

**Colorado Educator Support Project**  
**Final Evaluation Report - Academic Year 21-22**  
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## Highlights and Summary

- **Across all the programs, the Colorado Educator Support Project had contact with ~1,200 educators from over 50 different school districts or school organizations.**
  
- **The Well-Being Support Line received 426 calls/texts from 308 different callers.**
  
- **We provided 449 individual mental health sessions to 156 different educators**
  - Satisfaction with this service was high with 85% of the educators reporting the service helped them better manage their mental health.
  
- **We provided 29 workshops/group sessions to 278 educators.**
  - These workshops included both virtual and in-person mental health seminars.
  
- **The coloradoeducatorsupport.com website had 19,272 views. The online program had 429 registrations.**
  - Many educators report sharing the downloadable materials from the online program with their colleagues and students.
  
- **Educators are reporting high levels of burnout and stress**
  - On the Burnout Inventory, 46% of the educators scored moderate to high levels of burnout
  - Most of the educators (94%) reported feeling supported by their coworkers, and 71% report feeling supported by their administration. However, only 52% felt supported by parents or the community.
  - Qualitatively, educators report struggles with staffing shortages, increase in student behavioral problems, and more difficulty with work stress impacting their personal lives.
  - Despite significant stressors, 73% of the respondents felt they were effective educators during the school year.

## **Introduction**

In October 2020, the CU Department of Psychiatry began offering a Well-Being Support Line (WBSL) in response to the COVID-19 pandemic. This service was offered specifically to Colorado educators due to the stressors regarding safety of in-person learning, rapidly changing plans related to remote learning, and additional work due to hybrid models of learning. The purpose of this service was to offer mental health support and targeted resources. Over the course of the 20-21 academic year, the WBSL received over 200 calls from Colorado Educators.

As the pandemic and COVID-19 restrictions continued into the 21-22 academic year, there was ongoing need for this service and mental health support. The Colorado Education Association, the Office of Behavioral Health, the Colorado State Legislature and Colorado Department of Public Health and Environment provided funding to support and grow this program. The Educator Support Program was expanded in Fall 2021 to continue to the 7-day a week call/text WBSL, but also added group support, psychoeducational workshops, individual support sessions, and a self-paced mental health educational program.

This evaluation report outlines a description of these services, summarizes the ways in which they have been used throughout this academic year, and reports on levels of satisfaction with this program. Data regarding burnout, hope, and their role as educators also provide some insight into the emotional wellbeing of the educators this program serves.

## **Methods**

The data for this report includes information only from the 21-22 academic school year, which included any services received between 8/1/21 and 6/3/22. The data for this report was gathered from two different sources. The service data, including the numbers and types of services used, was collected using an internal data management system. After each call/text, support session, or group/workshop, staff entered the data about the participants.<sup>1</sup>

Second, to determine satisfaction with the services provided, we sent out a survey to anyone who had provided an e-mail address as part of registering for any of our services. In early May 2022, we sent out 454 e-mails with a link to our online survey. We received 86 responses, a response rate of 19%. Demographics of the survey respondents are in Figure 1.

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<sup>1</sup> While the number and types of services provided are actual, the demographic data is not routinely collected. For purposes of privacy, educators are not required to provide any identifying data beyond telephone number. Because of this, the demographic data from service use should be interpreted with caution.

Together, we combine this information to report both use and satisfaction from this service, as well as an overall picture of educator mental health.

