

# **IMPACT OF STRESS AND BURNOUT INTERVENTIONS ON EDUCATORS IN HIGH-RISK SECONDARY SCHOOLS**

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**DECLARATION**

This research project was funded by the National Research Foundation (NRF)'s Prestigious Equity Award, but does not reflect the opinion of the NRF. By submitting this dissertation electronically, I declare that the entirety of the work contained therein is my own, original work, that I am the owner of the copyright thereof and that I have not previously in its entirety or in part submitted it for obtaining any qualification.



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October 18, 2013  
Date

## ABSTRACT

This study focused on the plight of teachers in the challenging traumatic context of high-risk schools on the Cape Flats, Western Cape, South Africa. Study aims were to measure the stress and burnout of educators and analyse the effect of three different interventions using psycho-educational workshops. Forty-three educators in three secondary schools took part for 15 hours in total over 10 weeks, as well as a control group of 20 teachers. Interventions were grounded in trauma release exercises (TRE), transpersonal psychology (TP) and transactional analysis (TA) practice, and can be conceptualised as primarily physical, emotional and cognitive approaches to stress and burnout prevention.

In a mixed-methods study based on the transactional stress model, quantitative data comprised statistical analysis of stress, personal, work and learner-induced burnout and well-being, at the pre- and post-intervention stages. An analysis of the text coding of the educators' stress, burnout, coping and well-being accounts followed. The study then focused on qualitative thematic analysis of the focus group interviews.

Perceived stress was significantly different between the three intervention groups and control group and learner burnout was significantly reduced in the TRE ( $p=0.02$ ) and TA ( $p=0.02$ ) groups. There were trends for stress and burnout reduction for the TP group. Coding analysis focused on the intra- and inter-individual TRE, TP and TA tools that had an impact on educators in their efforts to cope with stress and burnout. Focus group interviews gave thematic insights into physical, emotional and cognitive responses to stress and burnout interventions on the individual, interpersonal and organisational levels and revealed new perspectives on classroom competency, with educators taking more responsibility for discipline in the classroom, their greatest stressor.

This study indicated that TRE, TP and TA interventions offer educators in high-risk schools physiological, affective and cognitive approaches to dealing with threat and trauma, assisting with stress and burnout reduction, facilitating renewed insights into classroom competency.

## OPSOMMING

Hierdie studie het gefokus op die toestand van onderwysers in die uitdagende, traumatiese konteks van hoë-risiko skole op die Kaapse Vlakte van die Wes-Kaap, Suid-Afrika. Die doelstellings van die ondersoek was om stres en uitbranding by onderwysers te meet en om die invloed van drie verskillende intervensies, in die vorm van psigo-opvoedkundige werksinkels, te analiseer. Drie-en-veertig opvoeders in drie sekondêre skole het oor 10 weke vir 15 uur in totaal deelgeneem, sowel as 'n kontrolegroep van 20 onderwysers. Die ingrypings is gegrond in die praktyke van trauma-ontladingsoefeninge (*trauma release exercises [TRE]*), transpersoonlike sielkunde (*transpersonal psychology [TP]*) en transaksionele analise (*transactional analysis [TA]*), en kan hoofsaaklik as fisiese, emosionele en kognitiewe benaderings tot die voorkoming van stres en uitbranding gekonseptualiseer word.

In 'n gemengde metode studie gebaseer op die transaksionele stresmodel, het die kwantitatiewe data bestaan uit statistiese analises van stres, persoonlike, werks- en leerdergeïnduseerde uitbranding en welstand, vóór en ná die ingrypings. Dit is gevolg deur 'n analise van die tekskodering van die opvoeders se verslae oor hulle stres, uitbranding, behartiging en welstand. Die studie het hierna gefokus op 'n kwalitatiewe tematiese analise van die fokusgroeponderhoude.

Waargenome stres het beduidend tussen die drie intervensiegroepe en die kontrolegroep verskil en leerderuitbranding het beduidend in die TRE ( $p=.02$ ) en TA ( $p=.02$ ) groepe verminder. Daar was tekens van vermindering van stres en uitbranding in die TP groep. Koderingsanalise het gefokus op die intra- en inter-individuele TRE, TP en TA gereedskap wat 'n impak op opvoeders gehad het in hulle pogings om stres en uitbranding te hanteer. Fokusgroeponderhoude het tematiese insigte oor die fisiese, emosionele en kognitiewe reaksies op stres- en uitbrandingsingrypings op die individuele, interpersoonlike en organisatoriese vlak verskaf, met onderwysers wat groter verantwoordelikheid geneem het vir dissipline in die klaskamer, wat hulle vernaamste stressor is.

Hierdie studie dui daarop dat TRE-, TP- en TA-ingrypings aan opvoeders in hoë-risiko skole fisiologiese, affektiewe en kognitiewe benaderings bied om bedreiging en trauma te hanteer. Dit dra by tot 'n vermindering van stres en uitbranding en fasiliteer nuwe insigte in klaskamerbevoegdheid.

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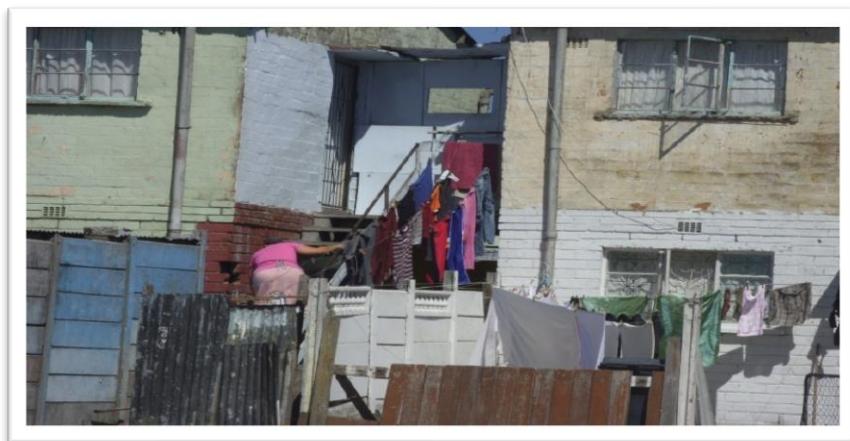
## DEDICATION

### Three brains: One mind

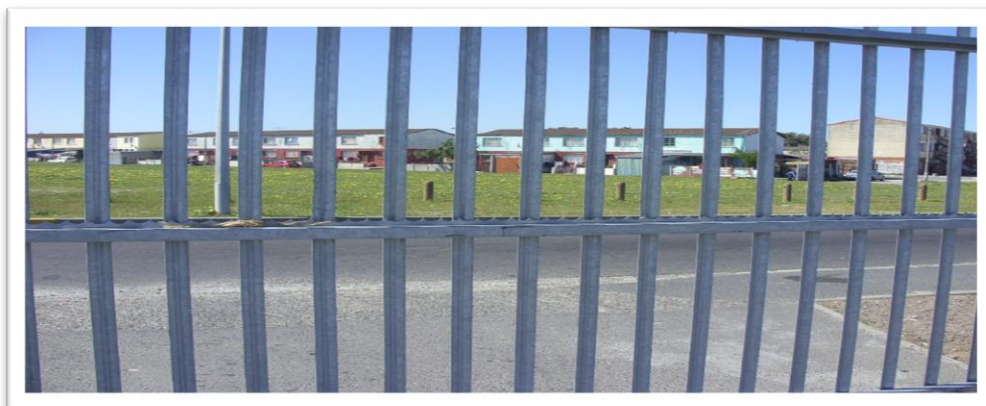
The striving and territorial protectiveness of the reptile  
The nurturing and family orientation of the early mammal,  
The symbolic and linguistic capacities of the neocortex  
May multiply our damnation or grace our salvation.

(Houston cited in Levine, 2010)

The work is dedicated to all who work tirelessly to make the community, school, and particularly the classroom, a safer, more competent and loving place, conducive to learning, achievement, care and integrative healing.



Crowded living conditions on the Cape Flats



Prison-like security at a Cape Flats school

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## CHAPTER ONE

### Introduction

*“It’s a terrible feeling, like you are tumbling in the waves, you’ve barely got your head out, gasping for breath, and it catches you again, and again,”* (Female educator, Cape Flats, 2011).

#### 1.1 Context

This is a critical time in the choices being made for a sustainable world; action needs to be taken to prevent damage to the Earth and its people; new alternatives need to be found for structural causes of destruction; and there is a fundamental shift in worldview and values (Macey, 1998). As a result of the disempowering effects of colonialism and globalism on many communities around the world, especially in disadvantaged areas, there is a need for a change in psychological attitudes, practice and commitment (Watkins & Shulman, 2010).

This study moved beyond conventional psychological one-on-one therapy and identified with liberation psychology, where theoretical and practical tools need to be redesigned from the standpoint of the lives of people; from their sufferings, their aspirations, and their struggles (Martin-Baro, 1994). This slain Jesuit psychologist from El Salvador made a plea for psychology to “break out of its own enslavement” (p. 25) and first be liberated. An evolutionary potential is starting to assert itself (Houston, 1997, p. 212), “spurred by a critical mass, a certain merging of complexity, crisis and consciousness to awaken”.

An intimate collaboration between science and praxis is needed for a lively, vibrant partnership capable of generating innovative therapies (Levine, 2010). This author believes there is a need for open multidisciplinary efforts to discern what is effective or not, and achieve our primary aim of helping suffering people heal. In choosing to make meaningful contributions to the challenges of South African society, Maree (2011) suggests being willing to adopt unwritten professional rules, working harder and with more flexibility and creativity than that required by institutional guidelines and requirements.

While there has been a shift since the turn of the 21<sup>st</sup> century towards common or non-specific factors, such as client characteristics and therapist qualities, that appear to contribute to the effectiveness of therapy (Wosket, 2006), this research moves beyond individualist

psychological attributes and focuses on the theories and application of group interventions for stress and burnout. However, the relationship between facilitator and group members in all interventions is acknowledged as a contributing factor in the healing process. Indeed, the researcher acknowledges the complex interplay of factors at work in all relationships, whether client and therapist or, in the case of this study, between facilitator and group members, with techniques and strategies forming only a small part of the whole change-inducing experience (Wosket, 2006).

Research has shown that studies need to be carried out on the extent to which intervention programmes deal effectively with stress (Dunham & Varma, 1998), which is indeed the aim of this thesis. These authors consider different approaches to stress management training and conclude that educational information on its own does not alter physiological and self-report measures of stress. More successful results have been gained from cognitive behaviour approaches, arousal-reduction methods such as relaxation; and personal coping skills training, such as assertiveness and negotiation. Combination of techniques is found to be more effective than a single approach.

This study considers three different approaches to stress and burnout interventions. Trauma release exercises (TRE) facilitate somatic release of tension and stress with neurogenic tremors; emotional healing is fostered in transpersonal psychology (TP), and transactional analysis (TA) utilises social psychology for greater understanding between learners and educators inside the classroom. There is the hope that these different approaches can be incorporated and, when appropriate, possibly combined into integrative and eclectic ways of dealing with complex psychological challenges of dealing with stress and burnout in traumatic environments. The study also hopes to cast a light on understanding the resiliency and coping of educators who thrive in these challenging contexts.

Psychological insights and practices facilitated in psycho-educational group interventions for stress and burnout could contribute to healing in sustainable and creative modes of reflective living in high-risk communities, including schools. The trauma prevalent in high-risk schools has a profound effect on those endeavouring to carry out their professional obligations as educators. Dissociated imprints of traumatic experience, such as physical sensations, panic, and helplessness, can be overwhelming, but ignoring or repressing unpleasant, painful sensations and feelings generally makes things worse (Van der Kolk, 2007). In considering the plight of teachers in the challenging gangland context of the Cape Flats, Western Cape, South Africa, this study attempts to provide interventions for teachers to

move from avoidance and helplessness to renewed energy and focus, offering a self-supporting, self-managed context to better cope with situations that once felt overwhelming. It also hopes to build on coping mechanisms already in place to strengthen even more the resolve of those dedicated to the education of future South Africans.

Declining educational standards in South Africa are of national concern, with revision of matric school-leaving requirements by government (Capazorio & Thakali, 2012). While progress has been made in South Africa since democracy 19 years ago for the poor, with access to roads, electricity, potable water and services that were denied to black people under apartheid, they have been denied the most important tool for empowerment – education (Hartley, 2012). He describes how those who have made it through the schools, struggle to find places in the universities; those who have made it through university can find no place in the job market.

A broader move towards devaluing education in South Africa is leading to social and educational illiteracy, where emotions triumph over logic, where reason is displaced by wrath and where books take second place to rocks (Jansen, 2012a). As there are no short cuts to changing society, he suggests that a social revolution that once again places education at the centre for change needs to take place, where ordinary people confront the rot in the school system before it is too late. A recent proposal by President Jacob Zuma in the 2013 State of the Nation address to make education an essential service came with the assurance that teachers would not be denied their constitutional right to strike. A presidential remuneration commission has been set up to investigate salaries and working conditions of teachers (Munusamy, 2013).

The Cape Flats is an area originally demarcated for those designated as Cape Coloureds<sup>1</sup> in forced removals by the apartheid Government of South Africa (Johnson, 2010). Under notorious Pass Laws and the Group Areas Act, people classified as non-White (Black or Coloured) were relocated to this flat, sandy stretch of land to the south east of the central business district of Cape Town. It has been described as “the dumping ground of the ’50s” by Bergman (2011), who points out that these communities are no longer restricted since the

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<sup>1</sup> Although the continued use of racial categories derived from apartheid is considered to be problematic, its use in the current study is deemed important because of cultural sources of conflict on the Cape Flats.

end of apartheid by racial discrimination, but history, language, economics and ethnic politics still contribute to the homogeneity of local areas. All communities on the Cape Flats, from Khayelitsha to Manenberg, Hanover Park and Athlone, remain poverty stricken with serious social problems, such as high unemployment, gang activity and illiteracy. Many non-Government (NGOs) and community empowerment organisations work towards combating poverty, crime and health problems and the role of civil society is strong (Bergman, 2011).

Despite these efforts, the Western Cape has been reported as the worst province in South Africa as far as crime is concerned, with an increase in murders and significant decreases in only two of 20 crime categories since 1994 (Philp & Laganparsad, 2011). In this *Sunday Times* article, Western Cape Premier, Helen Zille called the rise in alcohol and drug-related violence “a pandemic” (p. 6), saying that 80% of violent crime in the province was associated with alcohol abuse. Mark Wiley, DA chairman of the Western Cape’s community safety committee, is reported as saying that policing was a national mandate and accused Nathi Mthetwa, Minister of Police, SA Police Services, of neglecting police resources in the Western Cape, calling high crime in the region “a disaster and national disgrace” (p.6). While having only 10% of South Africa’s population, the Western Cape has been ascribed as having 60% of gang activity in the country (Plato, 2012). For example, between January 2009 and March 2012, 87 cases of murder and attempted murder were reported in one of the highest crime areas on the Cape Flats, Hanover Park. However, not a single conviction has been secured there for gang-related murder or attempted murder in the past three years (Petersen, 2012).

The profession of teaching is as challenging as the context of this study’s schools. According to the Centre for Development and Enterprise in South Africa, poor teacher quality and their unions were in part to blame for declining academic results in the schools (Jones, 2011). The report suggests that the South African school system needs teacher performance contracts, to which the South African Democratic Teachers Union (SADTU) is vehemently opposed, stating that teachers are hard-working and those not carrying out their duty should be dealt with by Government.

The Cape Flats is described as having some of the most dedicated teachers, but “teachers can’t teach learners who can’t learn... A traumatised child, whose brain is operating in survival mode, is unable to learn,” (Benjamin, 2011a. p. 11). She describes the legacy of apartheid, learned helplessness, mistrust of police, fear of gangsters and drug lords and abject

poverty as major challenges in this area. “Yes, this is a bleak, bleak picture. The issues are layered and extremely complex,” (Benjamin, 2011a. p. 11). It is within this context that schools in the Cape Flats area are described as “high-risk” in this study.

Locally and internationally teachers have been identified with other professionals, such as medical doctors, nurses and policemen, as being susceptible to suffering from stress and burnout (Brand, 2007; Castle & Buckler, 2009; Gold & Roth, 2003; Kokkinos, 2007; Rudow, 1999). In South Africa, stress and burnout of educators are indeed major concerns, as indicated by a national teacher wellness survey for SADTU. A Teacher Well-being in SA Public Schools Survey (SADTU, 2010) pointed out that despite the fact that South Africa needs 33 000 teachers by 2015, large numbers of educators are feeling stressed and leaving the profession. Main findings of this survey are that the key people supporting learner care, support and education are teachers and that teacher and school support systems need strengthening. The survey also points out, however, that WCED interventions are considered to be stressful for educators, so there is a danger that departmental workshops increase stress levels.

Johnson (2010) reports in a burnout study that large numbers of teachers are leaving the profession due to contract termination, resignation and mortality (Human Sciences Research Council [HSRC], 2005). Fifty-five per cent of educators have considered resigning due to inadequate remuneration, increased workload, lack of career development, lack of professional recognition, dissatisfaction with work policies and job insecurity (HSRC, 2005). The reduction of stress and burnout to improve coping and promote resilience and well-being amongst this sector is considered vital to enhance quality education (Gold & Roth, 2003). The implementation of effective stress and burnout interventions for educators could be an important step in the promotion of ability to cope, possibly leading to increased well-being, giving insights to improved handling of emotional and social interaction with learners in the classrooms.

It has been pointed out, however, that stress management training should not exonerate organisations of their responsibility to improve working conditions leading to stress and burnout (Dunham & Varma, 1998). The Department of Education does indeed need to take cognisance of the challenges facing teachers in the classrooms on the Cape Flats on a daily basis and devise realistic, practical solutions for factors impeding educators from delivering quality teaching.

Coping is, however, more than adjustment. It is also about thriving and an expression of the essence of individual growth and development (Dewe, O'Driscoll, & Cooper, 2010). Stress and coping research is described by these authors as “not without its controversies, disappointments and questioning of progress, falling short of expectations,” (p.2). To understand and deal with stress and burnout, it is necessary to develop effective approaches to managing life's challenges. The stress and burnout interventions utilised in this study represent an endeavour to enhance well-being by providing diverse yet effective coping strategies in the Cape Flats' educator population, who work under extremely stressful conditions.

In low-income communities, these stressful conditions are exacerbated by interrelated factors of race, socioeconomic status and health. In addition, residence in poor neighbourhoods, racial bias in medical care, the stress of experiences of discrimination and the acceptance of the societal stigma of inferiority result in deleterious consequences for well-being (Williams, 1999). Factors such as violence, domestic, financial, emotional and sexual abuse, gangsterism, unemployment, illiteracy, teenage pregnancy, substance abuse and child neglect make areas such as the Cape Flats high-risk for community members to suffer from challenging symptoms. “The sequelae of such exposure are equally complex and include states, features, conditions and phenomenology, including severe problems with emotion dysregulation, dissociation, somatic distress and identity and relational disturbance and spiritual alienation,” (Courtois & Ford, 2009, p 1).

Trauma on the Cape Flats is cumulative, comprising the general context of people's lives (Appelt, 2006). It has also been described as continuous (Benjamin & Crawford-Browne, 2010), resulting from living in a violent neighbourhood from an early age, with multiple experiences of trauma. According to Benjamin and Crawford-Browne, recovery takes place under threat, multifaceted with elements of resilience.

Consequences of trauma in high-risk educational settings are wide-ranging, such as inadequate coping skills and teacher stress and burnout, (Johnson, 2010), learners living in a state of emergency, ruled by fear and frustration (Benjamin, 2011a); poor academic performance of learners and school drop-out (Inglis, 2009). However, if there can be one role model to act as a steady anchor in an otherwise traumatic and stressful life of the child, positive outcomes can result (Goleman & Lantieri, 2008). The educator is well placed to be such a role model. While drop-out rates are virtually non-existent in low-risk communities, as many as 50% of students in the age group 15 – 17 leave school in high-risk areas, such as the

Cape Flats (Reginald Asha, personal correspondence, June 24, 2010); a statistic which follows national trends (Inglis, 2009).

The positive mediation of educator stress and burnout could improve competence in the classrooms on the Cape Flats and be a key factor in reversing these high drop-out rates in this sector. The teacher-child relationship has long-lasting effects on the child in school (Ray, 2007). If stress in the teacher-child relationship can be reduced, the teacher should be released from destructive interactions with students, so facilitating improved coping, resulting in better learning.

Teacher stress describes an imbalance between demands at school and the resources teachers have for coping with them (Esteve, cited by Wood & McCarthy, 2002). Symptoms, which include poor performance, frustration, anxiety, and disrupted interpersonal relationships at work and home, can be experienced over a long period of time. Burnout may result, with a loss of idealism and enthusiasm for work as a result of unmet needs. Stress and burnout are considered to be disabilities, with teachers performing far below their potential, despite being committed and well prepared (Gold & Roth, 2003). Unless action is taken, feelings of isolation and depersonalisation increase over time. Stressors in the workplace and in personal lives can lead to adverse lifestyle behaviours, having a negative impact on mental and physical health over prolonged periods of time. The anxiety, stress and burnout continuum can lead to psychopathologies such as post-traumatic stress disorder, with symptoms of, for example, social withdrawal, chronic depression and anxiety, pessimism and cynicism.

The present study focuses on high school teachers in secondary schools, Cape Flats, Western Cape. Identified as a population at risk for stress and burnout in high-risk schools, the teacher participants were exposed to one of three different interventions to enhance coping skills and improve classroom competence. One intervention was based on facilitating neurogenic tremors with trauma releasing exercises; another on transpersonal practices using mind, body and spiritual healing from Capacitar workshops. A third intervention was based on the social psychology of transactional analysis.

## **1.2 Background**

The interventions in this study are drawn from the experience of the researcher both in her capacity of support staff wellness workshop facilitator for the Western Cape Education



Department (WCED) in 2009 and in working with community school counsellors, teachers and learners on the Cape Flats as a group facilitator and trauma counsellor for several years from 2009. Different models of group therapy listed by the Association for Specialists in Group Work are task groups, psycho-educational groups, counselling groups and psychotherapy groups (Corey, Corey, & Corey, 2010).

The models of TRE, TP and TA are based on psycho-education, which is a major conceptual model in education, especially relevant for community mental health treatment groups (Holtzkamp, 2010). Factors such as discerning the context, building a base of support, identifying and sorting programme ideas and choosing appropriate formats for learning activities are expounded in the principles of Caffarella (2002). Major assumptions include the non-sequential nature of programme planning and the discernment of the importance of context and negotiation. Group members are relatively well-functioning individuals who may have an area of information deficit. Focus is on developing members' behavioural, affective and cognitive skills through a structured set of procedures within and across group meetings (Corey et al., 2010).

Interpersonal interaction is crucial in group therapy, providing participants space to interact freely with others, helping to understand and identify what goes wrong in their interactions, and enabling them to change maladaptive patterns (Yalom, 1995). Describing groups based solely on psycho-education or cognitive-behaviour principles as less effective, Yalom believes each group can be made more potent by incorporating a focus on interpersonal process, but he warns about distinguishing between the appearance of efficiency and true effectiveness. Focus is needed on "the extent and the nature of the interactional focus and its potency in bringing about significant character and interpersonal changes," (Yalom, 1995, p. xiv).

While a feature common to all three interventions is the focus on stress and burnout in the school context of the Cape Flats, intrapersonal as well as interpersonal processes are central to this study. In workshop design, the importance of self-reflection in the context of a psychological sense of community, addressing educator concerns with cognitive, emotional or physiological support, combined with social support, are underlying principles. Whatever the intervention, the group workshop format promotes collaboration and mutual support among delegates. Indeed, groups have power to move people in creative and life-giving directions (Corey et al., 2010).

Early research on professional burnout focused mainly on organisational change (Maslach & Leiter, 1997), with the focus shifting to individuals and their interaction with the environment (Leiter & Maslach, 2005). The work environment in relation to burnout has been described in four dimensions: psychological, structural, social and organisational/bureaucratic (Talmor, Reiter, & Feigin, 2005). The structural and organisational challenges faced by the WCED are great, with the legacy of apartheid still being evident in high-risk communities. Schools on the Cape Flats, for example, lack essential facilities for sports and recreation and even basic infrastructure is missing, such as school fences and water pipes, which are often vandalised or stolen. There are broken windows, gaping holes in ceilings, barren concrete school grounds, with main entrances and even school classrooms having heavy security gates, in an effort to keep children in school and criminals out. Schools are faced with severe resource limitations, with one psychologist and one social worker attending to the psychosocial needs of approximately 100 000 children in a district metro (N. Jalamba, personal communication, May 22, 2009).

This study looks at the psychological and social dimensions of stress, burnout and coping and implications for well-being, set within the context of severe structural and organisational/bureaucratic challenges in the impoverished environment on the Cape Flats, Western Cape. Examples of stressful and traumatic events that took place in the course of undertaking this research in four high schools on the Cape Flats posed many facilitation and contextual challenges.

A learner, for example, was killed in gang crossfire; bomb scares necessitated schools being evacuated; pupils were suspended for wielding a pellet gun at the school entrance; a teacher was glued to his chair by learners; a fire was started on school premises, disrupting classes and distracting teachers; members of gangs in the area threatening learners at the gates; violent outbreaks in the classrooms necessitated the services of an ambulance to take injured children to hospital; learners were dismissed from school for extremely disruptive and inappropriate behaviour; educators and ground staff resorted to threatening children with sticks; a teacher throttled a pupil in a fit of rage and a 13 year old learner was accidentally shot fatally by his father. Classes were disrupted by learners leaving to witness violent clashes amongst other learners, which caused chaos in the school. A teacher went home to fetch a gun after his car had been vandalised by learners. A teacher and headmaster reprimanding a pupil who pulled a gun out and threatened to shoot them. While the teacher ran away, the headmaster stood frozen in terror. Daily challenges for schools included

dealing with poverty and hunger by sourcing inexpensive food from neighbouring retail outlets and providing nutritious meals for learners, unable to work from weakness and lack of concentration.

Teachers attending workshops suffered from illness such as colds and flu, and some had lost their voices from shouting in the classrooms. One teacher stated at the start of workshops that he had to learn how to handle stress better because he had actually died in hospital from deteriorating health and had been resuscitated and warned by the doctors. Another teacher in a primary school adjacent to a high school taking part in the study dropped dead in front of his class from a stroke. Teachers could not always find time to take part in interventions and worked in the back of the room, attempting to follow material presented.

Workshops were cancelled or not attended due to unavoidable events, such as public holidays, religious holidays, preparations for the events in the school, such as food fairs and the matric dance, and conflicts with Departmental workshops and meetings. Muslim teachers felt weak from lack of food or drink during the period of the fast. Teachers present were often called out to attend to pressing administrative issues in the school. Some teachers who had signed up for workshops cancelled when daunted by form filling or overwhelmed by personal stress, such as attending to sick relatives or taking family members to hospital.

Conditions in libraries and empty classrooms where interventions took place were often unhygienic, dusty and dirty, with birds flying through broken windows and defecating on furniture and books. This made floor-work and lying on mats, required by the TRE intervention, for example, difficult. Faulty doors and windows banged or there was consistent noise of children shouting and playing, making quiet time for reflection and healing extremely challenging. Sometimes the noise made by birds in the ceiling was so loud that facilitators could not make themselves heard.

Initially the researcher and facilitators baulked at these challenges, feeling stressed and struggled to cope to varying degrees. However, entering the world of the participants led to a deeper understanding of the challenges encountered and it became a matter of focusing on the goal and attempting to achieve it, despite these set-backs. For example, creative devices, such as rulers, held banging windows in place, workshops were rescheduled and emotional issues, such as the death of a learner, were dealt with as they arose, leading to focussed and enriched group sharing.

Teachers in South Africa are challenged to achieve multiple roles needed to fulfil teaching obligations in deprived environments. With schools suffering from severe staff shortages, teachers have been described as policemen, sexologists, criminologists, psychologists, drug counsellors, doctors, nurses, sports coaches, tour guides, peace-makers, pastors, and fund-raisers for the state, not to mention educators – with skills of assessment and filing, as well as teaching (Bloch, 2009).

Analysing questionnaire responses of HIV/Aids coordinator teachers on the Cape Flats, Johnson (2010) found major work stressors for mostly primary school teachers were lack of departmental and teacher support; no time; workload and administrative tasks and learner misbehaviour. Teaching stressors were listed as administrative load, overcrowded classrooms, work overload and lack of support. Learner stressors were misbehaviour, no parent support, social difficulties and academic weakness. Personal stressors were family challenges, financial worries, transport challenges and lack of quality time.

Many of these problems, especially lack of learner discipline and administrative workload as teacher stressors, and family difficulties and finances as personal stressors, are also evident in this study among educators in the high school sector. A detailed analysis of educator stressors in the four high schools taking part in this study is given in Chapter Five, Results and Findings.

According to the Department of Basic Education (2009), of the nine provinces in South Africa, the Western Cape has 8% of national learners (980 694); 8.3% of educators (34 382) and 6.2% of schools (1 597) (See Table 1). Statistics giving national and Western Cape ratios of learner-educator, learner-school and educator-school, do not adequately reflect the lack of teachers and overcrowded classes in public schools in poorer regions such as the Cape Flats where this study took part. Therefore, the ratios in schools taking part in this study are also included (See Table 2). While learner-to-educator ratios in the study's sample do not differ widely from national statistics, the reality is that secondary schools on the Cape Flats hold 40 - 55 children in some classes such as Grade 10 and 11, with 44 average in the class of Grade 8's and 9's. The lowest number of learners is in Grade 12, with an average of 37 learners.

Table 1

*Number of Learners, Educators and Ordinary Public and Independent Schools by Number of Learners in South Africa in 2009.*

Province	Learners	% of total	Educators	% of total	Schools	% of total
KwaZulu-NI	2 827 335	23.1%	89 377	21.6%	6 091	23.5%
E. Cape	2 076 400	17.0%	69 620	16.9%	5 809	2.4%
Gauteng	1 903 838	15.6%	66 351	16.1%	2 309	9.2%
Limpopo	1 707 280	14.0%	58 563	14.2%	4 105	15.8%
Mpumalanga	1 035 637	8.5%	35 221	8.5%	1 934	7.5%
<b>W. Cape</b>	<b>980 694</b>	<b>8.0%</b>	<b>34 382</b>	<b>8.3%</b>	<b>1 597</b>	<b>6.2%</b>
North West	777 285	8.0%	26 697	6.5%	1 768	6.8%
Free State	651 785	5.3%	23 741	5.7%	1 595	6.2%

*Source:* Department of Basic Education Snap School Survey 2009

Table 2

*Learner-Educator Ratio (LER), Learner-School Ratio (LSR) and Educator-School Ratio (ESR): National, Western Cape and Cape Flats*

Region	Learner-educator ratio	Learner-school ratio	Educator-school ratio
National	29.6	472	15.9
Western Cape	28.5	614	21.5
Cape Flats	33	944	30.5

*Source:* Adapted from Department of Basic Education Snap School Survey 2009 and Cape Flats schools, 2011

This high number of learners in a class results from various factors, such as learner subject choices for matriculation, and headmasters and deputy headmasters being counted among teachers but not always taking responsibility for much classwork. This high ratio of learners to teachers makes classrooms difficult to manage, with teaching being described by one educator as “crowd control”.

International challenges of education are wide-ranging and complex. Topics explored include the role of educational assessment in terms of expanded expectations and challenges (Linn, 1993), reflective learning and concerns with technology and curriculum (Brown, 1992) and different intelligences in education, such as web and artificial intelligence (Devedzic, 2004).

In contrast, major educational challenges in South Africa public schools reflect poor *national socio-economic conditions, such as lack of facilities, overcrowded classes of up to 50 learners and declining literacy levels* (Bloch, 2009), controversial matriculant pass rates (Jansen, 2012b), school drop-out (Inglis, 2009) and high rates of teacher absenteeism (SAPA, 2013). Many private schools opt to write matriculation exams with the International Examination Board, in an effort to maintain academic standards which will allow learners to qualify for entry into international universities, further widening the gap of education and opportunity between the private and public schools.

Despite the fact that President Jacob Zuma held education and skills development at the centre of Government policies in his 2010 State of the Nation address, placing “ a grave responsibility on the education system to improve its reporting and accountability systems,”(South African Government Information, 2010), adequate financial resources are lacking in public schools to make significant improvements possible.

Latest statistical information available from the Department of Basic Education (2009) describes how it has recently been reorganised into the Department of Basic Education and the Department of Higher Education and Training. Traditional primary and secondary phases are divided into GET (Grades R to 9) and FET bands (Grades 10 to 12). There are nine provincial education departments with 25 906 ordinary public schools, of which 6 304 are secondary schools with 3 856 946 learners and 141 841 educators. A total of 83.8% of 4 418 904 learners attend public schools.

The Department of Education (2009) reports that most learners are in Foundation Phase, with only 20.5% reaching the FET band. Of these FET learners, 52.7% are female. A worrying trend is that nationally there is a significant increase in under-enrolment in Grade 12 - only 58.2% of learners for appropriate school age population, although some enrol in colleges and other classes outside the compulsory schooling phase. Nationally more female learners (79%) are in secondary schools than males, with female learners remaining in the system longer.

A steady decline is reported in the proportion of learners as the grade level increases, with an anomaly occurring in Grade 10, where there is an unexpected increase in the proportion of learners. This could possibly be explained by the higher levels of retention in Grade 10 than other grades (Department of Basic Education, 2009). Failing to reach academic standards required for Grade 11, these learners repeat Grade 10 and then drop-out.

The decline in the number of learners from Grade 11 to 12 is also reported as significant, suggesting further drop out or movement out of schooling to other educational institutions. All these factors place additional stressors on teachers as they struggle to meet school pass rate expectations. The National Senior Certificate examination (NSC) of 2008 is reported as the first based on New Curriculum Statement (Department of Basic Education, 2009). To obtain this school leaving qualification, learners must achieve 30 – 40% in six subjects. One subject can be less than 30%. In 2008 the overall pass rate was 62.6%, which declined to 60.6% in 2009, indicating that school results were dropping nationally. This trend was reversed in 2011, with a national pass rate of 70.2%.

However, in some academic circles, this result has been met with scepticism rather than euphoria. Jansen (2012b) cites four deceptions which make these results contrived. The first is that over 500 000 learners who registered in Grade 1 in the year 2000 did not write matric in 2012, disappearing from the system. The second deception listed by Jansen (2012b) is the meaning of the pass rate. “The requirement for passing is so low in South Africa that pupils really have to put in a special effort to fail,” (p. 4). He points out that no serious university will take poor performing students into its first-year classes and if some do, the learner will undoubtedly fail at huge cost. Thirdly, the Government is desperate to demonstrate racial parity in performance, when in reality the top 100 pupils are white, and so the legacy of education inequality has not been dealt with effectively. Fourthly, the pretence that even the modest improvement in pass rates is a result of what the government does is misleading, as many companies, NGOs and community-based groups are driving school-change initiatives.

Western Cape has 8% of national total of learners, with 8.3% of educators and 6.2% of schools. Learner: educator ratio in the Cape is 28:5, which is the second best in the country after the Free State (27:5). Worst in the country is KwaZulu Natal, with a 31:6 ratio. Most provinces average 29 learners to every teacher (Department of Basic Education, 2009).

The statistics in this report also indicate that the Western Cape has the most number of teachers (21.5 educators per school) after Gauteng, which has a ratio of 27,8:1. However,

learners in the Western Cape have access to fewer schools, with one school per 614 learners, compared with 357 learners per school in E Cape. There is a trend for the rural provinces to have more schools with fewer learners; urbanised areas have fewer schools with more learners. Matric results at the end of 2011 indicated that W Cape has the highest standard of education, with a pass rate of 82.9%, followed by Gauteng 81.1% (Govender, 2012).

Schools taking part in this study fall within one of the largest Metros in the Western Cape. In order to ensure confidentiality of the participants, this Metro is not identified. Table 3 shows Western Cape Metros with number of learners (Department of Basic Education, 2009).

Table 3

*Number of Learners in Western Cape Metros, 2009*

Western Cape Metros	Number of Learners
Metropole North	60 239
Metropole South	56 731
Metropole Central	55 829
Metropole East	53 845
Cape Winelands	49 247
Eden and Central Karoo	37 550
West Coast	16 956
Overberg	12 075
<b>Total</b>	<b>342 472</b>

*Source:* Department of Basic Education, 2009

Despite these challenges, the average 2011 matric pass rate of the four schools taking part in this study was 73.5%, with intervention schools achieving 97%, 78% and 53% and the control group 66%. Of the total of 93 educators in all the study's schools, 72 signed up to take part in the research with 63 completing the workshops, representing 87.5% of participants. For ethical reasons, participants were not asked why they did not sign up for or leave the course.



