

## Flourishing During COVID-19: Exploration of the Factors That Impacted the Wellbeing of School Leaders During the Pandemic in Ireland

Majella Dempsey<sup>1</sup>  and Jolanta Burke<sup>2</sup> 

### Abstract

The COVID-19 outbreak impacted the wellbeing of school communities worldwide. However, little is known about the factors that helped individuals maintain their wellbeing amid the pandemic. The current paper presented selected results from two surveys carried out with primary school leaders in the Republic of Ireland in relation to the factors that protected their wellbeing during the COVID-19 school closure. The first survey took place two months after the school closure (Time 1,  $N=939$ ); the second one, three months after the school re-opening (Time 2,  $N=861$ ). Participants' wellbeing was assessed using the Mental Health Continuum Short Form (MHC-SF). The findings showed that participants' wellbeing decline from Time 1 to Time 2. Descriptive analysis showed that approximately half of the sample at both times experienced flourishing. Finally, qualitative analysis identified similarities among flourishing and non-flourishing leaders in relation to them becoming more health-conscious and seeking social connection. However, compared with flourishing leaders, non-flourishing leaders reported feeling overwhelmed and seeking help. Equally, flourishing leaders reported scheduling personal time, professional development and having a more positive outlook, which may have affected their wellbeing. Discussed are the implications of the current study that can inform the policy and practice of school leaders in Ireland and worldwide.

**Keywords:** School leaders, positive mental health, flourishing, COVID-19, school wellbeing

The beginning of the COVID-19 pandemic heralded a dramatic shift in education. Overnight, all the school activities were channelled remotely to maintain teaching and learning for their students (Department of Education [DES], 2020a). In the largest experiment ever conducted in distance education (Gouëdard et al., 2020), school leaders became the main interpreters and conduits of recommendations from both the Health Service Executive and Department of Education and other stakeholders. Navigating through the pandemic was for many of them as challenging as doing a cryptic crossword puzzle without clues. Whilst much research was published to identify the actions of school leaders to ensure effective school management, little is known about the actions they took to maintain their wellbeing, which is what the current study aimed to address.

### Wellbeing During Pandemic

In the context of this research wellbeing is defined as “a journey of promoting and improving individuals' mental health and conditions, so that they can contribute to the school communities' overall wellbeing, and vice versa” (Burke, 2021). Pandemic-associated challenges have negatively impacted people worldwide by reducing various aspects of their wellbeing, such as life satisfaction, positive affect, physical health, as well as increasing their psychological distress, depression, and anxiety (Ammar et al., 2020; Every-Palmer et al., 2020; Gloster et al., 2020; Quinn et al., 2020; Smith et al., 2020; Zacher & Rudolph, 2021). In schools, the impact of the pandemic was compared to experiencing collective trauma (Crosby et al., 2020; United Nations, 2020). Nonetheless, it has also provided an opportunity to demonstrate school community's resilience and stimulated rapid innovation in education (Burke & Arslan, 2020; United Nations, 2020).

---

<sup>1</sup>Department of Education, Maynooth University, Dublin, Ireland

<sup>2</sup>RCSI University of Medicine and Health Sciences, Centre for Positive Psychology and Health, Dublin, Ireland

**Corresponding Author:** Jolanta Burke, 2RCSI University of Medicine and Health Sciences, Centre for Positive Psychology and Health, Dublin, Ireland.  
Email: [jolantaburke@rcsi.ie](mailto:jolantaburke@rcsi.ie)

Wellbeing in education can be viewed from various perspectives that relate to disciplines, e.g. philosophy, sociology, pedagogy, social justice, or psychology (Agherdien & Pillay, 2018; Brady et al., 2015; Colao et al., 2020; Ransome, 2010). Within psychology, it is further differentiated as deficit-focused, i.e. aiming to reduce illness or prevent suicide ideation; as well as flourishing-focused, i.e. aiming to enhance the wellbeing resources, which make life worth living and help individuals cope more effectively with adversity (Denny et al., 2018; Greenfield, 2015; Hobson & Maxwell, 2017; Quinn et al., 2021). Moreover, in the context of flourishing-focused wellbeing, there are several models prevalent in education, such as PERMA, FLOURISH, PERMA-H, or PROSPER (Diener, 2010; Lai et al., 2018; Noble & McGrath, 2015; Williams, 2011). In the current study, the Mental Health Continuum model (Keyes, 2002) was used to assess wellbeing, as it provides comparative research and reports high validity and reliability.

According to the Mental Health Continuum (MHC) model, wellbeing consists of emotional, psychological, and social wellbeing (Keyes, 2002). These three types of wellbeing derive from the main theories of wellbeing that have existed in psychology and dominated the field for decades. Emotional wellbeing is modelled on the Subjective Wellbeing (SWB) theory according to which wellbeing comprises of reduced negative affect, increased positive affect, and life satisfaction (Diener, 1984). Psychological wellbeing stems from the Psychological Wellbeing (PWB) theory, according to which wellbeing incorporates autonomy, environmental mastery, personal growth, positive relations, purpose in life, self-acceptance (Ryff & Keyes, 1995). Finally, the social wellbeing emanate from the Social Wellbeing theory (Keyes, 1998) which is composed of social contribution, integration, actualisation, acceptance and coherence. Thus, the MHC model amalgamates the main theories of wellbeing, thus offers a good foundation for assessment of school leaders' wellbeing.

### **External Factors**

An array of external factors influenced school leaders during the pandemic. The existing digital divide in Ireland, coupled with the lack of resources, training and hardware in schools, as well as homes, highlighted the educational inequalities and made the situation even more demanding for school leaders (Mohan et al, 2020; Gouëdard et al., 2020). Despite the lack of stable and unified technological infrastructure, they found alternative methods to communicate with their students, such as sending them emails, or provide them with hard copies of work (Burke & Dempsey, 2020; Irish National Teachers' Organisation [INTO], 2020). As resourceful as their actions were, the relentless pressures associated with managing their schools remotely and the accompanying demands of leading virtual teams took a toll on their wellbeing (Burke & Dempsey, 2020; Dempsey & Burke, 2020).