**Figure 1. Demographics**

	N (%)
<b>Geography of District</b>	
Metro – Denver	48 (60.8%)
Metro – non-Denver	18 (22.8%)
Rural	9 (11.4%)
Other	3 (3.8%)
Not associated with a district	1 (1.3%)
<b>Educator role</b>	
Classroom teacher	47 (59.5%)
Health care staff	17 (21.5%)
Administrator	4 (5.1%)
Para-professional	4 (5.1%)
Support staff	3 (3.8%)
Other	4 (5.1%)
<b>Learner age</b>	
Elementary	40 (50.6%)
Middle school	22 (27.8%)
High school	23 (29.1%)
Early childhood	8 (10.1%)
College / University	1 (1.3%)
<b>Years in Education</b>	
Less than 1 year	1 (1.3%)
1-3 years	13 (17.1%)
4-6 years	10 (13.2%)
7-10 years	20 (26.3%)
11-15 years	12 (15.8%)
16-20 years	4 (5.3%)
More than 20 years	16 (21.1%)
<i>Mean:</i>	<i>12.1</i>
<b>Gender</b>	
Woman	69 (87.3%)
Man	7 (8.9%)
Non-binary/Gender non-conforming	2 (2.5%)
<b>Race and Ethnicity</b>	
White, Non-Latina/o/x or Hispanic	62 (79.5%)
Latina/o/x or Hispanic	7 (9.0%)
American Indian or Alaskan Native	3 (3.4%)
White, Latina/o/x or Hispanic	2 (2.6%)
Biracial	2 (2.6%)
Native Hawaiian or Other Pacific Islander	1 (1.3%)
Asian	0
Black or African American	0

## Service Descriptions, Usage and Outcomes

### Colorado Educator Support Website

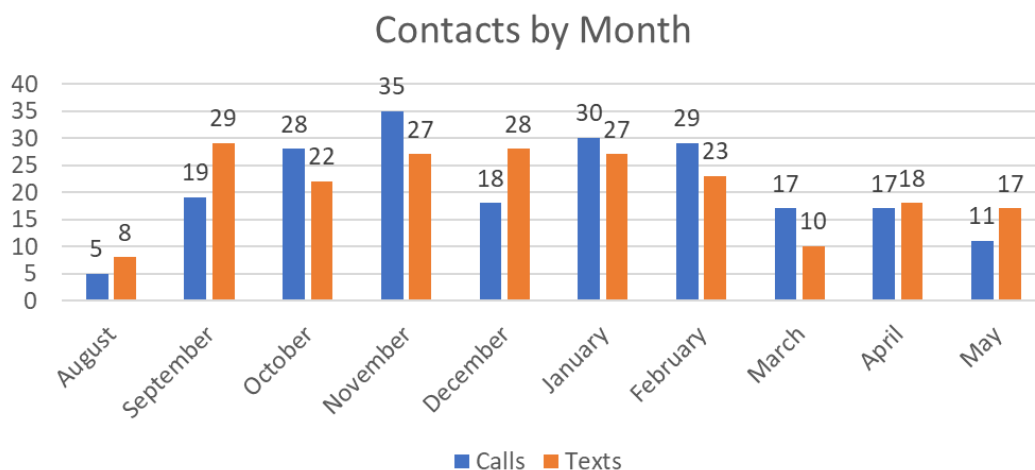
**Description.** The website ColoradoEducatorSupport.com served as a project hub to provide information about program services. Information about the support line, individual support services, workshops, and additional resources were available through this site. In addition, the website offered specific tips around the holidays, return to school, and other timely mental health topics which were periodically updated. This website served as the point of entry to register for the online self-paced program, access program materials, or register for workshops.

**Usage.** The website received 19,272 views from 9,958 unique viewers. Website traffic was notably increased in days following news coverage or social media reference to the project. Most of the referrals from outside sources came from Facebook, with the next highest referral source the Colorado Department of Education (CDE) website. The website averaged approximately 1,500 visits a month over the academic year, with September and October the highest use months, and visits dropping to fewer than 500 visits in May.

### Well-Being Support Line (WBSL)

**Description.** The WBSL is a 7-day a week call/text support line in which educators can have immediate contact with someone to receive support, talk through concerns and/or get connected to other programs. The WBSL is staffed by master's level students in mental health education programs and supervised by licensed mental health clinicians.

