, the staff and the schedules (Association québécoise des Centres de la petite enfance [AQCPE], 2020a, b; Bassok et al., 2020, Bassok et al., 2021). There were repercussions on the way children were cared for. When parents could no longer enter the daycare center, the relationship between them and the daycare centers was shaken. There was an increase in workload and also a financial burden, notably the costs associated with health measures created a deficit (Association québécoise des Centres de la petite enfance [AQCPE], 2020a, b; Government of Quebec [GQ], 2021). Work overload leads to an increase in stress and a decrease in well-being at work among early childhood education staff according to studies conducted at the beginning of the pandemic (Bassok et al., 2021; Bigras & Lemay, 2020; Crawford et al., 2021; Schué, 2020; Swigonski et al., 2021). Knowing that the pandemic generates a state of stress, which has now lasted for two years, this state of stress may become chronic (Center for the Study of Human Stress, 2020). Our study is based on Bakker and Demerouti's (2014) work demands and resources model and this model will be used to explain the results. This model involves work demands, which implies the physical and psychological efforts and costs. When they are too high, they are associated with decreased health levels, burnout, and negative affect. The model also implies the resources needed to achieve professional goals, reducing the consequences of work demands and allowing for growth and learning. This is associated with increased engagement and satisfaction and mitigates the negative consequences of work demands on well-being and work engagement (Bakker & Demerouti, 2014; Bigras et al., 2022; Dicke et al., 2017; Skaalvik & Skaalvik, 2018). This model can be applied to ECEC managers, in particular work demands can be explained by an overload of work with the application of sanitary measures and the changes they require in operating the facilities, the low perceived support of the government, a lack of control over the sanitary measures imposed in this epidemic situation, all of which involves a great physical and mental effort. In addition, the pandemic reduces the availability of resources essential to achieving its educational goal, the quality of service is affected, among other things, by an unbalanced budget, a lack of staff and dissatisfied parents (Bakker & Demerouti,

2014; Bigras et al., 2022; Dicke et al., 2017; Skaalvik and Skaalvik, 2018). To the best of our knowledge, few studies have focused on the well-being at work of ECEC managers during the COVID-19 pandemic, yet it is critical to the quality of services provided (Corr et al., 2017; Douglass, 2019; Ryan and Whitebook, 2012).

Objective

The objective of our study is to outline a longitudinal portrait of the level of well-being at work of Quebec's ECEC managers between 2021 and 2022.

Methods

The research design is descriptive, longitudinal and correlational. Recruitment was done by email via the list of ECEC available on the Ministry of Family (MFA) website. In February 2021, 1914 individuals were solicited and 327 participants completed the online questionnaire. One year later, in March 2022, all 327 participants were solicited, and 151 participants responded, a second time to the online questionnaire. All were informed of the project, ethical considerations, and signed an online consent form.

Data Sources

The sample was predominantly female (149 women and 2 men), two thirds of the sample were executive directors and one third were assistant directors. Half are between 50 and 59 years old, one third are between 40 and 49 years old and 87.4% of the responding directors have a university degree. The average management team size was of two employees. Approximately one third have an ECEC that includes a coordinating office for family child care settings and approximately 2/3 have an ECEC only. The ECEC they work for varies in size; 34.4% of participants have 1 facility, 42.4% have 2 facilities, 23.2% have 3 or more facilities. A disadvantaged clientele subsidy is received by 35,8% of responding directors. A proportion of 22.5% declared having chronic health problems, while 13.2% live with a loved one who has chronic health problems or is over 70 years old and 41.7% have dependent children at home. The largest proportion of participants came from the Montérégie (17.9%) and Montréal (27.8%).

