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Preparing for the Profession: Building Resilience with Preservice Teachers

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Abstract
In this qualitative study we examined how preservice teachers (PSTs) navigated self-care and professional resilience during a junior-year clinical experience. A thematic analysis of data from forty-two PSTs, which included video reflections, written logs, surveys, and exit interviews related to self-care and wellbeing led to the identification of three central themes: (1) *Strengths and Struggles*, including the protective role of social support and the undermining effects of loneliness and negative self-talk; (2) *Limitations of a Curriculum*, highlighting the gap between self-care knowledge and practice, and (3) *Secondary Trauma*, with PSTs affected by the emotional weight of students' lived experiences. While many participants valued the self-care curriculum for increasing awareness and fostering peer connection, data suggested that isolated interventions are likely insufficient for long-term resilience. These findings underscore the need to shift self-care from an individual responsibility to a shared, structural priority in teacher preparation.
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1. Introduction

Teacher education programs carefully design courses and experiences to help preservice teachers (PSTs) develop the knowledge and skills to serve as effective teachers. However, while professional wellbeing is critical to effective teaching, teacher education programs rarely focus on elements of self-care or strategies that will keep PSTs resilient in the face of professional hardships and stress (Fowler, 2015; Lemon, 2021; Mansfield et al., 2016; Weldon, 2018;). Now, more than ever, PSTs need to centralize their wellness as the demands of teaching continue to rise (Pressley, 2021; Schussler et al., 2018). Educators who take care of their physical, social, emotional, intellectual, and spiritual needs are more likely to stay calm, attuned, and present in the classroom, which yields many benefits for students and reduces rates of teacher attrition (Lucas, 2018; Walkley & Cox, 2013). "Healthy classrooms begin with healthy teachers" (Atkins & Rodger, 2016, p. 97), and this work must begin during the preservice years (Hoferichter & Jentsch, 2024; McKay, 2019; Núñez-Regueiro et al., 2024). The purpose of this project was to examine the self-care experiences of PSTs during a junior-year clinical experience who engaged in a 14-week *Teacher Resilience Curriculum* as part of a clinical course.

2. Literature Review

2.1 Preservice Teacher Stress

Preservice teachers (PSTs) often feel overwhelmed and intimidated by emotional and academic complexities involved in becoming a teacher (Le Cornu, 2009), leading to high levels of stress. Stress is felt anytime environmental events cause a state of imbalance (Núñez-Regueiro et al., 2024), and is, unsurprisingly, reported by the majority of PSTs who face rigorous demands in licensure requirements and a certain level of unpredictability in clinical experiences (Huang & Zhou, 2025). Clinical experiences offer some of the most meaningful moments in developing as an educator, as PSTs connect theory to practice in a real-world setting; however, clinical experiences can also serve as the most stressful and draining components of teacher education (Lemon & McDonough, 2020; Paquette & Rieg, 2016). During these professional experiences, PSTs are faced with novel classroom tasks and real-world problems, that sometimes misalign with the theory-driven or idealistic prerequisite coursework experienced in their programs (Alisic, 2012; Núñez-Regueiro et al., 2024).

Clinical experiences may also trigger a jarring professional "wake up" in response to toxic school cultures (Beutel et al., 2019; Caires et al., 2009; Wilkins, 2017), underresourced environments (Roselle, 2007), and

overwhelming workloads (Crosswell & Beutel, 2017; Danyluk et al., 2021). During clinical experiences, PSTs face stress from lesson planning (Danyluk et al., 2021; Jennings et al., 2011), performance evaluations (Crosswell & Beutel, 2017) while simultaneously reporting a lack of confidence in their skills and sense of belonging in the school community (Ng & Nicholas, 2015; Weatherby-Fell et al., 2019). PSTs also report a concerning gap between highly theoretical coursework and the practical realities of clinical classrooms (Hennissen et al., 2017; Yin, 2019) in addition to witnessing the challenges of managing diverse student needs in politically charged times (Yada et al., 2021). Further, these stressors are felt in conjunction with the demands of rigorous academic requirements across courses (Keller-Schneider et al., 2014 Lutovac & Assunção Flores, 2021; Muntazhimah & Ulfah, 2020; Tülüce, 2018). These pressures are not limited to one national system. In Finland, for example, PSTs have reported stress from high academic expectations and complex practicum feedback (Lutovac & Assunção Flores, 2021). In Indonesia, preservice teachers cite a lack of confidence in managing diverse learners and a gap between theory and practice as key stressors (Muntazhimah & Ulfah, 2020). Australian and Canadian studies similarly describe how PSTs often feel overwhelmed during school placements, particularly when school environments are underresourced or lack support structures (Crosswell & Beutel, 2017; Zito et al., 2024).