### 1.3 Theoretical approach

The main theoretical challenge of this study was to combine evolutionary understandings of brain development with current neurological research into brain function and make these insights relevant to community interventions. The aim was to facilitate meaningful engagement with stress and burnout interventions in group efforts with teachers to improve traumatic social conditions in schools in the ganglands of South Africa. The interventions designed for this challenging context of high learner to educator ratios, high number of learners per school and inadequate number of educators per school, are based on the three brain model (Cummings & Mega, 2003; MacLean, 1990; Yakovlev & Lecours, 1967).

In brain development, evolutionary processes have produced increasingly refined systems for interacting with the environment. “From reptilian to lower mammalian to human stages of evolution, successive elaborations of neuronal tissue have built upon and often elaborated systems of preceding phylogenetic epochs,” (Cummings & Mega, 2003, p. 7). These authors state that in neuropsychiatric disorders, patient treatment can be improved by adopting a neurobiological basis for interpretation. This approach combines phylogenetic, anatomic, functional and clinical data, reunifying psychiatry and neurology. In this study, the phylogenetic, anatomic and functional aspects of the brain are considered in designing interventions aimed at reducing stress and burnout: TRE engages the reptilian, survival brain; TP, the paleomammalian, emotional brain and TA, the neomammalian, rational brain.

The first intervention was body-based, involving TRE, developed by Dr David Berceli who was invited to South Africa in 2009. He heads an international trauma organisation, operating in over 30 countries around the world. After experiencing traumatic reactions in the bunkers in war zones of the Middle East, Berceli drew on his experience as a therapeutic body worker, realising that the startle response of the body contracting from the shoulders and hips inwards created tension in the flexion muscles. Releasing the tension, he surmised, could have many beneficial effects. His work has included stress reduction studies in which “tremors are generated in the flexor muscles by performing a series of exercises that stretch the leg and pelvic muscles, evoking our natural ability to shake ourselves back to a state of tranquillity,” (Berceli, 2008, p. 52).

Trauma release exercises are not aerobic, as they are not under direct control of the cortex, and they are unlike the transpersonal meditative techniques from the East, which Berceli (2008) describes as slowing heart rate and lowering blood pressure consciously. Tremors have the advantage over other types of physical exercise because they are generated

from within the limbic system of the brain, and are therefore not under conscious control. By bypassing the cortex and accessing the unconscious reptilian brain, changes can manifest in the body which could not otherwise be accomplished. “By interrupting the hypothalamus-pituitary-adrenal axis, tremors produce physical relaxation, reducing our stress without need for our conscious control or even awareness of the releasing process,” (Berceli, 2008).

Application of TRE throughout the world has allowed clients to achieve a sense of release, relaxation and calmness and often emotional states from old traumas are mitigated (Scaer, 2008). In describing the theoretical basis and efficacy of TRE, Scaer (2007) explains that the exercises specifically address the physiological issues of retention in procedural memory of the sensorimotor experiences of the traumatic event, subsequently expressed in recurrent somatic symptoms. “I believe that the stereotyped and specific motor responses of the illopoas muscle group elicited by trauma release exercises serve to extinguish the conditioned association of contracture of this muscle with the traumatic event, healing many symptoms related to it,” (Robert Scaer, personal communication, February 14, 2010). The exercises can be learned and practised as a therapeutic self-help skill, as well as being used as an adjunct to other forms of stress and trauma release. Indeed, it is averred that “shivers and shakes, quivers and quakes” (Levine, 2010, p.16) can transform trauma, regulate stress and allow life to be lived to its fullest. This is the typical way the nervous system returns to normal and how the body self-regulates. “Learning to live through states of high arousal...allows us to maintain equilibrium and sanity. It enables us to live life in its full range and richness – from agony to ecstasy,” (Levine, 2010, p. 17).

The second intervention is transpersonal in emphasis, based on the work of Dr Pat Cane, who is founder and director of Capacitar International, a world-wide movement, established in 1988, involved in trauma healing and transformation. “Capacitar” is a Spanish word meaning, “to empower, to bring to life”. A doctoral dissertation, “Trauma Healing and Transformation: Awakening a New Heart with Mind, Body, Spirit Practices”, resulted from Cane’s research efforts with trauma victims in the aftermath of Hurricane Mitch, Honduras. When invited to South Africa in 2002 by the SA Catholic Bishops Conference to work with HIV/Aids caregivers, Dr Cane presented her multicultural popular educational approach for the healing and transformation of struggling populations of the world. The intervention, designed for all those affected by traumatic events such as natural disasters, violence, poverty and disease, was introduced to professionals working in schools suffering from inadequate psychosocial resources. Berenice Daniels, Chief Education Specialist: Specialised Learner

and Educator Support at the Metro South Specialised Support Unit, WCED, attended and supported the workshops. The Rotary Club of Newlands offered sponsorship for workshop facilitation.

As reported by Johnson (2010), TP offers an alternative approach to handling stress and burnout to the Cartesian paradigm, challenging traditional views of mental health and psychotherapy, drawing on cross-cultural insights suited to indigenous and holistic approaches to healing and managing stress (Institute of Transpersonal Psychology [ITP], 2008). These workshops are founded on the popular education principles of Freire (1983), a Brazilian who started to work in the 1950s with silenced and oppressed people living in poverty. Voiceless and apathetic people are empowered in this approach to take charge of their lives through active participation, critical awareness and social analysis (Cane, 2000). The vision of “healing ourselves, healing our world” empowers individuals to process their own stress and trauma and, in a multiplier effect, be better equipped to help others. Using ancient and modern transpersonal practices, Capacitar integrates mind-body-spirit through the balancing and harmonising of energy in the individual, leading to family, community and societal healing.

The third intervention (TA) is based on the rational brain, drawing on Eric Berne’s clinical observations as a psychotherapist in the 1970s, with psychodynamic principles checked directly in real world observations (Stewart, 1992). Berne is described by this author as being the first psychodynamic theorist to make observability the cornerstone of the entire theory. In considering the transactional model of stress in this study (Lazarus & Folkman, 1984), Berne’s transactional analysis of relationships provides a theoretical basis for the understanding of stressful transactions between educator and learner and subsequent coping strategies.

The International Transactional Analysis Association (ITAA, 2011) defines TA as a social psychology offering a powerful tool to bring about human well-being. The theory has evolved to include applications in education, psychotherapy, counselling and organisational development. Outside the therapeutic field, TA can be used in educational settings, helping teachers and learners to stay in clear communication and avoid setting up unproductive confrontations, (Stewart & Joines, 2009). As it can be used wherever there is a need for understanding of individuals, relationships and communications, it is ideally suited for stress-related transactions.

#### **1.4 Research Question and Rationale**

The research question predicating this study is: How do interventions, based on trauma release exercises, transpersonal psychology and transactional analysis, impact stress and burnout of educators in high-risk secondary schools? In answering this question, the influence of these interventions on stress, burnout, coping and well-being of educators and their effect on classroom competency, were considered. In a mixed-methods design, quantitative and qualitative data were gathered.

Firstly, quantitative statistical analysis of stress, burnout and well-being pre-and post-intervention was carried out, followed by text coding analysis of stress, emotional responses, coping strategies, classroom competency, impact of interventions and suggested improvements to interventions. Weekly questionnaires on workshop assessment and stressful encounters supplied data for the consideration of the impact of stress and burnout interventions on educators. This was followed by thematic content analysis of focus group interviews, to better understand the impact of interventions.

Levels of educator stress and burnout were established, positive and negative factors about the interventions were elicited and possible areas of improvement in training uncovered. The research sought to gain insight into the life-worlds of these teachers, assess whether TRE, TP or TA interventions affected stress and burnout, and how teachers' experiences impacted on their coping and well-being. If professionals, such as teachers, can benefit from practices in alleviating stress and preventing burnout, their physiological, affective and cognitive responses should improve.

Potential health consequences in the long term are broad, including the reduction of absenteeism due to sick leave, less susceptibility to infection and reduced resignations due to burnout. Practically, if TRE, TP and TA provide effective tools for mediating stress and burnout, a new model combining some or all of these techniques could be consolidated and further assessed in South African schools in future. Notwithstanding which intervention they received, educators could gain skills to deal with on-going stress and challenges of life.

In a previous study, transpersonal techniques in Capacitar trauma-focused workshops were examined in South Metro by the researcher, finding that these practices moderated personal and work burnout amongst HIV/Aids coordinator teachers in predominantly primary and special needs schools on the Cape Flats (Johnson, 2010). The study was then extending to teachers in four high schools on the Cape Flats, comparing the effects of TRE, TP and TA

intervention models with a control group of teachers receiving no intervention. The purpose of this study was to evaluate the effect of these different approaches on educators who are at risk of suffering from stress and burnout in the challenging context of high-risk secondary schools, and to examine coping strategies and well-being of educators and classroom competency.

Specific goals to address the research aim and to guide the study were: To measure stress levels of high school teachers; to measure levels of personal, work and client (learner) burnout suffered by the teachers; to evaluate the impact of different interventions on stress and burnout; to measure well-being pre- and post- interventions; to analyse teachers' experiences by adopting a thematic focus group analytic approach, regarding focus group interview data as displays of perspectives and moral form (Silverman, 2011), assessing how these and codes from written texts give perspectives on the impact on classroom competence; to make suggestions about what they regard as relevant to their coping needs and well-being; to identify any specific local issues relevant to their experiences on the Cape Flats which could act as a guide to shaping future approaches and to use feedback from the study in the interest of teachers at risk for stress and burnout, and possibly influence future policy in the WCED for care and support.

### **1.5 Research Summary**

The impact of three stress and burnout interventions on high school educators was analysed with a mixed-methods concurrent strategy to employ the best methods that serve the theoretical perspective of the researcher. By using two phases - quantitative data with pre- and post-intervention statistical analysis of stress, burnout and well-being measures and coding text analysis, and qualitative thematic and constructionist analysis of focus group interviews - the researcher aimed to consider diverse perspectives, to better advocate for participants, and to improve understanding of the change process as a result of being studied.

The image of democracy, care and social justice should be recreated in the research mandate to exercise moral discretion regarding the purpose and representation of social inquiry (Lincoln, 2005). It is not enough to be merely concerned by the plight of exhausted and demoralised teachers, or to introduce interventions which are not based on sound empirical research. Positive action needs to be taken, analysing the effectiveness of different interventions on the coping strategies of teachers and assisting them to reach democratic, caring and social justice aims, particularly within challenging educational contexts such as

public schools on the Cape Flats. Practically, educators should be given opportunities to exercise their right to be given an equal chance to voice their democratic concerns. Workshop interventions can provide tools to improve classroom competency and model compassion and care, which can be passed on to learners. Educators can expect justice in being treated fairly in their interaction with historical, political, organisational and social challenges.

## **1.7 Overview of Chapters**

This dissertation is organised into seven chapters. Chapter One provides the context and background of the present study, examining the research question and rationale. An outline is given of the TRE work of Berceli (2007), Cane's (2000) TP trauma healing and transformation workshops, as well as Berne's (1961) TA theory. The Cape Flats educational context in which training takes place is described. Study aims are delineated in the purpose of the study and chapter content is outlined.

Chapter Two presents a literature review, examining different models of stress and the interactive transactional model (Lazarus & Folkman, 1984) adopted in this study. Burnout is considered on a personal, work and client (learner) level, and the impact of various types of trauma. Well-being and coping strategies are also discussed with the interventions designed and adopted in this study. Classroom skills are considered from different perspectives, such as safety, kindness, compassion, culture, and social and emotional competency.

Chapter Three gives theoretical background to healing in terms of the three intervention approach. The theory and practice of TRE are examined, taking into account the neurological, physical and psychological impact on the body. TP and mind, body, spirit integration are also explored, considering the importance of heart entrainment. TA is discussed in terms of psychodynamic, social psychology and relational dynamics. This chapter also studies the practical application of TRE, TP and TA interventions, detailing content of each workshop, highlighting techniques and exercises adopted which are specific to each intervention.

Chapter Four describes the research methodology undertaken amongst teachers in WCED. Demographic details of the intervention and control groups are given, including major stressors listed by educators and burnout assessment. An outline is given of the mixed-methods research design, with quantitative statistical analysis of stress and burnout measures and text coding. Qualitative focus group thematic and constructionist analyses conclude the study of the impact of stress and burnout interventions. An examination of validity and

reliability of research methods and measures and the consideration of ethics follow, with a reflexive comment concluding the chapter.

The focus of Chapter Five is on quantitative and qualitative findings. Analysis begins with descriptive and inferential statistical analysis of stress and burnout, pre- and post-interventions, with within-group and between-group comparisons. Text coding from workshop questionnaires and themes arising from focus group interviews for each intervention are then examined, with mind maps analysing constructionist patterns. Reflections of perspectives on stress, burnout, well-being and coping in professional and personal lives are presented and implications for the competency of classrooms are considered.

Chapter Six presents a discussion of quantitative and qualitative findings. The three-intervention approach is discussed, with a summary of contextual and demographic issues. Mixed-methods analysis, taking all data into consideration, is then given for each intervention.

Chapter Seven provides a theoretical summary of the research, considering stress, burnout, coping and well-being, as well as classroom competency. Research limitations, recommendations for future research and theory development, intervention application, and final reflections conclude the study.

## CHAPTER TWO

### Literature Review

*“Stress and coping research is like the stress process: It is dynamic, multidimensional, complex and fascinating. It requires more than cross-talk among psychologists: The research requires truly multi-disciplinary approaches ... all relevant to the initial response to a stress appraisal and how it plays itself out at every level: biological, psychological, and social,”* (Folkman, 2011, p. 461).

#### 2.1 Introduction

Stress and burnout are analysed as central constructs in this study in terms of different stress models and burnout symptoms. The inter-relationship of stress and burnout with coping strategies and well-being is also considered. The concept of trauma as an individualised stress response is discussed, as there are multiple impacts of traumatic and stressful factors on educators in high-risk secondary schools on the Cape Flats. Classroom competency as a factor of educators coping with stress and burnout is also considered.

#### 2.2 Stress and Burnout

**2.2.1 Models of stress and burnout.** Stress and burnout have been researched by pioneers such as Selye (1974), Maslach (1982) and Lazarus (1991, 1999, 2000). In the past 30 years there has been a plethora of research, with attention shifting from the harmful effects of stress to coping, followed by stress-related resilience and a focus on well-being (Folkman, 2011). In the first half of the 20<sup>th</sup> century, stress research was given impetus by its significance in military combat in conflicts such as World War II and the Korean War. It was later recognised as an inevitable aspect of life, and how people coped with it made the difference in human functioning (Lazarus & Folkman, 1984). These authors developed a stress-strain-coping theory which stated that without adequate coping skills, elevated stress levels could lead to manifestation of increased burnout symptoms.

In psychopathology, stress is described as acute stress disorder (ASD) or post-traumatic stress disorder (PTSD). ASD is listed in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) as an anxiety disorder which is a symptomatic reaction to traumatic events in a person’s life (American Psychiatric Association, 2000). PTSD is seen as a



common disorder when a person experienced, witnessed or was confronted with an event that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others; the person's response involving intense fear, helplessness or horror. The response to stress and trauma has also been described as a spectrum of conditions rather than a single disorder, with exposure to prolonged, repeated trauma resulting in complex post-traumatic stress disorder (CTSD) (Herman, 1997).

Limiting the definition of trauma to extreme stress is likened by Scaer (2005) to defining an iceberg by its tip. He believes that multiple stressors, like abuse in dysfunctional families, difficult marital relations, discrimination and poverty based on race, gender, religion or nationality, become traumas as a result of their meaning in relation to past traumas suffered. Trauma should be defined by specific physiological changes that occur in the body and brain, related to any negative life experience and to the perception of those changes over time (Scaer, 2005). Indeed, on a stress continuum of well-being to disease, factors present in high-risk schools on the Cape Flats could be described as daily traumas, rather than stressors, in a response generated from societal dysfunction and personal life challenges.

In the response-based model, stress is defined as a non-specific response of the body to any demand for change (Selye, 1974). In the stimulus-based model, stress involves events whose advent requires a significant change in the on-going life pattern of the individual (Cox & Ferguson, 1991). In the interactional model, more emphasis is given to individual differences and subjective responses (Newcombe, 1990). The transactional model, modified in this research, is more process-orientated, emphasising the psychological structures underlying the person-environment relationship (Lazarus & Folkman, 1984).

Our approach to psychological stress emphasises cognitive appraisal, which centres on the evaluation of harm, threat, and challenge. An appraisal does not refer to the environment or to the person alone, but to the integration of both in a given transaction. As such, it is a transactional variable. (Lazarus & Folkman, 1984, p. 294)

How a person interprets on-going transactions with the environment and coping strategies is inferred rather than able to be examined. A crucial corollary of the transactional perspective is, therefore, process. In the Lazarus model the stressful experience is constantly changing, as is the person's relationship. Emotions change rapidly from, for example, anger to guilt, from loving to joyful. In the same way, coping changes as the environment alters.

Lazarus and Folkman (1984) believe that in order to understand stress and coping in the transactional model, variables such as emotions and social support must be treated as changing processes. “Indeed, the essence of stress, coping and adaptation is change, since to be effective a person in jeopardy must change something in order to restore a more harmonious relationship with the environment,” (p. 296). The ipsative approach to stress and coping research, with intra-individual data being compared with normative or inter-individual data, is important in the transactional model. This means that repeated, intra-individual observations are made to determine the patterns a person uses and the degree to which they vary across encounters. This profile can be used to establish how much personal or environmental factors affect competence through their impact on cognitive appraisal and coping (Lazarus & Folkman, 1984).

Appraisal describes the understanding of a situation and its significance for an individual’s well-being. Two main evaluative issues of appraisal described by these authors (p.35) are primary: “What is at stake”; and secondary “What are coping options”? These questions do not imply degrees of importance, but refer rather to the complex interplay which shapes stress reactions and the ensuing emotional reactions. Appraisal can be viewed as negotiating between, and integrating environmental and motivational influences (Leibowitz-Levy, 2008). This process of negotiation indicates the significance of the event for personal well-being, eliciting an emotional response and implying the presence of an active goal (See Figure 1). In this study, physiological, emotional and cognitive responses offer comprehensive coping solutions, taking all aspects of the threat response into account with three kinds of appraisal described by Lazarus and Folkman (1984): irrelevant, benign-positive and stressful. These appraisals are relevant to research with teachers at risk from stress and burnout as it is in challenging context of high-risk schools, in which stressful issues of harm/loss, threat and challenge are encountered on a daily basis.

Burnout has been described as feeling done in (Siamian, 2006), with coping ability decreasing and levels of demand increasing. While not a recognised clinical, psychiatric or psychological disorder, there are similar features between burnout and other diagnosable conditions, such as depression, anxiety disorders or mood disorders. However, burnout is much more common, reported by 25% - 60% of practising physicians in the USA (Scott, 2008). It is less severe than other conditions, more temporary in duration and caused by situational stressors rather than a biologically mandated chemical imbalance. On the stress to

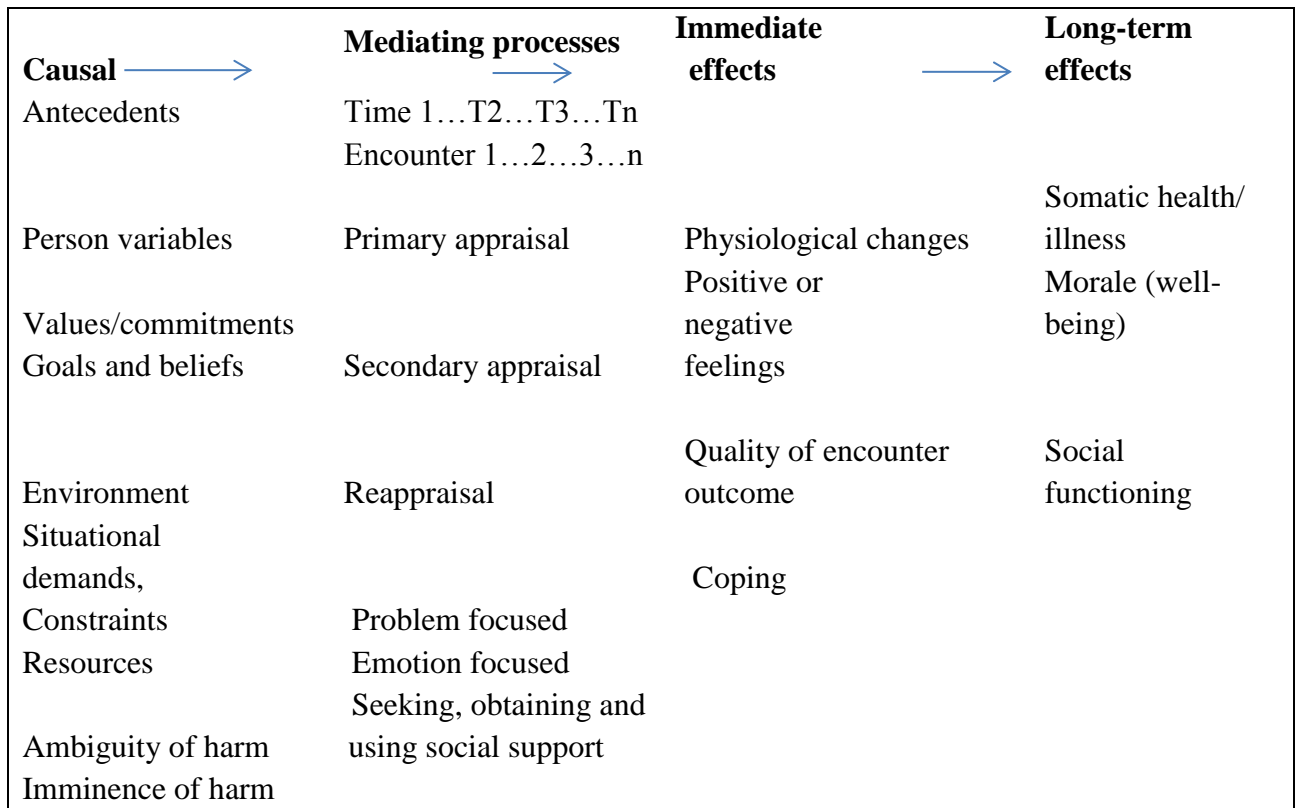


Figure 1: Resolutions of each stressful encounter (Source: Leibowitz-Levy, 2008).

disease continuum, burnout could be seen as preceding certifiable disorders, such as PTSD, CTSD and ASD. The perceived inability to cope by educators could be seen as directly related to levels of well-being and disease on a continuum of stress, burnout and trauma.

While the continuum definition of burnout has been adopted by many researchers with Maslach's (1982) constructs of emotional exhaustion, depersonalisation and personal accomplishment, there has been a call for cut-off scores for diagnostic purposes and more information on burnout (Halbesleben & Buckley, 2004). These authors highlight the usefulness of two theoretical burnout models, the Conservation of Resources (Hobfall, 2001, 2011) which addresses the causes and consequences of burnout and the Job Demands – Responses (JD-R) (Demerouti, Bakker, Nachreiner, & Shaufeli, 2001), which address job demands and resources.

However, while researchers have ascertained that burnout can be reduced, there is a need for the development of appropriate and novel interventions programmes for reduction (Halbesleben & Buckley, 2004). By deconstructing the impact of stress and burnout interventions on educators in high-risk secondary schools, this study aimed to contribute to the understanding of stress, burnout and coping processes involved in the handling of

environmental and teaching demands in the traumatic context of the classrooms in high-risk schools.

**2.2.2 Job-related stress and burnout.** Experienced over a long period of time, stress may result in burnout, which was first identified by Freudenberger (1975). In a clinical approach, he described symptoms such as a compulsion to prove oneself; working harder, neglecting one's own needs; displacement of conflicts, not realising the root cause of the distress; and revision of values, such as dismissal of friends or hobbies. These symptoms can lead to depression, exhaustion, depersonalisation, disillusionment, anger, discontent and personal dissatisfaction. Burnout is defined as a state of fatigue or frustration brought about by devotion to a cause, way of life, or relationship failing to produce expected rewards (Freudenberger & Richelson, 1980). It has also been described as a negative set of symptoms impacting on all areas of functioning (Savicki & Cooley, 1982).

Maslach and Schaufeli (1993) refined the construct's measurement and meaning from a psycho-social and research orientation. Burnout was defined as a change in tolerance for continual stress, "a tolerance that gradually wears away under a never-ending onslaught of emotional tensions" (Maslach, 1982, p.11). Burnout, with a loss of idealism and enthusiasm for work as a result of unmet needs, is considered a disability, which results in performance far below potential, despite being well prepared and committed (Gold & Roth, 2003). Feelings of isolation and depersonalisation increase over time unless action is taken.

Occupational stress and burnout have received increasing attention (Schaufeli & Greenglass, 2001), with the human service professionals being described as particularly vulnerable to burnout (Freudenberger, 1975). It is important to examine characteristics of occupations and the occupant's response to the stressors involved. The most frequently studied occupational groups are teachers (17%), nurses (17%) and social workers (7%), respectively (Schaufeli & Enzmann, 1998). Sources of stress may vary among these professions, but they share a high vulnerability to burnout given the demands made on them by individuals and a shortage of time to fulfil the demands that are part of their profession. While burnout is linked to the extensive literature on occupational health, it goes beyond occupational health, with a need to focus on specific stressors in the workplace to emphasise total life and environmental pressures affecting health (Schaufeli & Greenglass, 2001).

Four stages of work burnout have been identified: physical, mental and emotional exhaustion; shame and doubt; cynicism and callousness and, finally, failure, helplessness and crisis (Gorkin, 2008). Factors in the workplace contributing to these stages include job

structure, such as unclear or impossible work requirements; high stress with no downtime; dire consequences for failure and lack of personal control or recognition from management (Scott, 2008). According to Scott, unhealthy life style choices can lead to burnout, such as lack of social support and not enough leisure time. Psychological features include individual personality traits, such as perfectionist tendencies, pessimism, excitability type A personality, impatience or free-floating hostility, poor fit for the job and lack of belief in abilities.

Freudenberger (1975) identified different personality types susceptible to burnout: the dedicated and committed personality; the overcommitted personality with unsatisfactory personal life and the authoritarian personality who can also be patronising. Protective factors for causes of burnout in the workplace are high possibilities for development, high predictability, high role clarity and low role conflicts (Borritz, 2006). He points out that burnout is preventable and burnout prevention is important for the reduction of sickness absenteeism.

Research into stress and burnout clearly indicates that, in the organisational context, there are environmental antecedents of burnout, such as role ambiguity, work overload, disruptive students, and amount of red-tape, which can trigger the stress and burnout response (Schwarzer & Hallum, 2008). Stress and coping were examined in child and youth care workers in a study of burnout across 13 cultures. Proximal environmental conditions, examination of coping styles and consideration of the cultural context of burnout were themes evolving from the analysis (Savicki, 2002). Environmental conditions were work structure, job enhancement and social support. Strong findings were that lowered social support relates to higher burnout; the intensity and organisation of the workload are also related to higher burnout. Lower levels of burnout were related to increases in the opportunity for workers to take control of their work and learn and apply new ideas.

Appraising and dealing with stressors depends on coping style approach, which is more pervasive and characteristic of the individual than the specific situation. While escaping from unpleasant feelings associated with a stressful situation might seem to be a solution, this has been strongly linked to high levels of burnout. Immediate, short-term relief is provided when steps to avoid stress are taken, but this coping style is “seductive” (Savicki, 2002, p. 179), leading the individual to a negative self-evaluation with regard to self-efficacy or ability to impact his/her working life. Control, or problem-focused, coping attempts to change the sources of stressful situations. This has been strongly linked to low levels of burnout, and to

higher levels of personal accomplishment. Repetition of successful problem-focused coping develops a personal sense of efficacy and optimism (Savicki).

Cultural conformity can also have an impact, as deviation from cultural norms reflects an individual difference that has been linked to burnout (Savicki, 2002). This is particularly relevant in South Africa, with 11 official languages and a wide diverse population living in both third and first world conditions. Unique challenges are posed for those working with and researching burnout in diverse cultural contexts.

The personal cognitions and behaviours of individuals are examined by Cherniss (1995) as keys to burnout. Self-efficacy is important for recovering from or preventing burnout. This quest for meaning strikes an existential chord for Savicki (2002), whose focus on recovery is on the individual, since both physical and psychological damage may have occurred. However, both remediation and prevention can be applied to individuals and organisations. Strategies that enhance energy, involvement and efficacy can improve engagement with work (Maslach & Leiter, 1997). Change of motives, value orientations and attitudes can be a focus. The process of purpose generation is central to overcoming the crisis of burnout, with the restoration of conformity between personal motives and action goals (Savicki, 2002).

**2.2.3 Teacher stress and burnout.** Teaching is an emotionally and physically demanding profession. Factors contributing to teacher stress include isolation, resulting from working alone in the classroom, and scheduling constraints which make meeting time with peers difficult, role conflict and role ambiguity, sense of powerlessness, and both physical and mental exhaustion (Wood & McCarthy, 2002). Individual characteristics, as well as job-related stressors, should be taken into consideration when studying the burnout phenomenon in teachers (Kokkinos, 2007). Neuroticism was a common predictor of all dimensions of burnout. Managing student misbehaviour and time constraints were found to systematically predict dimensions of burnout. Six sources of teacher stress have emerged consistently from research across a range of studies (Dunham & Varma, 1998): poor learner behaviour resulting from low motivation to overt indiscipline; time pressure and overload of work; unsatisfactory school ethos, including poor relationship with headmaster and colleagues; poor working conditions, including lack of resources and physical features of the building; inadequate pay, promotion and career development; coping with change.

Low self-efficacy was found to precede burnout in a study of the relationship between self-efficacy, job stress and burnout among teachers (Schwarzer & Hallum, 2008). It was suggested that further research needs to study intervention mechanisms to strengthen teacher

self-efficacy as a protective resource factor. “General self-efficacy aims at a broad and stable sense of personal competence to deal effectively with a variety of stressful situations,” (p. 154). This present study seeks to measure the effect of stress and burnout interventions as a protective resource factor for self-efficacy, energy and attitudes to strengthen personal coping skills. The intervention goal is to equip teachers not only to survive better, but even to flourish in challenging circumstances.

On the one hand, helper motives, as opposed to pedagogical or subject-orientated motives, dominate in teachers who are susceptible to burnout. In a study of HIV/Aids and burnout, health worker stress has been found to revolve around staff fears, issues of association, professional and role issues and stigma, discrimination and ethical issues (Miller, 2000). Information gathered in the field should revolve around well-being, work conditions and stress responses, all of which have usable indices that can be measured before and after supportive interventions have been put in place. On the other hand, a behaviour definition of burnout (Haberman, 1995) differentiates between the teacher being an emotionally non-committed paid employee or a well-functioning professional. He described burnouts in teaching as strong insensitives who can cope with student debilitation and negative conditions of work in dysfunctional classrooms because they no longer take failures as personal inadequacies. These detached job holders do not feel responsible or accountable for students’ behaviour, learning or anything else that takes place in the classroom.

Environmental and individual factors causing burnout among helping professionals suggest the following to avoid burnout: Development and application of stress reduction techniques; development of self-evaluation and goal setting skills; awareness of environmental factors and use of time-outs and social supports; training in detached concern; explanation of therapeutic success and failure through attributional training, and clarification of counselling expectations and beliefs (Savicki & Cooley, 1982).

In South Africa, a study by the HSRC (2005) found 10.6% of educators had been hospitalised in the previous 12 months (Johnson, 2010). Another indication of educators’ health status was that at least 75% had reported a visit to a health practitioner in the six months before the study. The most frequently reported diagnoses in the last five years before the study were stress-related illnesses, such as high blood pressure (15.6%), stomach ulcers (9.1%) and diabetes (4.5%). In early 2013 South Africa was reported as having the highest absenteeism rate of teachers in the Southern African Development Community – a total of

7 448 000 days was lost in 2012, or 19 days on average per teacher, which is double the rate of other neighbouring countries (South African Press Association [SAPA], 2013).

South African research has found that teachers need emotional-social competencies to cope: empathy, optimism, assertiveness, self-awareness, reality-testing, social responsibility, flexibility, impulse control and stress tolerance (Van Wyk, 2006). To relieve pressures which could lead to stress and burnout, training in emotional-social competencies is recommended. In a study of the role played by hardiness and attributional style in the dynamics of stress and coping processes, it was found that South African teachers who are high in hardiness generally use more transformational coping than subjects lower in hardiness (Leon, 2000). It was also found that subjects high in commitment, a sub-component of hardiness, were more likely to have an internal locus of control. Stronger coping mechanisms, communication skills, interpersonal relationships, emotional security, intellectual stimulation and a balance between professional and personal satisfaction were additional factors found to help teachers to feel better. Gold and Roth (2003) offer a professional health solution for teachers, which considers physical-emotional, psycho-social and personal-intellectual well-being.

## **2.3 Multiple Types of Trauma**

Due to complex social and political events, traumatic experiences have increased in every-day life, creating new challenges for mental health practitioners dealing with trauma and its aftermath (Ringel & Brandell, 2011). While these authors cite the 9/11 attacks, war on terror, combat trauma and school shootings as a result of bullying as contemporary American traumas, traumatologists in South Africa are faced with challenges such as intergenerational trauma resulting from political injustices and continuous trauma on the Cape Flats as the result of multiple on-going factors, such as violence and poverty (Benjamin, 2011b).

**2.3.1 Systemic and intergenerational trauma.** This is an age of anxiety, caught between a sense of impending apocalypse and an inability to acknowledge it, which results in “despair work”, which is similar to grief work in the acknowledgment of inner pain (Macey, 1998, p. 16). There are multiple causes for despair, from significant global challenges, such as fires, catastrophic floods, global warming, food shortages, water pollution and scarcity, to violence and political upheaval (Cane, 2000).

Working in Nicaragua’s multiply-wounded society, Cabrera, cited by Johnson (2010) observed that permanent stress leads to loss of ability to make decisions or plan for the future. Personal change is central to organisational processes, as there is no social change without



personal change. As a result of this insight, developmental projects in Nicaragua have focused on four major areas: the personal sphere, where crisis, wounds, health, the conception of healing, life style and holistic health are considered; historical-cultural approach, attempting to understand how personal life is marked by the country's historical and national culture, followed only then by organisational and developmental approaches.

Structures based on differences of race, gender and class, which disempower large numbers of people, perpetuate systemic trauma (Watkins & Schulman, 2010). Social and economic justice, hunger and poverty, representation and censorship, resistance and repression, violence and mediation are central issues in liberation psychologies, where research should engage in collaborative, participatory explorations to benefit communities involved.

Energy patterns of universal consciousness are relevant to systemic trauma as 85% of people on the planet calibrate below 200, which is the average level of human consciousness, filled with emotions like apathy, guilt, fear and shame (Hawkins, 1995). Only 4% of the world's population calibrates at an energy field of 500 or above, characterised by peace, love, joy and enlightenment. Human consciousness development is impeded by the lack of knowledge about the nature of consciousness. A practical map of these fields of consciousness has been developed by Hawkins (1995), after 20 years of research measuring energy fields of many different items, studying the relationship between attractor fields and human behaviour. These different processes of consciousness include world-views, perceptions, emotions, and spiritual beliefs. At the lowest level is shame, for example, which is perilously close to death in the form of conscious suicide or failure to take steps to prolong life. Shame is used as a tool for cruelty and the people who resonate at this level have dangerous behaviour, such as gangs. The God-view is despising, the life-view is miserable, the emotion is humiliation and the process is elimination (Cane, 2000). Shame can result from early experiences such as sexual abuse, which can destroy emotional and psychological health, making the whole personality vulnerable to negative emotions such as anger, guilt and false pride (Hawkins).

In the consideration of collective healing and the assumption of personal responsibility, Cabrera (2002) asserts that multiply-wounded societies run the risk of experiencing intergenerational trauma. This is highly relevant in South Africa, as it is felt by those who come into contact with sufferers of previous traumas. The suffering from years of apartheid and injustice is being felt and manifested by later generations born into democracy.

Teachers working in high-risk schools in post-apartheid South Africa are affected by factors of poverty, crime, violence, drug abuse and child neglect, which have been present in educational institutions and wider society for multiple generations. The crime of Bantu Education is likened to Adam's biblical sin in the Garden of Eden because all South Africans suffer from the devastating consequences of this original sin either directly or indirectly (Biko, 2013). He believes that "the process of social engineering implemented by Dr Verwoerd in the Bantu Education Act of 1953 has scarred the South African consciousness so deeply that it can only be termed an attempt at intellectual genocide of indigenous South African people," (p. 171). The historical impact of these injustices needs to be taken into account in any approach to healing when studying stress, burnout and multiple types of trauma in teachers.

Despite the fact that South African expenditure on education has risen from R31.8 billion in 1994 to R51.1 billion in 2000 and is one of the highest government investments in education in the world at 6% of GDP (Biko, 2013) conditions in schools, almost 20 years after free democratic elections, have not improved much from the apartheid years. This is described by Finnegan (1994, p. 22), at Grassy Park High School:

There was no auditorium, no gymnasium, no cafeteria, no book lockers, no language labs, and no heat. The "sports ground" was a glass- and rock-strewn horse pasture; the library owned fewer books than I do. The classrooms were full of broken windows, broken lights, decrepit desks, and yawning holes in the ceilings.