Several variables were measured to observe well-being at work via validated scales. In total seven different questionnaires were used. Workplace well-being is measured by the 25 items of the Workplace Well-Being Index (Dagenais-Desmarais & Savoie, 2012). The five dimensions of this scale are interpersonal fit at work, accomplishment at work, feeling of competence at work, perceived recognition at work and willingness to commit to work. It is measured using a 6-point Likert scale (0 = disagree to 5 = strongly agree). Self-compassion is measured by the 26 items of the tool created by Neff (2003; Kotsou & Leys, 2016). There are 6 dimensions which are self-compassion, self-judgment, common humanity, isolation, mindfulness and over-identification. It is measured using a 5-point Likert scale (1 = almost never to 5 = almost always). The 13 items of self-judgment, isolation, and overidentification are reversed. Work engagement is measured by the 9 items of the Utrecht Work Engagement Scale by Schaufeli and Bakker (2003; Schaufeli et

al., 2006; Seppälä et al., 2009). There are three dimensions called vigor, dedication and absorption. It is measured using a 7-point Likert scale (0 = never to 6 = always/every day). Burnout is measured by the 22 items of Maslach and colleagues' Burnout Inventory (1996; Maslach et al., 1997; Dion & Tessier, 1994). There are three dimensions which are emotional exhaustion, depersonalization and personal accomplishment. It is measured by a 4-point Likert scale (1 = strongly agree to 4 = strongly disagree). The personal accomplishment items are reversed. Perceived stress is measured by the 14 items of Cohen and colleagues' tool (1983; Langevin et al., 2015; Quintard, 1994). It is measured by a 5-point Likert scale (0 = never to 4 = very often). There are 7 reversed items. Depressive symptoms are measured by the 10 items of the Center for epidemiologic studies-depression scale of Radloff (1977; Langevin et al., 2011). It is measured by a 4-point Likert scale (0 = never to 3 = frequently). There are two reversed items.

Results

We can observe a decrease in the scores of the variables of well-being at work, self-compassion, and commitment to work between 2021 and 2022. Looking specifically at the subscales, only the variables of work well-being in Figure 1 (total well-being, adequacy, fulfillment, and willingness to commit), self-compassion in Figure 2 (total self-compassion, isolation, mindfulness, and over-identification), and work engagement at Figure 3 (total work engagement, vigor, dedication, and absorption) have a significant decrease. Regarding work engagement in Figure 3, low vigor goes from 19.9% to 24.5%, while moderate level from 47 to 31.8% and high level from 33.1 to 43.7% and low absorption from 14.6% to 18.4%, moderate level from 40.4 to 50.3% and high level from 45% to 31.1%. Furthermore, that there is an increase in perceived stress (Figure 4), and depressive symptoms (Figure 5), and a significant increase in burnout (Figure 6), between 2021 and 2022. The high level of depressive symptoms in Figure 5, which means that people have depressive symptoms at a clinical level, increases from 10% in 2021 to 19.9% in 2022. For burnout in Figure 6, high depersonalization increases from 12.6% to 20.5% and low personal accomplishment for 100% of participants.

Pandemic-related work overload has affected all components of managers' tasks. There has been a cumulative effect of managing public health measures, pandemic fatigue and the effects of the 5th wave building up, staffing shortages increasing, budget being out of balance and quality of services being affected, including instability and groups closing due to COVID cases. Although there are many resources available for managers to achieve their personal goals, such as positive relationships at work, quality relationships with colleagues, positive climate, these could be affected by pandemic fatigue and the cumulative negative effect of the pandemic. This would explain the results and the increase in burnout, well-being at work, depressive symptoms or the decrease in work commitment and self-compassion (Bigras et al., 2022; Bassok et al., 2021; Eadie et al., 2021; Ministry of Family, 2020; GQ, 2021). There are many ways to prevent deterioration of well-being at work. One way is regular peer meetings that provide a level of social support reduces feelings of isolation, stress, and low achievement and increases overall well-being (Dicke et al., 2017). Another way is peer meetings that address particularly stress management and ways to develop self-compassion in a difficult

context participants (Kotera & Van Gordon, 2021; Bigras et al., 2021; Nguyen & Le, 2021). This could also help to contribute to the well-being of participants (Kotera & Van Gordon, 2021; Bigras et al., 2021; Nguyen & Le, 2021). Another option would be to participate in a collective reflective coaching device, such as *Catching your Breath* which helps foster well-being at work, including a sense of competence and self-compassion (Bigras et al., 2021; Fortin & Bigras, 2022; Fortin et al., 2022). The effects of the pandemic appear to have long-term effects on managers' well-being. The context of the COVID-19 pandemic is a significant multiplier of the challenges for ECEC managers. A manager enhances the quality of their environment with effective leadership, flexibility, proactivity, and adaptation to departmental policies, community needs, and staff support. However, it is difficult for them to perform their tasks under the weight of stress.