Moreover, PSTs bring their own lived experiences and histories to the classroom, including unresolved trauma, economic pressures, and mental health challenges, which can further intensify their stress during teacher training (Farnsworth, 2021; Tülüce, 2018). In fact, as a whole, college students in the United States are experiencing alarming rates of stress and mental health issues related to general academic life, financial concerns, and personal relationships ((Duong et al., 2023; Hrynowki & Marken, 2023; Lipson et al.,2022). According to recent data from the United States, nearly 60% of college students experience at least one type mental health condition, while only 38% report thriving on campus (Zhou & Eisenberg, 2022). Additionally, the 2023 National College Health Assessment found that approximately 77% of undergraduates reported experiencing moderate to severe psychological distress (American College Health Association, 2023). Global student wellbeing trends echo similar concerns (Campbell et al., 2022; Wiens et al., 2020). The general decline of student wellbeing can place PSTs in a vulnerable position, making them more susceptible to the stress they might experience in their coursework, compromising their ability to rebound from professional stress and challenges encountered in teacher education (Deasy et al., 2016; Hockley & Hemmings, 2001).

The compounding pressures of one's coursework, employment, and personal life are challenging to navigate, even for seasoned teachers, and can leave preservice teachers feeling worn out and questioning their career choice (Crosswell & Beutel, 2017; Farnsworth, 2021: Núñez-Regueiro et al., 2024; Wilkins, 2017). These challenges can help explain the high attrition rates in teacher education, which have been reported from 25-42% in the United States (Kim & Corcoran, 2018), and similar rates in countries such as Australia, South Africa, and Japan (Shibiti, 2020; Maeda, 2025; Wheeley et al., 2023). Preservice training is taxing for even the strongest and most highly motivated students and requires PSTs to learn new routes to wellbeing and self-care to stay engaged and committed to teaching (Lemon, 2021; Squires et al., 2022). Without intentional support structures to build professional resilience, many PSTs may feel unprepared for the realities of the profession and ultimately leave before completing their training or in the early years of their teaching careers.

2.2 Preservice Education and Wellness

Currently, little attention is given to supporting and promoting preservice teacher wellness within teacher education programs. Instead, the primary focus is on teaching methods and meeting state requirements for teacher licensure (Mishra & Koehler, 2006). It is unlikely that teacher education programs don't care about wellness and resilience, it is simply deprioritized in the ranking of requirements and, therefore, neglected across courses unless an instructor independently decides to incorporate wellness or self-care (Birchinall et al., 2019; Huang & Zhou, 2025) Fortunately, many preservice teachers find protective factors through informal peer support, as well as encouragement from mentor teachers (Arcelay-Rojas, 2019; Beutel et al., 2019; Crosswell & Beutel, 2017; Le Cornu, 2009; McGraw & McDonough, 2019; Ng & Nicholas, 2015; O'Brien et al., 2022). Family and friends also play a crucial role in helping PSTs respond to personal, academic, and professional responsibilities, and in adjusting to unfamiliar and often demanding school environments (Beutel et al., 2019; Crosswell & Beutel, 2017; McGraw & McDonough, 2019). PSTs may also maintain resilience if they hold a strong vocational commitment to teaching, what we sometimes call their "why" (i.e., why they want to be a teacher) (Huang & Zhou, 2025).

Most of the supports PSTs name in supporting their wellbeing are student-dependent rather than purposefully embedded within a program to support all preservice educators. Neglecting the topic of wellbeing and self-care in preservice training can explain why teachers often experience higher levels of burnout than counselors (Adams et al, 2017; Huang & Zhou, 2025). While teaching and counseling are careers that share high emotional demands, self-care and emotion regulation are required in the curriculum for counsellors as both an ethical mandate and integral part of their programming (Council for Accreditation of Counseling and Related Educational Programs, 2023) unlike teacher education. It seems there is much to be learned from other helping professions and their efforts to strategically support the wellbeing of their preservice professionals and avoid burnout (Curry & Epley,

2021; Grise-Owens et al., 2018; Shin et al., 2014).

Although limited, a few teacher education programs have piloted or incorporated such content or interventions to support preservice teacher wellbeing with promising results (Zito et al., 2024). For example, Vesely-Maillefer and Saklofske (2018) piloted an Emotional Intelligence Training aimed at preventing teacher burnout by building skills necessary for everyday challenges in the classroom. In response to the training, PSTs' coping skills, self-efficacy and resilience improved, while stress indicators declined. Similarly, the Building Resilience in Teacher Education (BRITE) framework and its corresponding modules (Mansfield et al., 2016) have shown positive results in the development of resilience for preservice teachers (See Beltman et al., 2018). Additionally, the modules helped to facilitate meaningful connections between PSTs and their mentors, teacher educators, families, and children, which in turn enhances their sense of confidence and belonging throughout their practicum experiences (Weatherby-Fell et al., 2019). Such studies suggest that resilience-oriented trainings and curricula benefit preservice teachers, yet their use remains scarce and largely dependent upon each program (Birchinall et al., 2019; Mansfield et al., 2020).