**Usage.** The call line received 426 contacts, with 214 via telephone call and 212 via text message. The calls were reasonably steady through the fall semester and into the new year, with the numbers dropping off slightly in the spring.



The support line was primarily used by classroom teachers (68%). The next highest group of callers were school health/mental health care staff (8%); support staff (7%) and administration (6%). The other 11% included calls from Early Childhood workers, those who work in Higher Education, and other off-campus supports. The calls/texts represented educators from 49 unique school districts or schools. Of those calls that came from school districts, 64% were from the Denver Metro area (including Denver, Jefferson, Cherry Creek, Littleton, Adams County, and Douglas Counties); 17% were from a non-Metro urban area (Colorado Springs, Boulder, Ft. Collins, and Pueblo); and 18% of the calls were from those in rural school districts. Private schools or non-district support services make up the other 9%.

**Outcomes.** Most of the callers (91%) received support, validation, and coping strategies from the staff during the call. In addition to receiving support on the call, many of the callers were also referred to ongoing Educator Support Program services, with 60% of the callers also scheduling appointments for individual support sessions. The WBSL staff provided outside referrals to 12% of the callers who required additional resources such as medication or long-term therapy. Approximately 17% of callers wanted to know more about the program or have marketing materials sent. There were also 12% of callers who were unable to be contacted after an initial call or text.

**WBSL satisfaction.** On the satisfaction survey, participants were asked to indicate level of agreement with positively worded satisfaction items such as “Services helped me to manage my work environment”. On a scale of 1 to 4, with 1 being ‘strongly disagree’ and 4 being ‘strongly agree’ the WBSL received an average overall score of 3.4 and a median overall score of 3.7. The only barriers endorsed were regarding difficulty transitioning to ongoing care.

### **Individual Support Sessions**

**Description.** By far, the most popular service has been the individual support sessions, all provided via telehealth videoconferencing. Individual support sessions are provided by trainees in social work, psychology, and the psychiatric nurse practitioner program. All trainees are supervised by licensed mental health providers. These are not therapy sessions but rather an opportunity for educators to meet with the same crisis counselor up to 5 times to talk about stresses related to work, home, or any other concerns. When educators contact the Educator Support Program to be connected to an individual provider, they can typically be seen for their first session within the same week, which is a particular strength of this service. Recognizing the difficulty educators may have in leaving work during the middle of the day, all individual support sessions are held either after school or on Saturday mornings.

**Usage.** Since we began offering individual support in August 2021, 449 sessions have been provided to 156 unique educators. Of those educators, 30% engaged in 1 support session, 17% had 2 sessions, 12% had 3 sessions, 16% had 4 sessions, and 24% had 5 or more sessions. Five educators completed all their sessions in Spanish.

**Outcomes/satisfaction.** Thirty people responded to the evaluation survey regarding the individual support services. Among those who responded to the evaluation, 87% agreed it was easy to get appointments fit their schedules. The number of support sessions attended ranged from 1 to 6 or more (this service was intended to be capped at 5 sessions but several participants were offered additional appointments to facilitate referral to follow-up care). The average number of support sessions was 4.8 with 35% of respondents reporting they engaged in all 5 sessions. Fifteen (15) educators who utilized individual support services subsequently transitioned into CU Psychiatry clinics for ongoing treatment.

Overall satisfaction with the individual services was very good. More than 85% of responding educators said they would refer others to the support sessions, that the service helped them better manage their overall mental health, and that their goals for the sessions were met. Several educators specifically mentioned the helpfulness of this service in written comments.