Virtual teams refer to a group of individuals working together in various locations towards an interdependent goal and relying on technology to communicate (de Guinea et al., 2012). Pre-pandemic research highlighted significant differences between face-to-face and virtual teams characteristics and behaviours, such as impaired information sharing (Mesmer-Magnus et al., 2011) and amplified levels of trust required for teams to perform in a virtual environment (Breuer et al., 2016), all of which impacts on the leadership approach. During the pandemic, unique to remote-leading challenges require school leaders to behave differently (Gustafson & Haque, 2020). Given that school leaders had no training on how to manage their teams remotely it put an additional pressure on them (Dempsey & Burke, 2020).

Uncertainty was one of the constant challenges for school leaders worldwide (Ahlström et al., 2020; Martinez & Broemmel, 2021). It made the decision-making about teaching and learning in schools particularly difficult for leaders, whose leadership approach had to adjust and resemble that of the military and emergency leaders (Ahern & Loh, 2020), instead of the usual school leadership approach. This was especially evident when schools re-opened in September 2020 and health regulations required significant changes to school practices (Department of Education, 2020b). While some of the leaders have naturally adjusted to this altered new reality, others struggled to maintain status quo, which resulted in their wellbeing decline (Burke & Dempsey, 2020; Dempsey & Burke, 2020; Mohan et al., 2020). These were just some of the external factors affecting leaders during the pandemic, many of which were out of leaders' control. At the same time, internal factors influenced by leaders need to be considered, since learning about them can help future leaders maintain wellbeing during similar crisis situations.

### **Internal Factors**

Several internal factors affecting wellbeing have been identified among the general public and school community during the pandemic. Individuals who have created new routines and engaged with physical exercise during the

pandemic were more likely to experience stable mood, lower levels of depression and anxiety (Muro et al., 2021). Maintaining positive mood and higher levels of wellbeing was also associated with the use of effective coping strategies, psychological flexibility and increased social contact (Dawson & Golijani-Moghaddam, 2020; Zacher & Rudolph, 2021). Resilience was found to be yet another factor that impacted wellbeing, whereby individuals with high levels of resilience were more likely to experience higher levels of subjective wellbeing (Paredes et al., 2021).

Whilst internal factors that helped individuals cope more effectively with the pandemic onset were widely discussed among the general public, little is known about the behaviours and attitudes of school leaders during this time. This is particularly salient given that the vast majority of school leadership research focused on actions that ensured effective school management, rather than their impact on leaders' wellbeing, which is what the current research aimed to address. Therefore, the current study's research questions are: What were the differences in school leaders' wellbeing at Time 1 and Time 2 during the pandemic? How many school leaders flourished during the pandemic? What impacted school leaders' wellbeing during the pandemic?

## Method

### Participants

At Time 1,  $N=939$  and at Time 2,  $N=861$  participants completed the survey, 76% were female, 49% aged 50+, 34% aged 40-49, and the remaining 17% aged under 40. At Time 1, 45.7% of participants ( $n=429$ ) were administrative deputy/principals, 54% were teaching deputy/principals, and .3% of participants ( $n=3$ ) reported other roles. At Time 2, 51.7% of participants were administrative deputy/principals, 48.1% of were teaching deputy/principals, .2% ( $n=2$ ) were other.

### Measures

**Flourishing.** The Mental Health Continuum- Short form (Keyes, 2002) was used to assess participants' wellbeing, which is based on a three-factor wellbeing model consisting of 14 questions, on a 6-item Likert scale, ranging from "never" to "every day". Participants were asked about the frequency of experiences over a two month-period, such as feeling interested in life, feeling that life has a sense of direction or meaning to it. Past studies demonstrated high reliability of the scale (Keyes, 2009), as did the current research ( $\alpha=.94$ ).

**Qualitative Data.** Qualitative data analysis was based on the following questions: What helpful actions have you taken to support your wellbeing? What tools and techniques have you put in place to help you cope during COVID?. The current research analysed data from two key points of the leadership practice during the pandemic, two months after school-closure, in May 2020 (Time 1), and three months after the school reopening, in December 2020 (Time 2). Therefore, the study offers a unique perspective on the experiences of school leaders during the pandemic and how this impacted on their wellbeing during the chaos of pandemic-related changes. The study received ethical approval from Maynooth University Social Science Research Sub-Committee.

### Data Analysis

Quantitative data were analysed using SPSS version 26. Qualitative data were analysed using MAXQDA 2020 (VERBI Software). Reflexive thematic analysis carried out on the open ended questions, followed the six phase approach as advocated by Braun and Clarke (2006; 2013). The data set was large with over 84k individual statements, therefore, during the coding stage lexical analysis was used to check that codes were representative of the larger data set. The data analysis was iterative and reflexive ensuring a rigorous thematic analysis producing insightful findings.

## Results

### Quantitative Data

#### Descriptive data at Time 1 and Time 2

The mean for the MHC construct was higher at Time 1 ( $M=3.32$   $SD=.84$ ) than Time 2 ( $M=3.07$ ,  $SD=.87$ ). This trend continues for all three elements of the MHC construct. Table 1 provides the details of descriptive statistics.