3. Theoretical Framework

To support and sustain teachers in their challenging roles as educators, a growing number of scholars have drawn upon the concept of resilience (Mansfield, 2020; Mu, 2024). Resilience is a theoretical perspective that suggests one's resources and personal assets can help one rebound from life's difficulties (Leitch, 2017). Although the concept of resilience was historically applied to children (Masten, 2001), it can help explain which teachers flourish and which teachers leave the field of education (Luthar et al., 2000; Schussler et al., 2018). Teacher resilience is an educator's capacity to thrive rather than merely survive in the school context by learning to utilize resources and adapt to challenges (Beltman et al., 2011). This perspective recognizes that teaching is a high-risk profession for burnout (Pressley, 2021), but there are also many personal characteristics, as well as contextual and social resources and social factors that protect educators from the stress they experience and help them quickly rebound (Le Cornu, 2009). Therefore, it is crucial for teacher education programs to support strategies and assets to preserve the wellbeing of preservice teachers, otherwise, a decline in interest and overall perception of teaching is likely to result. Many helping professions (i.e., counseling, social work) utilize this theoretical perspective in designing and supporting preservice experiences (Curry & Epley, 2021); however, education is slow to adopt such a perspective. This study enters that space with other helping professions, and positions self-care as a protective factor and necessary component of a clinical experience to support the wellbeing and success of PSTs.

4. Methods

Based on existing scholarship in the field and teacher resilience as a framework, we designed a qualitative study around the following questions:

1. How did PSTs care for themselves during a junior-year clinical experience?
    1a. In what ways were PSTs successful in self-care?
    1b. In what areas do PSTs need self-care support?
2. What aspects of PSTs' clinical experience supported or hindered self-care and professional resilience during a junior-year clinical experience?

4.1 Participants & Context

Preservice teachers enrolled in the first author's sections of a junior-year clinical course from 2022-2023 were invited to participate in the study. Volunteering for the study provided permission for coursework related to wellness and resilience to be used, based on the IRB consent form. Of the 45 potential participants, 42 volunteered to participate and three declined participation. Participants included 40 females and two males, all of whom were full-time students between the ages of 20 and 23. Thirty-five identified as white, three identified as Latina, and four identified as Biracial (Latina/white, Black/white). Nine participants grew up in an urban setting, 13 in a rural setting and 20 in a suburban setting. Fifteen of the students had transferred to the four-year institution within a year of beginning this clinical course.

Participants spent two days each week in an elementary classroom, from grades one to five, where they completed 100 clinical hours with a licensed teacher. During this experience, they observed classroom practices, shadowed a focal student, led small group activities, and completed a whole class lesson. Participants were also enrolled in four additional education classes during the semester that covered theories, issues and methods related to teaching.

4.2 Positionality

As researchers, we acknowledge that our identities, professional backgrounds, and lived experiences shape the lens through which we designed this study and interpreted its findings. We are three white female educators—two faculty members and one graduate student—with backgrounds in education and social work. Collectively, we

bring decades of experience working in K–12 schools and higher education. Our professional roles have immersed us in the challenges of teaching, teacher preparation, and student support, and we have each personally experienced the emotional toll of stress, burnout, and the need for resilience in educational spaces.

We have lived and worked in various regions across the United States, which contributes to a broader understanding of the diverse contexts in which educators operate. At the same time, we recognize that our racial, gender and cultural identities as white women may limit our ability to fully capture or speak to the experiences of preservice teachers from historically marginalized backgrounds. We have sought to honor participants' voices and center their perspectives throughout this study while remaining reflective of our own positions of privilege and influence in both research and practice.

4.3 Data Collection

Data included video reflections, written reflections, end-of-semester survey, and an exit conference. Video reflections were connected to a Teacher Resilience Curriculum developed by faculty in the program and embedded across clinical courses. PSTs were asked to submit weekly video reflections through an online platform and respond to one another. Students responded to weekly prompts covering aspects of physical, emotional, social, intellectual, and spiritual wellbeing (See Table 1). Participants also kept a reflective log of their classroom activities and experiences, which were completed at the end of each clinical day. While the reflective log was not specific to self-care, wellbeing was an unprompted topic that consistently emerged throughout written reflections and, therefore, wellness-related comments were flagged for this study. Finally, participants completed an end-of-semester survey and exit conference with the clinical course instructor, which asked the PSTs to reflect on the semester and self-care content. Part of the end-of-semester survey also asked PSTs to identify which self-care topics were the most helpful during the semester by checking as many boxes as desired.