Scientific or Scholarly Significance of the Study

There is an urgent need for further research on the well-being and mental health of managers. This study revealed an important decreased of well-being of the ECEC managers and the importance to ensure that childcare managers receive the support and resources necessary to reduce the negative influences of the pandemic on their well-being at work (Bigras et al., 2022).

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APPENDIX

Figure 1. – *Evolution of scores of well-being at work of ECEC managers between 2021 and 2022.*

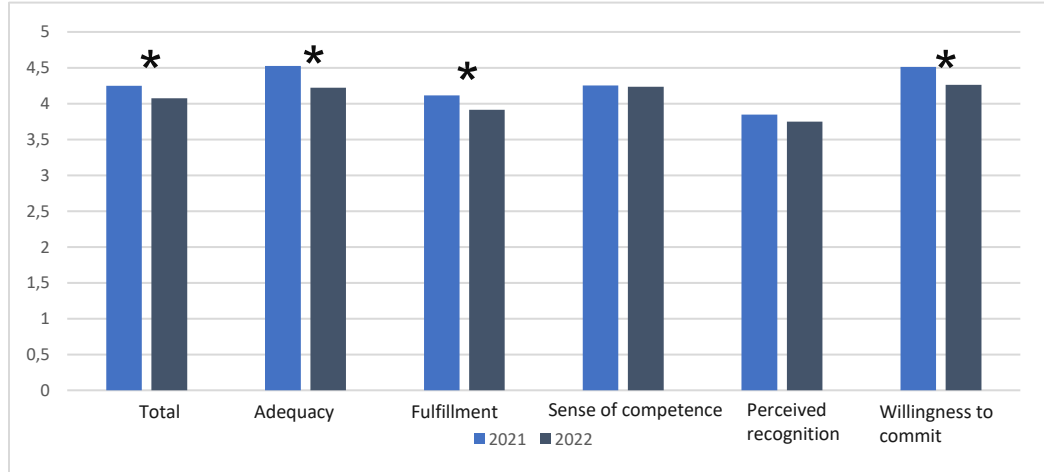


Figure 2. – *Evolution of scores of self-compassion of ECEC managers between 2021 and 2022.*

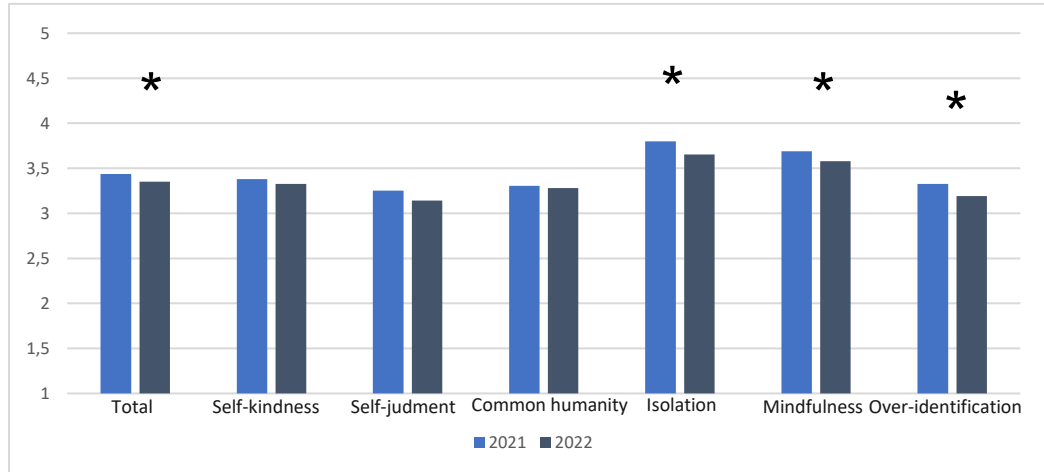


Figure 3. – *Evolution of scores of engagement at work of ECEC managers between 2021 and 2022.*