### Comparison between Time 1 and Time 2

An independent-samples t-test was conducted to compare the wellbeing scores for school leaders completing the survey at Time 1 and Time 2 (Table 1). There was a statistically significant difference across all the wellbeing scores. Leaders at Time 1 ( $M=3.3$ ,  $SD=.84$ ) had higher levels of overall wellbeing (emotional, psychological and social) than leaders at Time 2 ( $M=3.07$ ,  $SD=.87$ ;  $t(1771)=6.04$ ,  $p<.001$ ). Specifically, leaders at Time 1 ( $M=3.68$ ,  $SD=1.01$ ) reported higher levels of emotional wellbeing compared with leaders at Time 2 ( $M=3.46$ ,  $SD=1.06$ ;  $t(1769)=4.64$ ,  $p<.001$ ). Furthermore, leaders at Time 1 ( $M=3.63$ ,  $SD=.98$ ) reported higher levels of psychological wellbeing, compared with leaders at Time 2 ( $M=3.45$ ,  $SD=1.03$ ,  $t(1762)=3.78$ ,  $p<.001$ ). Finally, leaders at Time 1 showed higher levels of social wellbeing ( $M=3.44$ ,  $SD=1.03$ ) than leaders at Time 2 ( $M=3.08$ ,  $SD=1.10$ ;  $t(1758)=7.08$ ,  $p<.001$ ).

**Table 1.** Independent t-test results comparing school leaders' wellbeing at Time 1 and Time 2.

Variable	Groups	n	M	SD	t	df
MHC	Time 1	939	3.32	.84	6.04*	1771.861
	Time 2	861	3.07	.87		
EWB	Time 1	939	3.68	1.01	4.64*	1769.630
	Time 2	861	3.46	1.06		
PWB	Time 1	939	3.63	.98	3.78*	1762.183
	Time 2	861	3.45	1.03		
SWB	Time 1	939	3.44	1.03	7.08*	1758.345
	Time 2	861	3.08	1.10		

\* $p<.001$ . MHC=overall Mental Health Continuum score; EWB=emotional wellbeing; PWB=psychological wellbeing; SWB=social wellbeing

Furthermore, each sample was divided into leaders who were flourishing and those who were non-flourishing. At Time 1, 59.5% of leaders ( $n=559$ ) were flourishing compared with 51.8% ( $n=446$ ) at Time 2. Similarly, at Time 1 40.5% of leaders were non-flourishing ( $N=380$ ) compared with 48.2% ( $n=415$ ) of leaders at Time 2.

### Qualitative Data

Themes were determined using a hybrid approach (Thomas & Harden, 2008), using a data driven inductive process (Braun & Clarke, 2006, 2013), followed by a deductive process based on a number of a priori themes from the literature and quantitative data analysis. Responses from leaders who reported to be were flourishing at Time 1 and Time 2 were analysed and compared with leaders who were non-flourishing at Time 1 and Time 2. Table 2 provides a list of themes emerging from data, which identify similarities and differences between those who flourishing and did not flourish.

**Table 2.** Themes emerging from flourishing and non-flourishing leaders at Time 1 and 2.

	Levels of Flourishing	Time 1 & Time 2
Similarities	Flourishing and non-flourishing leaders	<ul style="list-style-type: none"> <li>• Becoming health-conscious</li> <li>• Seeking social connection</li> </ul>
Differences	Flourishing	<ul style="list-style-type: none"> <li>• Scheduling personal time</li> <li>• Seeking professional development</li> <li>• More positive outlook on life</li> </ul>
	Non-flourishing	<ul style="list-style-type: none"> <li>• No time for self-care</li> <li>• Feeling overwhelmed and seeking help</li> </ul>

### Similarities

Similarities have been found between groups of flourishing and non-flourishing leaders regardless of the stage of the pandemic. They related to (1) becoming health-focused, and (2) seeking out social connection.

### Becoming health-conscious

The tool most mentioned by participants was the need to take exercise and become more health conscious. This was mentioned by many of participants at Time 1 and Time 2.

Working from home gave some leaders more time for exercise *“I’m availing of the chance to go for walks and get fitter; this is something I didn’t manage for myself during my day when school was open”* (Respondent 502: Time 1). *“I maintain a good work life balance by ensuring that I engage in some form of exercise every day. I also have other hobbies and passions”* (Respondent 102: Time 1). In tandem with exercise many mentioned adopting a healthier diet *“Walking daily and cutting out processed sugars since March”* (Respondent 104: Time 1). Many built this into their new working from home schedule. *“Time out for exercise. Decision to ‘close my laptop’ at a certain time”* (Respondent 296: Time 1). This emphasis on exercise continued when leaders went back to school in September at Time 2. *“Regular fresh air and walks. Eat well. Smile regularly* (Respondent 4: Time 2). *Leaving school work at school Exercise – walking”* (Respondent 9: Time 2). Some talked about attending classes on-line *“I attend weekly classes in yoga and Pilates (online at moment). I go for a walk with my husband and dog 5-6 times a week- and a cycle once a week”* (Respondent 111: Time 2). They were also scheduling this exercise into their day *“I try to do meditation every morning for 10 mins before I go to work. I do a yoga class online once a week. I make a ‘to-do’ list and try to get through it on a given day. I have set an alarm on my phone for 4pm to tell me to stop work!”* (Respondent 391: Time 2).

The leaders with high wellbeing scores combined this exercise with a positive attitude. *“I bought an exercise bike. I take a lot of deep breaths . Watching comedies to take my mind off work. Walking on the beach helps me feel grounded. Making sure I keep laughing - sounds strange but it really makes me feel great!* (Respondent 854: Time 2). The leaders with lower wellbeing at Time 2 also spoke about taking exercise but felt they had to work at fitting it in due to workload with comments such as *“Looking after my health, exercise, diet etc and trying to spend less time in work (which is almost impossible due to the crazy workload)”* (Respondent 43: Time 2). Exercise and other activities were the most mentioned tools by this group *“I do mindfulness, exercise, member of support groups for principals”* (Respondent 60: Time 2). *“Connection with friends and colleagues. Meditation. Sea swimming”* (Respondent 137: Time 2)

### **Seeking social connection**

For many of the leaders staying connected was very important with many mentioning the need to be with friends and family even if it was through on-line communities at Time 1. They cited this as a proactive way to maintain their wellbeing *“exercise, making family mealtimes a main feature of the day, cooking good food, staying connected with friends and family digitally”* (Respondent 435: Time 1). Many mentioned how important WhatsApp groups became during the first lock down *“meditation and mindfulness, connecting with my family and friends via WhatsApp”* (Respondent 117: Time 1). This need to connect when forced to be apart by the pandemic was evident *“I try to get out for walks and to talk to friends and colleagues daily, it is important that we stay connected despite being locked down”* (Respondent 392: Time 1).