4.4 Data Analysis

With a goal of thematic description, we moved through an inductive qualitative process that allowed the data to guide our investigation and discovery phases (Creswell & Poth, 2018). Drawing strategies from grounded theory, the first step was to organize the data and familiarize ourselves with the various data sources and participants. Video reflections were transcribed verbatim and then compiled with PSTs' written reflections, survey responses, and notes from exit conferences. Analytic memos accompanied this process as we documented research steps, questions related to the data, and emerging impressions (Corbin & Strauss, 2015). Our first wave of coding involved reading through each piece of data, line by line, and labeling chunks of data with initial codes and ideas. Initial codes were then reviewed and reorganized in hierarchical ways where some codes were collapsed or expanded to include others. This process was applied to each set of data, with codes from prior coding being carried over into each new set of data, where new codes were added or used to refine prior codes. NVivo 12 assisted the organization and analysis of data (Lumivero, 2023; Richards, 2020).

5. Findings

Data clustered into three main categories: 1) Strengths and Struggles, 2) Limitations of a Curriculum, and 3) Secondary Trauma. A description of each category and connected themes are offered below with evidence from the data.

5.1 Strengths & Struggles

5.1.1. Social Support & Human Connection

For most PSTs, *family* and *friends* emerged as a primary protective factor during the semester. Participants described friends and family as giving them energy, providing meaning for life and provided compassion which they did not easily give themselves. Friends and roommates also encouraged some PSTs to cook healthy meals and workout, which they may not have accomplished on their own. One PST shared in their video post, "A couple of times a week I will make dinner with my roommates. These are the nights I actually eat vegetables. And we don't talk about school – that is the rule. No school. It feels so good."

However, for a few students, the lack of social support and friendships on campus threated their resilience and contributed to loneliness. This was especially true for transfer students who experienced barriers to meeting people or breaking into pre-established social circles. One participant even recommended that the clinical course incorporate social events or "meet ups" as a way to facilitate social connections and friendships, which they lacked during the semester. One PST reflected, "So possibly having a list of activities and something like a group sign-up sheet could make for an easy way to bring more students together and feel united and not alone." The PST expanded upon this in the exit conference by sharing about his feelings of loneliness and isolation during the semester.

Interestingly, several PSTs identified the video reflections as a place they felt human connection and community, which contributed to their resilience during the semester. By viewing and commenting on their peers'

posts, they felt a greater connection to their classmates, especially given the vulnerability that many PSTs displayed in their videos (e.g., food insecurities, body image issues, financial stress, self-doubt). This assignment was unlike other assignments in their other courses. For example, one PST wrote in the end of semester survey, "I definitely think this [video reflections] helped build relationships in the classroom, and I finally feel closer to other education majors!" Another PST wrote about the video reflections, "It allowed me to form a more personal connection with my classmates and relate to them in many ways." It appeared that this assignment provided a sense of social support for many preservice teachers, for example, "Responding to peers is helpful in creating a tight-knit classroom community. Just little comments like, 'I like that!' or 'Thank you for sharing!' goes a long way."

5.1.2 Self-talk

Comments related to self-talk emerged across all sources of data, with the majority of data pointing toward negative self-talk. PSTs were critical of themselves and their teaching abilities in their written reflections and exit conferences. They also spoke candidly of the constant judgment they inflicted upon themselves throughout the day in their video reflections. For example, one PST shared in a video, "It's funny, actually not funny, that I avoid deficit-language with my students but not with myself" and another shared, "when I think about being kind, it is always about being kind to others and not to myself." Participants disclosed insecurities related to school and their physical appearance leading to negative self-talk in their lives. Additionally, several participants named social media as a catalyst for some of the negative talk, and interestingly, these same participants ranked the social media cleanse (a week of limiting social media usage) as the least helpful self-care topic. For these reasons, the week that focused on *speaking kindly to yourself* was rated as the most popular topic in the end-of-semester survey.

For a few participants, the week that focused on positive self-talk prompted them say kinder things to themselves. For example, one participant wrote, "I felt that speaking kindly to myself was a helpful tip that kept me in a good mood throughout the day and over all made me much more positive to not only myself but others." Another PST wrote, "You set yourself up for much greater success throughout your day, as well as week. Little moments of speaking kindly to yourself result in happiness throughout the day!" However, for most PSTs it was a week that helped them recognize a pattern in their behavior that was compromising their resilience, and they desired more support on making this a habit.

5.2 Merits & Limitations of a Curriculum

5.2.1. Self-care as an Assignment

PSTs provided positive feedback on the self-care content because it "forced" them to focus on themselves and held them "accountable" in regard to wellness. Most participants completed the posts on Sundays, which was often described as their day to reset and prepare for the week. They claimed that the weekly assignment helped them to pause and consider their needs, which did not come naturally. For example, one PST wrote, "I had to hold myself accountable. It was a place that I was able to reflect upon myself and see the areas in which I need to improve," while another PST reflected on how the curriculum encouraged her to focus on what matters in life and not just "go through the motions." Some PST's recognized the curriculum as a way to address burnout. They wrote:

> I really enjoyed the self-care videos and moments of reflection. It gave me the opportunity to realize what aspects of my life were missing during this difficult semester. There was so much happening in my life, and these gave me the opportunity to slow down and reflect on what makes me happy or how I could improve. Even if we don't realize it, burnout is real, and we need to take care of ourselves.