Societal intergenerational trauma symptoms can manifest as PTSD, with fight-flight responses characterised by strong physiological reactions such as fast breathing, alertness, increased blood pressure and heart rate and decreased activity in digestive, reproductive and immune systems. This is now seen as a common disorder, when a person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others; the person's response involved intense fear, helplessness or horror (DSM-IV, 2000).

The boundary trauma model explains why lesser degrees of trauma inflicted by another person may be a mortal threat if that person represents a vital resource in the formation of safe boundaries (Scaer, 2007). This author points out that trauma is most devastating when it comes from persons or events surrounding those persons who are caregivers, that is, the primary source of safe boundary formation. Educators who have come from traumatic

families with abusive and neglectful parents, or learners in schools with dysfunctional caregivers, are left without adequate boundary perception throughout the lifespan if boundaries have not been developed in childhood.

Friends, neighbours and members of communities also represent a significant source of safe boundary perception (Scaer, 2007). Living in high-risk areas of crime and gangsters, learners will be susceptible to trauma by the assault and violence perpetuated, which will be particularly devastating because all of these acts represent a loss of sense of safety or boundary between individuals and members of their own species. As caregivers in the school, educators could be seen as playing a vital role in creating healthy boundaries for children at risk in violent communities.

**2.3.2 Complex and continuous trauma.** Responses from symptoms of complex traumatic stress disorder (CTSD) range from a brief stress reaction that gets better by itself and never qualifies for a diagnosis, to classic or simple post-traumatic stress disorder, to the complex syndrome of prolonged, repeated trauma (Herman, 1997). Apart from those living in societal totalitarian systems such as apartheid, examples of CTSD sufferers include those subjected to sexual abuse and domestic violence, childhood abuse and neglect.

Concrete infanticidal attachment has been related to patterns of family abuse, where emotional bonding is linked to intense episodes of abuse, compelling the victim to actively seek highly abusive (to oneself or to others) contact in order to feel safe in moments of trauma and distress (Sachs, 2013). A depressing picture of abuse, dissociation and attachment emerges, resulting in abuse of self and others and when working with people who are in this cycle, it is suggested that it is necessary to engage on all three levels: the reality of abuse; dissociation by connecting with the therapist, and the pattern of attachment (Sachs, 2013).

Many abusive and violent conditions were present in Cape Flats' schools, in the lives of both teachers and children who experienced repeated trauma. Symptoms include alterations in self-perception such as: sense of helplessness or paralysis of initiative; shame, guilt, and self-blame; sense of defilement or stigma; and a sense of complete difference from others.

These conditions depict a level of acceptance that can be referred to as a state of shock, which is extremely severe trauma, characterised by the acute levels and magnitude of adrenal activation and debilitation. The history of shock and trauma in our lives, families, and our culture is carried in our sometimes unconscious memory and this accumulating effect is its

danger, posing a threat to our health and well-being. It needs to be exposed, addressed, understood, and released on both a collective and personal level (Mines, 2003).

Participants in a doctoral research study on women's experiences of living in a violence-prone neighbourhood on the Cape Flats described being severely affected by drug abuse, violence and gangsterism that occur in public spaces, institutional settings and homes (Crawford-Browne, 2011). This study cited participants identifying underlying factors as unemployment, overcrowding, inadequate schooling, parenting challenges and a lack of justice, along with other systemic issues. Most participants see "the government" as central in explaining the violence within their community. Family-related stress is also a main issue (Crawford-Browne, 2011).

Educators are exposed to these same continuous traumas of the community as they make their way to school, or endeavour to prevent school drop-out by dealing with dysfunctional families or life-style choices of learners, such as gangsterism, drug abuse and teenage pregnancy. Even subtle negative experiences may reach the level of trauma if a state of helplessness accompanies the negative event (Scaer, 2005). Following from Levine's work (1997) equating the freeze response and disassociation as extremely subtle and hard to identify, Scaer describes how a life threat may occur as a new experience or as an internal threat-based message arising from procedural memory for an old trauma. Symptoms from developmental traumas which originate from childhood experiences can remain dormant, accumulating over years or even decades (Levine, 1997).

**2.3.3 Other types of trauma.** Vicarious or secondary trauma, also known as compassion fatigue, can affect individuals in the caring profession, such as teachers, counsellors, psychologists and policemen, who are exposed to traumatic events on a secondary level (Figley, 1995; McCaan & Saakvitne, 1995). Sufferers of secondary trauma can have the same symptoms as persons who have directly survived a traumatic event. These include physiological reactions, like social withdrawal, chronic depression and anxiety, substance abuse, survivor guilt and unresolved grief, along with feelings of powerlessness, ineffective personal relationships, crisis of faith, mistrust, pessimism, cynicism and aggression (Cane, 2000).

Work-related stress has been described as demands of the job which affect other settings as well, needing care-giver resilience to cope with this stress naturally, or through the help of others. While there are different degrees of ability to tolerate exposure to stressors, in work

focusing on emotional suffering, there is a common theme of carers absorbing information about human suffering (Figley, 1995).

Trauma is viewed as a gateway to transformation by Finley and Myss (2009). To deal with trauma, it is necessary to deal with its origin – disconnection from spiritual experience. Suffering and liberation are part of an authentic spiritual life. These aspects of recovery from trauma are addressed by the transpersonal approach to healing.

## **2.4 Coping and Well-being**

**2.4.1 Definitions.** The relationship between stress and the onset of burnout may depend on the presence, absence or level of coping strategies used by an individual (Wilkerson, 2009). Coping has been defined “as constantly changing cognitive and behavioural efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person,” (Lazarus & Folkman, 1984, p. 141). This definition is more process- than task-orientated, distinguishing between coping and automatised behaviour which limits coping to conditions of psychological stress; and focuses on efforts to manage stress, regardless of outcome. Coping is not identified with mastery in this definition, but includes efforts to minimise, avoid, tolerate or accept stressful conditions.

Original coping responses were identified as emotion-focused coping or problem-focused coping (Lazarus & Folkman, 1984) but research in the 1990s have aligned coping with both positive as well as negative effect and coping research now includes concepts such as meaning-making coping, future-orientated coping, religious and spiritual coping and interpersonal coping (Folkman, 2011). The emotions and sense of well-being experienced in a stressful situation should be distinguished from morale over the long term (Lazarus & Folkman, 1984). Positive and negative emotions expressed in a stressful encounter reflect a person’s momentary evaluation of personal well-being and are in the foreground; morale in the long term is more of a background affective state that is relatively enduring. The authors are concerned with how appraisal and coping processes affect subjective well-being in a stressful situation and the relationship between well-being in the short term and morale over the long term.

It has been suggested that coping strategies fall into two main types: direction-action techniques and palliative techniques (Dunham & Varma, 1998). The former refers to what can be done to eliminate sources of stress, such as rescheduling tasks; the latter refers to dealing mentally or physically with the sources of stress themselves, either mentally

appraising the situation and putting it into perspective, for example, or physical techniques like taking a hot bath or receiving a massage.

Aristotle, cited by Michalos (2007), referred to general well-being as *eudemonia*, which meant favoured by the gods and *daimones*, that is, living and doing well. This was achieved in multiple ways, by enjoying goods of the mind, such as wisdom, moral virtue and pleasure; goods of the body, with physical beauty and health; external goods, such as wealth, adequate material resources, good parents and peaceful and secure communities; and good influence, which referred to diverse features of a good life, like education.

Well-being is not just subjective, but should include a vast array of measures such as happiness, life satisfaction and job satisfaction (Michalos, 2007). He believes it should not only be about feeling, but about perceptions of the world, what is done about what is thought, and finally, measures of real world consequences which follow from different combinations of perceptions, beliefs, feelings and actions. Describing happiness or well-being in the moral philosophic tradition of Socrates, Plato and Aristotle, Michalos says: “They agreed people should reflect on their lives as a whole, discover what is most important or valuable (i.e. life’s final end or *telos*) and plan and live their lives to achieve that end,” (p. 9). For Aristotle, living well and doing well was the same as being happy.

Well-being, or wellness, has also been described as an evolving rather than static state. “High-level wellness involves giving good care to your physical self, using your mind constructively, expressing your emotions effectively, being creatively involved with those around you, and being concerned about your physical, psychological, and spiritual environments,” (Travis & Ryan, 2004, p. xix). For these authors, a person’s well-being is not where he/she is on the continuum of health, but in which direction he/she is facing. They extend the definition of health to encompass a process of integration characterised by awareness, education and growth.

Little attention, however, has been paid to the potential impact of coping strategies on physical health and well-being of individuals (Dewe et al., 2010), with almost all studies on coping focusing on psychological strain or distress. Day and Livingstone, cited in Dewe et al. carried out research with “intriguing results” (p. 93) when studying self-reported health symptoms among military personnel. Only negative coping styles, such as venting of emotions, denial and disengagement, exacerbated rather than alleviated health problems. Positive coping strategies, such as problem-solving and seeking informational and emotional

support, had no physical effects on health complaints. Eustress, defined as “any form of stress which is beneficial, usually associated with a feeling of fulfilment and achievement rather than anxiety,” (Oxford Dictionary of Psychology, 2003), could be considered in the context of well-being of educators (Friedman, 1992) as well as healthy levels of anxiety (Arden, 2012), together with distress with stress and burnout levels, in an appreciative inquiry approach to problem analysis.

Latest neurological understandings of the brain reveal that well-being based on optimal brain functioning includes concepts like affect symmetry of the right and left frontal lobes, understanding fast and slow tracks to the amygdala, neuroplasticity and neurogenesis (Arden, 2012). Translated into optimal functioning, these concepts make up a mnemonic recipe in brain-based therapy for FEEDing the brain: Focus, Effort, Effortlessness and Determination. To be well, therefore, means taking care of the brain and this author suggests five healthy habits for optimum brain function: Social medicine, exercise, education, diet and sleep/hygiene.

Well-being in terms of neural integration has been suggested by Siegel (2010), incorporating the middle prefrontal cortex, with specific parts such as the anterior cingulate, orbitofrontal and medial and ventrolateral prefrontal zones. It includes the middle prefrontal integrative fibres which link the whole cortex, limbic area, brain stem, body proper and even social systems to one another: “The nine middle prefrontal functions emerging from this multidimensional neural integration include (a) body regulation, (b) attuned communication, (c) emotional balance, (d) fear modulation, (e) response flexibility, (f) insight, (g) empathy, (h) morality and (i) intuition,” (Siegel, 2010, p.264).

Considering the relationship between trauma and resilience, McElheran (2013) questions whether well-being and happiness are part of a Western myth that if we do not feel happy, then something is wrong. She rather focuses on the development of character through effort and pain and suggests that the struggle to emerge is crucial to transformation. For McElheran, individuals and communities should strive for integration rather than happiness, with the ability to process and express all emotions - uncertainty, fear, sadness as well as happiness, pride and satisfaction. In other words, well-being arises from the expression of all emotions in a relationship with another empathetic human being. This connection is more important for healing than any technique utilised.

**2.4.2 Threat responses.** The interaction of cognitions (thoughts and images) with behaviour, emotions and physiology within a climate or context describes different aspects of human functioning (Scott, 2009). From a systems perspective, the multidimensional nature of the network of communicating subsystems inextricably intertwines mental processes, emotions and physiological systems. On-going coping of stress is affected by heart, brain, nervous, hormonal and immune systems, all considered essential components of the dynamic interactive information network (HeartMath Institute, 2013). An understanding of the brain functioning under stress, combined with evolutionary developmental brain processes, contributes to a multidimensional, integrative understanding of the responses to threat processes. A certain degree of anxiety is necessary for optimal brain function (Arden, 2012) but in heightened cases of stress and trauma, a specific reaction to threat occurs in the brain (See Figure 2).

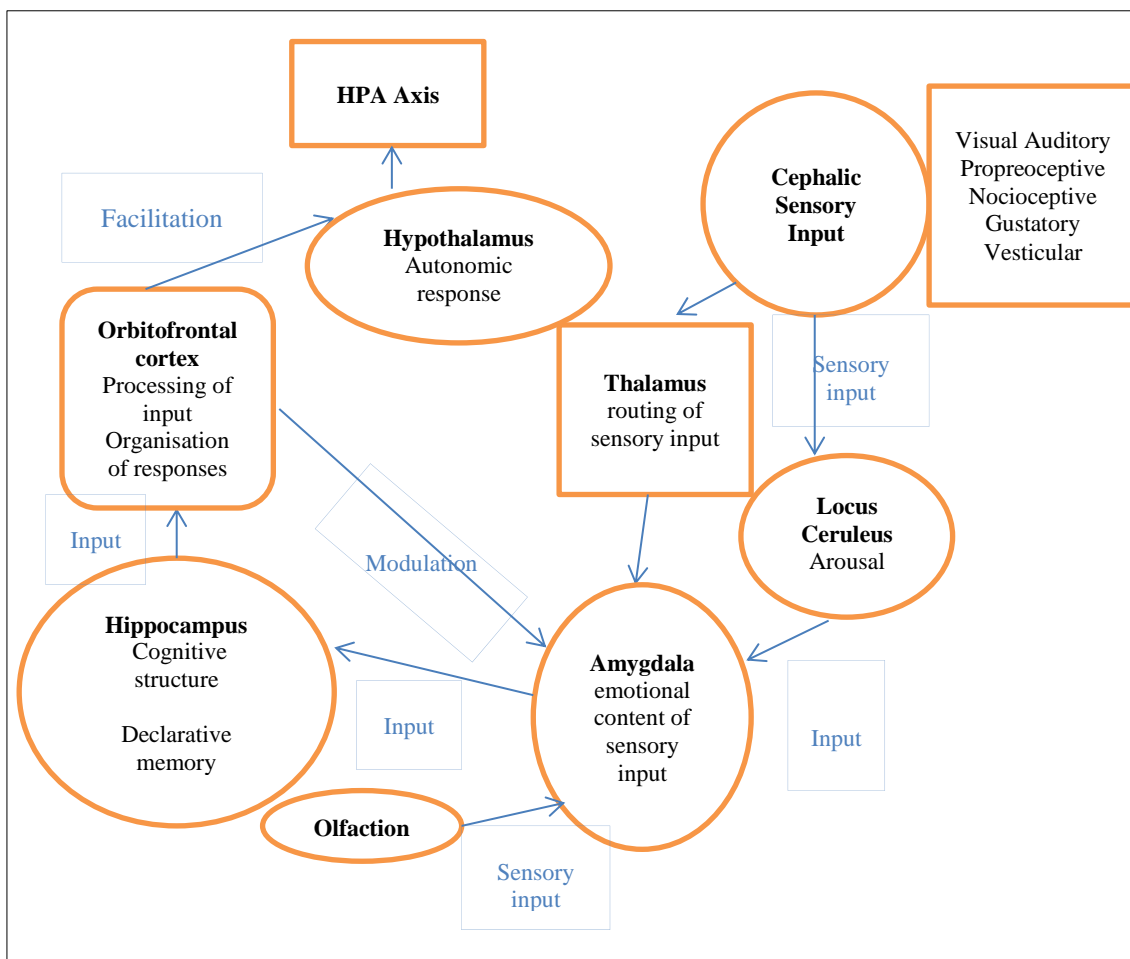


Figure 2. Theoretical diagram of pathways for arousal and memory mechanisms in the brain in response to a threat. Source: Scaer (2007).



This reaction is initiated by sensory input from various organ systems transmitted to the thalamus, a cell cluster in the middle of the brain (Scaer, 2007). This information is then routed by the thalamus to appropriate areas of the cerebral cortex as well as the limbic system, or emotional brain, particularly the amygdala, the centre for memory pertaining to arousal. Sensory input is then transmitted to the brain stem locus ceruleus, routed through the thalamus, except for olfaction, which is directly transmitted to the locus ceruleus and amygdala. Related information from the amygdala is routed to the hippocampus, developing a cognitive structure for the information. This is then transmitted to the right orbitofrontal cortex and a behavioural autonomic response to the threat is organised (Scaer, 2007).

Behaviour results from genetic, historical, experiential and environmental influences, as well as central nervous system (CNS) structure, providing a physical basis for integrating and mediating these multiple behaviour determinants (Cummings & Mega, 2003). These authors describe the evolution of the brain as producing increasingly refined systems for interacting with the environment. In tracing reptilian to lower mammalian to human stages of evolution, understanding the organisation of these phylogenetic stages aids our insight into the neurobiological basis of behaviour (Cummings & Mega, 2003).

In describing nervous system responses to stress, threats and trauma from an evolutionary perspective, Porges (2012) states that metabolic demands are reduced to facilitate health, growth and restoration. According to Porges, early in vertebrate evolution, neural regulation of the heart is mediated by an unmyelinated, less efficient, vagus. This neural system provided defence by immobilising metabolic, oxygen and food demands for survival. As vertebrates evolved, they developed a spinal sympathetic nervous system, which emerged in bony fish, which coordinates movements among schools of fish, with mobility being a defensive system. As mammals evolved, a new vagus, that dampens the sympathetic and the adrenal circuits, developed to enable social engagement, and to optimise metabolic resources. The area of the brain stem that regulates this newer, myelinated vagus is linked to the brain areas that control the striated muscles of the face. This area of the brain stem controls the ability to listen through middle-ear muscles, articulate through the laryngeal-pharyngeal muscles, and express through the face (Porges, 2012).

The Polyvagal Theory states that when confronted with a challenge, the first part of the nervous system will try to negotiate by using the face, vocalisation and language (Porges, 2012). If that does not work, the “new” social engagement system will retract to promote mobilisation. The sympathetic nervous system will then revert to fight-flight, but if escape

and defense are not options, as in the case of childhood abuse for example, increasing sympathetic nervous system activity is not adaptive, since mobilisation will not be an effective defense and under these circumstances the nervous system seems to evaluate the risk of life threat and will trigger a shutdown response (Porges, 2012). This author explains that physiological circuits or states are not voluntarily selected; rather, the nervous system evaluates threat on an unconscious level, described as neuroception.

The three layered model of the central nervous system described by Yakovlev and Lecours (1967) is credited as the first to best describe a heuristic concept of brain-behaviour relationships (Cummings & Mega, 2003, p. 7):

A primitive inner core devoted to arousal and autonomic function is surrounded by a middle layer that includes the limbic system and basal ganglia; this in turn is encapsulated by the most recent phylogenetic layering of the neocortex and pyramidal system. Each layer subserves different functions.

These functions are described as the reticular core, middle layer and outer neocortical layer (Cummings & Mega, 2003). The reticular core, with a mesh of unmyelinated neurons, controls consciousness, cardiovascular and respiratory function. The middle layer, with partially myelinated organised cell groups, includes the basal ganglia and limbic system. It functions with arousal, communal activities, personality and emotion. The outer neocortical layer of well-myelinated neurons enables fine motor control, detailed sensory processing, praxis, gnosis and abstract cognition.

The interventions designed in this study aim to optimise each of these areas, with the understanding that all systems are dynamic, moving between the old and new. Adding the evolutionary perspective of brain development, the complex interactional nature of the different parts of the brains becomes apparent (see Figure 3). Each emerging and preceding brain thus changes the other to some extent.

Failure to integrate can lead “the cantankerous trio – reptilian id, mammalian ego and neocortical superego,” (Pearce, 2002, p. 30) to battle continually for supremacy, leading to troubled behaviour. At the start of the interventions, each group was taught the theory of the three brain model, and at the end, workshops in other models were offered to provide opportunity for optimal understanding and integration. The three brain model has been described as rational, emotional and survival to offer an easily comprehensible explanation to educators on the Cape Flats of the effects of continuous trauma on the learner and their

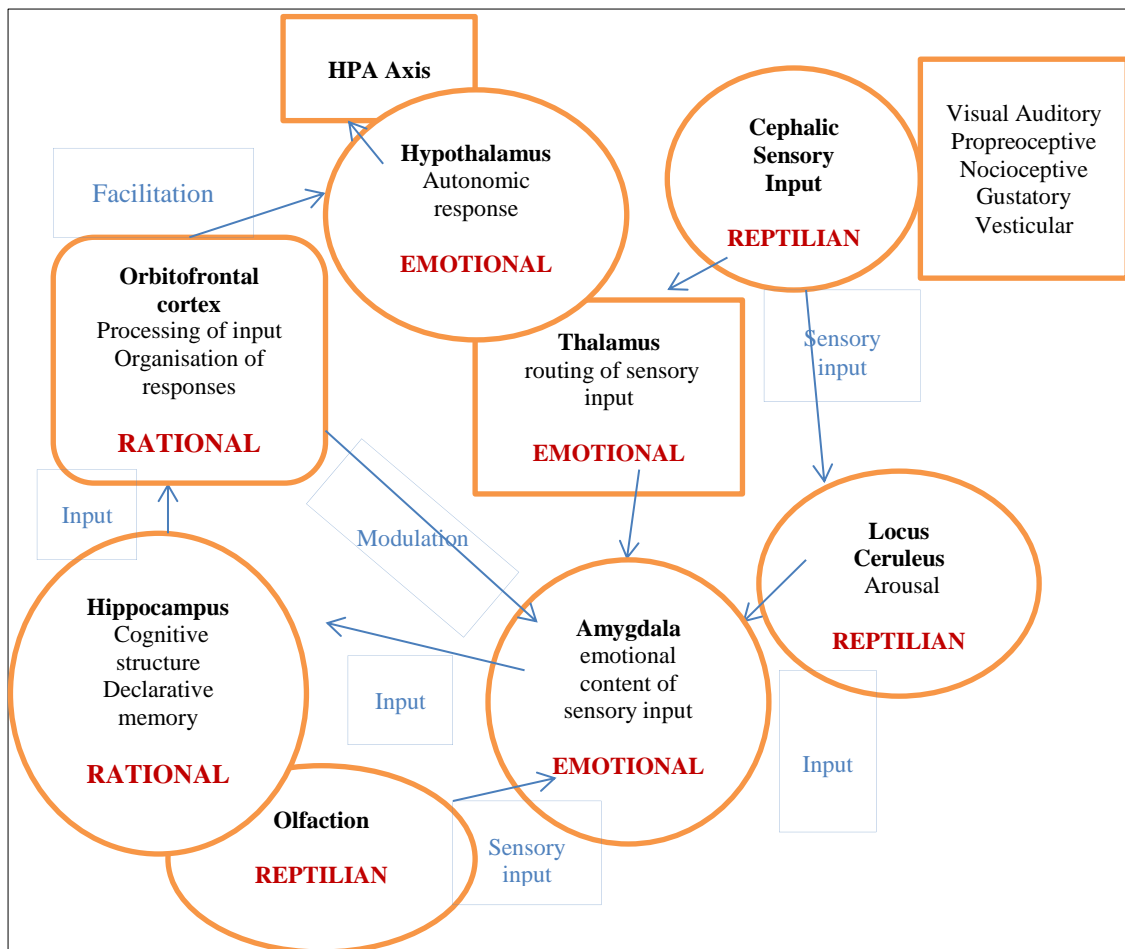


Figure 3. Theoretical diagram of pathways for arousal and memory mechanisms in the brain in response to a threat, with associated evolutionary stages of development. Adapted from Scaer (2007).

resultant behaviour in the classroom (Benjamin, 2010). In considering the different roles and reactions of the three brains, interventions used in this study with educators are geared towards optimum engagement in brain awareness and development in all these areas of response.<sup>2</sup>

**2.4.2.1 Reptilian, survival brain.** The reptilian brain system functions in a habitual way, unable to alter either inherited or learned patterns of behaviour (Pearce, 2002). TRE originate from this survival brain. This comprises the brainstem, medulla, cerebellum and pons, making a first layer functioning as a survival machine, reacting without rationally considering

<sup>2</sup> In this study the three brain model offers a conceptual, rather than a neuropsychiatric, framework in a psychological community context to explain different brain foci in healing processes.

feelings or thoughts (Benjamin, 2010). It is responsible for the social engagement (Porges, 2012) and fight, flight and freeze responses when faced with stress and trauma.

Translated into learner behaviours in the classroom, the psychosocial impact of activation of the survival brain due to trauma and violence is hypervigilance, being jumpy and irritable and easily startled; unable to concentrate or focus, appearing to have attention deficit disorder (Benjamin, 2010). Educators can also be prone to this exaggerated startle response, overreacting to learner behaviour, or having difficulty focusing on the lesson material. This can lead to educator and learner withdrawal or apathy, anger, poor impulse control and, for the child, learning difficulties (Benjamin, 2010). Through the alliance of the neocortex with this low brain, educators and learners would also be prone to lying, gloating when successfully deceiving, lamenting and self-pitying when deceived in this way (Pearce, 2002). This author describes how, unimpeded by emotions, the reflexive system alerts the cognitive brain to a dangerous event and swift decisions can be made to mobilise our intellect to the reptilian brain's defence network.

Children unconsciously adopt dysfunctional patterns and painful life experiences, such as injuries, accidents and surgeries, and imprint the postures, tics, aches and pains of those events on procedural memory throughout the lifespan (Scaer, 2005). These form the substrate for physical behaviours skills, appearance and health. Resistance to shaking, crying or having tantrums means that individuals have socially lost the ability to tolerate the expression of vehement emotions in others – “perhaps impractical in a tightly compacted culture, both physical and emotional,” (Scaer, 2005, p. 286). He notes that domesticated and caged animals lose the ability to discharge freeze response and concludes that perhaps like these animals, man is in his own metaphorical cage, caught by the behavioural entrapments of culture.

**2.4.2.2 Mammalian, emotional brain.** The transpersonal techniques adapted from Capacitar workshops in this study focus on calming and soothing the emotional brain. This brain, or limbic system, comprises several related areas: amygdala, thalamus, hypothalamus and the basal ganglia. It is responsible for regulating the emotions and activating feelings ranging from fear and sadness to caring, social bonding and playfulness (Benjamin, 2010). This author explains that emotions are developed through social experiences, interactions and expressions, with the foundation of all future relationships and interactions in life being founded on early attachment and emotional bonds formed between a baby and the caregiver.

It is immaterial whether a negative response signal is received from the neocortex or reptilian brain as the emotional response remains the same, flooding the entire body and brain. Reprimands, criticisms, fears and anxieties, whether real or imagined, will affect state-specific learning, with a resulting trigger of hormones (Pert, 1999).

In the classroom, the child functioning poorly in the emotional brain is highly emotional, attracting attention and prone to heightened displays of, for example, rage or crying (Benjamin, 2010). They may seem self-absorbed and struggle to get things into perspective. They may live in a fantasy world, confusing reality with make-believe, not taking responsibility for their actions. “Traumatised learners struggle to control their emotions. They may display impulsive rage, revenge, mood swings and violent behaviour,” (Benjamin, 2010, p.6). Similarly, educators lacking emotional intelligence may be prone to emotional outbursts, lacking the ability to control their own emotions and unable to recognise and deal appropriately with the emotional needs of the learners. Focus in the transpersonal intervention is on the heart/brain connection, spiritual awareness and emotional intelligence.

Some transpersonal techniques<sup>3</sup> deal with recognising and processing emotions (such as the Finger Holds), while others bring about heart coherence through gentle touch (the Holds). Exercises like acupressure and polarity massage also facilitate deep rest and relaxation, calming and soothing emotions. Feelings of safety and recovery from stress and trauma are facilitated through exercises like visualisation and meditation. Spiritual awareness is heightened by mindful connection to self and a greater universal power through meditation, song and dance.

**2.4.2.3 Cognitive, rational brain.** The TA stress and burnout intervention works with the cognitive, rational brain. This comprises the hippocampus, where cognitive structure and declarative memory takes place, and the neocortex, which is the largest part of the brain, composed of the cerebrum, the most complex structure, which is divided into two hemispheres: the left for math, logic and language; the right for visual imagery, face recognition and spatial abilities (Benjamin, 2010). In addition, the four lobes, occipital, temporal, parietal and frontal, accept stimuli and input from the opposite side of the body via the survival and emotional brains. Any negative thought or experience will automatically

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<sup>3</sup> A detailed description of transpersonal psychological techniques presented in Capacitar workshops is available (See Johnson, 2010).

shift attention and energy from our forebrain to our hindbrain, a shift which short-changes our intellect and severely impairs thinking and learning, literally locking the neocortex into the function of our lowest brain (Pearce, 2002).

Within the classroom context, the thinking brain or cortical areas need to be in an attentive calm state, which Benjamin (2010) describes as sadly, rarely achieved by the traumatised child. “Without the rational thinking brains being activated, learners are inattentive and they display poor decision-making, irrational and impulsive behaviour and poor problem-solving skills,” (p.8). The goal of the TA intervention is to develop and enhance adult autonomy. Adults working with teenage learners need to cultivate human capacities for awareness, spontaneity and intimacy to help prepare youth to be aware, authentic, flexible and spontaneous (Talob, 1994) in the competent classroom. With the development of these characteristics rooted in the autonomous personality, Talob believes that social adjustment is likely.

**2.4.3 Educator coping and well-being.** The psychology of education enables learners rather than supporting teachers in developing their skills, which is expected to be learnt in classroom apprenticeship (Castle & Buckler, 2009). According to these authors, teacher training lacks developing personal skills and strategies and educators need to challenge themselves, becoming the best they can, continually questioning what they do and how and why they are doing it. Teaching can lead to stagnation, and in stressful and traumatic contexts, disillusion, despair and burnout can result. In building a wall of well-being (Castle & Buckler, 2009), this study adapts the concept to envision the cement as the group process, holding insights, skills and techniques, which are the bricks, together. In standing firm on solid foundations of theory and understanding, the well-being wall should withstand contextual challenges of stress and burnout. In a cognitive behaviour approach, important aspects of teacher success are concentration and attention; maximising time and minimising disruption; planning, preparation; motivation; confidence and self-esteem and emotional regulation (Castle & Buckler, 2009). Managing continual change is also seen as an essential skill.

Many international studies have analysed stress, burnout, coping and well-being among teachers (Blasé, 1982, 1986; Brouwers & Tomic, 2000; Cox & Brockley, 1987; Cunningham, 1983; Pillay, Goddard & Wilss, 2005). Negative association between the Maslach Burnout Inventory subscale depersonalisation and competence may be attributed to a distancing mechanism in difficult human interactions (Pillay et al., 2005). Many beginner teachers suffer

from what Veenman (1984) terms reality or transition shock. Improving teacher competence, therefore, especially in younger teachers, could be a solution to this problem. While collaborative teamwork and communication are viewed as essential for enhancing teacher capacity (Ontario's Principals' Council, 2009) the researcher postulates that another solution to combat depersonalisation could be more focus on educator wellness, enhanced by regular psycho-social meetings among staff to discuss emotional difficulties and problematic classroom situations and share coping strategies, reducing the distancing mechanism in difficult interactions.

A solution to the behavioural burnout described by Haberman (1995), where burnouts are insensitives, could be a more caring and compassionate attitude. This is in keeping with the approach taken by transpersonal psychology, where the use of non-ordinary states of consciousness, deep insight and spiritual practice for healing can be used effectively in the overcoming of burnout amongst caring professionals (Institute of Transpersonal Psychology, 2008). The ITP states that many professional psychologists are beginning to recognise the importance of knowledge of spirituality and how it interfaces with psychology.

In considering the nature of the service profession, Davis (2000) believes that deeper caring and more emotional and transpersonal involvement between professionals and those being served will reduce burnout and promote growth in both those being cared for as well as caregivers. The principles of the 12 steps to recovery advocated by Alcoholics Anonymous, including spiritual growth and deep sharing among those undergoing similar challenges, which have been incorporated into wider addiction programmes including narcotics and eating and behavioural disorders, such as gambling and sex addictions, could also be relevant to healing approaches in the traumatic schools context.

The importance of heart in a compassionate approach to healing was recognised by Montgomery (1991) in her study of the care-giving relationship in nursing. This caring becomes a self-enhancing way of being, and helping to heal others also heals the caregiver's heart, thus preventing burnout. The importance of heart coherence (Pearce, 2002) is considered in transpersonal healing. Transpersonal practices, such as mindfulness, breath work and visualisation, elicit a sense of calm and safety and facilitate heart coherence, the benefits of which have been scientifically documented by the HeartMath Research Centre (McCraty et al., 2009).

Heart coherence is linked to emotional healing as heart rate variability reflects inner emotional states and stress. On the one hand, negative emotions lead to increased disorder in the heart's rhythms and in the autonomic nervous system, which adversely affects the rest of the body. On the other hand, positive emotions increase harmony and coherence in heart rhythms and improve balance in the nervous system. Health implications are that disharmony in the nervous system leads to inefficiency and increased stress on the heart and other organs, while harmonious rhythms are more efficient and less stressful to the body (McCraty et al., 2009).

Well-being research has also focused on self-efficacy, Bandura's term for an individual's sense of their abilities, of their capacity to deal with the particular sets of conditions that life puts before them (Penguin Dictionary of Psychology, 2001). A longitudinal study of teacher burnout and self-efficacy (Brouwers & Tomic, 2000) found that perceived self-efficacy in classroom management must be taken into consideration when devising interventions to both prevent and treat burnout among secondary school teachers. Ten of the most effective coping strategies reported by teachers are: ensuring an understanding of the work being taught through lesson preparation; finding humour in situations; abandoning sessions not going well; discussing concerns with other teachers in the school; getting to know pupils as individuals; setting priorities; making lists; sharing failures and social interchange of recreational interests with colleagues (Cockburn, 1996).

Research in Norway (Skaalvik & Skaalvik, 2007) found strong support for six separate but correlated dimensions of teacher self-efficacy. The following sub-scales were included: instruction, adapting education to individual student needs, motivating students, keeping discipline, cooperating with colleagues and parents and coping with changes and challenges.

Prolonged periods of stress can exhaust the physical and psychic reservoirs of the individual (Berceli, 2010). Professionals such as teachers who are exposed on a continual basis to stressful situations may create increased quantities of adrenaline and other chemicals, thus creating a new biological baseline. These individuals then remain in a heightened active and alert state, even if there is no longer a need for hyper-vigilance. In order not to allow the body to reach states of chemical exhaustion and manifest illness by forcing them into a state of recuperation, Berceli has evolved a series of trauma release exercises to return the body to homeostasis. While these exercises have not been researched on teachers, they have been researched in schools and university with students (Berceli, 2007, 2011) and applied in highly



traumatic situations, such as war zones, the police force and fire brigade in many countries around the world (Berceli, 2010).

## **2.5 Classroom Competence**

There are many types of competency which can prevail for optimal functioning and recovery – from safety and reward response (Rock, 2009), kindness (Levine, 2010) and compassion (Armstrong, 2011) to cultural competency (Mindell, 2002) and social and emotional competence (Jennings & Greenberg, 2009). This study considers the importance of safety and non-threat, kindness, compassion, social and emotional and cultural competency in the classroom, engaging with teachers in their understanding of competency in the volatile setting of the Cape Flats.

**2.5.1 Safety and threat.** Neurological findings show that social and physical pain produce similar brain responses in the dorsal anterior cingulate cortex for degree of distress and right ventral prefrontal cortex for regulating the distress (Lieberman, 2007). The brain is described as a “social” organ, with physiological and neurological reactions affected directly and profoundly by social interaction (Rock, 2009), with social needs being equated with survival needs in terms of brain reaction. This poses great challenges to teachers to create an environment that addresses the social brain threats to optimal performance of learners. The conscious awareness learners have to potentially stressful interactions means that educators’ behaviour is interpreted and magnified in meaning, making sentences and gestures potentially threatening to the class, even though this response may be unintentionally evoked.

The acronym SCARF is used by Rock (2009) to highlight ways to calm the threat response. This stands for: status (treating people fairly); certainty (knowing what to expect); autonomy (allowing people to make decisions); relatedness (understanding each other enough not to feel excluded) and fairness (treating learners fairly). These qualities are used by Rock in organisational contexts, but could also be relevant in the competent classroom.

The threat response is described by Rock (2009) as deadly, impairing creative thinking, creative insight and preventing problem solving, debilitating employees (or learners) when they most need mental capacities. Educators were informed that in the classroom every sentence and gesture could be magnified and combed for meaning by learners. By bringing into conscious awareness potentially fraught interactions, educators were given guidance to calming and reassuring learners. Their behaviour can reduce threats inherent in the classroom.

Just as the animal brain is wired to respond to a predator before it can focus attention on the hunt for food, so is the social brain wired to respond to dangers that threaten its core concerns before it can perform other functions. Threat always trumps reward because the threat response is strong, immediate, and hard to ignore. (Rock, 2009, p.10)

**2.5.2 Kindness.** Trauma is more than what happens to us, it is what we hold inside in the absence of an empathetic witness (Mate, 2010). Recalling the shock of being in an automobile accident, Levine (2010) describes the supportive and calm presence of a pediatrician, who came to his aid. “Her simple, kind face seems supportive and calmly concerned. She takes my hand in hers, and I squeeze it. She gently returns the gesture. As my eyes reach for hers, I feel a tear form...” (p. 5). Feeling emotionally held by this encouraging presence, Levine felt a trembling wave of release move through him, and he took a deep breath. This extraordinary description of healing is described by Levine (2010) as the “power of kindness” (p. 5), defined as “friendliness and thoughtfulness” (*Oxford Advanced Learner’s Dictionary*, 1992, p. 687). This power of kindness could be harnessed in classrooms, making schools a healing place for learners.