The ability to share experiences enhanced wellbeing *“talk to people share worries”* (Respondent 10: 2). *“I give myself time by myself when I get home to process and come to terms with my day I have a good management team who are good to discuss issues with I have a very supportive family”* (Respondent 70: Time 2). This need to have someone to listen to is evident in the following quote *“I work closely with another school principal regularly and we always take calls from each other to offer words of wisdom or a different perspective. I have very good relationships with school staff: we care for one another and always do our best to listen to one another”* (Respondent 271: Time 2).

### **Differences**

Several differences were found between leaders who flourished and did not flourish during the pandemic. Flourishing leaders were more likely to (1) schedule personal time, (2) professional development, (3) have more positive outlook on life; whereas non-flourishing leaders were more likely to report (1) no time for self-care, (2) feeling overwhelmed and seeking help.

### **Flourishing**

#### **Scheduling personal time**

Leaders who were flourishing put time into scheduling their day and making time for the things that enhanced their wellbeing. At Time 1 one respondent described how they did this *“Creating a daily work timetable and sticking to*

it. *Creating a weekly to do list for work. Exercising daily. Taking time to shut down devices and turn off my phone so I am not accessible at all times. I have created a 'work time' at home to separate the two from becoming intertwined. Realising that I can't do it all by myself and delegating out work to management team and staff groups. Organising online calls with friends and family*" (Respondent 287: Time 1). Clearly this leader is aware of what is impacting their wellbeing and how they can enhance it through exercise, connecting with people and delegating work. Another described it as being able to stop working and attend to self-care *"shutting up shop at a sensible time. Making lists. Prioritising. Linking in with local principals online. Online yoga"* (Respondent 21: Time 1). At Time 2 this scheduling was also cited as being an important tool in protecting and enhancing wellbeing *"No work done on Saturdays or Sundays, no attendance at PA meetings after school hours, no attendance at school events at the weekend, no attendance at CPD [Continuous Professional Development] after school hours, go home within 30 minutes of the school day being over"* (Respondent 82: Time 2).

At Time 2 it was evident that leaders had additional stress in trying to implement COVID protocols and respond to weekend communications. It became even more important for them to schedule time for their wellbeing. *"I try and ensure that I take the time out when kids go to bed to read, chat or watch TV with my wife. Perhaps have a cup of tea or a beer. I also try and ensure that I take at least one day off during the weekend. But it doesn't bother me if a crisis or a one off event needs to be dealt with e.g.: a COVID case"* (Respondent 91: Time 2)

Some had learned that this was important during the first lockdown *"Making a clear break between work and home life. I lost his during the first lockdown"* (Respondent 90: Time 2).

### **Professional development**

Another difference between the group who were flourishing and the group with lower wellbeing as the number of times they talked about participating in professional development *"New Diploma - new learning, new exercise class and Yoga"* (Respondent 119: Time 2). *Trying to build awareness of both areas [health and wellbeing] through reading, CPD and involvement with external organisations*" (Respondent 34: Time 2). At Time 1 and Time 2 many talked about taking courses offered on wellbeing and other topics such as teaching on-line and so on *"A webinar on teacher wellbeing - very beneficial . Lots more of these needed"* (Respondent 655: Time 1). *"Autumn walk challenge October 4 miles every day INTO 4 week course on wellbeing in October MBSR (Mindfulness Based Stress Reduction) October to December 2020"* (Respondent 44: Time 2). It was indicative of how responsive the system was to leaders' needs during the pandemic that these courses were offered at such short notice. The proactive leaders took advantage of these events.

### **More positive outlook on life**

Leader who were flourishing had a more positive attitude *"I have decided to have a positive outlook and disposition, to have an attitude of gratitude, in spite of obstacles"* (Respondent 285: Time 2). These leaders are taking actions to enhance their wellbeing *"I sporadically do a gratitude journal, I do my best to get out walking/taking photos, I get plenty sleep, I read, I chat with friends"* (Respondent 326: Time 2). These leaders talk about having an attitude of gratitude *"I have decided to have a positive outlook and disposition, to have an attitude of gratitude, in spite of obstacles"* (Respondent 285: 2). Another described it as looking at life with optimism *"Trying to foster and maintain a positive mindset. Coming from a point of grounded optimism. Feeling grateful every day. Finding joy in simple things. Looking at the distance travelled rather than the end place. Talking to friends and colleagues. Getting out to walk and exercise, and enjoy being outside"* (Respondent 668: 2)

### **Non-flourishing**

#### **No time for self-care**

On the other hand leaders with lower wellbeing talk about being overwhelmed and not having time to look after their health and wellbeing. *"I feel I don't have time to focus on health as the job seems to expand to fill the time and everyone seems to look to me for answers and buck rests with me - downwards and upward"* (Respondent 97: Time 2). The workload is taking up all these leaders' time with little left for self-care *"None myself and the principal spend our time trying to look after everyone else"* (Respondent 481: Time 2). *"There is no time to put anything in place. Just look at the documents sent out by the DES since MARCH. One of the documents , the wellbeing documnet is 106 pages long with at least 2 links in every page to other relevant information.... it's impossible to get around to reading them let alone implement them"* (Respondent 217: Time 2). For some to make time they needed

to leave work unfinished *“I go into school early I leave relatively early, I set aside specific time in the evening to do my work and I set aside specific time at the weekend and if my work is not accomplished then I'll leave it”* (Respondent 89: Time 2).

