The authors of *Teachers as Health Workers* take an in-depth look into the health work that teachers do in their everyday practices and the consequences of this expansive role on both student and teacher health. After 2 years of a pandemic, the health work that teachers are expected to complete came to the forefront as the COVID-19 virus ran rampant throughout communities across the globe. Yet, as McCuaig et al. (2022) point out, health work such as providing pastoral care, promoting healthy lifestyle choices, and caring for the well-being of students are responsibilities that have always been imbedded in the fluid role of teachers. Set in a time prior to and also during COVID-19, this book provides a detailed account of the expansive role of the teacher, who by all accounts might also be called a health worker.

The book details a research project involving 12 Australian schools that was conducted by four critical health educators. McCuaig et al. poignantly map the health work of teachers through an analysis of health policies interviews with teachers and observations in schools. They conclude that to meet both the health and academic needs of students, the silos in which health and education are constructed must be permeated through a form of boundary spanning. And as such, boundary spanning professionals must be given training and recognition to adequately meet student needs and avoid a state of burnout.

In the first section of the book, McCuaig et al. provide an overview of the health work done by teachers and a fulsome discussion of why schools are ideal places for this type of work. Artifacts such as posters, images, policy statements, and quotes from teachers provide the weight and authenticity necessary to demonstrate the unassuming health work teachers do such as pastoral care, crisis management, and family support.

After clarifying the extent of teacher’s health work, McCuaig et al. articulate the impact this work has on teachers’ personal and professional lives. Teachers responded to questions about how being a health worker affected their own well-being with conflicted sentiments. Most teachers said that the health work was a burden but a necessary burden because of their commitment and sense of responsibility to the children.

The final section of the book titled, “Teachers’ Health Work: Care, Crisis, and Costs” details the information acquired through the research to provide thought provoking insights into the most concerning issues surrounding teachers’ health work and potential strategies to remediate. In an analysis of the data, the authors apply the Regime of Personhood (RoP) analytic framework (Rose, 2000, as cited in McCuaig et al., 2022) to “devise the lines of inquiry underpinning [our] Teachers Health Work Spectrum” (p. 148). The spectrum works to critically analyze the pathogenic and salutogenic registers of teachers’ health work through the domains of problematizations, teleologies, technologies, and authorities. This framework proves useful in deepening the analysis and demonstrating the crucial health work teachers assume and the supports, training, and policies that are lacking.

Under the pathogenic and salutogenic health perspectives, McCuaig et al. create four clusters. The first two clusters, classroom delivery of health education curriculum and routine and formal health and safety policy, fall under the pathogenic register. The tasks associated with the
pathogenic clusters include understanding policy, fulfilling legal obligations and implementation of the health education curriculum which are all included in a teacher’s contracted duties. Of the remaining two clusters, which align with the salutogenic perspective, health oriented caring teaching is considered by both the teachers and researchers to fall under the umbrella of responsibilities within what would be considered “in loco parentis” in the Education Act (1995). In contrast, the last and maybe most interesting register, crisis management was problematic for teachers for several reasons. Through conversations with teaching staff McCuaig et al. (2022) discovered that in multiple instances,

A fast-failing family institution was a dominant theme in our participants’ descriptions of their role in dealing with complex and emotionally charged challenges that included: neglect and sexual abuse, violent students, poverty, death of family members and severe student or parent disability. (p. 155)

With little to no guiding policies or training to assist educators in the preceding situations many of the teachers although seemingly willing to tackle these tough situations did so at a cost to their own well-being. The authors then appropriately attempt to answer the question “Why are teachers more committed to and enthusiastic about this health work than, what many would consider to be, their core business of teaching the mandated health education curriculum?” (McCuaig et al., 2022, p. 157).

An analysis of the personal and systems costs of teachers undertaking health work is then described in Chapter 11. The research acquired from this study highlights the costs incurred to the time spent teaching the core curriculum, both the financial debit and credit teachers’ health work provides to the state, and finally the personal costs teachers experience to their own well-being as a result of taking on this type of work.

The book concludes by discussing how neoliberalism has created a healthcare hustle in the Western world. In an attempt to address these issues, the authors advocate for a re-visioning of education that accounts for the fluidity of demands on teachers. As a means of meeting the student’s health and academic needs as well as supporting teachers in the taxing health work that will inevitably fall on them, this re-visioning would include a co-location of education and health services. For this type of re-visioning to be successful the findings from McCuaig’s research indicate that boundary spanners from both health and education will need to be trained and supported in this fluid work.

As noted in this book, the education and health sectors played vital roles in the economy throughout the COVID-19 pandemic, yet chronic underfunding to both sectors are still prevalent and continue to place greater pressures on those working in these fields. While this study was set in Australia, the issues and challenges will be familiar to a North American audience. Teachers as Health Workers is a timely and essential read for both researchers looking to support front-line workers in school systems and educators working the healthcare hustle for the betterment of students.

Reference