Several PSTs also appreciated the message the assignment sent, that self-care in teaching is just as important as other aspects of teaching. Since points were attached to this assignment, like other assignments, it showed that self-care and professional resilience were valued. For example, "It was nice because it (self-care video reflections) acknowledged and encouraged the importance of self-care" and "It is nice when a course actually cares about your mental health."

Like any assignment, a few students neglected to complete the weekly posts and asked to respond to numerous missed prompts during the last week of class. Perhaps not completing the assignment was an act of self-care during the semester. They chose to put their needs before a course assignment. As one participant shared in her (late) post, "I've had a really hard time prioritizing school this semester, which is why these [self-care] posts are late. I'm really sorry. And I'm just now gaining motivation, which is really awful because it's the end of the semester." Like this PST, it was viewed as an assignment or something on their to-do list, rather than habits to keep them strong or engaged during the preservice years. For example, one participant wrote, "I liked the assignment, but can you post more reminders about it on the course site? Otherwise, it is easy to forget about."

5.2.2 Knowledge Versus Practice

Participants described a clear understanding of self-care practices and why they were important to their personal wellbeing and professional roles. However, simultaneously, many PSTs struggled to implement these practices throughout the semester. For these students, they were aware of the need to get more sleep but continued to "get by" on five to six hours each night. One PST wrote in their clinical log, "Honestly, I was so tired today it was hard for me to even focus. I need to get more sleep." For others, they recognized there were toxic people in their lives

who zapped their energy but struggled to set boundaries or limit time with those individuals. There were numerous examples of PSTs who put school, friends, family and work before themselves and their basic needs. One PST wrote in her clinical log, "I've been having extreme back pain today and haven't been able to move much in the classroom. It has been hard to participate but I am doing my best." As part of the curriculum, PSTs are encouraged to "seek care" when there is a serious physical, emotional, social or spiritual need. However, the course's attendance policy and requisite hours for graduation can cloud self-care judgment and place school in front of one's wellbeing.

In line with this theme, several PSTs directly pointed out the disconnect between their knowledge and behaviors. One PST shared in a video, "I know that I need to stop scrolling on TikTok before falling asleep. But I just don't." Another PST even suggested that the Teacher Resilience Curriculum focus more on enacting these practices, rather than simply sharing and discussing. They wrote, "I think the self-care videos helped ground me whenever I was stressed, because I could always go back and watch the videos when I needed a pick me up. But I feel like there should be more of an emphasis on practicing these habits." Only four of the fifteen weekly self-care prompts asked participants to engage in an act of self-care (i.e., do something that makes you happy, take a break from social media, perform an act of kindness, draw/dance/sing/create). Most prompts called for a general reflection on what PSTs were currently doing or identifying barriers to self-care. Data suggested that prompts led to an increase in self-awareness or knowledge but not necessarily action.

5.3 Secondary Trauma

Many participants described the toll that student stories and circumstances took on their wellbeing. PSTs described "losing sleep" and excessively worrying about students. Although the trauma that their students experienced did not directly impact them, it seemingly had a secondary effect. One PST wrote on her end-of-semester survey, "There have been days when I can't stop thinking about one of my students and what she is going through. I've only spent 100 hours with this student, and it is hitting me this hard. What am I going to do as the actual teacher?" In an exit conference, another PST talked about a student whose fatPher was recently arrested for a very "disturbing" crime and the pain and sadness she felt for that student as she "watched his personality change" during the semester. Even after completing the clinical experience, she reported worrying about the student during the exit conference.

One PST began feeling the effects of student trauma during her first week in the field when she was required to report abuse in a child's home as a mandated reporter. She wrote in her clinical log, "When I talked to you [instructor] at school, I think that I was still processing what happened. Now that I am at home, I am kind of a mess. This is bringing up a lot for me." Another PST shared on their end-of-semester reflection:

> I am worried about how to really separate work from home and being able to sleep at night. There is one incident that happened on the last week of class, and it was really upsetting, and I am still thinking about it. How do you block that out when you are at home? I worry that I will have even more cases like this and this is how I feel after being with this student for only 18-20 days.

As these examples suggest, simply learning about a student's trauma compromised many PSTs' physical and emotional wellbeing. However, at the same time, they did not readily view self-care as a way to help them rebound from this type of stress. While the self-care curriculum was positioned as a way to stay a resilient educator, self-care practices were not identified as buffers to stories of secondary trauma. Instead, preservice teachers voiced fear or concern through the question – what do I do?