### **Feeling overwhelmed**

They report that they are feeling overwhelmed and this was more evident in responses at Time 2 than at Time 1. *“I try to step away from my phone for a few hours at the weekend. I try to remember that I am only one person. I try to breathe when I get anxious. I call a family member when I get overwhelmed, which happens much more often lately”* (Respondent 807: Time 2). *“I feel I don't have time to focus on health as the job seems to expand to fill the time and everyone seems to look to me for answers and buck rests with me - downwards and upwards”* (Respondent 97: Time 2)

This feeling of being overwhelmed is impacting on their health *“Took sick leave when I was at the point of burnout in October. Got counselling through the EAP. Confided in trusted colleagues. Mindful exercise-not thinking about work when exercising-consciously switching off”* (Respondent 264: Time 2). However, they are looking for help to cope *“I have attended video counselling. I take daily walks. I have taken up meditation”* (Respondent 4: Time 1). They talk about attending counselling, coaching and other professional. *“Very little. Had some Cognitive Behaviour Therapy over last year due to stress in work, this helped me to “zap” unwanted thoughts, other than that I like candles and aromatherapy to help me relax. I was swimming in the sea all summer but very little exercise recently”* (Respondent 409: Time 2). The pandemic and school closure had a detrimental impact on some leaders' wellbeing. *“I have been seeing a counsellor for a year and also started professional coaching 6 months ago. I walk regularly”* (Respondent 188: 2). This in tandem with exercise is helping them enhance their wellbeing. *“I have spoken to a counsellor once a week I have tried to stop working at home at weekends or late at night unless absolutely necessary I try to commit to some outdoor exercise once a day at least”* (Respondent 804: Time 2).

## **Discussion**

The current study identified that in general, leaders' wellbeing has deteriorated as the pandemic continued. This is consistent with research showing that the COVID-fatigue became more evident in subsequent lockdowns during the pandemic (Ball & Wozniak, 2021; Scandurra et al., 2021). The lack of social connection was felt by many in society and had an impact on schools where leaders reported that they were dealing with many issues in addition to meeting the learning needs of their students (Hargreaves & Fullan, 2020). However, the current study is the first one that highlights this phenomenon among the school leaders. Further research, ideally longitudinal, should explore the changes in leaders' mental health overtime, and identify ways to help them combat their pandemic-fatigue.

The second finding from the research demonstrated that half of the participants experienced flourishing during the pandemic. This is consistent with past research showing that across 38 countries worldwide with over 9,000 participants, 40% of individuals reported flourishing (Gloster et al., 2020), although the level of flourishing varies across different samples (e.g. (Bassi et al., 2021; Chong et al., 2021; Visser & Law-van Wyk, 2021). This is the first study to assess wellbeing of school leaders' flourishing levels during the pandemic. More research is required that applies more diverse wellbeing measures.

Moreover, the current research identified two factors that leaders, had in common regardless of whether they flourished, which impacted their wellbeing. The first one related to becoming more health-conscious, the second one to seeking out social connections. The first finding contradicts past research showing that physical activity was associated with higher levels of wellbeing during the COVID-pandemic (Callow et al., 2020; Martínez-de-Quel et al., 2021; Ogueji et al., 2021). However, the current research included social and psychological wellbeing as part of the measure, which differs from the other studies, also it included measures other than physical health activities that fall under the category of becoming health-conscious. Further, quantitative research needs to explore how MHC scores relate to physical health. In relation to the second factor, seeking out social connection, other research carried out during the pandemic identified individuals' need for increased connection (Dempsey & Burke, 2021). However, research indicated that whilst social connection was associated with reduced distress and fatigue (Nitschke et al., 2021), it is not the number of people that individuals connected with but the quality of that connection that had an impact on their wellbeing (Okabe-Miyamoto et al., 2021), which may explain the current research findings. Given

the complexity of this issue, further exploration is required to identify the type of networks that school leaders were part of that affected their wellbeing.

Finally, the current research identified some differences between leaders who flourished and those who did not during the pandemic. Mainly, while non-flourishing leaders were overwhelmed and found it hard to find time for self-care, the flourishing leaders applied more effective coping mechanisms in the face of adversity. During the pandemic, engaging in positive psychology interventions and similar self-care practices showed reduction of loneliness, anxiety during the pandemic and enhancement of wellbeing (Boucher et al., 2021; Parks & Boucher, 2020). Furthermore, taking other actions to enhance self care, such as improving sleep hygiene and engaging in effective coping has a potential of making positive difference in individuals life (Aznar et al., 2021; Bermejo-Martins et al., 2021; Rolin et al., 2021), which could be one of the reasons for this research findings.

### **Implications for Practice**

Irish schools provide a lot more than learning for their students, they provide a safe space, school meals, additional learning supports, connection and routine to name a few and these come at a personal cost to the leaders (O'Toole & Simovska, 2021). Following on from the current research more material and structural supports should be offered by the Department of Education and management organisations to the leaders. Furthermore, this research points to the need for more embedded distributed leadership practices in primary level schools, which is in line with what other researchers recommended (Donovan, 2015; Hacher, 2005).

### **Limitations**

Even though the sample of participants is large and representative, future research should consider indepth interviews with school leaders, as they may provide more insights into their experiences and the impact of their actions on their wellbeing. Furthermore, while the study sampled different people of the same population each time, thus is referred to as a cohort study (Cohen, Manion, & Morrison, 2018), a panel longitudinal study would be useful to further identify the actual differences in individuals' wellbeing longterm. Despite the limitations, the current research provides a number of unique contributions. Firstly, it is the first study that considers the wellbeing of school leaders during the COVID-19 pandemic using the longitudinal cohort approach. It highlighted the centrality of becoming more health conscious and seeking out social connections in relation to flourishing. It showed that healthy coping behaviours (seeking health and social connection) are not limited to individuals who are flourishing. Furthermore, this is the first study that identified behavioural differences between school leaders who were flourishing and those who were not. Finally, it provides evidence that the pandemic impacted school leaders' personal wellbeing.