**2.5.3 Compassion in education.** Compassion in the classroom means that people are treated with courtesy and dignity, and that time is not wasted on discipline issues but rather on academic progress (Integrated Character Education for Texas Schools, 2010).

The meaning of compassion in education is the same as in all public and private lives: Compassion impels us to work tirelessly to alleviate the suffering of our fellow creatures, to dethrone ourselves from the centre of our world and put another there, and to honour the inviolable sanctity of every single human being, treating everybody, without exception, with absolute justice, equity and respect. (Armstrong, 2011, p. 4)

In considering the importance of compassion in the classroom, Cook (2009), a secondary school pupil in the USA, made an impassioned plea to teachers: “Teachers, do not lose your humanity... Students will be the most engaged when they feel as though you care about them. Don’t be afraid that they won’t respect you; when a teacher makes the effort to make a student feel appreciated, they will only flourish”.

Designing a 12 step programme for attaining compassion, Armstrong (2010) lists several actions which could be taken. These are: Learn about compassion, look at your own world; compassion for yourself; empathy, mindfulness, action, learning how little we know; learning to speak to one another; concern for everybody; knowledge; recognition and loving

enemies. An understanding of respect and healthy interactions is a focus of TA interventions. The autonomous adult in present moment awareness is able to relate better, with kindness and compassion, to learners, without being negatively triggered from past adult or child ego states in a confrontational situation. Teaching and modelling respect is an integral part of Capacitar TP workshops, which begin with healing of the self before healing the world. In TRE, a deep respect and compassion for oneself in the release of tension and trauma should make teachers more aware of and sensitive to the humanity of learners in the classroom.

**2.5.4 Cultural competence.** Even though South Africa has been a democracy since 1994, the legacy of apartheid and the systemic and intergenerational trauma still evident in high-risk schools means that racism is a background context for violence and mistrust in the high schools on the Cape Flats. Incidences of anger and fighting are cultivated by poverty, gangsterism and drug warfare, where shooting and revenge killings take place on a regular basis in the community. Clashes between Coloureds and Xhosa-speaking pupils on the Cape Flats turn violence into racial attacks. The schools which took part in this study have the reputation of being the most violent in the Western Cape.

Cultural tolerance in the classroom is important for competency, humanity and respect. Diversity awareness (Mindell, 2002) is a multileveled approach of noticing cultures, ages, genders, race, sexual orientations, religions, economic backgrounds, jobs, abilities, worldviews and dreams. Mindell suggests a process-orientated approach based on awareness of and revealing the richness of diversity and complexity.

**2.5.5 Emotional and social competence.** In the prosocial classroom model, social and emotional competence is an important contribution to the development of healthy teacher-student relations (Jennings & Greenberg, 2009). Ideally, teachers should understand learner emotions, be aware of associated cognitive appraisals and understand how cognitions and emotions motivate behavior. In the prosocial classroom, teachers should be able to model effective classroom management, understanding the dynamics of classroom conflict. Being models of social and emotional competence themselves, they should be able to implement process-orientated activities, based on their own understanding.

In a study using TA to enhance adjustment in high-risk Filipino college students, Talob (1994) found that groups, although lacking in cohesion and universality, developed deeper understanding, interpersonal learning, altruistic attitudes and inner hope to change for the better. The mental ability variable, however, showed no significance in the study, with results indicating that high mental ability did not show improved adjustment scores compared with

low mental ability. The research concluded that youth adjustment and mental ability are not functionally related, making TA ideal as a culture-fair theory that does not depend on intelligence levels. Cognitive appraisals were part of intervention design in TA. Emotional intelligence and emotional processing were the focus in TP workshops. In the TRE intervention, an increase in self-awareness and the release of tension and trauma in the body should enable teachers to be more in touch with their bodies and emotions.

## **2.6 Chapter Summary**

This chapter dealt with the constructs of stress, burnout, coping and well-being, considering the traumatic environment of the Cape Flats in which the study took place. Focus then turned to teacher well-being and the features of classroom competence, where important concepts were related to practical approaches in interventions.

## CHAPTER THREE

### Stress and Burnout Interventions

*“The conditions at the school are reaching boiling point. I tried today to have a song in my heart, no matter what I am up against, I tried to remain positive, but it is just chipping away, chipping away, chipping away. There’s no resistance left, how can I say, I don’t see a light at the end of the tunnel. It’s just overwhelming - very, very overwhelming,”* (Male educator, Cape Flats, 2011).

#### 3.1 Introduction

An intervention is “a generic term used for any procedure or technique that is designed to interrupt, interfere with and/or modify an on-going process,” (Penguin Dictionary of Psychology, 2001, p. 367). Advances in the understanding of teacher stress are likely to come from understanding how individuals appraise their situation and how this influences attempts to employ effective coping strategies.

In examining the typology of stress management interventions in the workplace, primary, secondary and tertiary interventions have been identified: the first reduces the number of stressors; the second modifies individual responses to stressors and the third intervention minimises the damaging consequences of stressors by helping individuals cope more effectively with the outcomes of stress in employee assistance programmes and counselling (Dewe et al., 2010).

The focus of interventions in South African high-risk communities needs to be contextualised according to how individuals, families and communities are affected by trauma (Kagee & Naidoo, 2004). While priorities such as brief interventions using practical problem solving have been suggested by Crawford-Browne and Benjamin (2002), another focus has been placed on resilience, context and empowerment, working with groups and communities rather than individuals and adopting an ecological view of well-being (Appelt, 2006). The researcher postulates that for educators, the classroom provides a setting in which factors leading to stress and burnout in high-risk communities can be addressed as part of a contextual approach to wellness.

This study considers the effectiveness of TA, TP and TRE stress and burnout interventions in the context of high-risk schools. To date a mixed-method design in the study

of the impact of these specific types of stress and burnout interventions in this cohort has not been researched. Key factors to be considered in the design and implementation of the intervention by the researcher were: theoretical orientation suitable for the Cape Flats, practical application in a demanding school environment and psychological considerations in healing processes of coping with stress and burnout.

### **3.2 Intervention Workshop Theory**

#### **3.2.1 TRE intervention: physiological approach.**

**3.2.1.1 TRE background.** The first intervention, TRE, is based on the psychophysiological premise that chronic diseases are caused by the neurological, endocrinological and anatomic release produced by exposure to traumatic stress (Scaer, 2005). Although our bodies are designed to handle threats, and some anxiety is necessary for optimum functioning and wellness (Arden, 2012), we have what Scaer (2005) describes as a “finite allostatic load” (p. 287) which means that we begin to deteriorate from stress-related disease when we have cumulated the maximum amount of tolerable stress in our bodies. This degree of traumatic life experience defines a person in every way – from conditioned associations and responses to live events, to ‘pet peeves’, sensitivity to smells and choice of dress.

Experiences are frequently stored in nonverbal parts of the body, such as the amygdala and in sensory organs (Baer & Huss, 2008). “Body-based therapies help clients access traumatic experiences that are not yet available for verbal narration and cognitive reflection. Many clients require processes other than talk therapy to make the material available to conscious awareness,” (Baer & Huss, 2008, p. 9). Citing research from dynamic motor theory, Cornell (2003) considers that brain processes are not developed by psychological processes but rather from activities of the limbs and muscles, with movements of the body organising and reorganising the brain. Highlighting Lichtenberg’s 1989 description of the perceptual-affective-action mode, operating without verbal representation or symbolic formation, and Bucci’s 2001 sub-symbolic processing, Cornell (2003) believes we are at the beginning of a coherent theory of the somatic, affective and nonverbal foundation of human functioning. TRE bypass the cortex and elicit neurogenic tremors which release muscle tension, returning the body to homeostasis. By introducing these exercises to stressed and burnt-out teachers, a sense of release should be achieved, returning the body to relaxation and calmness and mitigating emotional states from current or past traumas (Berceli, 2009). As role models for the learners, teachers should cope better with crises in the classroom.

**3.2.1.2 TRE origin and history.** TRE were developed by Berceli (2009) as a result of, on the one hand, an increasing concern with trauma in society and the impact on large populations and, on the other hand, the bio-psychosocial effect of these traumas on clients and the need for social workers and other health care professionals to gain effective tools for dealing with the trauma. According to Berceli (2009), the greatest breakthrough in the field of stress, anxiety and PTSD research has been in the area of biology. Because PTSD causes chemical changes in the central nervous system (CNS) which can have a direct biological effect on health, he believes the long-term and accumulative effects of these chemical changes can cause vulnerability to hypertension, immune deficiency, susceptibility to immunological disorders and infections as well as disturbed pain perception.

Citing Pitman's discovery of this biological dimension of trauma changing public health planning to recognise the importance of defusing the chemical imbalance in the healing process, Berceli postulates in his PhD research that body-based interventions offer the bridge between the psychological and biological (mind/body) relationship of trauma. "By using the technique tested in this research project, an adequate framework within which to understand the importance of including body-work awareness in conjunction with counselling sessions may be enhanced," (Berceli, 2007, p. 11).

**3.2.1.3 Key TRE concepts in stress and well-being.** Due to high adrenal, cortisol and opioid levels, people exposed to multiple traumas for prolonged periods will often experience a loss of neuro-modulation (Berceli, 2010). This is the experience of having an exaggerated response to simple everyday stressors. What occurs is that trauma and stress have become a state of preoccupation for the mind instead of a passing experience. The individual's response to daily events becomes tainted with an unconscious life or death threat. Thus, their responses to minor stressors have an exaggerated reaction as though it is life threatening.

This approach could be of significant in the study of educator response in the classroom, with the accumulation of stressors causing overreaction by teachers to student behaviours. Berceli (2010) believes that traditional stress reduction techniques and general exercises are largely ineffective for people in trauma inducing professions. He states that general physical stress reduction techniques only resolve surface or superficial tensions in the body but do not dissolve deep chronic tension patterns created under prolonged stress. Likewise, he postulates that medication or mind concentration methods of stress reduction are largely ineffective because a traumatic state of preoccupation prevents the mind from relaxing its control for fear that danger may be just on the horizon.

The lack of discharge of autonomic energy after freezing in the human species could be the result of a suppression of instinctual behavior, rather than a functional adaptive mechanism as a result of the evolving frontal neocortex (Scaer, 2007). This author points out that animals in the wild will die if they do not release autonomic energy of the flight/fight/freeze response, with inhibition in humans resulting in a state of helplessness and predisposition to freeze after exposure to stress and trauma. Constraints imposed culturally in order to maintain order, such as educational institutions, could also create a low-level state of helplessness (Scaer, 2007). Educators exhibiting behaviours of helplessness and non-responsiveness to stressors in the classroom could be storing excessive autonomic energy.

**3.2.1.4 TRE in education.** TRE is relatively new to the education field. In a combined social work and kinesiology PhD research project, the effect and potential therapeutic potential of neurogenic tremors on stress levels of university students were examined by Berceli (2007). The Spielberger State Trait Anxiety Inventory [STAI] and the Activation-Deactivation Adjective Check List [AD-ACL] were used to measure anxiety levels of participants. Heart Rate Variability (HRV) was used to measure the physiological states of the participants by analysing the effects of the tremors on the sympathetic and parasympathetic nervous systems.

After performing the exercise routine six times over a two week period, the STAI X-1 showed a significant reduction ( $p < .05$ ) in anxiety-present and an increase in anxiety-absent in both the subscale and total scores. The AD-ACL scores did not reveal any significant changes in the individual categories or subscales. The HRV showed an increase in parasympathetic nervous system activity, but it was not statistically significant. Berceli (2007) concluded that the purpose, etiology and potential therapeutic value of neurogenic tremors were only beginning to be explored and that a hypothesis on these tremors could not be formed on the data available. He suggested additional research be conducted in the fields of psychology and physiology for a conclusive exploration of these tremors.

In 2010 a high school in Phoenix, Arizona, USA, described the benefits of teaching TRE exercises to high school students in an anatomy class. The exercises were reported by the educator to be successful and popular and a surprising and unexpected side effect was improved sleep patterns for learners (Berceli, 2011).

### **3.2.2. TP intervention: emotional approach**

**3.2.2.1 TP background.** The second intervention utilises TP practices in Capacitar workshops, with an emphasis on wholeness and well-being. The focus is on physical health,



emotional balance, mental clarity and spiritual well-being. Healing involves a deeper change in the whole system - from the person, their relationships, and their environment, down to cellular levels (Cane, 2000). As individuals heal, they are able to reach out to their relatives, community and the larger world to bring health and wholeness to the human family.

In the schools' context, introducing teachers to transpersonal practices should not only facilitate connection between body, mind and emotions, but also equip them with a set of tools learnt in workshops for use in the classroom. Emotional literacy, mental clarity, awareness of the body and spiritual connection are qualities which can be utilised in under-resourced and overcrowded classrooms, where discipline, violence and learning difficulties as a result of traumatic home and social environments are a stark reality in many schools on the Cape Flats.

**3.2.2.2 TP origin and history.** TP focuses on the essential self. "Trans" comes from the Latin, meaning "across" (South African Pocket Oxford Dictionary, 2002. p. 970) and "persona" means "mask" or "character in a play," (p. 664). The transpersonal techniques drawn from Capacitar workshops are centred around the experience of spirituality and self-transcendence. As part of positive psychology, or psychofortology, the emphasis is on health, supported by psychoanalytic, existential and humanistic theories.

Transpersonal psychology is based on the work of Jung, Frankl, Maslow and Assagioli, who emphasised wholeness and well-being. These theorists implicitly or explicitly acknowledged two overlapping processes of growth: The emergence of personality and the alignment of that personality with a transcendent, spiritual centre.

According to the Institute of Transpersonal Psychology (ITP) (2008), the term originated in the work of Jung (1981), who coined 'transpersonal unconscious' as a synonym for the 'collective unconscious', which he identified as the source of life and vitality. Transpersonal psychology examines the dynamic relationship between conscious and unconscious processes as in psychoanalysis, but also focuses on the role of the unconscious in spiritual development. Like behaviourism, it researches human action as well as observable behaviour, but also emphasises the centrality of consciousness and the mystery of the inner world. Like humanistic psychology, TP affirms the potential for self-growth and change, but also investigates how people transcend the ego and normal psychological health to understand the connection with wider aspects of human life, psyche and cosmos (ITP, 2008).

Maslow's (1959) research was the key stimulus in the development of TP. He argued that the highest of human possibilities have been ignored and that the growth-orientated nature of the human psyche needs to be studied rather than mental illness and pathology. He turned the focus on aspects such as peak experiences, inspired creativity and other experiences, where the self or identity is transcended.

**3.2.2.3 Key TP concepts in stress and well-being.** TP assists in an individual's growth process by facilitating a shift in self-awareness and healing. This is done through body work, where simple techniques, such as acupuncture, release trauma from the tissues and assist in restructuring them in consciousness. As the person experientially starts to feel calmer, unhealthy emotional patterns and blocked energy centres are released. The TP integrative, rather than reductionist view, sets out to develop human beings in all aspects of existence: emotional, spiritual, creative, rational and intellectual. The rationalistic and scientific approach to health has overshadowed this focus on ancient wisdom and spiritual traditions, resulting in a specialised but fragmented view of the human experience.

TP, notably psychosynthesis, has also been used in programmes addressing burnout prevention (Van Dierendonck, Garssen, & Visser, 2005). Johnson (2010) reported that the term psychosynthesis, coined by Assagioli (1999), addresses both the process of personal growth in personality integration and self-actualisation, as well as transpersonal development. This dimension, described by Maslow (1959) as peak experiences, comprises inspired creativity, spiritual insight, and unitive states of consciousness. In addition, psychosynthesis recognises the process of self-realisation, of contact and response with one's deepest callings and directions in life. This can involve personal and transpersonal development. Research results showed that a psychosynthesis-based prevention programme might be an effective instrument in reducing burnout and enhancing happiness, emotional intelligence and feelings of spirituality (Van Dierendonck et al., 2005).

Cane (2000) points out that most mind/body research applies to improving wellness and quality of life for middle-class Americans. The research, therefore, fails to consider the conditions in alternate cultures and settings. An holistic and indigenous approach of mind-body-spirit integration is needed in the context of Africa. Eagle, as cited in Cane (2000), suggests the integration of Western and indigenous South African systems of healing in working with the traumatised. Indigenous healing systems, located within African cosmology, can act to complement and supplement conventional Western psychotherapeutic interventions.

In promoting an holistic approach, indigenous healing practices may reach under-resourced communities and create the conditions for personal and community integration. Some (1999) underlines the importance of nature, ritual and community in the indigenous healing practices of Africa – elements present in the TP workshops. Some techniques in Capacitar workshops draw on energy body practices, such as Emotional Freedom Techniques, which uses imaginal and narrative-generated exposure, together with interventions which reduce hyperarousal, such as acupuncture and related techniques (Feinstein, 2008). In reviewing preliminary evidence of its efficacy, this author concludes that limited scientific evidence, combined with extensive clinical reports, suggest that energy medicine holds promise as a rapid and potent treatment for a range of psychological conditions.

**3.2.2.4 TP in education.** The capacity for self-transcendence and self-realisation in education is considered by Roberts and Clark (1975). Through relaxation and concentration, guided fantasy and creativity, focus is shifted from external to internal awareness. Altered states of consciousness through dreams, meditation and spirituality are explored for controlling consciousness without the use of drugs.

The importance of reflection for enhancing professional growth of teachers is a focus for research by Korthagen and Vasalos (2005), concurring with the psychological trend to focus on people's strengths rather than deficiencies. The emotional freedom technique (EFT), or tapping, which is taught in Capacitar workshops, has been used to treat teacher burnout (Reynolds & Walden, 2010). EFT also proved effective in treating Presentation Anxiety Syndrome (PEAS) in university students, with significant reductions reported by Boath, Stewart and Carver (2012) in Subjective Units of Distress (SUDS) ( $p=0.002$ ) and Hospital Anxiety and Depression Scale (HADS) ( $p=0.048$ ). TP has been taken into the classroom by Cane and Duennes (2005), making physical techniques such as emotional literacy (finger holds); pain relief (acupuncture) and touch (massage) part of educational curriculum.

### **3.2.3 TA intervention: cognitive approach**

**3.2.3.1 TA background.** The third intervention, TA, is based on observation and social psychology. It is relatively easy to replicate and teach, making the theory testable in principle. Berne's philosophical base draws from a triad of empiricism, which relates theory to the real world; phenomenology, which advocates understanding the world by direct personal experience and existentialism, holding self-responsibility and authenticity in high esteem (Stewart, 1992).

**3.2.3.2 TA origin and history.** Eric Berne was born Eric Bernstein in Montreal, Canada in 1910. He became a Doctor of Medicine and Master of Surgery at McGill University and moved to the United States shortly after graduating, beginning a psychiatric residency at Yale University School of Medicine. On becoming a US citizen, he changed his name to Eric Berne. He joined the US Army Medical Corps during World War II and began to practise group psychotherapy, compiling the critique of psychiatry and psychotherapy that would provide the basis for his writing. He died in 1970 of a heart attack.

**3.2.3.3 Key TA concepts in stress and well-being.** With its focus on transactions between people, TA offers a relevant approach to the dealing of stress in Lazarus and Folkman's (1984) transactional model. Despite highly intellectual concepts, its strength is in its practicality and rationality, which can be understood by all ages and mental abilities (Talob, 1994). This researcher urges future studies to examine TA as a dynamic process, not just a fixed body of knowledge or a mere theory of personality. It is indeed the aim of this study to focus on the practical process strengths of this theoretical functional model. A distinction is made in TA between structural model, with a focus on content, and the functional model with its focus on process. "Interpersonal aspects of TA work require the functional model; intra-psychic matters need to be studied in terms of the structural model" (Stewart & Joines, 2009).

Philosophical assumptions of TA are about people and their interactions: People are OK, everyone has the capacity to think; people decide their own destiny and these decisions can be changed (Berne, 1961). From these assumptions follow two basic principles of TA practice: the contractual method and open communication, which underline workshop interventions in this study.

Key TA concepts relevant to human interactions chosen in this study are setting up contracts, functional ego-states, transactions and games, life positions; drama triangle (Karpman, 2007) and winner's triangle. Other TA concepts presented in workshops were: stroke theory, drivers and working styles.

Functional ego-states originate from the ego-psychology of Federn (1952) and Weiss (1966), who in turn credit Freud, whose ego is purely abstract (Stewart, 1992). Berne added the crucial quality of observability into categories of ego-states, describing them as distinctive sets of behaviour and internal experiences. According to Berne (1961), each ego state is as a set of feelings, attitudes and behaviour patterns which either resemble the

Parent<sup>4</sup>, depicting the parent figure; the Adult, adapted to the current reality; or the Child, which are relics from the individual's own childhood.

In terms of stress and burnout, a description and demonstration of ego-states interaction between teacher and learner should increase the educator's awareness of feelings, experience and behaviours which are ever-changing and encourage a moment-to-moment healthy Adult exchange in the present reality. Even though educators may consider their authoritarian role in the classroom to be similar to a controlling Parent, interactions can be supportive rather than dictatorial and bullying. Similarly, learners can acquire Adult behaviours rather than act out the less healthy compliant or rebellious Child feelings and attitudes. A situation of mutual OK-ness would be the goal to reduce stress and burnout in the classroom.

Games are played in TA terms when actions have an ulterior motive, are outside Adult awareness, do not become explicit until players switch behaviours and result in everyone feeling confused, misunderstood and wanting to blame the other person (Stewart & Joines, 2009). They are repetitive sequences of out-dated strategies, in which both parties experience racket feelings of childhood, rather than authentic feelings of the present. In stressful classroom interactions, games between educators and learners were examined in workshop interventions. As a decisional model, there is the belief that people can change by gaining insights into old ways of reacting and by actively deciding to change these patterns into real and lasting behaviours.

The drama triangle explains simply what position people take when playing games. They either are the persecutor, putting people down and belittling them; the rescuer, helping people from a one-up position or the victim, who does not believe they can cope on their own (Karpman, 2007). Players switch from one role to another in games, being inauthentic and acting out past strategies from previous experiences. A winner is someone who accomplishes his declared purpose in a comfortable, happy and smooth way (Stewart & Joines, 2009). In the winner's triangle, assertion, caring and vulnerability are qualities which lead to positive responses and transactions (Choy, 1990). Strokes mean recognition and appreciation, "touching literally or metaphorically," (Stewart, 1992, p.13) and can be positive or negative, verbal or non-verbal, conditional or unconditional, drawing on a person's need for stimulation. In fact, any transaction is an exchange of strokes (Stewart & Joines, 2009).

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<sup>4</sup>Ego states are written with a capital letter

Therefore, all interactions in the classroom can be viewed as strokes, and an understanding and awareness of the quality of strokes between educator and learner should give greater insight into stressful transactions.

Quality and intensity of strokes are relevant, as stroking reinforces behaviour, so encouragement, for example, will improve behaviour while insults will have the opposite effect. As we all have a stroke quotient depending on life experiences, we may filter strokes according to our own needs, so sensitivity to context of giving and receiving strokes is important. Generally, a person needs both positive and negative conditional and unconditional strokes (Stewart & Joines, 2009) in order to learn and function optimally. However, due to deprivation, learners may operate in a stroke economy, where they do not expect positive strokes and negative strokes are used as a means of control.

Life scripts are important in TA because they give an understanding of behaviour. According to Berne (1961), life script originates from the preconscious and is based on decisions made in childhood, reinforced by parents, justified by subsequent events and culminating in a chosen alternative. The script is what is planned, and the life course is what actually happens according to script.

Scripts are either winning, losing or non-winning, banal, meaning that people either fulfil their life purpose, fail to accomplish declared purposes or are ‘middle-of-the-roaders’, not taking risks. When we get into script, we are basing our lives on early decisions not necessarily relevant to the here and now. According to the TA stress scale, the more stress involved in a transaction, the more a person is in script. Stress does not cause the script behaviour, the movement is decisional, although out of awareness (Steward & Joines, 2009).

Injunctions are unfair negative commands from parents, typically telling a child not to be smart, or to get lost, or to stop complaining, for example. What decisions the child makes about these injunctions are described in TA as ‘compound’ and are used in script analysis to assist the adult to understand behaviours originating from negative prior messages.

Distorted feelings, behaviours and thoughts by script-bound people result in racket feelings, which were used by Berne (1961) to describe feelings taught and encouraged in the family of origin and used in adult life in an exploitative way, out of the person’s awareness.

In contrast, authentic feelings as anger, sadness, scared and glad, plus physical sensations like relaxed, hungry, tired, sleepy are experienced in childhood before they were censored. While anger, for example, can be both an authentic and racket feeling, the important

distinction between them is that authentic feelings are appropriate as a means for here-and-now adult problem-solving, while expression of racket feelings is not. Authentic feelings also solve problems, while racket feelings leave the person with unresolved emotions out of an appropriate time-frame.

Drivers are behaviour sequences followed by people before they go into script. Originating from script, these drivers represent an outlook creating a response, such as ‘be perfect’; ‘please others’; ‘be strong, try hard, please others’ and ‘try hard, please others and be perfect’. Some parents give their children allowers, such as ‘you are good enough as you are’ or ‘please yourself’, which allows the person to step out of driver behaviour (Stewart & Joines, 2009). Working through these reactions, educators will be given insights into their reactions and behaviours.

Discounting lies at the heart of stressful transactions because represents the way we react to problems. It has been defined as ‘unawarely ignoring information relevant to the solution of a problem’ (Schiff, cited in Stewart & Joines, 2009). These authors describe four passive behaviours as: Doing nothing; overadaptation; agitation; incapacitation or violence. These behaviours in the classroom can be discussed and role-played into more positive transactions.

The basic assumption that each person is born OK and that each ego state has rights is the altruistic basis of TA theory that links freedom and responsibility (Drego, 2005). The author states that transactional norms of personal autonomy provide guidelines for strategies of social autonomy, empowering the poor, marginalised, rejected, the minority and disadvantaged. As a tool in the classroom, it can empower teachers with the freedom to be responsible, which is the foundation for building families and communities of nurturance in which personal OKness can thrive (Drego, 2005).

**3.2.3.4 TA in education.** TA is described by the ITAA (2011) as a practical educational psychology that transforms philosophy and principles into daily practice in a flexible and creative way. According to the Association, it leads to an understanding of how people function and helps connect human behaviour, learning and education. It is empowering for both teacher and student, enhancing interaction and mutual recognition.

The Association lists key philosophical concepts underpinning educational TA as: Effective educators offer empathic acceptance of all human beings as people, with respect for their dignity; people at any age and stage can learn to take responsibility for their own behaviours; educational difficulties can be addressed effectively with co-operative goodwill

and a coherent theoretical framework for the human dynamics involved. The contractual process of educational TA means that all parties know where they stand, and what agreements have been made for what purposes. Throughout the process TA ideas and methods are described as being used openly to promote informed co-operation and the sharing of power between all parties.

Based on the experience of introducing TA into schools, Barrow and Newton (2004) recognise it as an approach that makes a profound impact on how schools respond to the complexities of the central emphasis on social inclusion. They describe helpful TA contribution to school life as: Promoting discussion and confidence in developing emotional literacy between staff and learners; providing a framework for managing conflict; presenting an alternative model for understanding and using praise; boosting learner confidence and promoting mental health in adults and children in schools as well as ensuring effective arrangements for working in partnerships with parents, learners and others.

TA in education and organisations operates at the social rather than psychological level, dealing with overt rather than covert agendas (Stewart & Joines, 2009). This means practically that the facilitator in groups will work on effective problem solving by thinking and acting in the present, rather than exploring past unresolved issues. Ego-state diagnosis is behavioural and social rather than historical or phenomenological. “Autonomy implies clear thinking and effective problem-solving. The educator aims to help students develop these abilities. Therefore, autonomy as an overall goal is as relevant in education settings as it is in clinical work,” (p. 281). As an intervention in high-risk schools, where violence and discipline are daily challenges in the classroom, TA could provide an effective means for managing stress and burnout of teachers.

### **3.3 Intervention Workshop Design**

All three stress and burnout intervention workshops in this study focus on stressors and coping strategies of educators, with major goals being to develop positive attitudes and improved interpersonal skills. The three interventions used group process to facilitate change; and sought to help participants transfer what is learnt to everyday challenges in the classroom and in life. By mirroring challenges faced in the classroom, the workshops aimed to help teachers with daily struggles.

The aim of each workshop was to offer a space for self-reflection and discussion with group support; introduce the teachers to the physiological, emotional and cognitive



approaches to dealing with stress and burnout and give them an understanding of the specific intervention offered at their school. After a general introduction, each workshop focused on theoretical and practical elements of dealing with stress and burnout according to one of the three models. Each workshop was run by one or two facilitators trained in intervention implementation, depending on availability. The researcher attended workshops as observer, and from time to time assisted with facilitation when trainers were absent due to other work commitments.

Workshops were designed primarily by the researcher, with practical input from facilitators. A main focus was on large-group discussion, with inter- and intra-personal processing. Theoretically and practically the researcher had worked with and trained in TRE, TP and TA for several years in diverse contexts. She was mindful of how each theoretical model presented to educators could assist them to understand educational challenges in traumatic contexts. The aim of designing the TA, TP and TRE interventions was an attempt to focus on and measure the impact of primarily physiological, emotional and cognitive approaches in dealing with stress and burnout and highlight potentially effective strategies for prevention interventions for this cohort.

An important focus in design was appreciative inquiry (AI), which encouraged people to identify their achievements, finding resilience, adaptation and innovation in looking at strengths (Elliott, 1999). While mainly used to date in business, AI is starting to find application in communities addressing challenging issues, such as poverty alleviation. Criticising participatory methodologies, on the one hand, as often being problem-focused and disempowering, Elliott questions such projects' sustainability. AI, on the other hand, creates a developmental pathway "based on what is right, rather than what is wrong" (p.vi). In choosing the AI approach to analysis of stress and coping, the researcher hoped to build on the strengths of educators and create workshop environments conducive to positive change, rather than being problem focused, giving constructive insights into classroom behaviours.

### **3.4 Outline of Intervention Workshops**

Content and design of the three workshops follows: TRE, TP and TA, with a detailed introduction outlined in Appendices 1 – 3.

### **3.4.1 Trauma release exercise workshops.** (Appendix 1)

**3.4.1.1 Workshop 1.** Welcome and introductions; focus on the three stress and burnout models; history of TRE and explanation of tremoring; trauma release exercises; activation of tremors; quiet time; closure; self-reflection; tea.

**3.4.1.2 Workshop 2.** Welcome and check-in; triggers, trauma and the body and stress responses; trauma release exercises; activation of tremors; quiet time; closure; self-reflection, tea.

**3.4.1.3 Workshop 3.** Welcome and check-in; theory of fascia and physiology; trauma release exercises; activation of tremors; quiet time; closure; self-reflection; tea.

**3.4.1.4 Workshop 4.** Welcome and check-in; groundedness and centredness as qualities for educators; trauma release exercises; activation of tremors; quiet time; closure; self-reflection; tea.

**3.4.1.5 Workshop 5.** Welcome and check-in; classroom competency discussion; trauma release exercises; activation of tremors; quiet time; closure; self-reflection; tea.

**3.4.1.6 Workshop 6.** Welcome and check-in; what the course has meant so far; personal and classroom application; trauma release exercises; activation of tremors; quiet time and closure; self-reflection; tea.

**3.4.1.7 Workshop 7.** Welcome and check-in; trauma responses in the body – disassociation, freezing and flooding; trauma release exercises; activation of tremors; quiet time and closure; self-reflection; tea.

**3.4.1.8 Workshop 8.** Welcome and check-in; questions, answers and comments on self-process; trauma release exercises; activation of tremors; quiet time; closure; self-reflections; tea.

**3.4.1.9 Workshop 9.** Welcome and check-in; theory on self-awareness and higher consciousness; application in the classroom; trauma release exercises; activation of tremors; quiet time; closure; self-reflection; tea.

**3.4.1.10 Workshop 10.** Welcome and check-in; what the course has meant on a personal level and in the classroom; way forward in the school; trauma release exercises; activation of tremors; quiet time; handing out of certificates; closure; self-reflection; tea.

### **3.4.2 Transpersonal psychology workshops.** (Appendix 2)

**3.4.2.1 Workshop 1.** Tea; introductions; logistics; workshop agreement; mindfulness meditation; general outline of three stress and burnout models; focus on the emotional brain; brief history of Capacitar and transpersonal psychology; tai chi; closure; self-reflections.

**3.4.2.2 Workshop 2.** Tea; welcome and check-in; mindfulness meditation; outline of workshop; tai-chi; emotional intelligence; Instinct to Heal theory; finger holds; song and dance; closing circle; self-reflections.

**3.4.2.3 Workshop 3.** Tea; welcome and check-in; mindfulness meditation; outline of workshop; tai-chi; emotional freedom technique theory, practice and discussion; the holds; song and dance; closing circle; self-reflections.

**3.4.2.4 Workshop 4.** Tea; welcome and check-in; mindfulness meditation; outline of workshop; tai-chi; acupressure points; theory and discussion on medical vs indigenous healing model; song and dance; closing circle; self-reflections.

**3.4.2.5 Workshop 5.** Tea; welcome and check-in; mindfulness meditation; outline of workshop; tai-chi; challenges of making the classroom a safe and non-threatening space – small group discussion; safe space meditation; song and dance; closing circle; self-reflections.

**3.4.2.6 Workshop 6.** Tea; welcome and check-in; mindfulness meditation; outline of workshop; tai-chi; half-way reflection of what course has meant to participants; revision of transpersonal techniques learnt to date; song and dance; closing circle; self-reflections.

**3.4.2.7 Workshop 7.** Tea; welcome and check-in; mindfulness meditation; outline of workshop; tai-chi; map of human consciousness and reflection of consciousness of personal life, school, community, country; hand massage; song and dance; closing circle; self-reflections.

**3.4.2.8 Workshop 8.** Tea; welcome and check-in; mindfulness meditation; outline of workshop; tai-chi; compassion; competency in classroom discussion; head, neck, shoulder release and massage; song and dance; closing circle; self-reflections.

**3.4.2.9 Workshop 9.** Tea; welcome and check-in; mindfulness meditation; outline of workshop; tai-chi; self-care; secondary and vicarious trauma theory; massage of choice by teachers (head, neck, shoulder, or hand); song and dance; closing circle; self-reflections.

**3.4.2.10 Workshop 10.** Tea; welcome and check-in; mindfulness meditation; outline of workshop; tai-chi; compassion meditation; the way forward in the classroom; song and dance; hand out of attendance certificates; closing circle; self-reflections.

### **3.4.3 Transactional analysis workshops. (Appendix 3)**

**3.4.3.1 Workshop 1.** Tea; introductions; logistics; contracting; general outline of three stress and burnout models; focus on the cognitive brain and brief history of TA; introduction to functional ego states; self-reflections; closure.

**3.4.3.2 Workshop 2.** Tea; welcome and check-in; functional fluency model; life positions; personal, classroom and school transactions; closure; self-reflections.

**3.4.3.3 Workshop 3.** Tea; welcome and check-in; contracting in the classroom; closure; self-reflections.

**3.4.3.4 Workshop 4.** Tea; welcome and check-in; stroke theory, drama triangle and winner's triangle; closure; self-reflections.

**3.4.3.5 Workshop 5.** Tea; welcome and check-in; SCARF; discussion of competent classroom, role play and application in the classroom; closure; self-reflections.

**3.4.3.6 Workshop 6.** Tea; welcome and check-in; summary of what has been learnt so far and comments on usefulness in personal lives, the classroom and school; life script; script and stress; listening skills; closure; self-reflections.

**3.4.3.7 Workshop 7:** Tea; welcome and check-in; cycle of permissions; stages of development; relevance in the classroom; closure; self-reflections.

**3.4.3.8 Workshop 8.** Tea; welcome and check-in; drivers and working styles of teachers; closure; self-reflections.

**3.4.3.9 Workshop 9.** Tea; welcome and check-in; discounting; relevance in the classroom; contracting in the classroom; closure; self-reflections.

**3.4.3.10 Workshop 10.** Tea; welcome and check-in; classroom competency; taking TA forward in stress and burnout prevention, reaction and rehabilitation; handing out of attendance certificates; self-reflections; closure.

### **3.5 Chapter Summary**

Each intervention workshop theory was described, covering background, origin and history, key concepts in stress and burnout and approaches in education. Design details were then described, with an outline of the contents of the 10 sessions which constituted the TRE, TP and TA workshops.

## CHAPTER FOUR

### Methodology

*“Mixed-methods research can be viewed as resolving to some extent the ‘paradigm war’ between functionalist and interpretive approaches, but there has not been an abatement in the hostilities, despite the reported rise in mixed-methods articles which have increased three-fold between 1994 and 2003,”* (Bryman, 2009, p.15).