- *“Thank you for these services, they came to me at a perfect time in my life.”*
- *“The counselor I worked with was a wonderful listener.”*
- *“This is a great resource. It was extremely helpful”*
- *“Very helpful. Please continue the program for educators”*
- *“[Support Coach] was exceptional with helping me with my concerns...”*

Lack of time to engage in sessions and/or scheduling difficulties were the most frequently mentioned barriers to using the service. Frustration that the services were time-limited was a frequently mentioned criticism in free text comments:

- *“I was only provided 5 sessions with a counselor who was not covered by my insurance. It was first available due to my needing help immediately. I wish there was an option to continue with the same therapist because I really feel success with her.”*
- *“I would like referrals to continuing sessions. [Support Coach] mentioned she would give those to me but then we didn't have our last session”*

## **Workshops, Group Sessions, and Seminars**

**Description.** A variety of psychoeducational and mutual-aid groups and workshops were offered with the goal of providing tools and opportunities for support in a group setting. Workshop topics included returning to school, burnout, stress, sleep, managing mental health in the classroom, anxiety, and tips specific to navigating the holidays. In addition, there were two workshops specifically to support educators after a crisis event.

**Usage.** There were 278 total participants across 29 unique sessions. Although there were 29 events attended by educators, there were also several other scheduled workshops in which no one attended. In further exploration as to why this service may not have been used as frequently, educators have cited privacy/confidentiality as a primary concern for their desire to do individual sessions rather than participate in a group.



**Outcomes.** The number of educators completing workshops evaluations were very small. Among the 7 educator attendees who did evaluate the workshops, 5 (71%) indicated they would recommend the workshop to a friend. The same proportion also indicated workshops were relevant, informative, provided strategies to use at home and in the classroom and were offered at a time that fit the educator’s schedule. Common themes from the workshops included problem solving, educator exhaustion, changes in working conditions, and feelings of anxiety/overwhelm.

### **Online Self-paced Program**

**Description.** The online program consisted of modules on various topics relevant to educator wellbeing in the pandemic including Stress Management, Burnout, Depression, Anxiety, Trauma, Grief and Loss, Relationships, Navigating Uncertainty, Wellness, and Crisis Management. Each module included videos in which mental health professionals discussed the topics, handouts designed to accompany content covered in the videos, and a brief knowledge review. Educators were able to receive Professional Development credits upon module completion. In January, we added a series of modules specific to administrators and educational leadership.

There were 429 educators who registered for the program coming from at least 49 unique Colorado school districts. Of those who registered, 55% were classroom teachers, 23% were school health care/mental health staff, 10% were administrators, and the remaining 12% included support staff and non-school district participants.

**Usage.** The number of educators who engaged with at least one module on the website was notably fewer than the number who registered for the program. There were 2,170 views of specific modules. Among the 10 respondents who completed an end-of-year program evaluation, commonly endorsed reasons for registering for the program were “to learn skills to use in my personal life” (70%), “to reduce stress related to being an educator” (60%) and “to learn skills to use in my classroom” (50%). Based on frequency of webpage views, Burnout was the most popular module receiving 184 page views. Other popular modules were Depression (178 page views) and Anxiety (174 page views).

**Outcomes.** Online program satisfaction data are derived from optional evaluation surveys that educators could complete as part of the process to request Professional Development credits. Fifty-three module evaluations were completed. Evaluations were completed for all topics listed and Anxiety (10 evaluations), Burnout (9 evaluations), Depression (7 evaluations) and Stress management (6 evaluations) were the most frequently evaluated modules. Modules were rated favorably regarding their structure and their usefulness in personal and professional life.

<b>Satisfaction Responses to the Online Self-Paced Program</b>	N (%) indicating “agree” or “strongly agree”
The module was a valuable use of time	50 (94%)
The module was engaging	48 (91%)
My knowledge of the content increased after going through the module	50 (94%)
The content was presented in ways I could clearly understand	52 (98%)
The time estimate for the module was accurate	52 (98%)
Would recommend the module to a peer	49 (92%)
Will use skills learned in the module in professional life	51 (96%)
Will use skills learned in the module in personal life	49 (93%)
Learned about mental health impacts of pandemic teaching	49 (93%)
Helped to identify stress signals in self	51 (96%)
Learned strategies to manage own emotional responses to pandemic stress	50 (94%)
Learned strategies that can be used in the classroom to support emotional needs of students during pandemic	48 (91%)

### **Professional Development**

While the primary goal of this project was to make mental health and crisis support available, there was also a learning component related to educator well-being and mental health. As such, participating in some of these services allowed educators to obtain professional development credits. There were 20 people who requested PD credits for workshops, and 41 who requested PD for completing the online modules.