### **Compliance with Ethical Standards**

#### **Ethical Standards**

All study procedures involving human participants followed institutional and/or national research committee ethical standards and the 1964 Helsinki declaration and its later amendments or comparable ethical standards. The study received ethical approval from Maynooth University Social Science Research Sub-Committee.

#### **Author Contributions**

The authors developed the concept for this manuscript, carried out the literature review, critically analysed the data, wrote the manuscript, and proofread it.

#### **Declaration of Conflicting Interests**

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

#### **Funding**


The author(s) received no financial support for the research, authorship, and/or publication of this article.

#### **Data Availability**

The datasets generated during and/or analyzed during the current study are available from the corresponding author on reasonable request.



## ORCID

Jolanta Burke  <https://orcid.org/0000-0003-2209-782X>Majella Dempsey  <https://orcid.org/0000-0003-1023-1593>

Published Online: September 6, 2021

## References

- Agherdien, N., & Pillay, R. (2018). Enabling transformation through socially just critical pedagogies in a health and wellbeing course: A South African case study. *Journal of Human Behavior in the Social Environment*, 28(3), 338-354. doi:10.1080/10911359.2017.1423252
- Ahern, S., & Loh, E. (2020). Leadership during the COVID-19 pandemic: building and sustaining trust in times of uncertainty. *BMJ Leader*.
- Ahlström, B., Leo, U., Norqvist, L., & Isling, P. P. (2020). School leadership as (Un)usual. insights from principals in Sweden during a pandemic. *International Studies in Educational Administration (Commonwealth Council for Educational Administration & Management (CCEAM))*, 48(2), 35-41.
- Ammar, A., Mueller, P., Trabelsi, K., Chtourou, H., Boukhris, O., Masmoudi, L., . . . Hoekelmann, A. (2020). Psychological consequences of COVID-19 home confinement: The ECLB-COVID19 multicenter study. *PLoS ONE*, 15(11). doi:10.1371/journal.pone.0240204
- Aznar, A., Sowden, P., Bayless, S., Ross, K., Warhurst, A., & Pachi, D. (2021). Home-schooling during COVID-19 lockdown: Effects of coping style, home space, and everyday creativity on stress and home-schooling outcomes. *Couple and Family Psychology: Research and Practice*. doi:10.1037/cfp0000182
- Ball, H., & Wozniak, T. R. (2021). Why do some americans resist covid-19 prevention behavior? An analysis of issue importance, message fatigue, and reactance regarding covid-19 messaging. *Health Communication*. doi:10.1080/10410236.2021.1920717
- Bassi, M., Negri, L., Delle Fave, A., & Accardi, R. (2021). The relationship between post-traumatic stress and positive mental health symptoms among health workers during COVID-19 pandemic in Lombardy, Italy. *Journal of Affective Disorders*, 280(Part B), 1-6. doi:10.1016/j.jad.2020.11.065
- Bermejo-Martins, E., Luis, E. O., Fernández-Berrocal, P., Martínez, M., & Sarrionandia, A. (2021). The role of emotional intelligence and self-care in the stress perception during COVID-19 outbreak: An intercultural moderated mediation analysis. *Personality & Individual Differences*, 177, N.PAG-N.PAG. doi:10.1016/j.paid.2021.110679
- Boucher, E. M., McNaughton, E. C., Harake, N., Stafford, J. L., & Parks, A. C. (2021). The impact of a digital intervention (Happify) on loneliness during COVID-19: qualitative focus group. *Journal of Medical Internet Research*, 23(2), N.PAG-N.PAG. doi:10.2196/26617
- Brady, G., Lowe, P., & Olin Lauritzen, S. (2015). Connecting a sociology of childhood perspective with the study of child health, illness and wellbeing: introduction. *Sociology of Health & Illness*, 37(2), 173-183. doi:10.1111/1467-9566.12260
- Braun, V. and Clarke, V. (2006) Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3 (2). pp. 77-101. ISSN 1478-0887 Available from: <http://eprints.uwe.ac.uk/11735>
- Braun, V., & Clarke, V. (2013). *Successful Qualitative Research: A Practical Guide for Beginners*. London: Sage.
- Breuer, C., Hüffmeier, J., & Hertel, G. (2016). Does trust matter more in virtual teams? A meta-analysis of trust and team effectiveness considering virtuality and documentation as moderators. *Journal of Applied Psychology*, 101(8), 1151-1177. doi:10.1037/apl0000113
- Burke, J. (2021). *The ultimate guide to implementing wellbeing programmes for school*. London: Routledge.
- Burke, J., & Arslan, G. (2020). Positive education and school psychology during the COVID-19 pandemic., 4(2), 137-139.
- Burke, J., & Dempsey, M. (2020). *COVID-19 Practice in Primary Schools in Ireland report*. Retrieved from Maynooth, Ireland: <http://mural.maynoothuniversity.ie/12796/>