#### 4.1 Introduction

Several factors need to be considered in the formulation of a research design. These include the worldview assumptions of the researcher; strategies of enquiry; methods of data collection, analysis and interpretation; the nature of the research problem, the researcher’s personal experiences and the audience (Creswell, 2009).

#### 4.2 Mixed Methodology

Social research is complex, with people’s statements seldom being straightforward and linear. Depending on the enquiry’s methodological approach, there are a number of options for analysis. The analysis process is the “heartbeat” of the research, with the quality of the analyst’s thinking being evident (Creswell, 2003, p. 6).

In this study, a mixed-method research design was adopted (see Table 4), combining both quantitative and qualitative approaches, used in tandem to strengthen the research beyond the use of only one methodology. In addition, methods were mixed within the two strategies: statistical and coding analysis in the quantitative study, and thematic analysis in the qualitative study. The worldview assumption of the researcher is one of pragmatism, which is non-commitment to any one system of philosophy and reality (Creswell, 2009). In considering social and historical contexts, there is a postmodern slant to the approach, reflecting social justice and political aims. “Pragmatism opens the door to multiple methods, different worldviews and different assumptions, as well as different forms of data collection and analysis,” (Creswell, 2009, p. 11). Underlying this strategy is a larger, transformative objective of advocating for educators who are working in high-risk, traumatic classroom settings, seeking to facilitate a more competent environment for teaching and learning.

In considering different reasons for electing to use mixed methods, it has been suggested by Mayring, Huber, Gurtler, and Kiegelmann (2007) that specific studies should inform the process rather than researchers taking theoretical stances out of context. In considering the context of this study, there is juxtapositioning for transformative insights (Shank, 2007). This is more than elaboration or enhancement, which allows the contrasting of different areas of understanding to establish how one might inform the other. It satisfies “the powerful compulsion within the human mind to reconcile juxtaposed modes of understanding within some common framework,” (Shank, 2007, p. 8).

Table 4

*Overview of Mixed-Methods Research Methodology*

Schools	Interventions	Qualitative methods	Quantitative methods
School 1: TRE - 17 educators	Trauma Release Exercises (TRE)	Focus group: thematic analysis	Statistical analysis: Perceived Stress Scale
School 2: TP - 16 educators	Transpersonal Psychology (TP)		Burnout: Personal, Work and Client (Learner); Well-being
School 3: TA - 10 educators	Transactional Analysis (TA)		Coding analysis:
School 4: Control - 20 educators			Workshop assessment questionnaire and appreciative inquiry reflections on stressors

The concept of mixed-methods design is said to have originated in 1959, when Campbell and Fiske used multiple methods to study validity of psychological traits. They encouraged others to employ their multi-methods matrix to examine multiple approaches to data collection. Additional reasons emerged from the original concept of triangulation, such as one method informing the other, or serving a larger, transformative purpose (Creswell, 2003). The pragmatist stance means less emphasis on philosophical issues and debates and more focus on practical issues, such as technical decisions about the appropriateness of methods for answering research questions, or ensuring continuing funding for a project (Bryman, 2009). The researcher adopts the post-positivist view which accommodates qualitative research more than positivism, with the assumption that that there cannot be theory-neutral observation

(Wacquant, cited by Bryman, 2009). Indeed, competing paradigmatic positions are a “cause for celebration”, offering the chance to examine the social world through different lenses (Bryman, 2009, p. 23).

Burnout research utilising mixed-methods investigations includes a study of information technology workers (Schwartz-Cook, 2006) and secondary school teachers (Van Tonder & Williams, 2009). In the former study, qualitative and quantitative measures identify factors that predict burnout in the target population. The findings indicated that organisational politics and menial tasks interfering at work are most strongly related to burnout. Role ambiguity, role conflict, job security, work overload, promotion prospects, an understanding manager and fair rewards are all significantly related to burnout as well.

In the latter study, a mixed-methods design in a predominantly qualitative methodology was used to explore the probable reason for burnout among 59 educators from three urban secondary schools in Gauteng, South Africa. Quantitative data comprised the Maslach Burnout Inventory, together with qualitative rich data work descriptions. Semi-structured interviews were also conducted with five participants, who tested highest on the burnout indicators. A negative learner profile and workload were the most frequently cited reasons for potential burnout. Practical implications were that burnout requires considered attention and aggressive context-specific intervention to contain its negative impact on both the educator and the student learning experience.

The concurrent mixed-method strategy of enquiry adopted in this study uses data in multiple ways to inform and guide the research process. The researcher, for example, drew on quantitative content coding analysis of workshop and appreciative inquiry questionnaires and qualitative thematic analysis of focus groups interviews, to better understand the data generated. In differentiating codes from themes, it is suggested that codes “provide a transparent window to something that lies behind participants’ experiences”, while thematic analysis “gives access to how the social world is lived, not simply how people talk about it” (Silverman, 2011, p. 214). The aim was to arrive at a deeper understanding of the impact of different interventions on educator stress and burnout in high-risk schools. The mixed-methods approach yields results with greater significance than separate quantitative and qualitative methodologies. For practical purposes, however, research methodology was considered under these separate categorical heading before a consideration of combined results for each intervention. Analysis of different research methodologies follows in the section after demographic details of participants.

### 4.3 Demographic Details of Participants

**4.3.1 Intervention and control groups.** Sixty-three educators participated in this study, constituting three intervention groups with a total of 43 educators and a control group of 20. Group 1 was the TRE group with 17 educators, Group 2 was the TP group with 16 educators, Group 3 was TA with 10 educators and the control group was at a secondary school in the area of the intervention schools (Table 5). The control group was offered an introductory workshop to all interventions after the completion of the study, with the option of more in-depth training.

Both sexes were almost equally represented in total in all these groups (men, n=32; women, n=31). However, group distribution varied, with two groups (TRE and TP) having a majority of women, and two groups – control and TA, having more men. Most participants were married (n=48; 76%), with a few single, divorced or widowed. Overall, teachers were Christian (n=41; 65%) with most others being Muslim. In most groups, the majority of teachers were aged between 40 and 50. The TA intervention had older participants, with 40% of teachers over 50.

Most teachers participating had been involved in teaching for between 20 and 30 years (n=29; 46%), with 8% (n=5) of participants teaching for over 30 years in the TRE and control groups. A small number of educators (n=10; 16%) had taught for less than 10 years, with 50% (n=5) being in the control group (See Figure 4).

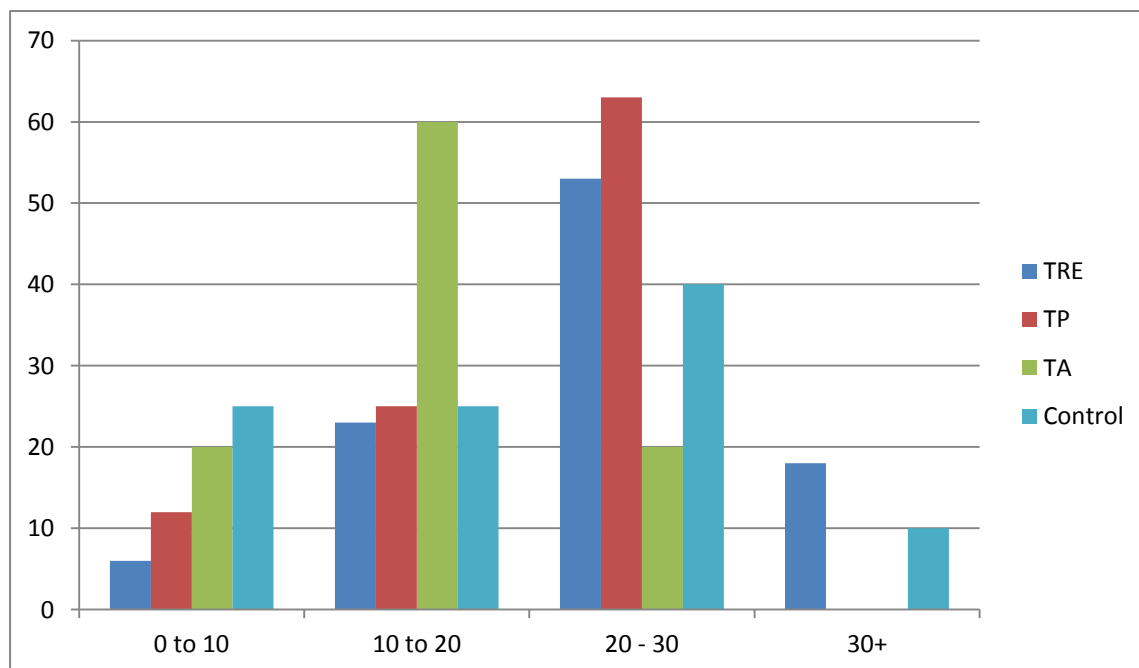


Figure 4: Number of years' teaching, intervention and control groups.



Table 5

*Demographics of Intervention and Control Groups*

Groups		TRE		TP		TA		Control	
		f	%	f	%	f	%	f	%
Gender	Male	8	47	7	41	6	58	11	55
	Female	9	53	9	59	4	42	9	45
	n	17		16		10		20	
Marital status	Single	3	18	3	19	2	20	4	20
	Married	12	70	13	81	7	70	16	80
	Divorced	2	12	0		0		0	
	Widow	0	0	0		1	10	0	
Race	Coloured	16	94	14	87	10	100	16	80
	Black	1	6	2	13	0		3	15
	White	0		0		0		1	5
Religion	Christian	10	59	10	62	5	50	16	80
	Muslim	6	35	6	38	4	40	3	15
	Other	1	6	0		1	10	1	5
Age	20-30	0		1	6	0		1	5
	30-40	2	12	1	6	0		3	15
	40-50	10	59	11	69	6	60	12	60
	50+	5	29	3	19	4	40	4	20
Teaching years	0-10	1	6	2	12	2	20	5	25
	10 to 20	4	23	4	25	6	60	5	25
	20-30	9	53	10	63	2	20	8	40
	30+	3	18	0		0		2	10

#### 4.4 Research Design

Research design comprised analysis and interpretation through quantitative and qualitative methods, preceded by a contextual analysis of high-risk schools, which was composed from text data supplied in the demographic questionnaire (Appendix 4).

**4.4.1 Contextual analysis.** A text portrait technique is suggested by Henning (2004) in her qualitative global analysis approach drawing mind-maps of data, where she includes a portrait of the research participant with the setting. In this study a contextual, not participant analysis is portrayed as a backdrop to the data, comprising the following information: main

teaching stressors; main life stressors; ways of coping with stressors; definition of well-being and burnout assessment.

**4.4.2 Quantitative methodology.** Quantitative content analysis of stress, emotional responses, classroom competency and coping followed the steps suggested by Silverman (2011), based on the work of Bauer (2000) and Marvasti (2004). It is recommended that particular texts are selected relevant to the research problem. A workshop assessment questionnaire (Appendix 9) asking for response to the intervention and an appreciative self-inquiry questionnaire (Appendix 10), seeking reflection of stressors and ways of coping over the previous week, were used as text for content analysis. As these questionnaires were voluntary, not all teachers filled them in every time. Some educators took them home to reflect upon, and returned them during the course of the following week. Most workshop questionnaires were filled in regularly, but some educators only reflected on their stressors and coping strategies at the start, middle and end of the interventions. As a small sample of teachers participated in each intervention (n=10 to n=17), the amount of data was deemed manageable.

A coding frame (categorisation scheme) was then constructed to fit both the theoretical considerations and the materials. The codes were tested for ambiguities and all materials in the sample were coded, establishing the reliability of the process as much as possible. A data file was then set up for the purposes of statistical analysis. Both the rationale of the coding frame and frequency distribution of all codes are given with reliability of the coding process.

While this method is described by Marvasti (2004) as convenient in simplifying large amounts of text into organised segments, fitting data into operationalised predetermined categories, rather than the participants' interactional deployment of categories, renders the theoretical base unclear and conclusions drawn could be considered trite (Silverman, 2011). In listing codes, the researcher illustrated with brief extracts from participants to better describe the meaning of the code. For example, under the theme, Stressors and the code, Societal Problems, the quotation "*Suffering children*" gives greater understanding (Appendix 11, Table 8).

Descriptive and inferential statistical analysis of stress, burnout and well-being, pre- and post-interventions were then utilised in the assessment of the impact of TRE, TP and TA psycho-educational workshops on educators. Methods of data collection included a demographic questionnaire and quantitative pre- and post-intervention measures, assessing the two main constructs: stress (Appendix 5) and burnout (Appendix 6), together with a well-

being measure<sup>5</sup>. A detailed account of quantitative methodology follows. This describes the following aspects: participants; interventions; variables; measures; design; procedure; instruments; statistical analysis; validity and reliability.

**4.4.2.1 Participants.** Six high schools in high-risk areas on the Cape Flats, within a 10km radius of each other, were randomly selected to take part in the study. Of the six approached, five agreed to take part, with one school volunteering to be the control group. In the fifth school a small pilot group of teachers (n=7) volunteered to take part, and as they were unable to join other groups due to school constraints, they attended a three model intervention, facilitated and designed by the researcher at their school. This data was not included in this study due to the experimental nature of the workshop and the small number of participants.

A preliminary meeting was held in each school at which the outline and objectives of the research were explained to all staff members, who were encouraged to take part in the study. While headmasters endeavoured to get teachers to participate during staff development periods, many decided not to join when it was pointed out that participation was voluntary. A total of 63 educators volunteered to take part in the research as part of three intervention groups and a control group.

**4.4.2.2 Interventions.** Because of the logistical constraints (for instance, differing timetables at the schools), random assignment of participants to intervention groups was not feasible. Instead interventions were randomly assigned to schools, depending on the availability of teachers and facilitators. Most intervention workshops took place from 14h30 for an hour and a half on a Tuesday, Wednesday or Thursday, with two interventions, transpersonal psychology and transactional analysis, taking place at the same time, which limited the number of workshops attended by the researcher. In all instances the researcher provided tea and ensured materials were printed and facilitators well-prepared. The largest groups were TRE (n=17) and TP (n=16), followed by TA (n=10). A few educators joined the workshops but due to various unspecified causes, which were not elicited for ethical reasons, discontinued.

**4.4.2.3 Variables.** The independent variables were the treatments, or interventions given to the pre-assigned groups: that is, TRE, TP and TP based interventions. The dependent variables were the response or the criterion variables presumed to be influenced by the

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<sup>5</sup> Copyright restrictions prevent inclusion of the Friedman Well-being Scale (Friedman 1992) as an Appendix

independent treatment condition. In this study, the measured dependent variables were stress, personal, work and learner burnout and well-being.

**4.4.2.4 Materials.** The three 10 week workshop interventions, spread over one to two terms depending on educator availability, took place in staff-development time allocations or after school hours, on one day a week for one and a half hours, with 15 hours in total. Assessment of the dependent variables was obtained at a pre-test and post-test stage of the design. In this study, The Perceived Stress Scale (PSS) (Cohen, Kamarck, & Mermelstein, 1983) measured the perception of stress and the Copenhagen Burnout Inventory (Kristensen & Borritz, 1999) measured personal, work and client burnout. The order of the questions in the instruments on stress and burnout was mixed to avoid stereotyped response patterns. Well-being was measured with the Friedman Well-being Scale (Friedman, 1992). All measures have yet to be normed for South African conditions.

**4.4.2.5 Design.** A quasi-experimental design was used, with schools where participants worked being assigned to one of three intervention groups for experimental Groups A, B and C and a control Group D. Quasi-experiments, provided they are conducted with due care, can be considered the most powerful available means by which to test hypotheses (Fife-Schaw, 2012). All groups were assessed at a pre-test phase and a post-test phase, with only the intervention groups attending workshops and receiving training.

**4.4.2.6 Procedures.** Research participants in the intervention groups attended 10 weeks of workshops, facilitated by accredited trainers. The TA intervention had a TA trained male facilitator, who had received TA training for a year. Participants received detailed training notes printed for each session. These notes were conceptualised and outlined by the researcher and written by the facilitator. The TP workshop was facilitated by an accredited South African Capacitar female trainer. A training manual entitled “Living in Wellness”, which was designed by Capacitar South Africa, based on Dr Pat Cane’s doctoral dissertation on trauma healing and transformation, was issued to all delegates. The TRE workshop was facilitated by two female TRE trainers. Printed instruction booklets issued by TRE International were made available to educators to purchase and a copy donated to the school library. At the end of the training, the performance of the intervention groups was measured and compared with the performance of the control group on post-tests by using tests of statistical significance to determine the relevance of the findings.

**4.4.2.7 Instruments.** The Perceived Stress Scale (PSS) (Cohen et al., 1983) measured the perception of stress. The PSS is a 14, 10 or 4 item scale which is a multiple-choice, self-report inventory that is used for measuring an individual's perceived stress. This study used the 10-item measure with questions about how the participant was feeling in the past month: How often have you been upset because of something that happened unexpectedly; how often have you felt that you were unable to control the important things in your life; how often have you felt nervous and stressed; how often have you felt confident about your ability to handle your personal problems; how often have you felt that things were going your way; how often have you found that you could not cope with all the things you had to do; how often have you been able to control irritations in your life; how often have you felt that you were on top of things; how often have you been angered because of things that were outside of your control; how often have you felt difficulties were piling up so high that you could not overcome them?

Burnout was measured with the personal, work-related and client burnout scales from the Copenhagen Burnout Inventory (Kristensen & Borritz, 1999). Personal burnout is described as a state of prolonged physical and psychological exhaustion. The personal scale consists of six questions: How often do you feel tired? How often are you physically exhausted? How often are you emotionally exhausted? How often do you think, "I can't take it anymore"? How often do you feel worn out? How often do you feel weak and susceptible to illness? The response categories are: Always (100); often (75); sometimes (50); seldom (25) and never/almost never (0). Total score on the scale is the average of the scores on the items. If less than three questions have been answered, the respondent is classified as non-responder (Kristensen & Borritz).

Work burnout is defined as a state of prolonged physical and psychological exhaustion, which is perceived as related to the person's work. The work burnout scale consists of seven items on exhaustion, attributed to work in general. The questions are: Is your work emotionally exhausting? Do you feel burnt out because of your work? Does your work frustrate you? Do you feel worn out at the end of the working day? Are you exhausted in the morning at the thought of another day at work? Do you feel that every working hour is tiring for you? Do you have enough energy for family and friends during leisure time? Response categories for the first three questions were: To a very high degree; to a high degree; somewhat; to a low degree, and to a very low degree. Response categories for the last four questions were: Always, often, sometimes, seldom, and never/almost never. The score for the

last question was reversed. Scoring was conducted according to the procedure outlined by Kristensen and Borritz (1999). To a very high degree or always = 100, to a high degree or often = 75, somewhat or sometimes = 50, to a low degree or seldom = 25, and to a very low degree or never/almost never = 0. The total score on the scale is the average of the scores on the items.

Client burnout is a state of prolonged physical and psychological exhaustion, which is perceived as related to the person's work with clients. Clients can be patients, students, children (as in the case of this study), inmates or other kinds of recipients. The client burnout questionnaire consists of six questions: Do you find it hard to work with children? Do you find it frustrating to work with children? Does it drain your energy to work with children? Do you feel that you give more than you get back when you work with children? Are you tired of working with children? Do you sometimes wonder how long you will be able to continue working with children? The first four questions response categories are: To a very high degree, to a high degree, somewhat, to a low degree, to a very low degree. The last two questions answer with: Always, often, sometimes, seldom, never/almost never. Scoring is as for the last two scales. If less than three questions have been answered, the respondent is classified as non-responder (Kristensen & Borritz, 1999).

The Friedman Well-being Scale (Friedman, 1992) consists of 20 bi-polar adjectives with an overall measure of well-being, and five subscales of: emotional stability; self-esteem/self-confidence; joviality; sociability; and happiness. Described by Friedman as short, easily administered and scored, it is presented as an excellent measure of perceived level of well-being over time.

On a questionnaire entitled for honest self-descriptions, respondents are asked to describe themselves at the present time, how they are typically, as compared with other persons they know of the same gender and roughly the same age. Adjectives are rated from one extreme to the other, for example, angry to calm, on a scale of 0 – 10, with the choice of very, moderately or neither being listed above the numbers. Choices include tense to relaxed; nervous to at ease; discontented to contented; and insecure to secure. One number between 0 – 10 is circled by the respondent.

**4.4.2.8 Reliability of measures.** In this study, Cronbach's alpha was calculated with Statistica-10 (2011) software for internal consistency reliability of the measures – stress, personal, work and client burnout, and well-being. These calculations are reported in

Chapter 5, Results and Findings. In addition, the following reliability indications were found in previous studies.

In measuring a 14-item instrument in a community smoking-cessation programme, the PSS was found to show adequate reliability and was correlated with life-event scores, depressive and physical symptomatology, utilisation of health services, social anxiety and smoking-reduction maintenance (Cohen et al., 1983). Coefficient alpha reliability in three college samples was reported as .84, .85 and .86. The PSS was suggested by these authors for examining the role of non-specific stress appraisal in the etiology of disease and behavioural disorders and as an outcome measure of experienced levels of stress.

The three versions of the PSS (14, 10 and 4 items) were found to demonstrate adequate internal reliability (Cohen & Williamson, 1988). The PSS-10 was found to be as good a measure as the longer scale. While recognising that measuring stress depends on the conceptualisation of stress and disorder, the authors concluded that it is reasonable to argue that the PSS measures what it was designed to assess: the perceived degree to which environmental demands exceed abilities to cope.

The CBI is a public domain questionnaire measuring the degree of physical and psychological fatigue experienced in three sub-dimensions of burnout: personal, work-related and client-related burnout. It has been translated into a number of languages and is currently being used in many countries. Its acceptability and validity in different cultures is being elucidated in various research projects.

The dominance and acceptance of the Maslach view of burnout has severely limited the progress of burnout research and practice (Jabanda, Cox, & Hassard, 2009). The free-to-use CBI offers a promising alternative to the commercial MBI instruments, containing items relating to personal burnout away from the workplace, acknowledging the importance of balancing the interacting variables of work and life.

In an Australian study on burnout among dentists, Winwood and Winefield, cited by Kristensen, Borritz, Villadsen, and Christensen (2005), compared the CBI with the MBI and concluded that “the CBI possesses excellent psychometric properties and seems to be an appropriate measure of burnout in populations of health professionals” (p. 282). Kristensen et al. (2005) hoped that future international collaboration would further elucidate the potential of the CBI in burnout research.

So far, CBI users have compared this instrument with the Maslach Burnout Inventory (MBI) with very encouraging results. For example, in an examination of the psychometric properties of the CBI in a representative sample of the adult Danish population working in the human services profession, good internal reliability was established, with Cronbach's alpha of .86 for personal burnout; .87 for work burnout and .85 for client burnout (Kristensen et al., 2005).

Another study examined the reliability and validity of the CBI in measuring burnout in New Zealand secondary school teachers, and then the relationship between burnout and well-being among this population. It was found that the CBI had acceptable reliability (internal consistency and homogeneity) as well as factorial and criterion-related validity. As expected, burnout was negatively related to well-being measures (well-being index, school connection, and perceived general health). The findings indicated that this burnout questionnaire was a valid instrument to use with New Zealand secondary teachers, and also highlighted the potential impact of burnout on the health and well-being of teachers (Milfont, Denny, Ameratunga, Robinson, & Merry, 2007).

A recent study by Smit (2011) to test the suitability of the CBI as a valid and reliable measure for burnout in SA, found high internal reliability for personal burnout ( $\alpha=0.94$ ) and client-related burnout ( $\alpha=0.91$ ). It was recommended that additional items based on withdrawal should be added to the work-related burnout scale. In utilising the CBI with HIV/Aids coordinator teachers in schools on the Cape Flats, South Africa, Johnson (2010) reported reliability levels of .85 (personal burnout); .87 (work burnout) and .83 (client burnout). The Friedman Well-being Scale (Friedman, 1992) reported reliability of .92 to .98 in five studies of psychotherapy clients and college students.

**4.4.2.9 Validity.** Validity is an important concept to address in any evaluation endeavor, not only to ensure that what is intended to be measured is in fact being measured, but also to ensure credible results to improve programme delivery or content. Ultimately this will better serve those who attend interventions for help with a given issue (Colosi & Dunifon, 2006).

Construct validity refers to the theoretical context of ideas and whether the theory supported by the findings provides the best possible explanation of the results. In this study, the researcher has attempted to define clearly the constructs of stress, burnout and well-being in interventions which are based on sound theoretical underpinnings of well-respected and published researchers (Berceli, 2009; Berne, 1961; Cane, 2000; Friedman (1992); Freudenberg & Richelson, 1980; Lazarus & Folkman, 1984) in the field of stress, tension,



burnout and trauma release, coping and well-being. The concept of the evolutionary three brain model has also been theoretically explained in neuropsychiatric and neurological studies (Cummings & Mega, 2003; Maclean, 1990; Yakovlev & Lecours, 1967) and practical applications of this theory have been applied to assist educators in better understanding learner behavior in Cape Flats classrooms (Benjamin, 2010), which is the context of the study.

External validity is concerned with how well the study's results can be generalised to other participants and conditions. In other words, it is necessary to consider how adequately the research sample represents the population in a process of generalisation. While the best way to ensure generalisability is random selection of the sample, this is not always feasible and it has been suggested that perhaps the best way to address the shortcomings of a pre/post experimental design is to utilise a control group (Colosi & Dunifon, 2006).

In this design, participants completed a pre-test at the beginning, and a post-test at the end. Additionally, the use of a control group of people not participating in the interventions helped to improve the research design. In some cases, the control group could be drawn from the waiting list for an intervention or comprise people interested in future training, as was the case in this study, and should consist of individuals who are as similar as possible to those participating. For each group, a measure of change is computed by comparing responses from the pre-test to that of the post-test. The treatment group is then examined to ascertain whether greater change is experienced than in the control group. This is described as the most rigorous design because it addresses the major shortcoming of the pre/post design, specifically response-shift bias. If such bias (or any other type of bias) exists, it will influence the results of the programme and control group equally. Therefore, any pre/post change in outcomes that is found among the intervention groups, and not the control group, can be attributed to the programme itself (Colosi & Dunifon, 2006). Because of the number of groups involved, a major difficulty in this study was to match a control group to diverse intervention groups. To minimise differences, the researcher selected educators in similar cultural and socio-economic circumstances in secondary schools within a close radius.

Internal validity lies at the heart of research, the demonstration of causality. To ensure validity, research needs to consider any confounding variable which could be responsible for change. These have been described as: maturation; history; testing; instrumentation; regression to the mean; selection; attrition; diffusion of treatment and sequence effects (Cook

& Campbell, 1979). The researcher will attempt to consider these aspects of internal validity in the highly challenging context of this study in the ganglands of the Cape Flats.

Maturation was not considered a confounding variable in this study as efforts were made to contain the interventions within a 12 week period from July to September 2011. Despite incidents such as bomb scares, disciplinary emergencies and violent incidents, which resulted in changed workshop dates and extension of deadlines, questionnaires were completed as timeously as possible. History was also not considered a confounding variable as schools in close proximity to each other were selected and social events, such as increased violence in the area, impacted all schools, both intervention and control groups, taking part in the study. In terms of instrumentation, no change was made in the calibration of the measuring instruments. While all participants were subject to pre- and post-testing, the fact that several months separated the completion of questionnaires meant that educators were unlikely to recall previous responses.

A main difference between groups was gender, with the control group having more men. This could influence the outcome of the study as women have been found to be more susceptible to stress and burnout than men (Cremades & Wiggins, 2007). As far as geographic location of schools was concerned, all institutions were situated in close proximity on the Cape Flats. Even though teachers did not all reside in the areas where they taught, they were all affected by location in the course of entering the school environments.

It was hard to ascertain the reason for attrition, as it was an ethical right to withdraw from the interventions without explanation. If participants withdrew for reasons of high stress and burnout levels, this could have had a differential effect on outcome. Most educators who withdrew from the study did so on ascertaining that it was voluntary to participate when filling in the consent form and demographic questionnaire at the initial workshop, after which there was a low rate of attrition ( $n=5$ ; 8%) once the workshops had begun. The researcher did not consider attrition, therefore, to be a confounding variable.

Diffusion of treatment did not affect the study as there was no information exchange between the four groups. All participants in each intervention came from the same school and therefore received only one treatment. Sequence effects could have occurred with earlier conditions of the study affecting later responses. To avoid stereotype responses, the order of the Perceived Stress Scale (Cohen et al., 1983) and the Copenhagen Burnout Inventory (Kristensen & Borritz, 1999) was mixed, as suggested by Kristensen and Borritz.

**4.4.2.10 Statistical analysis.** Data analysis and interpretation began in early 2012, six months after the start of interventions, interrupted by several holiday and school breaks. Data were captured in an Excel spread-sheet. The descriptive statistics calculated for measures at the pre-test and post-test stages of experimental designs were means and standard deviations.

Inferential statistics were used to test the null hypotheses in the study: that is, that there were no statistically significant differences between the pre- and post-testing of the intervention groups and control group respectively and no significant differences between these four groups at pre- and post-testing in terms of stress, burnout and well-being after the TRE, TP and TA interventions. Hypotheses testing utilised a mixed-model, repeated measures ANOVA for stress and personal, work and learner burnout, and well-being, pre-and post-intervention. To control for Type 1 error, post hoc comparisons were made using Fisher's least significance difference (LSD) test to evaluate the significance between intervention group means. If tests, paired for experimental effect of each independent group, disclosed significant differences, the null hypothesis could be rejected. However, rejecting the null hypothesis was necessary, but not sufficient to draw a causal inference about the three interventions as the observed differences might also be due to the effects of confounding factors (Graziano & Raulin, 2010). The causal hypothesis states that the independent variable had the predicted effect on the dependent variable. While this statement is described as probable rather than absolute, if the null hypothesis is rejected and confounding variables have been carefully measured, the causal hypothesis can be accepted (Graziano & Raulin, 2010). In this study, the causal hypothesis was: Educators that participated in a TRE, TP or TA intervention showed reduced levels of stress and burnout and improved well-being, post-tests, in comparison with those who did not receive the intervention. To rule out competing interpretations for significant statistical findings, statistical, construct, external and internal validity were considered.

**4.4.3 Qualitative methodology.** After coding and statistical analysis in quantitative methodology, a third qualitative research method was adopted, focus group thematic analysis, which offers breadth, describing a "substantive phenomenon" (Silverman, 2011, p. 213). Qualitative data were collected in focus group interviews of all participating educators in each intervention, with a follow-up session during which themes were checked, confirmed and amended where necessary.

In this study, a psychological perspective of educator stress and burnout was examined in the cultural context of the Cape Flats area of Cape Town, South Africa. Teachers were given a voice to describe not only the context of their personal and professional lives, but also the impact of a stress and burnout intervention on their coping, well-being and understanding of competency in the classroom. In each intervention session, teachers were given the opportunity for group sharing about their stress and burnout and methods and procedures presented were linked directly to classroom experiences and competency.

At the end of the interventions, focus group discussions provided data generated via group interaction, building conversation among participants (Millward, 2012). It is this element of interaction that enables the elicitation of a different type of evidence not possible from a one-to-one interview (Morgan, 1997). Group dynamics are managed by an external moderator, who ensures discussion occurs in a focused way. Conversation becomes owned by participants when they are excited by the topic and pursue the discussion in an animated way which has its own meaningful direction. For Morgan (1997), the full potential of focus groups as a psychological tool is starting to be recognised, although this tends to be more said than done. The balance between covering the topic adequately and allowing the information to flow freely requires great skills of facilitation (Millward, 2012).

**4.4.3.1 Reliability.** Reliability concerns the assessment of the measurement technique or strategy employed (Hammersley, 1990). Reliability of focus group data requires conducting a systematic analysis of the transcripts or tapes to check for the consistency, stability and equivalence of moderating procedures across groups (Fern, 2001). Fern considers the coding scheme as critical. In order to ensure reliability of coding schemes, an independent professional clinical social worker was consulted and codes checked for independent assessment. Inter-rater analysis of data was conducted for thematic reliability, as well as feedback from participants.

**4.4.3.2 Validity.** Validity refers to assessing the findings of the measurement process (Hammersley, 1990). Internal validity of qualitative data is a complex issue, requiring that the representation of reality and feedback obtained from participants are recorded in a truthful way. In the TRE intervention, for example, the researcher developed a theme of “spiritual connection”. This was, however, disputed by the focus group and removed from data analysis by the researcher, although spiritual connection is listed as a code in “Impact of the intervention”(see Table 16), revealing the complexity of internal validity.

Two key elements of validity proposed are plausibility and credibility (Hammersley, 1990). The former determines whether or not a claim seems plausible, that is, whether we judge it as likely to be true given our existing knowledge. Hammersley adds that some claims are so plausible that we can immediately accept them at face value, while others require the presentation of evidence. In the latter instance, the judgement of the credibility of a claim must be taken, given the nature of the phenomenon concerned and the circumstances of the research. It is fully acknowledged that both plausibility and credibility are social judgements, which may not be consensual, since there may be different views about what is plausible and credible (Denzin & Lincoln, 2003).

To ensure plausibility and credibility in this study, the workshops designed for the schools are based on internationally recognised psychological, educational and healing approaches. Transactional analysis was developed by Berne (1961); transpersonal psychology has been researched by, among others, Assagioli (1999), Cane (2000), Jung (1981) and Raheem (1991); and the physiological release of stress and trauma has been studied by Bercei (2009), Levine (2010) and Scaer (2005).

Objectivity in qualitative research is described as a “chimera” by Guba and Lincoln, 2005, p. 208). This is a mythological creature that does not exist, save in the imaginations of those who believe that knowing can be separated from the knower. The researcher’s responses to the social conditions, reactions and needs of secondary school teachers in the Western Cape, are based on the “crystallisation” rather than “triangulation” process. The triangle is a rigid, fixed, two-dimensional object. The crystal, rather, combines symmetry and substance with an infinite variety of shapes, transmutations, multi-dimensionality and angles of approach (Richardson cited in Guba & Lincoln):

Crystallisation, without losing structure, deconstructs the traditional view of ‘validity’ (we feel how there is no single truth, we see how texts validate themselves) and crystallisation provides us with a deepened, complex, thoroughly partial understanding of the topic. Paradoxically, we know more and doubt what we know (Guba & Lincoln, 2005, p. 208).

In applying this crystallisation approach, the researcher initially considered the validity of data in one dimension, in fixed categories, such as quantitative statistical analysis, or qualitative thematic analysis in focus groups. However, as the process unfolded, the information from each method began to add to the complexity of the whole, with unexpected

insights and subtle focus from hidden angles being revealed. The challenge became to validate and consolidate data from different juxtapositioned sources, sharpening focus into the research “crystal”, exposing its many dimensions and contradictions, knowing the essence of the jewel, in its ever-shifting colour and depth, escaped definition and clarity in its multifaceted dimensionality.

**4.4.4 Limitations.** In considering the limitations of the mixed-methods approach, there is little written to guide the researcher through the process (Creswell, 2003). In addition, there is little advice to be found how a researcher should resolve discrepancies that occur between the two types of data. Because the methods are unequal in their priority, this approach can result in unequal evidence within a study, which may be a disadvantage when analysing results.

Sample group selection and size could be considered limitations of the study, as random selection was not possible with teachers working in different schools and only available on specific days and times due to demanding and varying school schedules. Also the ethical voluntary requirements of the study allowed teachers to elect not to attend interventions as in the case of the control group, despite higher levels of burnout in the majority (n=15; 75%) of this sample. Groups varied between 10 and 20 delegates, which are small samples to test significance of results.

**4.4.5 Motivation.** As far as the researcher’s own personal experience is concerned, motivation for the study is outlined in more detail in the reflexivity sections of this chapter. In brief, the foundation for the research was laid firstly from interventions funded by Newlands Rotary Club and the Department of Education, and then secondly by a practicum and employment on the Cape Flats as a trauma counsellor, working with stressed educators and volunteer community counsellors placed in schools.

**4.4.6 Research audience.** In considering the research audience, organisations concerned with teacher well-being, such as the Department of Education and SADTU, are the primary targets. A presentation was made at the Department of Education’s 2010 educational psychology workshop for support staff, and circuit educational psychologists attended presentations of the MA research on burnout among HIV/Aids Coordinators (Johnson, 2010). Funding has been granted by the Department of Education for workshops to continue in one of the intervention schools, which has elected to become inclusive by accepting challenged learners. The researcher has also informed the head office of the Department of Education in Cape Town about the study and feedback will also be given on its completion.

In addition, the wider profession of psychology is my audience, as the preliminary findings of this research were presented at the International Congress of Psychology in Cape Town in 2012 and in March 2013 an article based on my master's research was published by the peer-reviewed "SA Journal of Psychology" in co-authorship with my supervisor, Professor Tony Naidoo, Department of Psychology at Stellenbosch University. The researcher has also collaborated with academics investigating educator stress at other South African universities, such as the University of Cape Town and University of the Western Cape's Educational Psychology Department.