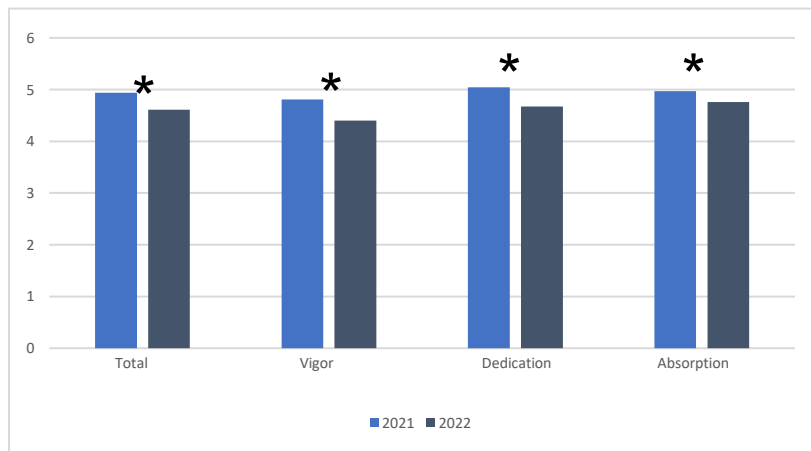


Figure 4. – *Evolution of scores of perceived stress of ECEC managers between 2021 and 2022.*

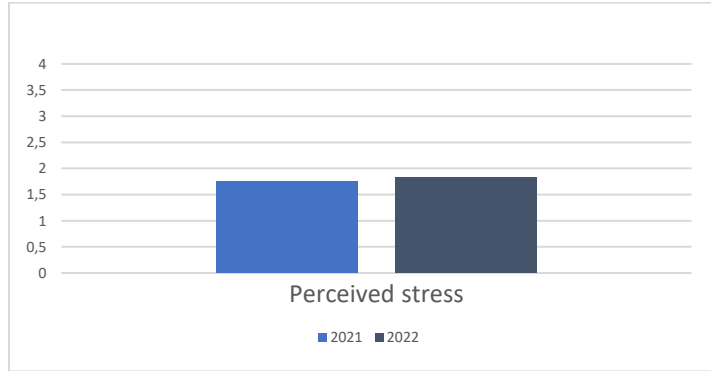


Figure 5. – *Evolution of scores of depressive symptoms of ECEC managers between 2021 and 2022.*

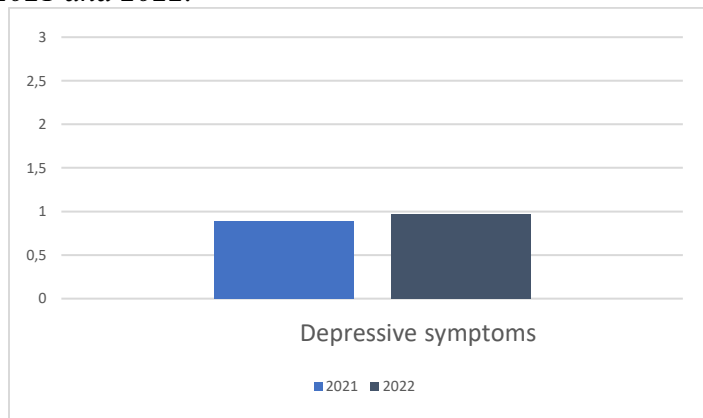


Figure 6. – *Evolution of scores of burnout of ECEC managers between 2021 and 2022.*