- Callow, D. D., Arnold-Nedimala, N. A., Jordan, L. S., Pena, G. S., Won, J., Woodard, J. L., & Smith, J. C. (2020). The mental health benefits of physical activity in older adults survive the COVID-19 pandemic. *The American Journal of Geriatric Psychiatry*, 28(10), 1046-1057. doi:10.1016/j.jagp.2020.06.024
- Chong, Y. Y., Chien, W. T., Cheng, H. Y., Kassianos, A. P., Gloster, A. T., & Karekla, M. (2021). Can psychological flexibility and prosociality mitigate illness perceptions toward COVID-19 on mental health? A cross-sectional study among Hong Kong adults. *Globalization & Health*, 17(1), 1-13. doi:10.1186/s12992-021-00692-6
- Cohen, L., Manion, L., & Morrison, K. (2018). *Research methods in education*. Abingdon, UK: Routledge.
- Colao, A., Piscitelli, P., Pulimeno, M., Colazzo, S., Miani, A., & Giannini, S. (2020). Rethinking the role of the school after COVID-19. *The Lancet*, 5(7), E360. doi:https://doi.org/10.1016/S2468-2667(20)30124-9
- Crosby, S. D., Howell, P. B., & Thomas, S. (2020). Teaching through collective trauma in the era of COVID-19: Trauma-informed practices for middle level learners. *Middle Grades Review*, 6(2).
- Dawson, D. L., & Golijani-Moghaddam, N. (2020). COVID-19: Psychological flexibility, coping, mental health, and wellbeing in the UK during the pandemic. *Journal of Contextual Behavioral Science*, 17, 126-134. doi:10.1016/j.jcbs.2020.07.010
- de Guinea, A. O., Webster, J., & Staples, D. S. (2012). A meta-analysis of the consequences of virtualness on team functioning. *Information & Management*, 49(6), 301-308. doi:10.1016/j.im.2012.08.003
- Dempsey, M., & Burke, J. (2020). *COVID-19 Practice in Primary Schools in Ireland: A two month follow-up Report*. Retrieved from Maynooth, Ireland: [https://mural.maynoothuniversity.ie/13001/1/Wellbeing%20and%20Leadership%20Report\\_Final.pdf](https://mural.maynoothuniversity.ie/13001/1/Wellbeing%20and%20Leadership%20Report_Final.pdf)
- Dempsey, M., & Burke, J. (2021). *Lessons Learned: The experiences of teachers in Ireland during the 2020 pandemic*. Retrieved from Maynooth, Ireland: [https://mural.maynoothuniversity.ie/13914/1/Teacher\\_COVID\\_Report\\_Final\\_21.01.21.pdf](https://mural.maynoothuniversity.ie/13914/1/Teacher_COVID_Report_Final_21.01.21.pdf)
- Denny, S., Howie, H., Grant, S., Galbreath, R., Utter, J., Fleming, T., & Clark, T. (2018). Characteristics of school-based health services associated with students' mental health. *Journal of Health Services Research & Policy*, 23(1), 7-14. doi:10.1177/1355819617716196
- Department of Education. (2020a). Covid-19 – *Statement from the Department of Education and Skills*. Press Release <https://www.gov.ie/en/press-release/92724a-covid-19-statement-from-the-department-of-education-and-skills/>
- Department of Education. (2020b). *COVID-19 Response Plan for the safe and sustainable operation of Primary and Special Schools*. Dublin: Web published <https://www.gov.ie/en/publication/a0bff-reopening-our-primary-and-special-schools/>
- Diener, E. (1984). Subjective well-being. *Psychological Bulletin*, 95(3), 542-575. doi:10.1037/0033-2909.95.3.542
- Diener, E. (2010). New Well-Being Measures: Short Scales to Assess Flourishing and Positive and Negative Feelings. *Social Indicators Research*, 97(2), 143-156. doi:https://link.springer.com/journal/volumesAndIssues/11205
- Donovan, M. (2015). The Challenges of Distributing Leadership in Irish Post-Primary Schools. *International Electronic Journal of Elementary Education*, (2), 243-266.
- Every-Palmer, S., Jenkins, M., Gendall, P., Hoek, J., Beaglehole, B., Bell, C., . . . Stanley, J. (2020). Psychological distress, anxiety, family violence, suicidality, and wellbeing in New Zealand during the COVID-19 lockdown: A cross-sectional study. *PLoS ONE*, 15(11). doi:10.1371/journal.pone.0241658
- Gloster, A. T., Lamnisos, D., Lubenko, J., Presti, G., Squatrito, V., Constantinou, M., . . . Karekla, M. (2020). Impact of COVID-19 pandemic on mental health: An international study. *PLoS ONE*, 15(12). doi:10.1371/journal.pone.0244809
- Greenfield, B. (2015). How can teacher resilience be protected and promoted? *Educational & Child Psychology*, 32(4), 52-68.
- Gustafson, D. C., & Haque, M. D. (2020). Uncovering the challenges and leadership practices of virtual school principals. *Online Journal of Distance Learning Administration*, 23(4), 1-13.
- Hacher, R. (2005). The Distribution of Leadership and Power in Schools. *British Journal of Sociology of Education*, 26(2), 253-267.