#### **4.5 Ethics**

Ethical behaviour can be defined as doing the right thing, but it has been suggested that it is more about reflecting on what is done, rather than the behaviour itself, as situations do not always have clear ethical criteria (De Graaf & Levy, 2011). These authors point out that finding out what is moral today is a function of current thinking, based on past values. Ethics are constantly changing according to the context and are a continually challenging aspect of human functioning.

Despite the complexity of modern research ethics, a simple definition has been expounded: "Each individual scientist, in each research project, must make thoughtful judgements of how best to contribute to science and to humanity," (Graziano & Raulin, 2010). In this study, the researcher attempted to maintain a conscious ethical awareness at each stage of the research, wishing to contribute meaningfully and honestly to science and humanity, while mindful of the constraints of the research project. Ethics of the research process are initially outlined, followed by of a consideration of ethics in the educational context.

**4.5.1 Ethics in research.** Participants signed written consent forms informing them of their rights before the workshops began (Appendix 7). The need to protect the rights and privacy of the participant teachers was considered, as well as their vulnerability given the focus on stress and burnout of the study. In obtaining signed consent from participants, anonymity was assured. In addition, no schools or the areas in which they were situated were directly identified.

Referral options were also given in the event of any adverse reaction, although this did not prove necessary during workshops. In one case, a participant undergoing psychotherapy withdrew from the workshop to avoid conflicting treatments. Members of the control group

were given the opportunity to attend stress and burnout workshops when the research project was completed, based on the intervention/s of their choice.

Ethical clearance was secured from the Stellenbosch University Ethics Committee, under the auspices of the Psychology Department. Permission was also obtained from headmasters in each participating school and these letters were sent to the Western Cape Education Department, whose permission was also requested and granted (Appendix 8). In most instances, headmasters attended workshops with their staff.

Confidentiality of the test scores and interview data was assured, with only the researcher having access to data and a code was used to protect the participants' identities. As the researcher and participants come from different race and cultural groups, the culture, language, beliefs and customs of participants were respected throughout. The participants were encouraged to complete the training, but the right to withdraw at any time was respected, without giving any reason or having to face unfair or negative consequences. Informed consent was obtained and the suitability of the language used in the questionnaires was checked with participants.

Ethical interpretation and reporting of findings are also major concerns in research, as the deliberate falsification and misuse of data for the researcher's ends are serious offences (Graziano & Raulin, 2010). Throughout the study, the researcher endeavoured to report the facts and interpret data as they were presented, with no bias towards any particular outcome, group or methodology.

**4.5.2 Ethics in education.** While philosophies of education consider the various ways of relating between teacher and learner, there is a difference between procedural ethics, that is, what is being passed on and the consideration of boundaries and limits, and interactional ethics, considering how participants relate and how they perceive each other in the process (Newton, 2011). This author points out that relational learning entails a therapeutic process of "minding the gap" (p.114), a phrase used by Eusden (2011) to describe the difference between intention and outcome, requiring on-going attention to co-transfential interactions in a therapeutic process.

The importance of contracting in the school context is highlighted by Newton (2011), who points out that unlike the therapy room, the classroom is not a confined and safe space and contracts will be multiparty with witnesses. By creating a contractual context with all concerned parties, Newton (2011) believes that working relationally will assist challenged



children to see the world differently, which is a more profound experience for the educator and learner than the mere transmission of information. “There is a need for careful observation and sensitivity to the message the child is giving via his/her behaviour so that consent can be determined by those outside the process and supported with evidence,” (Newton, 2011, p.115).

It is this ethical approach that underlies the educator/learner teaching relationships in this research project, where the dynamic of working relationships in the competent classroom are considered critical to the effective imparting of academic material. In working environments of large classes and lack of academic motivation of many learners, teachers are challenged to fulfil this ethical relationship obligation.

#### **4.6 Reflexivity**

One of the keys to good research is to challenge one’s own assumptions, carrying out the study in such a way that the researcher can be surprised by the data (Alasuutari, Brannen, & Bickman, 2009). Reflexivity is the process of reflecting critically on the self as researcher, the human as instrument (Guba & Lincoln, 2005). It is described as a conscious experiencing of self as both enquirer and respondent, as teacher and learner, as the one coming to know the self within the processes of research itself. The many selves can fall into three categories: the research-based self; the brought self and the situationally-created self (Reinharz, cited by Guba & Lincoln). I will attempt to reflect on myself within these three categories of self.

**4.6.1 The research-based self.** I believe I have a talent for writing, starting out as a commercial and descriptive writer and I wished to apply this talent to my academic interest in psychology. I excelled in my early writing career, winning an enterprising journalism award in 1980 and travelling to the USA. However, I understand that research, whether qualitative or quantitative, requires a different style, discipline and ethical approach to that of journalism. While I am a qualitative researcher at heart, wanting deeper insights beyond the numbers, I am also drawn to quantitative science, enjoying the security of statistical analysis, which has a clear set of assessment criteria. In choosing mixed-methods research, I hope to draw on the strengths of both methodologies, with an equal focus on quantitative and qualitative data. I identify with the trend of methodological pluralism, calling for a rethinking of the nature of quantitative and qualitative research, and how it can be assessed.

This methodological pluralism was challenging in my involvement as researcher. On the one hand, I attempted to adopt an impartial scientific stance when gathering quantitative

research, while on the other hand I became more personally involved with participants in qualitative focus group interviews. It was also challenging to coordinate and manage facilitators in each intervention as they were not directly experienced in the schools where the research took place. I did, however, seek the assistance of community counsellors from the local schools to help coordinate the workshops.

During the research process, while being present at interventions and conducting focus group interviews, I was mindful of the impact of the work on both myself as researcher and the participants. People opened up and exposed their vulnerability. Male educators, for example, cried when discussing the death of a learner, and spoke of racism and overcoming personal difficulties. I was deeply affected by such encounters, feeling a sense of commitment to contributing to the healing of traumatic events and the betterment of challenging circumstances of educators, with a profound gratitude for their willingness to trust and confide in the research process. Some teachers said they only agreed to take part to please the headmaster or to help me academically and did not realise the profound personal affect the workshops would have on their lives.

Several teachers elected not to take part in the interventions, so I felt challenged as the researcher, respecting their rights not to participate, but mindful of the possibility that the population I set out to reach was, in fact, not able to be accessed. However, despite this setback, the educators taking part in the study showed an openness and willingness that made me appreciative of those prepared to take a leap of faith into the unknown.

Coming from a different race and cultural background, I questioned my ability to enter one of the most challenging communities in this country - the ganglands of the Cape Flats, and I wondered if I could reflect and report on it fairly and adequately. In the end I approached the task as a human being rather than a Caucasian female, and tried to look beyond the labels to the person sitting in front of me, regardless of differences such as skin colour, culture, age, gender and life experiences. I was accepted by the educators as researcher and fellow human being, just as I accepted them as participants and fellow human being, and this mutual trust and sharing was ennobling and humbling.

I acknowledge that while it is impossible to escape the power-knowledge web that we are all caught up in as products of a historical/social context (White & Epston, 1990), I endeavoured throughout the study to engage with a participatory consciousness in an ethical-political process while relating to others. This meant that knowledge was critically questioned

in terms of power, truth and benefit. While exposed to values of colonialism and domination when growing up in Rhodesia (now Zimbabwe) and living through turbulent apartheid politics while a student at University of Natal, Durban, in which my political science lecturer, Dr Rick Turner, was banned and shot for his beliefs, I developed a critical stance to my political and social context. I was rebellious of unjust systems and in post-apartheid South Africa believe that academic activism is one of the most powerful forms of protest to any type of oppression.

While unable to escape a position of privilege and power as a result of my social context, I found myself during the research and work in impoverished communities, questioning my social milieu and values and I developed a type of identity crisis, questioning where I truly belonged, physically, emotionally and mentally. The impact on my research meant that contextually I made a conscious effort to bracket experiences, not wanting to be constantly shocked by events taking place, but rather accepting them as the norm and reporting on them as impartially as possible. Philosophically, I became more critical of this acceptance of normalising injustices and struggle, recognising the heroism of my research participants on the one hand, but wishing to report on injustices on the other.

My decision to research educators in high-risk schools arose out of a desire to give voice to the unheard in unjust social contexts of violence and lack of resources, ever mindful of the resiliency and ability of members of communities to draw strength from within their systems, as exemplified by the values of the NGO where I worked for several years, Community Action towards a Safer Environment (CASE). The context required me to bracket preconceived ideas of schooling and education and observe and report on conditions as they were presented. The interventions I introduced came from a desire to equip educators with insights to raise consciousness in marginalised contexts through accessing inner resources, with insights from workshops, rather than imposing a set of foreign psychological techniques.

From an academic point of view, my research in the schools on the Cape Flats over the past few years has opened up opportunities to present research papers and submit articles to peer-reviewed journals. I have presented papers at three Psychological Society of South Africa (PsySSA) congresses in 2010, 2011 and 2013 and at a Continuous Trauma Workshop organised by University of Cape Town in 2011. A paper based on preliminary findings of my PhD research was presented at the International Congress of Psychology (ICP), which took place in Cape Town in June, 2012. In addition, I displayed a poster at the World Mental Health Congress in Cape Town in 2011.

An article on the quantitative results of my MA research, written in co-authorship with my supervisor, Professor Tony Naidoo, was published by the peer-reviewed “South African Journal of Psychology” in 2013 and a qualitative article was submitted to the “South African Journal of Higher Education” in 2013. I have also written a chapter on teacher well-being for a book “More than a Drop in the Ocean”, produced by Benjamin (2011b) in her capacity as director of CASE, where I worked for two years prior to becoming a full-time PhD student.

**4.6.2 The brought self.** As a product of a German religious school in Harare, Zimbabwe, in the 1960s and 1970s in what was then colonial Rhodesia, I was exposed to rigorous international standards of education, demanding a high work ethic. As the Dominican nuns had no private family lives, many had a deep devotion to learners and were committed and focused in their attention to studies. The quiet, disciplined and spiritual atmosphere of the Convent provided a contrasting back-drop to the violence and chaos of the Cape Flats schools where I worked as a counsellor, and I felt drawn to investigate these challenges. Teachers were at the heart of inspiring and motivating learners and that became my research focus.

Although the path to my PhD was long and arduous, I realise that exposure to personal trauma, volunteer work and interventions with international facilitators before formally studying psychology allowed me to integrate my own healing, experiential learning and contextual group work with academic and scientific insights from my studies. One way that I was able to give back to the psychology community was by serving on the Council of the Psychology Society of South Africa (PsySSA) as chair of the registered counsellor and psychometry division. I hope that my research will equip me to give insights into the training and supervision of health professionals, including registered counsellors. In 2013 this was the largest category seeking registration with the HPCSA (Laraine Lane, personal correspondence, 18<sup>th</sup> February, 2013), needing more exposure and commitment to group work to deal with mass trauma and stress experienced in South Africa.

**4.6.3 The situationally-created self.** As a full-time PhD student funded by the NRF, I have left my job as wellness coordinator at an NGO on the Cape Flats and find myself more and more involved in academia. At the start of 2013 I was offered a part-time lecturing and supervision post at Stellenbosch University to design and implement an Applied Counselling module in the Psychology Honours programme and I was appointed to supervise B.Psych counsellors in their internships at the Midrand Graduate Institute. While missing the challenges of full-time employment on the Cape Flats, I am grateful to my NRF Prestigious Equity Award for research, which has allowed me to pursue my academic interests.

As a white, middle class, mature South African, I have been richly blessed by my involvement in economically disadvantaged communities on the Cape Flats. I realise that spending years working, counselling and facilitating workshops in these communities does not necessarily equip me to understand, interpret and report on their world as a researcher. However, I identify strongly with the triumphs and struggles of educators who are among our country's unsung heroes, often working silently and selflessly for future generations of South Africans. I hope to cast a light, however dim, on the triumphs and disappointments of working in classrooms in high-risk schools, broadening our understanding of the complexities and challenges involved. Instead of building high walls to hide behind in our violent communities, we need to break down the barriers and reach out to our neighbours in understanding our commonalities as fellow human beings. I have a deep commitment to translating my liberation psychological orientation into practical ways to further my research in schools, ever mindful that resourcefulness exists within communities and that more categories of counselling need to be recognised by South African mental health authorities to allow local community members to benefit and help others to thrive.

Often I was challenged by straddling such different worlds simultaneously and my health and safety were sometimes compromised, but I always trusted that I was being guided and protected on my path. The riches I gained from working in this environment include humility, appreciation, respect and admiration for those who work tirelessly and unselfishly for the good of others. Clinical psychologist, Lane Benjamin, provided me with a role model of a selfless community psychologist in the trenches driven by her impassioned vision. My supervisor, Professor Tony Naidoo, was also a steady, inspiring role model in academia, tirelessly pursuing the goals of empowerment of historically disadvantaged communities. I approached my research filled with inspiration and hope, and trust that there may be something in these pages that sparks some insight, making a contribution, however small, to a better future for educators and learners in high-risk schools.

#### **4.7 Chapter Summary**

This chapter described the research methodology undertaken amongst teachers in high-risk schools, giving demographic details of the intervention and control groups. An outline then followed of the mixed-methods research design. An examination of validity and reliability of measures and the consideration of research and educational ethics were included, ending with a reflexive comment.

## CHAPTER FIVE

### Results and Findings

*“A scientist’s curiosity is active, leading to discoveries, not through luck, but because the prepared mind of the scientist recognised the significance of a curious observation. It is a disciplined curiosity, sharpened by labour, frustrations, and long hours of research,”*  
(Graziano & Raulin, 2010, p. 4).

#### 5.1 Introduction

This chapter presents the results and findings of the mixed-method design used to examine the research question: How do interventions, based on trauma release exercises, transpersonal psychology and transactional analysis, impact stress and burnout of educators in high-risk secondary schools? In answering this question, the influence of these interventions on stress, burnout, coping and well-being of educators and their effect on classroom competency, were the primary foci.

Mixed-method research yields both quantitative and qualitative data, offering breadth and depth to the analysis (Silverman, 2011). This study focused initially on the contextual analysis of high risk schools, forming the backdrop to data analysis. Statistical analysis of stress and burnout measures derived from a quasi-experimental design was undertaken, followed by quantitative content analysis of codes of stressors, emotions and coping strategies, pre- and post-interventions. The study concluded with qualitative data analysis, establishing dominant themes, with insights into the competent classroom and workshop improvements also considered.

#### 5.2 Contextual Analysis

An overview of the teaching context of the participants (n=63) in all schools which took part in the study (Figures 5 – 10) is first given to better understand the challenges encountered by educators in high-risk schools. This analysis was carried out on open-ended text which formed part of the demographic questionnaire filled in by all participants (Appendix 4).

**5.2.1. Major teaching stressors.** Across all groups, major teaching stressors were listed as learner discipline (*“Violence and racism”*); marking/administrative workload; lack of learner

work ethic (“*Learners who don’t do homework*”); and learner attitude (“*Apathy*”; “*Arrogance and petulance of learners*”). Other stressors were listed as bureaucracy (“*Cluster meetings, no good intervention from WCED, staff meetings*”); struggling learners (“*No/low parental involvement*”; “*Levels of attention of students*”; “*Learners who can’t count*”) and large classes (See Figure 5).

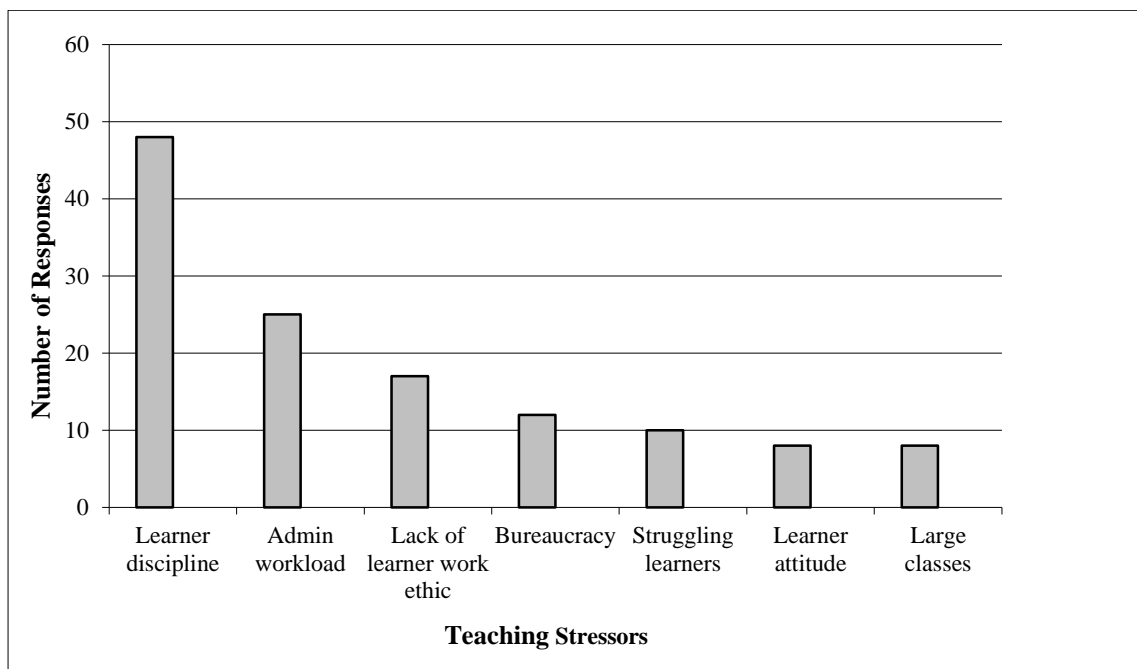


Figure 5. Teaching stressors, intervention and control groups

**5.2.2 Other life stressors.** Teaching stressors took place in the context of wider personal, family and societal pressures. Other major stressors affecting educators in high-risk schools were: family issues (“*Sick mother*”; “*Marital problems*”), finances; health (“*Being bi-polar*”; “*Not able to exercise as much as I want to*”; “*High blood pressure, chronic eye infection, degenerating hip bone*”); and time management. Some educators said they had no other stressors (“*None*”; “*Nothing that has a major impact – I could be unaware*”) (See Figure 6).

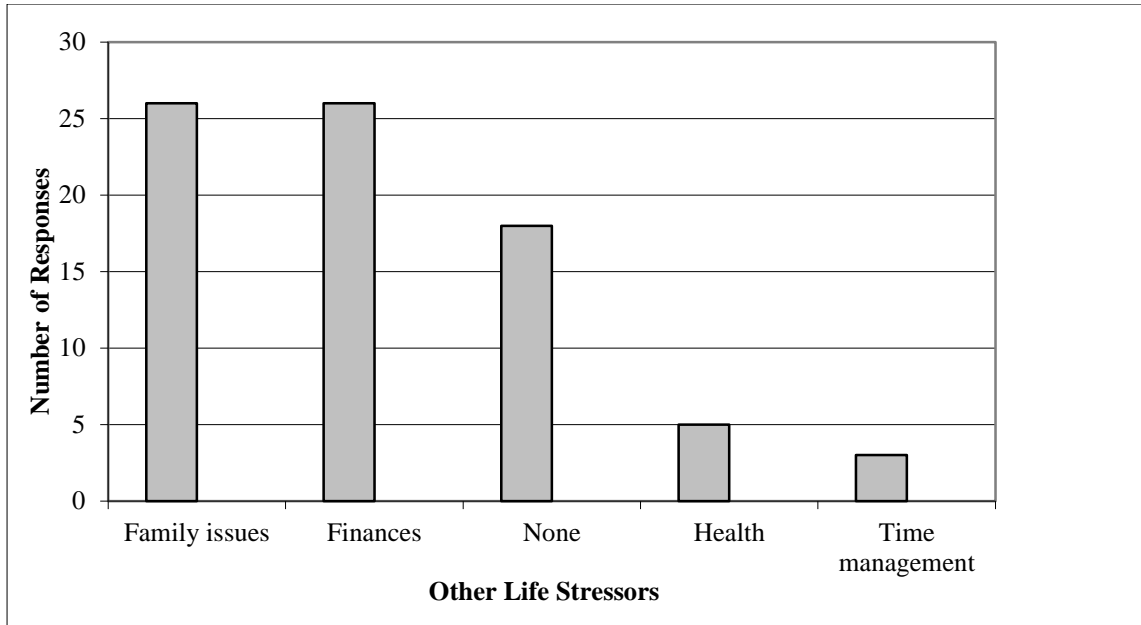


Figure 6. Other life stressors, intervention and control groups.

**5.2.3 Dealing with stressors.** In order to deal with these stressors, educators mostly exercised (“*I go to gym every day*”; “*Play soccer*”) and shared with others, such as family, educators and friends. Many turned to the church, some walked or hiked, sought medical help (“*I visit a psychologist*”; “*Take medication*”) and had sex (“*I schedule sex with my husband*”). Some resorted to less healthy behaviours, such as escapist or addictive behaviour (“*I smoke*”; “*Drink a lot*”; “*Go shopping*”) or do nothing (“*Not much*”) (See Figure 7).

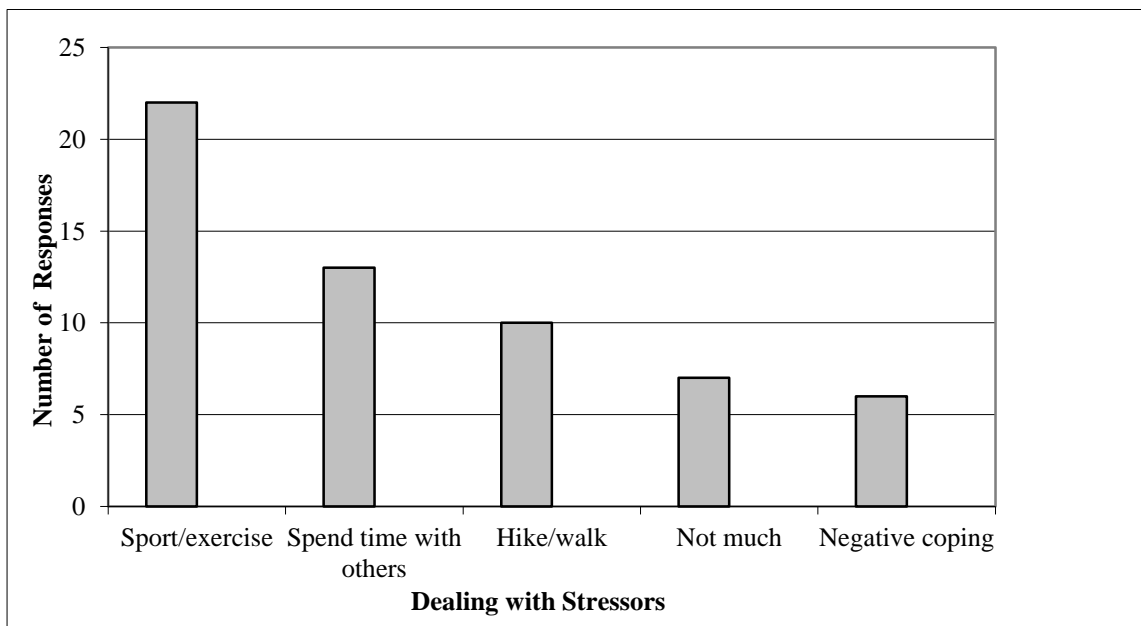


Figure 7. Ways to deal with stressors, intervention and control groups



**5.2.4 Improving well-being.** The majority of educators across all groups spent time with their family and others turned to religion to improve well-being. Talking to friends was also important. Many pursued creative activities, such as music (“*I’m a DJ who loves music*”), writing, gardening and fishing (“*Seldom, but I try to go fishing with my kids*”). Teaching was also a positive way of coping (“*Being at school, acting as a mother figure for learners*”; “*I love computers*”; “*I try to understand the children*”) (See Figure 8).

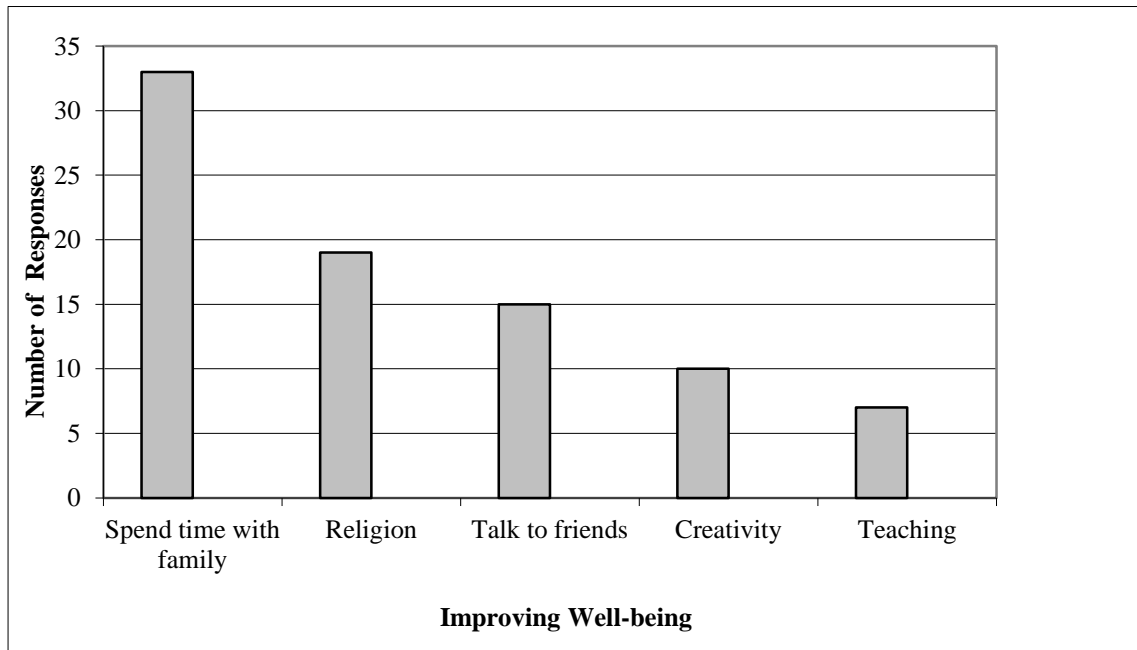


Figure 8. Ways of improving well-being, intervention and control groups.

**5.2.5 Educators’ definition of well-being.** When asked what feeling well means, 50% of educators equated wholeness and balance with well-being, including emotions, physical health, mental ability, spirituality. (“*Living a balanced life, emotionally and physically, able to cope with demands of work and everyday life*”). Happiness was important (“*Looking in the rear-view mirror and catching a glimpse of yourself smiling for no reason*”). Contentment was also considered: (“*Being content regardless of what I am facing*”). Feeling positive and excited were keys to well-being (“*Enjoy what I do*”; “*Lucky to be alive*”). Being of service was also important (“*Leading a purposeful life*”; “*I encourage others and if they achieve, I feel good*”; “*Helping the underdog*”) (See Figure 9).

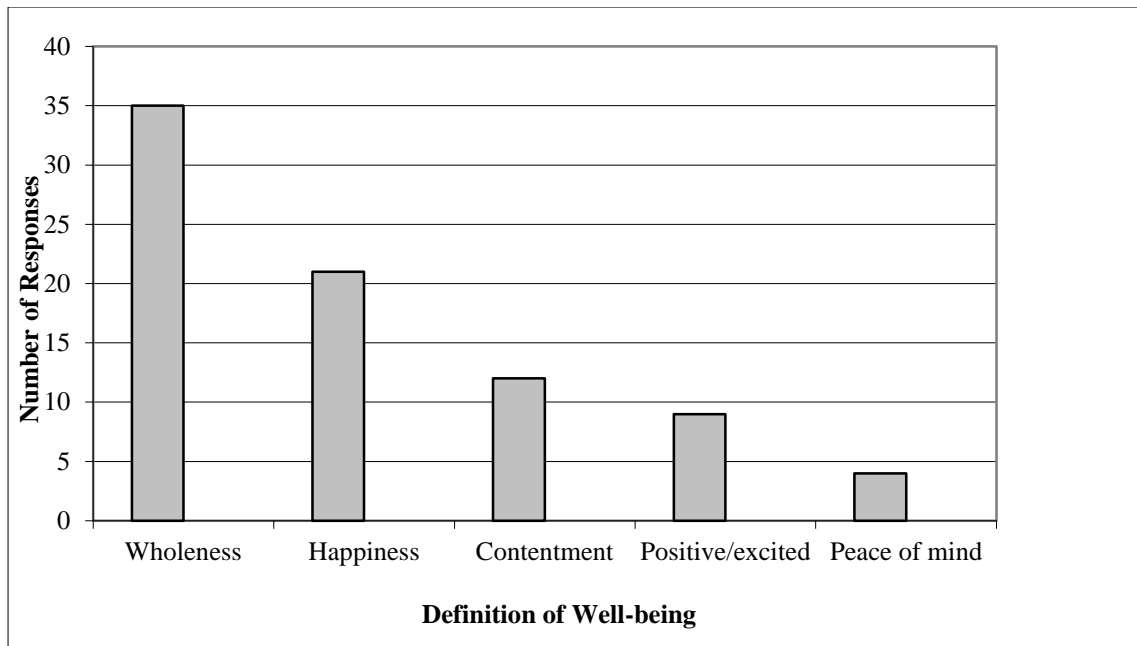


Figure 9. Educators' definition of well-being

**5.2.6 Burnout assessment.** The majority of teachers (n=41; 65%) from both intervention and control groups identified with feeling burnout during the school year, all the time (30), or sometimes (11). Of these, the majority were women (n=21; 51%). Burnout comments ranged from feeling this way at certain times of the year, such as the end of the week or end of the term and exam times, to a continuous feeling:

*Yes, of late, I feel that I've had enough of having to work basically 24-7 to prepare and attempt to complete what is required of me as an educator and HOD. I'm getting tired and sick of late nights, working and not being able to do many other things. (52 year old female teacher, working for 32 years)*

*Always – forever want to give up teaching. Feel I can't cope in dealing with learners, feel I can't teach anymore. Always feel that I do not have enough time to relax, socialise etc. (I am) always physically/emotionally tired. (48 year old male teacher, working for 22 years)*

Other burnout comments included: “Yes, the situation at the school does not change, it just gets worse and worse”; “Yes, teaching has become very administrative”; “Yes, Mondays”; “Often feel burnt-out – sore body and mental fatigue, cry a lot lately, constantly tired, aggressive with my kids”; “Yes, I feel like I am going crazy, as if my head cannot cope with everything – can thus feel a chemical imbalance”. Others reported that they were sometimes burnt-out (“Had burnout last year, was in rehabilitation for three weeks, which

helped me a lot”; “I did in the first term, however I feel better able to cope now”), while some (n=16; 22.8%) felt they were hardly or never burnt-out. A few did not answer the question (See Figure 10).

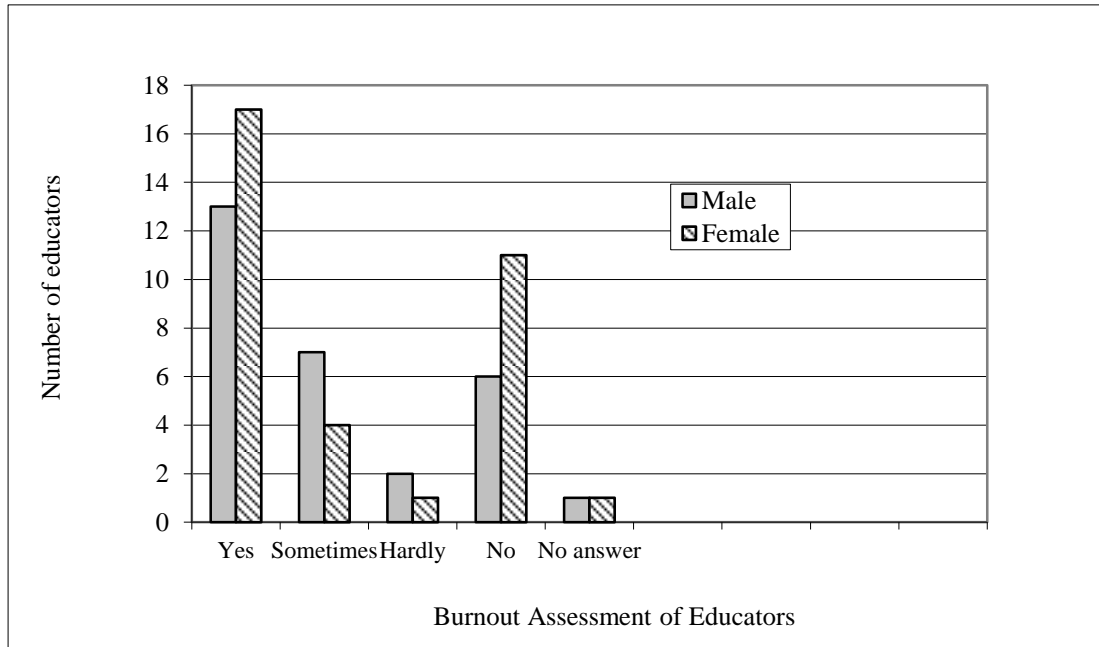


Figure 10. Burnout assessment of educators

**5.2.7 Burnt-out teachers in intervention and control schools.** The control group had the highest number of teachers (n=15; 75%) who were always or sometimes burnt-out. This was followed by the TP intervention school (n=11; 69%); and the TRE school with (n=11; 65%). The TA intervention school had the lowest number of teachers who reported themselves to be burnt-out (n=4; 40%).

### 5.3 Quantitative Statistical Data Analysis

**5.3.1 Analysis of variance.** Chi-square tests indicated that there were no significant differences between the intervention and control groups in terms of age, number of years teaching, gender, race, marital status, religion and home language attributes. The chi-square analyses were as follows: age (F 1.60)=0.11, p=0.74); number of years teaching (F 1.61)=1.11, p=0.30; gender, (Chi-square [df = 4.70]=3.13, p=0.54); race, (Chi-square [df=1]=0.96, p=0.33); marital status (Chi-square [df = 1]=0.00, p=1.00); religion, (Chi-square [df=1]=3.50, p=0.61) and home language, (Chi-square [df=2]1.07, p=0.58).

**5.3.2 Descriptive statistics.** For all the study's measures, no problems were found when the underlying assumptions of normality were tested, with no outliers in the data affecting the means calculated. Descriptive statistics of the stress and burnout measures, at pre-and post-intervention stages, are set out in Table 6. From these scores it is evident that stress, personal burnout, work burnout and learner burnout were highest among the control group. Overall there was a trend of reduced levels of stress and burnout post-interventions for TRE, TP and TA groups. The control group levels of stress and burnout remained unchanged or increased slightly from the period pre- to post-intervention, with the exception of work burnout, which was somewhat reduced. Standard deviation scores were highest in personal, work and learner burnout in the pre-control group, post-control (work burnout) and post-TA (learner burnout) groups.

Descriptive statistics of the well-being measure, pre- and post-intervention are set out in Table 7. The TRE and TA groups had the highest mean score of well-being, with all groups improving well-being after interventions, except for TRE, which dropped slightly. The control group also decreased in well-being, from pre- to post-testing. Inferential statistics tested the significance of these trends. Regression to the mean was not considered to be a confounding variable in the analysis of inferential statistic results because, despite the fact that participants tend to measure less extreme scores in follow-up testing, in this study in some instances, especially in the case of the control group, post-scores were higher than pre-scores.

Table 6

*Descriptive Statistics of Stress and Personal, Work and Learner Burnout*

Group	N	<u>Stress</u>		<u>Personal Burnout</u>		<u>Work Burnout</u>		<u>Learner Burnout</u>	
		M	SD	M	SD	M	SD	M	SD
Control pre	19	1.94	0.51	55.04	23.42	57.14	24.65	53.94	20.66
Control post	20	1.97	0.53	55.62	15.89	54.82	21.84	57.51	14.91
TRE pre	17	1.91	0.39	49.26	16.48	49.36	15.63	44.61	17.47
TRE post	17	1.47	0.51	43.62	16.81	41.38	16.41	35.53	13.67
TP pre	17	1.71	0.56	47.55	13.26	44.95	17.45	44.11	19.76
TP post	15	1.51	0.34	45.83	14.77	40.24	17.67	41.94	17.21
TA pre	10	1.56	0.61	42.08	16.49	42.14	18.11	42.51	19.12
TA post	10	1.38	0.44	39.58	16.46	36.78	16.67	30.00	20.58

Table 7  
*Descriptive Statistics of Well-Being*

Group	N	Well-being	
		M	SD
Control pre	19	6.96	1.63
Control post	20	6.63	1.84
TRE pre	17	7.28	1.29
TRE post	17	7.14	1.51
TP pre	17	6.75	1.54
TP post	15	7.10	1.14
TA pre	10	7.44	1.41
TA post	10	7.90	1.36

### 5.3.3 Inferential statistics

**5.3.3.1 Pre-tests.** Overall, there were mostly no significant differences between the groups' pre-tests on the perceived stress, personal, work, and learner burnout and well-being variables. Exceptions were the TA pre-test measures of perceived stress, which were significantly lower than other groups ( $p=0.047$ ,  $M=1.56$ ) and TA pre-test work burnout ( $p=0.043$ ,  $M=42.14$ ).