In addition to those receiving Professional Development credits for attending a workshop or completing the online modules, there were two educators who participated in the CEA/Adams State Graduate Credit program. These educators were able to use the modules and workshops as a training opportunity and receive credit to count toward their ongoing education.

### **Emotional Wellbeing of Educators Using these Services**

In the survey, educators were asked a series of questions about their overall well-being, career goals, burnout symptoms, and hope for the future. Despite significant stressors, it is encouraging that 45 of 62 (72.5%) educators responding to the project evaluation felt they were effective educators during the school year.

## Perceived Social Support

A majority of educators perceived social support from their peers and their school administration during the current school year. Perceptions of parent and community support were lower.

Perceived Social Supports	N (%) indicating “agree” or “strongly agree”
I have felt supported by administration this school year	44 (71%)
I have felt supported by parents this school year	33 (53%)
I have felt supported by other educators this school year	58 (94%)
I have felt supported by the community this school year	32 (52%)

## Anticipated Career Outcomes

Educators were asked whether they were currently looking for another job and about their expectations of remaining in the education profession for 1 year and 5 years. Of the respondents, 48.4% (30/62) indicated they have actively looked for a new job over the past 12 months. Of those looking for another job, 73% (22/30) indicated they looked within education, 47% (14/30) indicated they looked outside of education but ultimately decided to stay within education and 28% (9/30) indicated they tried to find a new job but did not find comparable job options. Only 1 educator indicated they had left their job in education. Many educators anticipated remaining in education with 87% (54/62) expecting they would still be in an educator position in 1 year and 61% (38/62) expecting they would be in education 5 years out.

In qualitative comments, frequently mentioned reasons for consideration of leaving education and/or looking for other jobs were stress-level (although not necessarily pandemic stress), need for higher salary, and/or planning to retire.

## Burnout Level of Educators in this Program

Burnout levels were assessed using the Oldenburg Burnout Inventory<sup>1</sup>, a self-report burnout measure that includes subscales measuring disengagement and exhaustion. Higher ratings indicate higher levels of burnout. Typically, any score over 35 indicates “at-risk” levels, while scores greater than 44 indicate a moderate to high level of burnout. <sup>i</sup>The mean level of burnout among educators in this sample was 44.17 out of 64 ( $SD = 6.7$ ) with a range of 30-61. In this sample, 9% of the educators were in the low range, 46% of the educators were in the “at-risk” category, 38% were in the moderate range, and 7% of the educators were in the high range of burnout.

## Hope Level

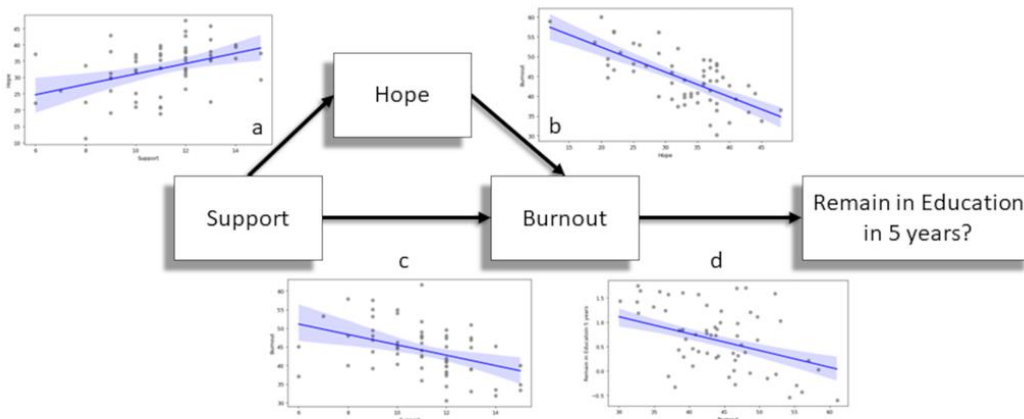
Levels of hope were assessed using the Adult State Hope Scale<sup>ii</sup>, which is a 6 item self-report instrument exploring current goal-related thinking with two subscales assessing agency and pathways. Higher scores indicate higher feelings of hope. The mean overall score was 32.66 ( $SD = 7.49$ ) and ranged from 12 to 48. The two subscales have a minimum score of 3 and a