- Hobson, A. J., & Maxwell, B. (2017). Supporting and inhibiting the well-being of early career secondary school teachers: Extending self-determination theory. *British Educational Research Journal*, 43(1), 168-191. doi:10.1002/berj.3261
- Keyes, C. L. M. (1998). Social well-being. *Social Psychology Quarterly*, 61(2), 121-140. doi:10.2307/2787065
- Keyes, C. L. M. (2002). The mental health continuum: From languishing to flourishing in life. *Journal of Health and Social Behavior*, 43(2), 207-222. doi:10.2307/3090197
- Keyes, C. L. M. (2009). *Atlanta: Brief description of the mental health continuum short form (MHC-SF)*. Retrieved from Atlanta: <http://www.sociology.emory.edu/ckeyes/>.
- Lai, M. K., Leung, C., Kwok, S. Y. C., Hui, A. N. N., Lo, H. H. M., Leung, J. T. Y., & Tam, C. H. L. (2018). A multidimensional PERMA-H positive education model, general satisfaction of school life, and character strengths use in Hong Kong senior primary school students: Confirmatory factor analysis and path analysis using the APASO-II. *Frontiers in Psychology*, 9. doi:10.3389/fpsyg.2018.01090
- Martinez, J. A., & Broemmel, A. D. (2021). Pencils down: Educators respond to the uncertainty amidst COVID-19 school closures. *International Studies in Educational Administration (Commonwealth Council for Educational Administration & Management (CCEAM))*, 49(1), 109-132.
- Martínez-de-Quel, Ó., Suárez-Iglesias, D., López-Flores, M., & Pérez, C. A. (2021). Physical activity, dietary habits and sleep quality before and during COVID-19 lockdown: A longitudinal study. *Appetite*, 158. doi:10.1016/j.appet.2020.105019
- Mesmer-Magnus, J. R., DeChurch, L. A., Jimenez-Rodriguez, M., Wildman, J., & Shuffler, M. (2011). A meta-analytic investigation of virtuality and information sharing in teams. *Organizational Behavior & Human Decision Processes*, 115(2), 214-225. doi:10.1016/j.obhdp.2011.03.002
- Mohan, G., McCoy, S., Carroll, E., Mihut, G., Lyons, S., & Mac Domhnaill, C. (2020). *Learning for all? Second level education in Ireland during COVID-19. Dublin: ERSI*.
- Muro, A., Feliu-Soler, A., & Castellà, J. (2021). Psychological impact of COVID-19 lockdowns among adult women: the predictive role of individual differences and lockdown duration. *Women & Health*, 61(7), 668-679. doi:10.1080/03630242.2021.1954133
- Nitschke, J. P., Forbes, P. A. G., Ali, N., Cutler, J., Apps, M. A. J., Lockwood, P. L., & Lamm, C. (2021). Resilience during uncertainty? Greater social connectedness during COVID-19 lockdown is associated with reduced distress and fatigue. *British Journal of Health Psychology*, 26(2), 553-569. doi:10.1111/bjhp.12485
- Noble, T., & McGrath, H. (2015). PROSPER: A New Framework for Positive Education. *Psychology of Wellbeing*, 5(2). doi:DOI 10.1186/s13612-015-0030-2
- Ogueji, I. A., Okoloba, M. M., & Demoko Ceccaldi, B. M. (2021). Coping strategies of individuals in the united kingdom during the covid-19 pandemic. *Current Psychology: A Journal for Diverse Perspectives on Diverse Psychological Issues*. doi:10.1007/s12144-020-01318-7
- Okabe-Miyamoto, K., Folk, D., Lyubomirsky, S., & Dunn, E. W. (2021). Changes in social connection during COVID-19 social distancing: It's not (household) size that matters, it's who you're with. *PLoS ONE*, 16(1), 1-16. doi:10.1371/journal.pone.0245009
- O'Toole, C., & Simovska, V. (2021). Same storm, different boats! The impact of COVID-19 on the wellbeing of school communities. *Health Education*. <https://doi.org/10.1108/HE-02-2021-0027>
- Paredes, M. R., Apaolaza, V., Fernandez-Robin, C., Hartmann, P., & Yañez-Martinez, D. (2021). The impact of the COVID-19 pandemic on subjective mental well-being: The interplay of perceived threat, future anxiety and resilience. *Personality & Individual Differences*, 170, N.PAG-N.PAG. doi:10.1016/j.paid.2020.110455
- Parks, A. C., & Boucher, E. M. (2020). Positive Psychological Interventions (PPIs) in the age of COVID-19: on the potential impact of digital PPIs on loneliness. *Journal of Positive Psychology*, 15(5), 569-571. doi:10.1080/17439760.2020.1789715
- Quinn, K., Mollet, N., & Dawson, F. (2021). The Compassionate Schools Framework: Exploring a values-driven, hope-filled, relational approach with school leaders. *Educational & Child Psychology*, 38(1), 24-36.
- Quinn, P., McGilloway, S., & Burke, J. (2020). *"The Class of 2020": The experience of Leaving Certificate students during COVID-19 in Ireland*. Retrieved from Maynooth:

- Ransome, B. (2010). Sen and Aristotle on Wellbeing. *Australian Journal of Social Issues (Australian Council of Social Service)*, 45(1), 41-52. doi:10.1002/j.1839-4655.2010.tb00162.x
- Rolin, S. N., Flis, A., & Davis, J. J. (2021). Work coping, stress appraisal, and psychological resilience: Reaction to the COVID-19 pandemic among health care providers. *Psychology & Neuroscience*. doi:10.1037/pne0000257
- Ryff, C. D., & Keyes, C. L. M. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology*, 69(4), 719-727. doi:10.1037/0022-3514.69.4.719
- Scandurra, C., Bochicchio, V., Dolce, P., Valerio, P., Muzii, B., & Maldonato, N. M. (2021). Why people were less compliant with public health regulations during the second wave of the covid-19 outbreak: The role of trust in governmental organizations, future anxiety, fatigue, and covid-19 risk perception. *Current Psychology: A Journal for Diverse Perspectives on Diverse Psychological Issues*. doi:10.1007/s12144-021-02059-x
- Smith, L., Jacob, L., Yakkundi, A., McDermott, D., Armstrong, N. C., Barnett, Y., . . . Tully, M. A. (2020). Correlates of symptoms of anxiety and depression and mental wellbeing associated with COVID-19: a cross-sectional study of UK-based respondents. *Psychiatry Research*, 291. doi:10.1016/j.psychres.2020.113138
- Thomas, J., & Harden, A. (2008). Methods for the thematic synthesis of qualitative research in systematic reviews. *BMC Med Res Methodol* 8(45). <https://doi.org/10.1186/1471-2288-8-45>
- United Nations. (2020). *Education during COVID-19 and beyond*. Retrieved from [https://www.un.org/development/desa/dspd/wp-content/uploads/sites/22/2020/08/sg\\_policy\\_brief\\_covid-19\\_and\\_education\\_august\\_2020.pdf](https://www.un.org/development/desa/dspd/wp-content/uploads/sites/22/2020/08/sg_policy_brief_covid-19_and_education_august_2020.pdf)
- Visser, M., & Law-van Wyk, E. (2021). University students' mental health and emotional wellbeing during the COVID-19 pandemic and ensuing lockdown. *South African Journal of Psychology*, 1. doi:10.1177/00812463211012219
- Williams, P. (2011). Pathways to Positive Education at Geelong Grammar school integrating Positive Psychology and Appreciative Inquiry. *AI Practitioner*, 13(2), 8-13.
- Zacher, H., & Rudolph, C. W. (2021). Individual differences and changes in subjective wellbeing during the early stages of the COVID-19 pandemic. *American Psychologist*, 76(1), 50-62. doi:10.1037/amp0000702