6. Discussion

Teacher stress is not a new phenomenon, and the early-career stage has been identified as a notably vulnerable time for educators' mental and physical health as they experience the many demands of teaching (Schussler et al., 2018;). Unfortunately, it is also an issue that begins before the first year of teaching, as scholars are now noting the high levels of distress and burnout occurring during the preservice years (Núñez-Regueiro et al., 2024; Squires et al., 2022). Therefore, attention must be directed toward teacher education to help foster professional resilience. By integrating self-care content into a junior-year clinical course, PSTs were able to pause, reflect and engage in moments of self-care to promote and preserve resilience. The weekly responses helped PSTs acknowledge the vital role family and friends play in their professional resilience by offering emotional support, social belonging, and the encouragement of healthy habits like cooking, exercising, and talking about their stress (Huang & Zhou, 2025).

Similarly, Squires et al. (2022) noted the importance of social connection in their study of over 1,000 preservice teachers, as family, friends and peers were named as the most helpful in supporting PST resilience within college of education programs. Positive peer relationships in teacher education programs can serve as a source of emotional support during preservice training and even evolve into a network of support post-graduation to help with innovation, collaboration, confidence and retention (Beltman et al., 2011; Mansfield, 2020). Therefore, teacher education programs should not underestimate the importance of relationships in their design and delivery of programming, as it can greatly inform the experiences and persistence of developing teachers (Kaur et al., 2021).

Additionally, programs should not underestimate that transfer students may be uniquely vulnerable to feelings of loneliness and disconnection during their clinical experiences. Several transfer students in the study described challenges in forming social ties on campus and reported difficulty integrating into pre-existing peer networks within their education cohort. These social barriers appeared to intensify their sense of isolation and, in some cases, compromised their resilience during the semester.

Given that social support emerged as a key protective factor in sustaining wellbeing, our findings underscore the importance of intentionally fostering community and belonging for transfer students within teacher preparation programs. Borrowing words from Harvard University's Robert Waldinger who led a 75-year longitudinal study on adult development, "Good relationships keep us happier and healthier. Period" (Waldinger & Shulz, 2023). Therefore, reducing unnecessary competitions and comparisons with peers and, instead, supporting relationships rooted in collaboration, sharing, and trust can reduce the emotional strain and stress felt by many PSTs (Ressler et al., 2022) and help preservice teachers achieve greater academic success (Liou et al., 2016). We believe the video reflections posted on the interactive platform in this study created that type of environment for preservice educators. Participants noted that the collaborative format fostered a sense of community among classmates and supported human connection that helped them persist during a challenging semester (Mansfield, 2020).

However, this study also showed there are limitations to relying on a 14-week curriculum to change PSTs' thinking and behavior related to self-care. As the data suggested, a weekly assignment will unlikely lead to the internalization of self-care as a professional practice unless it is supported in contextualized and sustainable ways within teacher education and across the university. PSTs who experienced loneliness and/or secondary traumatic stress were seemingly the most vulnerable. Given that PSTs were placed in a school where student adversity was prevalent due to rates of poverty, mobility, documentation status, and limited community resources, greater efforts should have been made to support their physical, social, emotional, and spiritual wellness as a way to promote their professional resilience (Author, 2019; McLean et al., 2020). Preservice teachers were underprepared to buffer against secondary traumatic stress that came from simply learning about students' lives (Fowler, 2015). Additionally, several participants reported loneliness as a challenge to their wellbeing. Since most college students are immersed in social spaces, we often assume they are experiencing connection and belonging, which was a protective factor for many PSTs (Bruehlman-Senecal et al., 2020). However, not all PSTs described social connectedness and friendships, positioning loneliness as a concern that warrants increased attention within teacher education programs.

6.1 Implications

As we support future teachers, we will witness their joy and stress as they complete clinical experiences and coursework (Kuebel, 2019). By centering self-care in our work with PSTs, and modeling self-care as part of the professional identity of teachers, we will help them more readily access the joy and meaning that should come with teaching (Lemon, 2021; McKay, 2019). This will not be accomplished with a weekly self-care curriculum; it requires systematic change. By explicitly naming wellness as a goal, we can help set self-care as the default for PSTs rather than a sporadic activity, which will improve their instruction, classroom management, and relationships (Hoferichter & Jentsch, 2024; Jennings et al., 2011). Although many preservice and inservice teachers view self-care as a luxury (Ressler et al., 2022), given the intensity and complexity of teaching in the current climate of education, attuning to and caring for one's wellbeing should be a professional and personal right, beginning in the preservice years (McKay, 2019; Richards et al., 2016).

Additionally, the self-care curriculum appeared insufficient in addressing the vicarious trauma many preservice teachers encountered in their clinical placements. This finding suggests that the curriculum may have been too broad or generic, lacking the specificity needed to help PSTs recognize the emotional impact of bearing witness to trauma and how to buffer those effects. Future iterations of the curriculum may benefit from explicitly addressing secondary trauma and integrating trauma-informed strategies tailored to the unique challenges of the classroom context, and how various school contexts may elicit different emotional reactions and needs.