**5.3.3.2 Perceived stress.** A comparison of TRE, TP and TA intervention groups ( $n=42$ ) with the control group ( $n=21$ ) on the variable perceived stress revealed a significant interaction effect between intervention\*time,  $F(3.59)=3.08$ ,  $p=0.03$ , partial eta squared=0.08 (See Figure 11). The main intervention effect, comparing the means of the four groups on pre- and post- tests, showed that the control group scored the highest on perceived stress, followed by the TRE, TP and TA groups. The combined pre- and post-mean of the control group ( $M=1.94$ ) was significantly higher than the combined mean of the TP group ( $M=1.60$ ,  $p=0.03$ ) as well as the TA group ( $M=1.47$ ,  $p=0.01$ .) (See Figure 12).

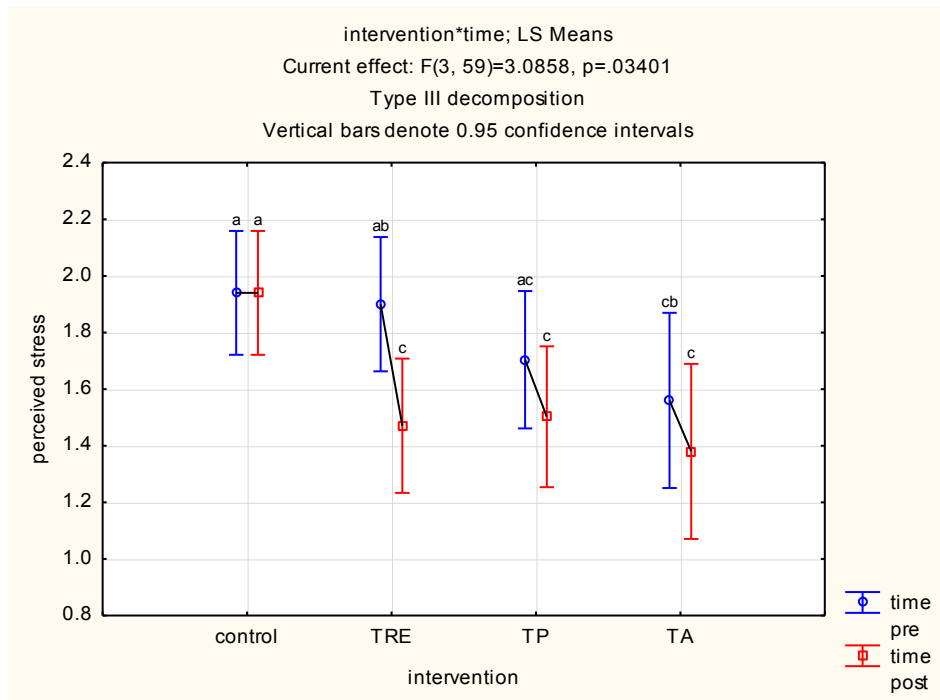


Figure 11. Perceived stress main effect intervention\*time LS Means, TRE, TP and TA intervention groups and control group.

Within group differences showed a significant reduction for TRE pre ( $M=1.90$ ) vs TRE post ( $M=1.47$ ):  $p=0.00$ , with a trend of reduction of stress pre- to post-tests for TP ( $p=0.07$ ), assuming a  $p$  value below 0.1 was a trend. The control group did not change:  $p=0.95$ . Cronbach's alpha for the Perceived Stress measure was .84, indicating adequate internal reliability.

**5.3.3.3 Personal burnout.** A comparison of the combined results of TRE, TP and TA intervention groups ( $n=42$ ) with the control group ( $n=21$ ), revealed a significant effect on the measure personal burnout for intervention,  $F(1.61)=4.57, p=0.04$  (See Figure 13).

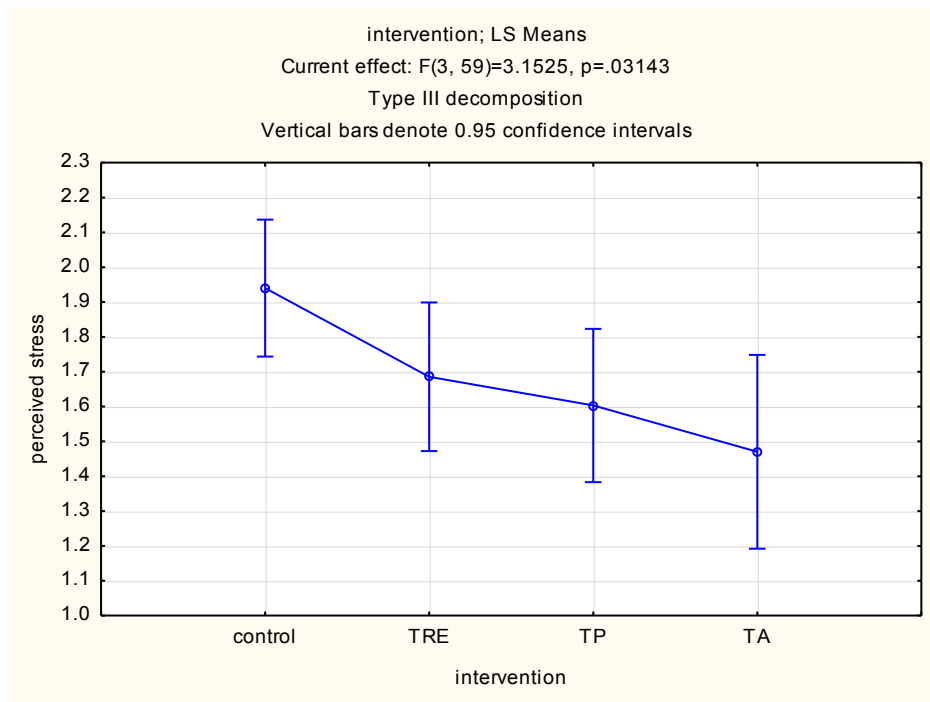


Figure 12: Intervention effect for the control, TRE, TP and TA groups.

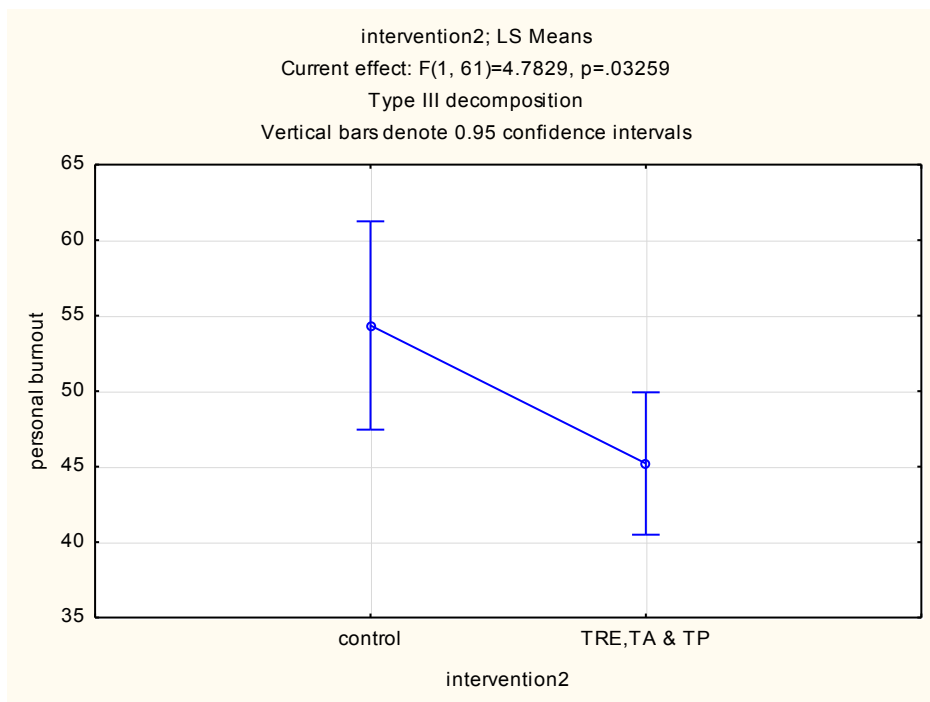
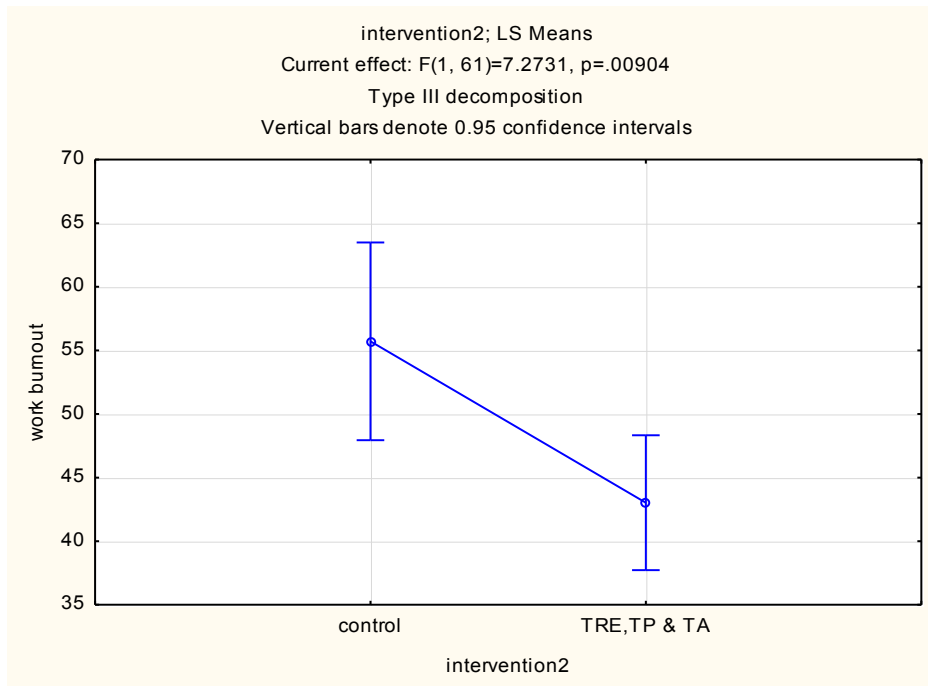


Figure 13: Personal burnout effect intervention, LS Means, with combined TRE, TP and TA intervention groups.

Significant post hoc comparisons between groups were: control post ( $M=55.62$ ) vs TRE post ( $M=43.63$ ):  $p=0.05$  and control post ( $M=55.03$ ) vs TA post ( $M=39.58$ ),  $p=0.02$ .

Cronbach's alpha level for personal burnout was .88.

**5.3.3.4 Work burnout.** A comparison of the combined results of TRE, TP and TA intervention groups (n=42) with the control group (n=21) for work burnout, revealed a significant effect for intervention,  $F(1, 61)=7.27, p=0.01$  (See Figure 14).



*Figure 14: Work burnout effect intervention, LS Means, combined TRE, TP and TA groups with control group.*

On the separate intervention group level, the main effect for work burnout intervention,  $F(4, 64)=3.11, p=0.02$  and time,  $F(1, 64)=10.29, p=0.00$  was significant. Post hoc comparisons between groups showed significant results: control post (M = 53.30) vs TP post (39.18),  $p = 0.03$ ; control post (M = 53.30) vs TA post (36.78),  $p = <0.03$ . Cronbach's alpha level was .89 for work burnout.

**5.3.3.5 Learner burnout.** Figure 15 shows a trend of learner burnout reduction on intervention\*time, with  $F(3, 58)=2.63, p=0.06$  for all three groups compared with the control group. A comparison of the results of the combined TRE, TP and TA intervention groups (n=42) with the control group (n=21) on the variable learner burnout revealed a significant interaction effect on intervention\*time,  $F(1, 60)=7.06, p=0.01$ , partial eta squared 0.11.

Significant differences in results in post hoc comparisons between groups were: control post (M=56.2) vs TRE post (M=35.54),  $p=0.00$ ; control post (M=56.2) vs TP post (M=40.71),  $p=0.01$ ; control post (M=56.2) vs TA post (M=40.71),  $p=0.00$ . Significant results for within groups were: TRE pre (M=44.61) vs TRE post (M=35.53),  $p=0.02$ ; TA pre (M=42.50) vs TA post (M=30.00),  $p=0.02$ ; Figure 16 shows the significant reductions in



learner burnout in the TRE and TA groups, with a shift in reduction in the TP group. Levels of learner burnout in the control group increased in the same time period. Cronbach's alpha level for learner burnout was .86, indicating adequate internal reliability.

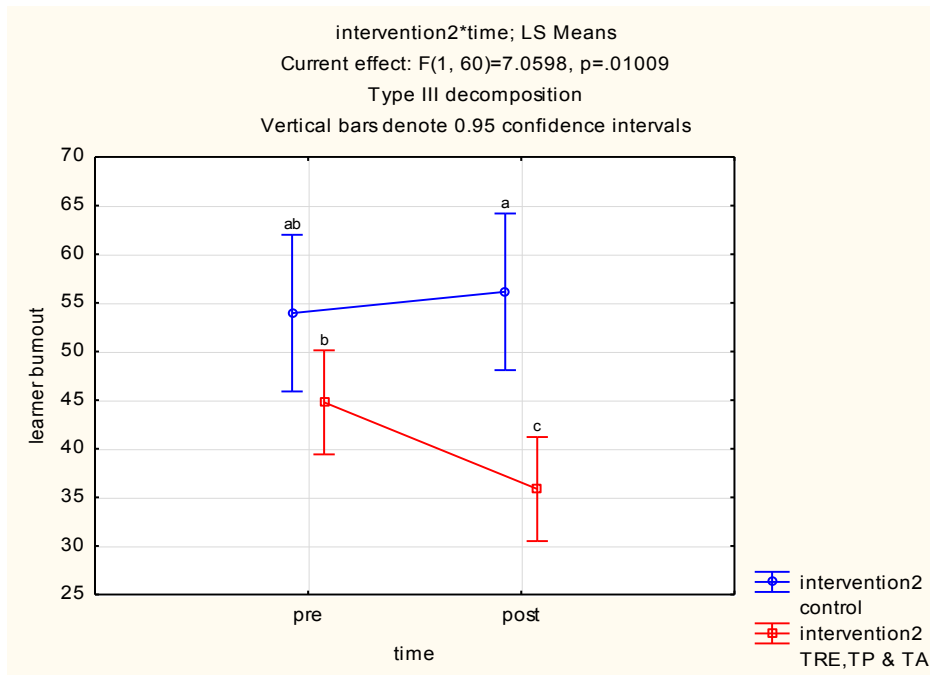


Figure 15. Learner burnout intervention\*time LS Means with intervention TRE, TP and TA groups and control group.

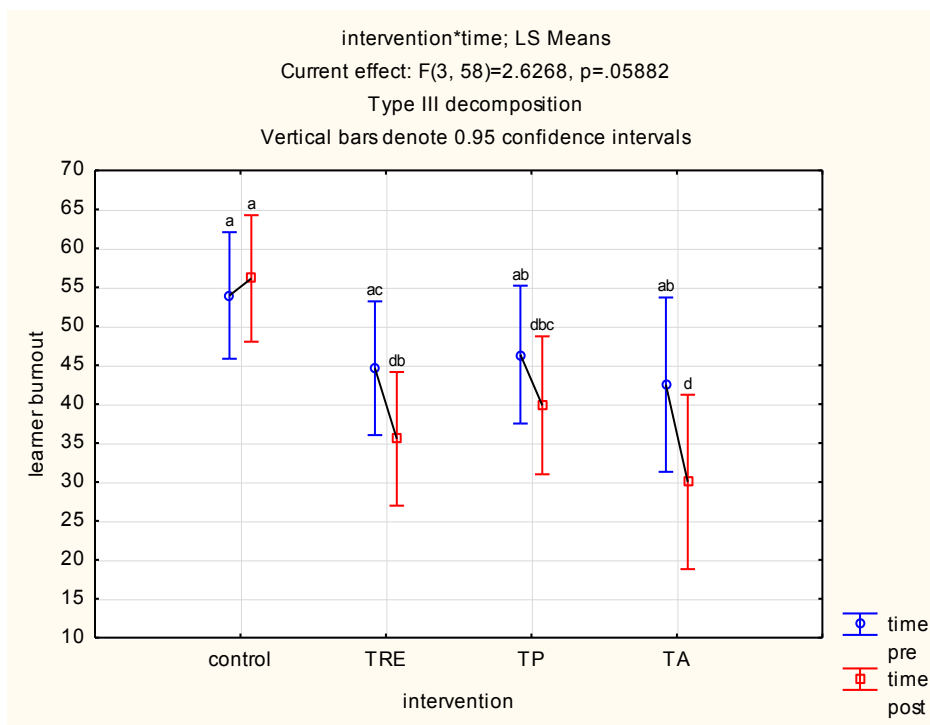


Figure 16: Learner burnout main effect time LS Means, intervention TRE, TP and TA groups and control group.

**5.5.3.5 Well-being.** The interaction effect for intervention\*time was not significant for the variable well-being. Significant post hoc differences between groups were between TA post and control post ( $p=0.03$ ). In this study, Cronbach's alpha coefficient for the well-being scale was .95, with .90 for the emotional stability subscale; .90 for the self-esteem subscale; .83 for the joviality subscale; and .85 for the sociability subscale, indicating adequate internal reliability for the scale as a whole and its subscales.

**5.3.4 Summary of inferential statistical analysis.** A comparison of TRE, TP and TA intervention groups ( $n=42$ ) with the control group ( $n=21$ ) on the variable perceived stress, revealed a significant interaction effect between interventions\*time,  $F(3.59)=3.08$ ,  $p=0.03$ , partial eta squared=0.08. There was a trend for learner burnout reduction  $F(3.58)=2.63$ ,  $p=0.06$  between the control group and intervention groups between intervention\*time. There was significant effect for intervention between combined intervention groups and the control group on personal burnout  $F(1.61)=4.57$ ,  $p=0.04$  and work burnout  $F(4.64)=3.11$ ,  $p=0.02$ . There was a significant effect for time on learner burnout  $F(1.60)=7.06$ ,  $p=0.01$ .

Within group comparisons showed significant perceived stress reduction in the TRE intervention, pre- and post-intervention ( $p<0.00$ ) and learner burnout was significantly reduced ( $p<0.02$ ). Between group comparisons revealed significant differences in learner burnout with control post ( $M=57.5$ ) vs TRE post ( $M=35.53$ ),  $p=0.00$ . The TP intervention showed within group trends of reduction in perceived stress ( $p=0.07$ ) pre- to post-testing and significant control post vs TP post work burnout differences ( $p=0.03$ ) between groups. The TA intervention showed significant differences on learner burnout ( $p=0.02$ ); between group comparison on learner burnout with the control group was also significant ( $p=0.00$ ).

## 5.4 Quantitative Content Analysis

Quantitative content analysis followed statistical analysis, dealing with themes and codes summarising the stressors, emotions and ways of coping described by educators, at pre- and post-intervention stages. Responses to what constitutes a competent classroom were also analysed at pre- and post-intervention stages, in line with the focus of the study. In consideration of the research question, to assess the impact of the intervention on educators, this theme for codes was also included in the post-intervention coding frames, together with suggested improvements to workshops, for future implications.

This information was obtained from written texts, in the form of workshop questionnaires, personal questionnaires and an appreciative inquiry (AI) questionnaire

focusing on stressors in the classroom. Examples of AI questions posed to educators are: Describe a stressful situation experienced in the classroom over the last week. What happened, what emotions did you experience and how did you cope? On reflection, what have you learnt from the transaction? How positive do you feel about your ability to cope with stressors in the classroom? (Appendix 10)

A coding frame was set up with a theme, code, number of occurrences and percentages to fit both the theoretical considerations and the materials. Percentages represented total number of responses from all educators taking part in the intervention. As the theoretical approach to stress and coping in this study was the Lazarus and Folkman (1984) transactional model, major codes were: teaching stressors; emotional response of educators to these stressors pre- and post- intervention; ways of coping pre- and post-intervention. In answering the research question, the impact of the workshops was coded, as well as views of the competent classroom and suggestions for improvements.

As highlighted in Chapter Four, Methodology, ambiguities were avoided as much as possible. For example, in the TRE intervention coding frame for stressors, poor work ethic focused on issues around attitude to work, such as homework not done, while the learner discipline code described behaviour in the classroom. To ensure consistency, this understanding of the terms was carried through to classroom competency, where learner discipline and work ethic were also featured.

#### **5.4.1 Content analysis - TRE intervention**

**5.4.1.1 Stressors.** In line with main stressors listed by teachers in the landscape of teaching, TRE intervention participants described learner behaviour as the most stressful element of teaching, followed by marking and poor work ethic of learners. Unreasonable parents and societal problems were also mentioned (see Appendix 11, Table 8).

**5.4.1.2 Emotional responses before the TRE intervention.** Prior to the start of the TRE intervention, educators reported feeling angry, agitated and upset, disillusioned, frustrated and helpless about the stressors experienced at school (Appendix 11, Table 9). They also recognised the need to stay calm and relaxed. Stressful incidents include finding a learner with a knife, calmly removing it but afterwards threatening the learner about calling management. The educator felt undermined and upset. Another educator felt sad about being ignored in class, and “*very frustrated*” about unruly learners: “*I feel I can’t get through to these learners*”. Discipline problems sometimes escalated to the point of showing disrespect,

and one educator felt that teaching was not for her “*because I might say or do something I might regret*”. This made her feel helpless. Late and struggling learners made an educator feel angry, upset and frustrated; another felt the most stressful incidents were “*learners disobeying me and defying me*”. A stressful incident reported by a teacher was parental reaction that their child was being labelled as “stupid” when he was trying to implement systems for learners at risk of failing the year. “*This is definitely not the case. I was taken aback, a bit angry and felt defeated. I am still working at it*”.

**5.4.1.3 Coping strategies before the TRE intervention.** In order to cope, educators mostly adopted an authoritarian style with learners, shouting and confronting them about their behaviour: “*I shout, ask for cooperation, threaten*”. A minority felt helpless and some did nothing by avoiding the confrontation. Others attempted to stay calm and find the most positive and appropriate response, or followed disciplinary procedures (Appendix 11, Table 10).

**5.4.1.4 Competent classroom before the TRE intervention.** In considering the classroom, educators at the start of the TRE intervention described competency as learners having a good work ethic, positive in attitude, with discipline and adequate resources available. Teachers were learner- and school-focused (See Table 11).

Table 11

*Coding frame: Competent Classroom Pre-TRE Intervention*

Theme	Code	Number	Percentage
Classroom competency	Good work ethic: “ <i>Follow instructions</i> ”; “ <i>Task focussed</i> ”; “ <i>Quiet during teaching</i> ”.	10	42%
	Positive learners: “ <i>Laughter</i> ”; “ <i>Enthusiasm</i> ”; “ <i>Self-aware</i> ”.	10	42%
	Discipline: “ <i>Trust</i> ”; “ <i>Respect</i> ”; “ <i>Class control</i> ”.	3	12%
	Adequate resources	1	4%
	Total	24	100%

**5.4.1.5 Emotional responses after the TRE intervention.** When faced with stressors after the TRE intervention (Appendix 12, Table 12), teachers reported feeling positive, relaxed, calm and grounded. Examples of positive response included: “*I have learnt that I can relax ... I*

provided a learner who had recently had a baby the opportunity to catch up with work and assessment that she had missed". Another teacher felt stressed about preparing an exam paper: "I tried to relax, taking it step by step. I realise I can handle myself and want to stay cool." One teacher felt "lots of sadness" about children suffering in Somalia and shared this with learners "speaking from my heart". A few educators also felt helpless and fearful.

**5.4.1.6 Coping strategies after the TRE intervention.** After the TRE intervention, teachers reported a positive attitude in the classroom, such as respect, caring and offering a smile, as their greatest coping strategy. Staying in control meant keeping a healthy distance and making a plan when necessary (Appendix 12, Table 13): "Hand them over to themselves to take responsibility for their own actions". Educators became aware that their attitude affected others: "I feel relaxed and kids respond to it"; "I gained the insight to relax so that my learners can relax". The coping strategy of physical presence included being grounded and calm:

*There were rude learners back-chatting. I asked one learner to leave but had to take action for the rest of the class. I felt rage and anger – I was not brought up this way. I wanted to give a hiding or raise my voice but I controlled myself. I quietly asked the learner to leave and not losing control made me feel good.*

**5.4.1.7 Competent classroom after the TRE intervention.** In considering what constituted a competent classroom, teachers after the TRE intervention listed calmness, relaxation, greater understanding of both educator and learner, respect and smaller classes as the most important elements. There was also a good work ethic. There was more of an educator-focus in the class after the TRE intervention (See Table 14).

**5.4.1.8 Suggested improvements for TRE intervention.** Suggested improvements of the TRE intervention were: Share more, quieter space, more inclusive of staff, more exercise, less talk; more time on "tender, loving care", longer sessions, more air, water available, blankets for warmth, more positivity. Many participants did not fill in the improvement question, which is difficult to interpret whether they did not answer the question, or whether there were no improvements. Some did say no improvements were necessary: "None – enjoying it totally"; "None so far"; "Okay"; "Good enough"; "Good for staff development"; "At the moment it's fantastic" (Appendix 12, Table 15).

Table 14

*Coding frame: Competent Classroom post-TRE Intervention*

Theme	Code	Number	Percentage
Competent classroom	Calm: <i>“Try not to stress, wait and counter learner action”; “Make a conscious decision not to lose control”.</i>	6	30%
	Good work ethic: <i>“Cooperative learners that listen and work with you”.</i>	4	20%
	Fun: <i>“Enjoying a laugh occasionally”</i>	2	10%
	Relaxed – <i>“Leave stress and busyness outside classroom”; “Have a relaxed attitude”.</i>	2	10%
	Understanding from teacher: <i>“Give them a chance to share emotions”; “Let them overcome negativity”.</i>	2	10%
	Understanding from learner: <i>“A class that understands there is a time and place for work and relaxation”; “Children understand their role”.</i>	2	10%
	Smaller classroom: <i>“Less learners”; “Classroom with less kids”.</i>	2	10%
	Respect: <i>“They must learn respect within themselves and I must role model this for them”.</i>	1	
Total		21	100%

**5.4.1.9 Impact of TRE intervention.** In order to determine the impact of the intervention, two questions were considered in workshop questionnaires: What personal discoveries or insights did you get; How do you plan to use the techniques you have learned? Greater understanding of the self was one of the main effects of the TRE intervention, with educators feeling more positive: *“This feels honestly like a good drug – I feel I can become addicted”.* Some had a sense of freedom: *“I can let go!”* while another had a sense of greater control: *“I looked inside myself – control”.*

Participants became more aware of their bodies, especially the stress and tension they were experiencing: *“I did not really realise that I was tense and stressed”.* Some were more conscious of the power of breathe, *“Breathe, breathe, breathe,”*; while others started to understand the feeling of tremors and felt more in touch with themselves: *“I discovered the*

*novelty of feeling tremors*"; *"Your body can cooperate if you trust yourself ... go deep in yourself."*

TRE was seen as a self-help tool: *"I plan to do this on my own during the week as a form of stress relief"*; *"I need more of these exercises"*; *"I discovered the awesome functioning of the body and its healing capacities"*. With this awareness came the recognition of the need for calm and relaxation: *"If you (are) calm, everyone around you seems calmer"*; *"I plan to chill more"*. Educators also saw the potential for the use of exercises in the class: *"I would like to give the kids a few minutes of breathing exercises before I start with the lesson"*; *"I want to share this technique with my learners"*.

Some participants enjoyed the interaction in the group: *"Great platform to air one's views"*, while others gained theoretical insights from the information provided: *"I gained knowledge about the functioning of the brain and where learners are developmentally"*. Educators felt trust both for themselves and for those facilitating: *"The facilitators are excellent and I feel I can let go of whatever holds me back."* One educator felt a deeper spiritual connection: *"It (TRE) agrees with my spirit"* (see Table 16).

#### **5.4.2 Content analysis – TP intervention**

**5.4.2.1. Stressors.** Educators in the transpersonal psychology (Capacitar workshop) intervention cited undisciplined learners as their greatest teaching stressor: *"Uncooperative learners"*; *"Rude learners"*; *"Disrespectfulness"*. This was followed by administrative tasks and workload: *"Loads of marking, IQMs and CA visits, managing my workload"*, poor work ethic of learners: *"Learners non-commitment to do their work and stay focussed during lessons"*; *"Learners' apathy, attitude towards their education"*, large classes and exam time (Appendix 13, Table 17).

**5.4.2.2 Emotional responses before the TP intervention.** The most traumatic incident that occurred at the start of the TP intervention was the death of a learner, over a long weekend. Prior to meeting at the workshop, this incident had not been dealt with by the teachers or the learners. (Analysis of this incident takes place in section 5.4.2.5 Emotional responses after TP intervention.) In order to cope with general stressors, such as excessive noise, classes not settling down, learners not doing homework, educators responded emotionally in the following manner: angry, frustrated, helpless, threatened and aggressive and sad and concerned. Some remained positive to varying degrees, while others felt negative. In order to

Table 16

*Coding frame: Impact of TRE Intervention*

Theme	Code	Number	Percentage
Impact of TRE intervention	Self-understanding: <i>"I can let go!"; "It's OK to let go and to trust someone else"; "I looked in myself - control"</i> .	21	25%
	Body awareness: <i>"Your body can co-operate if you trust yourself and go deep in yourself"; "I did not really realise that I was so stressed and tense"</i> .	21	25%
	Self-help tool: <i>"I need to do these exercises regularly because I can discover much more about myself"</i> .	15	18%
	Calm and relaxation: <i>"If you (are) calm, everyone around you seems calmer"</i> .	12	14%
	Tools for classroom: <i>"I want to share this technique with my learners"</i> .	10	12%
	Connection with others: <i>"Great platform to air one's views"</i> .	3	4%
	Theoretical insights: <i>"I gained knowledge about the functioning of the brain and where learners are developmentally"</i> .	2	2%
	Spiritual connection: <i>"It (TRE) agrees with my spirit"</i> .	1	1%
Total		85	100%

show that emotions did not take place in isolation, the flow of emotions was illustrated in the anger and negativity codes (Appendix 13, Table 18).

**5.4.2.3 Coping strategies before the TP intervention.** As recorded in the TRE intervention, the most common educator response was authoritarian, involving shouting, swearing and a desire to hit, which was contained: *"I felt like smacking him, but I knew it was not the right thing to do..."* Some teachers felt positive and accepting of the circumstances, while others ignored learners, seeking help from higher authority or setting tasks. One teacher tried light-heartedness, but got a violent response: *"I played hit and tickle - one learner became violent and rude"* (Appendix 13, Table 19).



**5.4.2.4 Competent classroom before the TP intervention.** A good learner work ethic was considered by the majority of educators to be the most important factor of classroom competency, prior to the TP intervention. Respect and values of learners was also considered important. There was awareness of competency of educators, with the focus then turning to discipline of learners and size of classes (see Table 20).

**5.4.2.5 Emotional responses after TP intervention.** TP delegates felt more self-connected, being more in tune with feelings and in charge of handling emotions. This emotional intelligence was also felt in the classroom: *“I felt in control, appreciated and respected.”* Educators also felt empowered to make a difference in their own lives and in the lives of others: *“Dealing with life is not so bad after all”*. In the TP intervention, group connection was felt strongly, which happened on both an emotional and physical level: *“I became more aware of my own body and learnt to trust others with the body”*.

Table 20

*Coding frame – Competent Classroom, pre-TP Intervention*

Theme	Code	Number	Percentage
Classroom competency	Good work ethic: <i>“A disciplined, focused, working class environment”</i> ; <i>“Learners who do their work in class”</i> .	10	34%
	Respect and values: <i>“Conduct themselves in an appropriate manner - respect and values”</i> ; <i>“Civil conversation, mature responses from learners”</i> .	7	24%
	Educator competency: <i>“Be well prepared”</i> ; <i>“Use praise more often”</i> .	7	24%
	Discipline: <i>“Calm, cooperative learners”</i> ; <i>“Learners eager and interested to learn”</i> .	4	14%
	Smaller class	1	3%
	Total	29	100%

Educators felt more positive, with emotions, for example, of caring, peaceful and calm. They felt more relaxed, physically and mentally, and more connected to others, whether this was learners, family or friends. Negative emotions were still felt by some teachers in the

classroom, such as; “*Out of depth, dissociation and irritation*”. Others felt more respectful and appreciative of people and two educators felt more spiritual connection to God in the workshops. One felt more compassion (see Appendix 14, Table 21). In dealing with the death of a learner, the TP intervention created a healing space for emotional processing:

*I did not realise how C’s death affected me. Yesterday I had a brief moment thinking about him and I was so busy with my hectic life that I did not want it to affect me. Until today. I am glad I could experience today the way we did. I did not speak to the class about it. I feel that I must speak to them and say how I feel and ask them how they feel about his death.*

**5.4.2.6 Coping strategies after the TP intervention.** Educators found being calm and relaxed and passing this onto learners were their greatest coping strategies after the workshops, together with the ability to reason and understand why learners behaved in a disruptive way. Mindful self-awareness lead to more thoughtful responses: “*I find that I stop myself and first think before I react to the learners when they misbehave*”. These self-insights assisted educators in the classroom: “*Being conscious of who and where I am, and how I feel*”. They also felt better able to cope with practical tools, such as the finger holds, emotional freedom technique and safe space visualisation techniques which were taught. In opening up to the group, they discovered the power of sharing and wanted to pass this onto learners: “*I find it so strange that all of us can share together*”. After the workshops, some educators appreciated positive behaviour and the importance of modelling this new way of being: “*If I am calm, my learners are calm*”. Some wanted to lighten up, while others still found it difficult to get out of negative behaviour like shouting. One teacher just wanted to let her learners “*be*” (Appendix 14, Table 22).

**5.4.2.7 Competent classroom after the TP intervention.** Participants after the workshops described the competent classroom as having first and foremost a positive, capable educator who was able to be a role model for students. Good learner work ethic was followed by the awareness that the classroom should be a happy, safe space, with a good atmosphere, “*like a home, because it is a place I want to be*”. One educator felt it important to communicate better with parents and another opted for smaller classes (See Table 23).

**5.4.2.8 Suggested improvements for TP intervention.** While many educators felt no improvements were necessary, others found starting and ending times to be an issue. Some

Table 23

*Coding frame – Competent classroom, post-TP intervention*

Theme	Code	Number	Percentage
Classroom competency	Educator competency: <i>"Educator to be more positive"; "Able to achieve, dare to dream and able to keep calm"</i> .	10	37%
	Good work ethic: <i>"Learners able to interact but not rude"; "Work as expected"</i> .	7	26%
	Safe, happy space: <i>"Create an atmosphere: pictures, curtains, clean floor"; "It will always be like a home because it is a place I want to be"</i> .	5	18%
	Better communication with parents: <i>"Parents informed of children's progress"</i> .	4	15%
	Smaller class: <i>"Small class with everyone participating"</i> .	1	4%
	Total		27

teachers wanted more people involved, while others wanted different input like practical demonstrations, interactive activities and slide presentations. Aspects of facilities were criticised, such as food, drink and seating. Some educators wanted more sharing, while one wanted less (Appendix 14, Table 24).

**5.4.2.9 Impact of TP intervention.** Practical tools offered to educators made the greatest impact in the TP intervention – these ranged from acupressure points, to emotional freedom technique and tai chi. With these tools, teachers were able to modify their behaviour in the way they handled stressors. They became more aware of emotions and how to handle them.

During and after the workshops, educators felt more at peace, calm and relaxed. They made a deeper connection with themselves: *"I discovered how the body and mind work as a whole"*, and were able to connect better with others, including staff, learners, friends and family: *"Not only is it good to share, it is also healthy"*.

Educators learnt new theories on the brain, and engaged with concepts like higher consciousness and healing energy. They were more aware of their own stress and the traumas of others. They felt a gratitude and appreciation of others and intended to apply new insights into their lives. Some made deeper spiritual connections: *"You are a spirit in a physical body"* and others felt lighter: *"Do not take your work too seriously"* (see Table 25).