maximum of 24. The pathway subscale had a mean of 17.29 ( $SD = 3.45$ ) and ranged from 7 to 24. The agency subscale had a mean of 15.37 ( $SD = 4.69$ ) and ranged from 4 to 24.

### Relationship among support, hope, and burnout

Using a path analysis approach (Figure 2) we analyzed the data to test whether teachers self-reported sense of support improved hope and mitigated burnout and/or the possibility of leaving the education field. The data supported the fit of a model evidencing self-reported support and hope mitigating reported burnout. Specifically, teachers who reported having more support also reported having more hope, and this association mitigated reports of burnout. This initial model evidences the importance of support from administration, peers, and the community for bolstering teachers hope and reducing level of burnout.

We also found that higher rates of burnout out were associated with less likelihood of staying in the education field in the next 5 years. Given that support associates with increases in hope, this may indicate that increases in teacher support may bolster hope and indirectly decrease burnout. Taken together, these issues not only may decrease teacher burnout, but potentially help to keep educators in the field longer term. Finding ways to both support teachers and build hope, may help with both burnout and teacher retention.



	$\beta$	Std $\beta$	p-value	95% CI bootstrapped	
<b>a</b>	2.022	0.574	< 0.001	1.965	2.036
<b>b</b>	-0.474	-0.577	< 0.001	-0.476	-0.464
<b>c</b>	-0.691	-0.238	< 0.001	-0.707	-0.661
<b>d</b>	-0.042	-0.533	< 0.001	-0.043	-0.042
<b>Indirect</b>	-0.958	-0.330	0.002	-0.972	-0.927
<b>Total</b>	-1.950	-0.569	< 0.001	-1.659	-1.608

Fit:  $X^2$  4.480(6), CFI= 1.00, TLI = 1.00; RMSEA= 0.001; SRMR= 0.023

## Conclusion

A primary goal of this Educator Support Program is to provide mental health support to Colorado educators. Doing so may facilitate a healthier workforce that is also better able to support students. In addition, support from coworkers, administration, and the community may be a way to help mitigate some of the burnout that educators feel.

While this program was created to help support educators through the pandemic, many of the concerns expressed through these services are representative of the educational system as a whole. Staffing shortages, disruptive student behaviors, feeling as though the community doesn't care about their safety are all issues that will likely continue to need to be addressed even after mask wearing, remote-learning, and quarantines are over.

Educators are an important part of our communities, and their impact on the economic and health outcomes of individuals and communities is invaluable. But given their reports, education is more challenging now than ever, so educators may benefit from ongoing mental health services such as these.

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<sup>i</sup> Tipa, R. O., Tudose, C., & Pucarea, V. L. (2019). Measuring Burnout Among Psychiatric Residents Using the Oldenburg Burnout Inventory (OLBI) Instrument. *Journal of medicine and life*, 12(4), 354–360. <https://doi.org/10.25122/jml-2019-0089>

<sup>ii</sup> Snyder, C. R. , Sympson, S. C. , Ybasco, F. C. , Borders, T. F. , Babyak, M. A. & Higgins, R. L. (1996). Development and Validation of the State Hope Scale. *Journal of Personality and Social Psychology*, 70 (2), 321-335.