This study brings to light a new area of education, which is deeply connected to teacher resilience, called pedagogical wellness. Pedagogical wellness refers to a teacher's ability to maintain a healthy, balanced approach to instructional strategies, classroom management, and student engagement, all while nurturing their own professional growth and emotional well-being (Duong et al., 2023). This type of wellness fosters learning communities where both educators and students can thrive, as it reflects key principles of a trauma-informed approach (SAMHSA, n.d.). Bringing attention to student wellness, teachers will consider how they welcome students to their classroom, the timing and types of assessments, varying forms of participation, community building activities, and encouragement of self-care activities. Bringing attention to their personal wellness as an educator, teachers will consider practical grading deadlines, manageable learning activities, boundaries on email communication, utilization of school resources, building a teaching community, and engaging in self-care with students (Duong, 2025). Just as preservice teachers learn other pedagogical skills, pedagogical wellness can be incorporated into coursework and the design of teacher education programs through curricular changes or the

establishment of a pedagogical wellness coordinator position.

While most campuses primarily focus on offering counseling services to address the stress and anxiety students may experience (Lipson et al., 2022; Pierce et al., 2021), pedagogical wellness is a preventative approach to reduce course-related distress and help student thrive rather than merely survive during demanding semesters (Duong et al., 2013). At the institution where this study took place, a new center was created to support students in the college of education, with wellness as a primary focus [link removed for peer review]. This illustrates an institutional approach to assuming some responsibility for the wellbeing of preservice students rather than placing the burden on students to independently manage their self-care and professional wellness (Mu, 2024).

6.2 Limitations

Several limitations should be considered when interpreting the findings of this study. First, all participants were enrolled in sections of a single instructor's course at one teacher education institution. This limits the generalizability of findings beyond this specific institutional and instructional context. Second, while the use of reflective assignments (video posts, written logs, and surveys) yielded rich qualitative data, it also relied heavily on self-reporting, which may be subject to social desirability bias or selective disclosure. Some students may have presented themselves in a more favorable light or emphasized particular experiences due to perceived expectations. Third, although the study drew from a diverse sample in terms of geography and transfer status, the demographic makeup was predominantly white and female, limiting insights into how PSTs from other backgrounds may experience and navigate self-care and professional resilience. Despite these limitations, the findings offer timely insights into the self-care experiences of preservice teachers within a well-established theoretical framework of teacher resilience, which can guide future pedagogical innovations and research.

7. Conclusion

Conversations related to teacher stress, burnout and attrition often focus on the first few years of teaching and ignore the longer trajectory that begins during the preservice years (Núñez-Regueiro et al., 2024). In fact, we should consider how patterns of stress, distress and (lack of) self-care can be carried over into the first years of teaching, with a call to shift our attention to the preservice years. Just as teacher education programs prepare students in pedagogical skills, we should prepare them for professional wellness and resilience. Building resilience in PSTs is crucial—not only to support their successful completion of teacher licensure but also to foster a sustainable teaching workforce that can effectively navigate current and future challenges (Mu, 2024).

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Table 1

Teacher Resilience Curriculum: Self-care Topics and Prompts

Week	Topic	Prompt
Week 1:	Wellness check - How are you?	How are you doing? Record a quick video about how you are adapting, surviving, or even thriving as you return to classes. What are your current stressors? How are you caring for yourself?
Week 2: Balance	School/work-life balance	As you begin to immerse yourself in coursework and semester-life, consider how you are establishing a work/school-life balance. How are you doing so far? What are some tips for how you create boundaries to protect your personal life?
Week 3: Physical Self-care	Hydration & Nutrition	This week focuses on physical development - specifically, hydration and nutrition. General guidelines suggest your body needs anywhere from 11-15 cups of fluid, which can come from drinking water or food you eat. Water provides the body with energy, helps with digestion, supports brain functioning, regulates body temperature, and promotes skin health. Dehydration is often the source of headaches - so, drink water! For nutrition, it is recommended that adults eat at least 1½ to 2 cups per day of fruit and 2 to 3 cups per day of vegetables. How are you doing with hydration and nutrition? In what ways are you successful and what are your barriers?
Week 4: Physical Self-care	Exercise & Movement	This week we will focus on exercise and movement. Although it does not always feel that way, your body wants to be active. Engaging your body in physical activity can even help you reduce the unhelpful mental and emotional distractions you might experience. It will also help you sleep better. In your post, discuss how you are successful when it comes to being physically active and identify some barriers.
Week 5: Physical Self-care	Sleep	This week we will continue with physical self-care and focus on sleep. Getting enough sleep can be really challenging during clinical semesters as you are required to get up really early (which is not typically when college students get up). However, sleep is essential to quality teaching. Sleep helps our executive function skills - impulse control, decision making, planning, and memory all rely upon sleep. Do you get the 7-9 hours of recommended sleep each night? What are your tips for increasing or sustaining your sleep pattern? What are your barriers? Please share with us!
Week 6: Emotional Self-care	Speaking Kindly to Yourself	his week we will focus on emotional self-care. Emotional self-care involves acknowledging your emotional state (without judgement) and attuning to your mental health. For this post, listen to the ways you talk to yourself. When you fail - and we all fail sometimes - listen to what to say to yourself about the failure.

Week	Topic	Prompt
		Replace negative "self-talk" with messages of hope. Show as much compassion to yourself as you would to a friend. Honestly, if I spoke to friends the way I speak to myself, I don't think I would have any! When you become critical of yourself, take notice. Take a breath and say something kind to yourself. Build up those neuropathways where speaking kindly to yourself becomes automatic.
Week 7: Emotional Self-care	Happiness Challenge	This week we will continue with emotional self-care. As we are always working toward more optimal levels of mental wellbeing, we are going to engage in a happiness challenge. Find a moment of happiness or joy to celebrate. This might naturally occur, or you might need to engineer a moment by spending some time doing something you enjoy. Tell us about it!
Week 8: Emotional Self-care	Social Media Cleanse	This week we will shift to social self-care. Social self-care involves maintaining positive relationships, finding a sense of belonging, and experiencing social peace. One of the main barriers to healthy relationships is social media. It interferes with daily conversations, distracts us from meaningful connections, and is associated with higher levels of loneliness. Social media is a low-quality social interaction. It is not the same as calling someone, going on a walk with a friend, or sharing a short conversation with someone on the quad. Social Media Cleanse! I want you to reflect on your use of social media and how it might contribute to your moods (emotional wellbeing) and relationships. Challenge yourself to 'give up' social media for a while. I will be taking the week off - maybe you could take a few days off or a few hours off. Reflect on how that impacts you.
Week 9: Social Self-care	Energy Givers & Zappers	We will continue with social self-care this week. I would like you to make a list with 2 columns - 1 column for people who 'zap' your energy and 1 column for people who give you energy. Maybe some people fit with just one column, but you might find some people give and zap. After you complete the list, reflect on it. What did you learn about yourself and your relationships? For me, my daughter gives me more energy than anyone. However, she also zaps much of my energy. It is usually related to power struggles and begging me to do things for her that she can do by herself. These are things that I want to focus on and improve as a mother. I also have several friends who give me energy and I need to make more time for them and those relationships. And, finally, my mom is a zapper. I've been working on boundaries with her, which has helped a lot. I probably zap her energy, too.
Week 10: Social Self-care	Act of Kindness	This week we will continue with social self-care and focus on caring for the people we care about. The goal this week is to engage in one act of kindness for someone else. There are many psychological benefits that come from doing something for others, and it helps us to maintain relationships. This might seem like a lot to ask when you already feel so busy, but it can be as easy as sending a kind email/text, giving someone a ride somewhere, doing a roommate's dishes, etc. Many of your already show acts of kindness every day, so it might be simply acknowledging those moments.

Week	Topic	Prompt
Week 11: Intellectual Self-care	Intellectual Recommendations	This week we will focus intellectual self-care. Intellectual self-care involves an ongoing pursuit of learning and education by engaging in new ideas or experiences. It might mean expanding your knowledge base, asking and answering questions, or learning a new skill. This can be accomplished by reading, talking with others, listening to media, visiting places, or researching a topic on your own. I would like everyone to recommend a book, podcast, documentary or community space. Since intellectual self-care is about nurturing our minds and engaging in lifelong learning – your recommendations will help us move beyond what we already know and engage with new ideas or places.
Week 12: Spiritual Self-care	What Gives Life Meaning	We've talked about attuning to our bodies, to our emotions, and to the people around us. This week we will talk about attuning ourselves to the things that give life meaning, to things bigger than we are...spiritual wellness. Not everyone defines "meaning" in the same ways. Even people with similar faith traditions and religious practices may define meaning differently. Thomas Merton, a scholar of comparative religion, suggested that "if you want to identify me, ask me not where I live, or what I like to eat, or how I comb my hair. Ask me what I am living for..." This week share about things that bring your life meaning or moments that you live for. It might be as simple as having the thought, "Yeah...it doesn't get better than this."
Week 13: Spiritual Self-care	Draw, dance, sing, create	As the semester hits one of the busiest times, try to find at least 5 minutes to engage in spiritual self-care. Here are some ideas: Journal Walk in nature or notice the colors on the Quad Pray Meditate or simply breathe Do a few yoga moves Listen to peaceful music Make a list of 10 things you are grateful for (in your head or on paper) Draw, Dance, Sing! If you are comfortable, tell us about your activity or something you would like to start doing more regularly over the summer.
Week 14:	Self-care Goal	For your final post, identify a self-care goal you have for the summer. It can be related to physical, emotional, social, intellectual or spiritual wellness. Try to pick something that you are 90% certain you can maintain.