Table 25

*Coding frame: Impact of TP Intervention*

Theme	Code	Number	Percentage
Impact of TP intervention	Tools for classroom: <i>"I want to use brain gym", "Life Orientation application"; "Create a safe space for learners"</i> .	18	20%
	Body awareness: <i>"I discovered how wonderful the body is - (it) works like a fine-tuned instrument, a miracle!"; "Becoming more aware of my body and the effect that someone else can have on it"</i> .	18	20%
	Self-understanding: <i>"I discovered how the body and mind work as a whole"; "I discovered my detachment from violence and aggression"</i> .	16	18%
	Self-help tools: <i>"Breathing exercises play a role in a person's life"; "I plan to do the little Tai Chi I have learnt in the morning and at night"</i> .	12	13%
	Calm and relaxation: <i>"Find some inner peace in a stressful day"; "To be more patient and calm"</i> .	10	11%
	New theory/insights: <i>"I found we have an energy field around us and it has an effect on us"; "Awareness of higher consciousness"</i> .	8	9%
	Connection with others: <i>"Talking helps to destress, let go of tension"; "In debrief I learnt that people handle trauma differently"</i> .	6	6%
	Connection to spirit: <i>"You are a spirit in a physical body"; "I thank the Almighty for all that I am blessed with"</i> .	3	3%
	Total	91	100%

### 5.4.3 Content analysis – TA intervention

**5.4.3.1 Stressors.** In line with other interventions, learner behaviour: *"Ill-discipline of learners"*; administration/workload: *"Department regulations of teaching"*; poor student work ethic: *"student apathy"* and illiteracy of learners: *"Level of attention of students"* were major stressors for TA teachers. In addition, they cited conditions at the school, parents who did not care or control their children, and having to teach a new subject area as major teaching stressors (Appendix 15, Table 26).

**5.4.3.2 Emotional responses before the TA intervention.** Educators attending the TA intervention described a number of stressful events occurring at the school, which resulted in

a variety of emotional responses. In one example, these emotions ranged from being angry, upset, stressed and anxious when a learner refused to take out his books. Stressors of having a learner shot and discovering a learner had been molested left an educator feeling shocked and traumatised, and he admitted he was still trying to cope with these events. Another educator described feeling disempowered when learners do not come to class with any materials like paper and scissors: *"I feel powerless and hopeless"*.

When Grade 12 learners came to class without completing an assignment, the educator felt angry, anxious and helpless. Another educator tried to disregard a learner “bunking” in class and not working. She felt anger, anxiety and helplessness. When a teacher felt under pressure during moderation, she withdrew, became quiet and was irritated with the learners. When a Grade 10 class would not cooperate, the educator felt despondent, disappointed and worried (Appendix 15, Table 27).

**5.4.3.3 Coping strategies before the TA intervention.** In order to cope in stressful school situations, educators adopted a number of strategies, including a positive response: *"I try not to give up, to approach things from a different angle. Stories that they can relate to help a lot"*. Some educators tried to use control with learners, while others became aggressive and threatening: *"My reaction produced no positive result. I struggle with situations like these (throwing the learner out of class)"*. Another coping strategy was to disregard or ignore the disruptive learner, or to appeal to reason: *"I felt out of control of my emotions and used reason to appeal to noisy matrices"* (Appendix 15, Table 28).

**5.4.3.4 Competent classroom before the TA intervention.** Good work ethic was considered the most important aspect of the competent classroom for teachers prior to attending the TA intervention: *"Positive and hard-working learners"*. This is followed by well-equipped classrooms: *"Conducive environment"*, competent teachers: *"Well-prepared teacher"*, and a better context than the Cape Flats (see Table 29).

**5.4.3.5 Emotional responses after the TA intervention.** Some educators felt extremely positive and confident after the TA intervention: *"Positive, confident, in control"*, *"I am positive and think before taking action"*. Although they also felt angry in stressful situations and negative emotions when challenged by learners, these reactions were processed rationally: *"I felt understanding and in control"*; *"I did contracting with the parents and resolved the issue instead of shouting"*. Educators felt calm, grateful and empowered: *"Thank you for empowering me as a father, husband, educator, manager and church leader with these skills. Your input, sacrifice, is (are) definitely valuable"* (Appendix 16, Table 30).

Table 29

*Coding frame – Competent Classroom, Pre-TA Intervention*

Theme	Code	Number	Percentage
Classroom competency	Good work ethic: <i>"Positive and hard-working learners"; "Learners willing to learn"</i> .	6	43%
	Well-equipped classroom: <i>"Conducive environment"; "More resources"</i> .	5	36%
	Educator competency: <i>"Well-prepared teacher"; "I must be positive"</i> .	2	14%
	Better environment: <i>"Any class outside of this environment"</i> .	1	7%
	Total	14	100%

**5.4.3.6 Coping strategies after the TA intervention.** Educators mostly drew on rational analysis and awareness to cope with stressful situations after the TA intervention: *"I managed to calm the situation by thinking about it"*; *"I am positive and think before taking action"*. They used TA terminology to rationalise their behaviour in a stressful situation: *"I feel empowered by the workshops with a range of insights which are all very helpful and these are/will add value to the way I interact with learners, parents and teachers"*. Educators felt more positive, confident and in control. They still experienced a variety of negative emotions in stressful situations, but with insight moved to a more able position. *"I was disappointed, angry, disturbed"* to *"calm, positive, rational"*. When a teacher choked a learner, the TA educator, who was also deputy principal, felt initially disappointed, but then calm and rational, which allowed for a cool-off period with the parent, which he described as *"working for the confrontation"*. He then felt *"positive and good"*. With empowerment, educators became calm and empathetic towards learners (Appendix 16, Table 31).

**5.4.3.7 Competent classroom after the TA intervention.** In line with these insights, the competent classroom was one in which there was primarily positive interaction between educator and learner: *"By being a positive teacher in a classroom with visible positive signs, our learners will become positive too"*. There was an informed educator in the competent classroom, with implemented TA insights: *"Giving positive strokes, trying to make lessons more interesting"*; *"A class that responds to contracting and knows its boundaries"*. Academic work was improved and there was learner support: *"Learners must feel safe;*

*educators need to create this atmosphere*". The classroom environment should be conducive to learning, *"with adequate resources"* (Table 32).

Table 32

*Coding Frame: Competent Classroom, Post-TA Intervention*

Theme	Code	Number	Percentage
Classroom competency	Positive interaction between educator and learner: <i>"By being a positive teacher in a classroom with visible positive signs, our learners will become positive too"</i> .	7	28%
	Informed educator: <i>"One in which educator implements everything learnt in TA"; "A class that responds to contracting and knows its boundaries"</i> .	6	24%
	Improved academic work: <i>"Learners should be focused, study, strive for goals"</i> .	5	20%
	Learner support: <i>"Learners must feel safe; educators need to create this atmosphere"</i> .	5	20%
	Conducive environment: <i>"A peaceful, warm atmosphere conducive to learning"</i> .	2	8%
	Total		25

**5.4.3.8 Suggested improvements for TA intervention.** Most comments were positive and suggested no improvements to the workshops: *"Everything must stay the same"*; *"Continue the good work"*; *"Workshops on TA were interesting and fun compared with those offered by WCED. I'm going to miss it!"* Educators then listed more time as a suggested improvement: *"More time and days"*, *"Go slower so PAC (Parent, Adult, Child ego states) elements can be properly understood"*. Some educators wanted more interaction/discussion around topics: *"Make it more lively"*; *"Currently the interaction of everyone present – the informal yet formative nature of the sessions if very helpful"*; *"Was confused by transactions vs operations - needs to be better explained from the beginning"*. A few delegates wanted another venue: *"Change the venue from the staff room to the library"*, while others wanted the workshops more relevant to their environment: *"Relate the PAC to our learners in this environment"*.

Better materials were requested by some educators: *“More detailed notes”*; *“Might show short video clips on observing different clues while detecting driver behaviour”*, while others wanted a different time for workshops: *“Time/earlier -loved the morning workshop!”* Several educators wanted the workshops to be more inclusive: *“Currently we are having psychology chats and not including the five teachers who did not study psych!”*; *“Do it with the whole school”* (Appendix 16, Table 33).

**5.4.3.9 Impact of TA intervention.** In TA workshops, teachers were given practical tools to deal with learners in the classroom. These ranged from contracting with classes to positive strokes, maintaining a structured discipline and encouraging attitude. Other practical tools which could be applied were drivers, which explained behaviour, ego states, which gave behavioural insights and the drama triangle and winners’ circle, which revealed unhealthy and healthy positions.

In using these tools, educators connected positively with others: *“I can use it in any relationship – e.g. between me and my wife”*; *“(I) plan to use it in my small ladies' group”*. Educators gained self-help tools to cope in difficult situations: *“It is imperative to value the input of all role players”*. With better self-understanding, educators feel more empowered to cope: *“I discovered that I am good enough as I am”*; *“I plan to develop self-awareness with learners and parents”* (see Table 34).

#### **5.4.4 Summary of coding analysis**

There were six main impacts of the interventions listed by educators: Intra-individual responses - Impact 1: Body awareness; Impact 2: Calm and relaxation; Impact 3: Self-help tool; Impact 4: Self-understanding; and inter-individual responses; Impact 5: Tools for the classroom and Impact 6: Connection to others. Two further intra-individual impacts, Spiritual awareness (Impact 7) and Theoretical insights (Impact 8) were also listed.

In considering these impacts in relation to the different interventions, the following conclusions were drawn (see Figure 17). The TRE intervention offered intra-individual tools, leading to self-understanding and body awareness. It was also considered a self-help tool and effective for calm and relaxation. However, it did not offer inter-individual tools for the classroom and participants did not comment on connecting with others.

In the case of TP, both intra-and inter-individual tools were offered, leading to better interaction in the classroom as well as more body awareness. They gained self-understanding



Table 34

*Coding Frame: Impact of TA Intervention*

Theme	Code	Number	Percentage
Impact of TA intervention	Tools for classroom: <i>"I discovered how to use contracts in each of my classes", "I suppose strokes are important to everyone - but especially our learners given their context"</i> .	27	38%
	Connection with others: <i>"I can use it in any relationship – e.g. between me and my wife"; "Plan to use it in my small ladies' group"</i> .	19	26%
	Self-help tools: <i>"Self-help tools"; "It was confirmed that I have control over the life position I assume and that position will suggest to others how they will respond to it"; "It is imperative to value the input of all role players"</i> .	15	21%
	Self-understanding: <i>"I discovered that I am good enough as I am"; "I plan to develop self-awareness with learners and parents"</i> .	11	15%
	Total	72	100%

and were equipped with self-help tools, together with improved spiritual awareness and theoretical insights.

TA supported inter-individual transactions, offering the most tools for the classroom and created a connection with the group. Self-help tools were gained and greater understanding of self resulted. However, there was neither body awareness nor calm and relaxation for educators in this intervention.

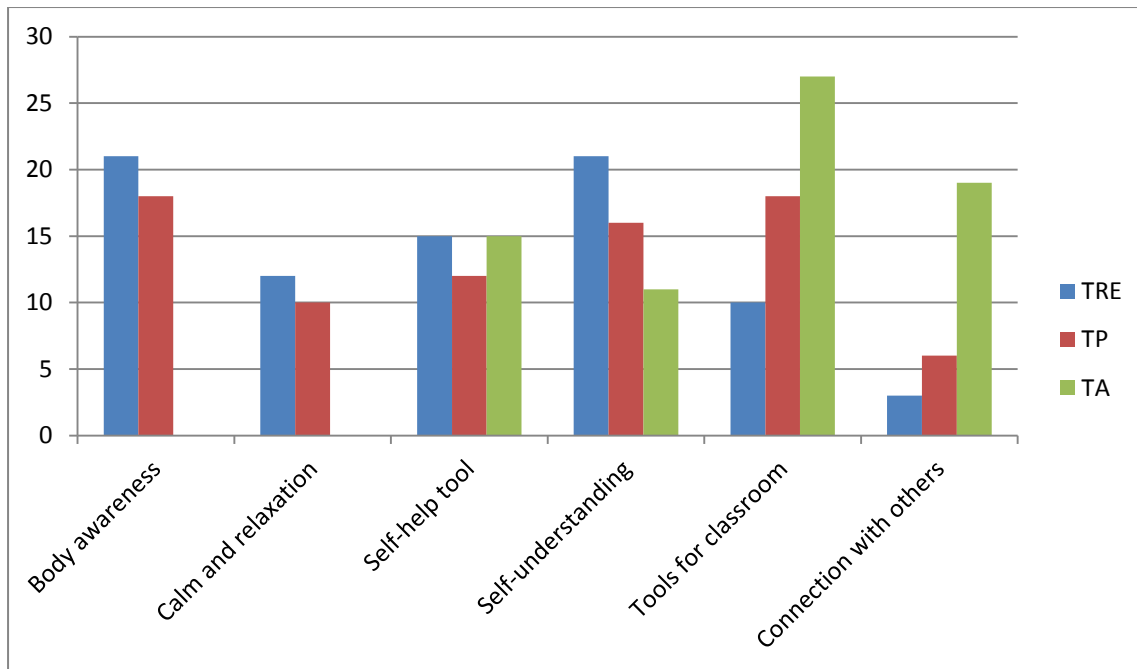


Figure 17. Summary of impact of interventions

### 5.5 Qualitative Thematic Analysis

Qualitative data analysis establishes dominant themes from focus group interviews. Describing the “slipperiness of human conceptions of reality,” Mabry (2009, p. 218) questions whether interpretivist methods seek to resolve social ambiguities into nomothetic findings or problematise them. She suggests that an attitude of openness about truth or reality should facilitate depths of understanding, propelling investigations to a profound level.

In extracting dominant themes from focus groups in the three interventions of this study, an effort was made to penetrate the unknown, avoiding preconceived ideas about the anticipated impact of interventions on educators. The following broad areas were considered in each intervention and discussed with groups before conclusions were drawn: relationship with self; relationship with others; relationship with school. This is in line with the correlates of burnout considered by Halbesleben and Buckley (2004), with individual, interpersonal and organisational levels being considered in research. Citing Maslach and Leiter (1997), these researchers consider how despite common organisational stressors, people react differently. Two major trends are individual attributes in moderating work environmental burnout and the role of social exchange relationships.

### 5.5.1. TRE intervention

**5.5.1.1 Dominant themes.** In considering dominant themes, teachers' responses to tremoring were divided between physical and emotional reactions, with impact on self-concept and thinking processes also taken into consideration. General positive impressions of the group were that tremoring resulted in improved self-efficacy (that is, ability to handle life's difficulties) through being more in a heart space; there was greater emotional intelligence, teachers felt more in control, less stressed about others, they were better able to connect with themselves, trust and let go, feeling more grounded and centred. However, some teachers did not find it an empowering experience; some found it required too much discipline, that it was in conflict with other therapies, and that the group space did not feel safe. Some said they felt unsure of the benefits and that they would rather find different ways to cope and release stress.

As tremoring is a primarily physical activity, teachers initially described their physical experiences, comparing the intervention to a visit to the gym. Some thought that as a physical outlet for stress, it competed with the gym:

*There was a time when I thought, ok, right, I am doing the tremoring, but I am enjoying doing the gymming more, and the same type of experience I had in the tremoring, it's to a certain extent the same as in the gym. (Male educator, 34 years old)*

Another teacher, who visited the gym regularly, was also interested in comparing the two physical experiences for destressing. "I am also in the gym but I also wanted to grab this opportunity to see what this is going to do for me." He admitted that in the beginning he tried to understand what it was all about, and concluded that in the end, tremoring was more about relaxation than exercise or information:

*You know in the beginning I was very reluctant and I was more for the knowledge and the head stuff - but I have been through all 10 sessions and what I have experienced here on a Wednesday is that it was more relaxing for me, it is about the relaxation. (Male educator, 43 years old)*

Being an action man, this teacher then questioned relaxation, wondering if he needed to give it more time to feel the benefits:

*I need to do something, I need to go to the gym, and I need to be on the bicycle and treadmill, I feel I must do something with my body - for me it is almost like that is results orientated, and I don't know if this is a long process that you need to get the results.*

Considering the sports field, the school coach linked trembling positively to learner performance in sport:

*Being a coach and sportsman, you are talking about things that are going to happen in the future - and I must say, doing TRE and also being a coach, I know the combination of the two when it comes to performance on an athletics track. For example, if we combine this, my athletes will perform even better than they are performing now. (Male educator, 40 years old)*

He attributed this improved performance to the process of becoming calm and grounded, despite challenging home circumstances:

*Being grounded, my wife is always going on about being grounded at home and it works. I have a lot of women at home – it drives me insane sometimes (laughter) - but now I am absolutely calm. Where does it come from? I have the combination of doing exercise and also the ability of doing this (tremoring) as well as just the general sense of what it's like to be a coach, to take someone to the next level.*

During the trembling process, focus was placed on the breath and this awareness led one educator to feel more in control of his life, although the exercises taught participants to let go of control. Ironically he found by letting go of control in some areas and being more in control in others, his life had become more balanced:

*Ya, I think, um, how I have benefitted from this process (pause), in certain aspects of my life, you sort of realise that you can't always be in control and I realise I always try and be in control (laughter). And I think with the, initially with the process, I could already feel the tremors coming, but I would try to hold back because I wanted to be in control. So eventually I decided just to let go and when I did let go I really, really benefitted from the physical trembling process.*

*And at the same time I have also learnt to take control of things that I normally don't, and there I am specifically referring to the breathing part of it. We tend to breathe subconsciously – none of us think about the breathing and it is not as effective if you are not (aware of) breathing ... So in a nutshell, it made a more balanced person out of me in that in some aspects of my life where I try to take control, I have just let go of it and in other aspects where I tend not to take control, I have become a little bit more responsible. (Male educator, 45 years old)*

This educator then related feelings of fragmentation and groundedness to being a teacher and the improved perspective he gained about himself and his learners:

*Um, I think with the actual benefit, people talk about fragmentation and being grounded, I like to think of myself before TRE as being a relatively grounded person. I think I got a little bit of a better perspective about myself and of my learners, but I don't think we have been involved in the process long enough for miracles to have happened, but I do feel after a tremoring session, I felt as though I was able to take on the world, I felt much more calm, much more able to deal with things than before I walked into the room and I think that if any of us pursued TRE process on an almost daily basis, I think that would become compounded and we would benefit from it much more.*

Calmness and the addictive nature of needing tremoring as a fix were then discussed.

This teacher learnt to put herself first and put less stress on others:

*I think TRE needs to be a selfish thing – you do it for yourself so that you can become a better person. It made me more calm - sometimes to the extent that I find it strange that I do not comment on things that irritate me. I just let it pass. And when I don't, on Monday or Tuesday, when we are only going to tremor on the Wednesday, I become agitated, I need to have that fix again to keep myself calm for the rest of the time ... I don't demand things from my family at home, for example, when the kids don't do their homework, I am not going to tire myself, fight a losing battle. I am calm about it and I think I get a better response. (Female teacher, 41 years old)*

This educator was better able to handle difficult classes after the tremoring, transferring her calmness to the learners. This was a subtle shift for her in managing problematic learners:

*With one difficult class I have their attention all the time because I am calm. I don't rant and rave and scream - not that I used to before but I have changed my tone a bit, I am quiet all the time. I find that they listen to me. I stand there and am physically grounded and teach them to get their attention. And they focus on something and be quiet and I think, this must be doing something right.*

For some educators, tremoring helped them to reconnect to a heart space and find important strengths from within:

*I think your goal as an educator is to be very strong within you, with the goals and objectives of where you want to take a student and, um, you've got to believe in yourself more than anything else. And when you talk to anyone, whether it is a student or adult - it's got to come from your heart. If it does not come from your heart, it means nothing. (Male educator, 49 years old)*

Another educator explained how she got into this heart space with tremoring and how the intervention enabled her to release her stress in the classroom:

*I try to be compassionate towards my learners, I am very concerned about my learners if they are doing wrong, not doing homework and not studying, and that stresses me out a lot. I have learned with the tremoring to let this out, I learnt to step out. I work from the inside and get involved with them and try to move out, and that helped a lot. This (tremoring) actually released my stress or made my stress a little less. (Female educator, 54 years old)*

For some educators tremoring gave a sense of wholeness and connection with themselves which seemed to occur on a profound level: *“I would like to see this continuing because it makes me as an individual feel more whole – and I am not totally whole yet. I mean we are all striving, trying to be perfect but not quite getting there ...”*; *“I am too deeply fragmented you know, as a person and the tremoring has assisted me to deal with issues that I needed to confront so that in that way there are some closures for me personally”*.

For some the tremoring group provided a safe space to relax and it was ground-breaking in getting staff together:

*When I cry, I cry, when I laugh, I laugh, when I snore, I snore (laughter from the group). So that for me is important because I don't want to pretend, I want to be who I am and I think that is important. With TRE we experienced a lot, and we compared how we were feeling and we saw how unfit we are and how uncomfortable we can feel in our own space. But I think this was a fantastic experience and it should go on. (Male educator, 45 years old)*

*I think that the tremoring has been quite ground-breaking in terms of attempting to collectively try and get our teachers together – even though we are not totally together – about half our staff has actually engaged in this type of activity. (Female educator, 40 years old)*

For others, it was not a comfortable space and they did not give it the participation they came to believe it deserved: *“I was in the wrong space in my life to give it the opportunity it deserved. I came up with the idea that my body became balanced again. I don't want to portray a negativity towards it, it is not that at all”* (Male educator, 35 years old).

*I was thinking that maybe I shouldn't say anything. I started, um, I was in a very bad space. I feel that many times I forced myself to come here. I, um, wanted to benefit from*

*it but because I was in such a bad emotional psychological space, I just really didn't reap the benefits from it, although I could identify with a few things. I am usually a person who is game and wanting to experience new things, but um it was not the right time...I am in therapy, psychotherapy.* (Female educator, 45 years old)

Several teachers said that they had hoped to practise tremoring regularly, but despite good intentions, had not been able to maintain the required discipline and they felt they needed more time to progress;

*Make it part of a regiment so that, God willing, with the new year it can actually become part of my daily life, as opposed to just having one specific um period during the week to do the tremoring and then I think I will be able to measure the success of it personally for me also.* (Female educator, 44 years old)

The difficulty of practically implementing tremoring into daily life was echoed by another teacher: *"I found the sessions very, um, fruitful. Um, my life is always stressful in the sense that I am always busy, my body is always tense. I have very little me time...I don't have time to really relax and just let go"* (Female educator, 54 years old).

One teacher acknowledged the individual nature of the sessions, but thought the focus should be on school benefits: *"I think it is happening for different people in different ways – but how do you turn that into a school thing because that is ultimately why we are here and why you came to our school. It will help the individual...but something needs to happen in terms of the school"*.

A summary of TRE themes follows in Table 35, focusing firstly on relationship with the self, and then in Table 36, on others and the school:

Table 35

*Summary of TRE Dominant Themes*

Physical impact	Relationship with Self		
	Emotional impact	Self-concept	Thinking processes
Physical outlet for stress, competing with or enhancing gym and other exercises: <i>“Everyone needs an outlet, some sort of physical activity”</i> .	Gives time for self-care: <i>“Selfishly put oneself first”</i> .	Feel more whole, real: <i>“Have taken off the mask”; “It makes me as an individual feel more whole”</i> .	Helped deal with issues: <i>“Tremoring has assisted me to deal with issues that I needed to confront, so in that way there are some closures for me personally”</i> .
Groundedness, which leads to better physical performance eg athletes at school: <i>“For me this (tremoring) is excellent, adding to the other things that keep me grounded”</i> .	Feel more of a heart connection; feel others’ humanness: <i>“If it does not come from your heart it means nothing”</i> .	Internal struggle between knowing that quiet is beneficial but wanting to be active: <i>“I know you also need to be quiet but I feel like my body is active”</i> .	Need for more information on TRE and stress: <i>“I loved the TRE but I feel that we still need a lot of knowledge so that you can know the background and what to do in certain situations”</i> .
Relaxes the body, brings calm: <i>“After a tremoring session I felt I was able to take on the world, I felt more calm”</i> .	Helps to destress after interaction with learners: <i>“This is actually helping me (to destress)”</i> .	Understand the need to self-connect, but can be hard to schedule into busy lives: <i>“I have very little ‘me’ time”</i> .	Curious to compare TRE impact with normal exercises: <i>“It was uncharted territory for me and I wanted to contrast the two”</i> .



Table 35

Summary of TRE Dominant Themes (continued)

Physical impact	Relationship with Self		
	Emotional impact	Self-concept	Thinking processes
Offers practical physical tools to cope: <i>"I went for an operation and I started to breathe and relax"</i> .	Boundary setting with more self-control and emotional intelligence: <i>"I felt more in control"</i> .	Stops the busyness – time to let go: <i>"You just relax, you close your eyes and drift away"</i> .	Developed more belief in self; think of becoming a better person: <i>"Your goal as an educator is to be very strong within you"</i> .
Feel more physically balanced: <i>"Tremoring has assisted me a lot to centre me because coming to a new school I needed to establish myself"</i> .	Sense of containment and holding: <i>"I feel more in control - it is a tool you can use to operate more effectively"</i> .	Helps to become a better person – improved sense of self: <i>"It was a little gift that was given and it helped – you take that gift and you sow it, within ourselves"</i> .	Teaches to let go of control and find more control: <i>"It made a more balanced person out of me"</i> .
Hard to do at home – need more time at school: <i>"I need to do this at home but the time is not there"</i> .	Releases frustration: <i>"The first time she felt emotional afterwards but there was no crying or weeping"</i>  Initially can bring up agitation but this soon settles: <i>"I am much more calm"</i> .	Awareness of a need for more time to "be": <i>"It has really positively influenced my life"</i> .	Can be hard to integrate with conventional therapy: <i>"I am in therapy and hope one day I will experience it"</i>  Know it works on a deep level: <i>"I know this is not just an exercise ... I can see that it works"</i> .

Table 36

*Summary of TRE Dominant Themes*

Relationship with Others	Relationship with School
<p>Division amongst staff between those who tremored and those who did not: <i>“ I feel that as a staff we are all separate entities – that we are not yet united as a collective body that stands together”</i>.</p>	<p>Helps to identify core issues; important to focus on discipline: <i>“ Go back in the room and take control of the class”</i>.</p>
<p>Ground-breaking; unity with teachers in workshop; can strengthen cohesion: <i>“I think that tremoring has been quite ground-breaking in terms of attempting to collectively try and get our teachers together – even though we are not totally together, about half of our staff have actually engaged in this type of activity”</i> .</p>	<p>Catalyst for being real, moving forward: <i>“I have to believe what I am saying to them; if they don’t believe me then they are not going to take it”</i>.</p>
<p>Issues around safety and trust; easier for some than others: <i>“Somehow the group was stifling because I was not entirely comfortable with everybody”</i>.</p>	<p>Helps to destress and relate to learners: <i>“I work from the inside and try to get involved with them and that helped a lot”</i>.</p>
<p>Felt like a personal gift which needs to be paid forward: <i>“Because it is inexpensive, you are given this gift to do something with”</i>.</p>	<p>Helps to prioritise role in school: <i>“We are so stressed and instead of just saying I am teaching, I am busy with a human being, trying to make changes”</i>.</p>
<p>Family benefits - emotional clearing with teenagers without talk; <i>“She said she missed her mom and I wondered: How could tremoring bring on this thought? She released something and something happened that gave me the firm belief that this works”</i>.</p>	<p>Realisation of importance of respect, compassion and safety for learners: <i>“The competent classroom is one with mutual respect from both sides, with understanding, cooperation and good work ethic. There needs to be compassion and safety for learners”</i>.</p>

Table 36

*Summary of TRE Dominant Themes (continued)*

Relationship with Others	Relationship with School
<p>More effective parenting skills: <i>“I have found that I am extremely calm to the point that I worry sometimes. Shouldn’t I comment on that, shouldn’t I worry that you are coming home late?”</i></p>	<p>View of a competent school: <i>“The competent school fosters critical thinking, positive reinforcement and happiness. There is safety, harmony, unity and co-operation”.</i></p>
<p>Better control and interaction with learners, parents and educators: <i>“I am thinking that if you make this part of staff development, it will certainly have an added effect on people”.</i></p>	<p>Importance of relating to school issues: <i>“How do you turn it into a school thing because that is ultimately why we are here”.</i></p>
<p>More light-heartedness and joking among teachers who have tremored together: <i>“This thing worked like a bomb for me because I feel comfortable in this space” (laughs).</i></p>	

## 5.5.2 TP intervention

**5.5.2.1 Dominant themes.** With dominant themes grouped into broad categories of relationship with self, others and school, transpersonal focus group discussions revolved around an improved connection among staff members, personal benefits gained from transpersonal practices such as calm, control and relaxation and a focus on the school as a kind and peaceful space, with importance placed on the growth of the learner rather than just academic studies. Some educators felt they needed more time to internalise the techniques and make them part of the school ethos.

Relationship building in workshops was a main theme in the focus group discussion: *“It allowed us the opportunity to experience our companionship...It allowed us to think and see each other differently...It commanded our attention”*. This interaction meant that: *“We know something in common, that we share something in common and now we have an understanding that we are affected by things differently as we share in our understanding”* (Male educator, 42 years old). With this understanding came a familiarity and happiness among staff: *“I sort of feel like we are happy, we are familiar; we sit around, we chat, we know each other, we automatically go into relaxed mode, and we can share, even if we joke about it...”*(Female educator, 41 years old).

This educator highlighted the difference between normal staff meetings and transpersonal interventions, saying that those not taking part were excluded from this feeling of closeness:

*We are never going to sit in staff meetings and listen to anyone, but this actually gave me the opportunity to see people, the human side of it which we never do. And I think it just brings us closer, you know, as a unit and it definitely makes a difference if you are not part of this.*

The group did not only give people the chance to listen, but also gave them the feeling of being heard and even in unspoken traumas, it provided a healing space for participants: *“It gave me the space to deal with what was happening at home – my mom was terminally ill and then passed away. This became a quiet and healing space for me to cope with what was going on at home, without actually talking about it to anyone”* (Female educator, 44 years of age).

The group allowed others to connect on an emotional level and discover a serious commonality underneath the laughter and fun:

*I found that teachers, all of us, have the same emotions and feelings, needs, but that we just never speak about it and, er, it also taught me that we need to care more about each other because we may be laughing and going 'te kere' (crazy), but under this there are things that need to come to the fore” (Male educator, 50 years old).*

This group connection enabled educators to deal with the trauma of losing a learner who was shot and to process the incident emotionally together. The transpersonal workshop provided a debriefing space for educators: *“We were told in the morning in the staff room and what touched me was the way people emotionally responded when we had the debriefing session here... We look at one another, we laugh at one another, but things touched people in different ways” (Female educator, 46 years old).*

For a new, young teacher, the workshops meant connecting to staff: *“This course for me was getting to know everybody a little better and feeling part of the staff and the school” (Female educator, 25 years old).* These sentiments were echoed by another new teacher: *“I am also new here and this session allowed me to learn more about colleagues which I didn't know... I know people and I know how to talk to them and I know how to handle things physically” (Female educator, 43 years old).*

Educators started to relate better to their families and respond in a calm manner:

*Just the other day I could speak to my son, after he had run up an account on the internet. I could very calmly say I am down and out and I saw the change in him and I thought, oops, have I touched a nerve or something? I went into his room, we spoke in a manner that the neighbours didn't have to know about it (laughs, then everyone laughs)”. (Female educator, 45 years old)*

Educators did not only see the change in themselves, but also their colleagues: *“I had not really taken note, but now that S has mentioned it, J is calmer for me, she is much calmer. She used to rant and rave, I have not heard her” (Female educator, 46 years old).*

As far as personal process was concerned, educators felt more empowered to tackle problems and calm down: *“The process or series of afternoons we had truly taught me, um, to go about things, or, or just to become a whole lot more calm than what we've been” (Female educator, 45 years old).* This resulted in a stronger connection with self: *“It also allowed you to listen to yourself at times, secret spaces and things like that... This has taught me to realise that if you are in control of yourself, then the situation remains a calm situation”.*

The nurturing, calming aspect of the workshop kept participants coming back to experience more of this supportive environment: *“That statement about falling asleep in the workshop was one statement that kept me coming back, because you said, ‘Come, you can fall asleep’,”*(Male educator, 50 years old).

This calmness and control helped educators to get perspective in their lives and prioritise: *“And at home I was working all night doing lesson plans and all that but now I just take an hour to do my work and then the rest of the evening I spend time with myself and I have really learnt to relax”*. Another educator reiterated this new sense of priorities and how her life had improved at home

*I don't take anything from xxx (name of school). Schoolwork must stay at school and when I get home it is my family. I don't compromise and I pray for that because there is a change. My table used to be full of books and my car, although my car is full of books, I don't touch it, it stays”* (much laughter from the group). (Female educator, 43 years old)

A benefit that educators felt from this calmness and control was, ironically, renewed energy:

*I feel when you are calmer, you are not shouting at the children or running after them, you are saving energy. That is why, although I feel tired when I walk in here, when I leave I feel much better and I feel like that at home as well, I feel more energised”*.(Female educator, 45 years old)

In the school environment, personal and family benefits were also felt in the classroom. Indeed some educators felt an improvement in classes and interaction with learners, although in other cases they felt that this needed time and continued effort and awareness:

*I feel that this works for me, but I am not applying it so that it works for the common good of my learners. Inevitably it does rub off, but I think that I should make a concerted effort to actually do more, then it could have a greater effect.* (Male educator, 45 years old)

The same educator added: *“I think we realise the importance of the techniques we have learnt, but I think as a school we need to internalise it more, um, and the ethos of the school must adopt it”*.

Other teachers were feeling more confident to apply what they had learnt. For example, one educator was actively using transpersonal techniques such as guided meditation,

emotional freedom technique (EFT) and acupressure to manage her class: *“The breathing, the calmness, taking learners into a safe place, into secret places, that has worked as well, tapping, acupressure for headaches”*(Female educator, 49 years old).

Another educator, who had shared his struggle in the group about having an autistic son, was using meditation and quiet time in the morning with his learners to great effect. This quiet prayer time was positively affecting not only his relationship with learners, but also at home with his family:

*My point of view is that every week here has changed me a lot. It has made myself more calm, more relaxed in the classroom. Um, when I get upset, the children used to say, ‘Sir, please do not get upset’, and as the course went along, I felt more at peace. The morning meditation in the classroom really revitalised me and my spirit.*

*It also helped me with my family at home, much calmer at home, and try to leave work at work and at home be a father and a husband, as part of the family at home, spend more time with the family around the table and, er, in class, what is actually happening is that some of the learners come early in the morning and use that time to come to my class and see what I am doing, and they also – it has changed me tremendously to see how children react, their response in a kind of bible study, to sit and have a quiet time with themselves and think about their lives. (Male educator, 39 years old)*

Another educator felt better in the classroom after TP workshops and felt he was more able to handle conflict:

*I think the course has helped me a lot. If you compare a Monday afternoon, or a Tuesday afternoon, when I do other things, pick up children and rush around here and there - on a Thursday I feel much better, more energised. In the classroom also I feel much better. I think I can handle conflict situations better with the learners and I would like to thank you for that. (Male educator, 46 years old)*

One educator continued to shout in class, but distinguished between the nature of the shout, being calm rather than frenzied: *“In my class, when I was shouting at the learners it would be frenzied, one that pushed up my blood levels. Now when I shout at my class it is calm. When I leave my class I am no longer stressed”* (Female educator, 43 years old). She also is using touch taught in the workshops with the learners, which she is finding helps to calm them down, although she is conscious of ethical constraints. Overall, she is finding teaching more enjoyable:

*I tend to touch my learners a little bit more. It's not supposed to be, but I touch them a little bit more like that (patting the person next to her on the shoulder) and the kids tend to appreciate a physical acknowledgement like that. Um, and for one child, (name given) that touch is a tremendous calm down for him. So I enjoy my classes, I really do, compared to last year, and thanks for that very much.*

Another teacher was grateful for what she had learnt in the TP intervention, which gave her new ways of dealing with learners in the class: *"I gained a lot of information and I am grateful that I have been part of xx (name of school) to get such things as this - it is a good thing. Um, in class, it also helps me because I am not stressing, I wasn't stressing but I have new ways to deal with the learners. I don't talk much with them, I don't tell them to be quiet. I just stand in front of them and it works. It works. And the other thing that works for me is to acknowledge each and every child.* (Female educator, 43 years old)

The workshops had helped this teacher to connect better with the learners and to be more positive: *It might be a small thing that that child is doing, but once you praise that child, then you are getting more, other positive things, and I think that we need to do that and not focus on the negative side".* This appreciation of learners was echoed by another teacher: *"I've come to appreciate every learner, not for the behaviour, but for the person, and I first look at the person and try not to shout and scream ..."* (Female educator, 25 years old)

The headmaster confessed that he is still trying to control himself with learners, and that he hopes to tone down his shouting:

*I must confess in the past three days I have shouted three times so that is not quite normal for me and there is no justification for it but I felt that the child is so used to exceptional responses from adults that a normal response would not do. And, um, I hope that next year we will not shout at kids and we value the space enough not to say it loud because, when you say it loud, you have to shout louder the next time to get the same response..."* (Male educator, 42 years old)

After the TP intervention, educators viewed the competent classroom as one in which there are clear, negotiated expectations with a good work ethic, inclusivity, transparency, competency and trust. Educators are well prepared for lessons. There is acceptance of the child, with forgiveness, focusing on strengths, differentiating behaviour from the person.

A summary of TP dominant themes follows in Table 37:



Table 37

*Summary of TP Dominant Themes*

Relationship with Self	Relationship with Others	Relationships with School
Connection with self, in touch with emotions: <i>“This became a quiet and healing space to cope with what was going on at home”</i> .	Improved relationships at home: <i>“When I leave I feel much better and I feel like that at home as well, I feel more energised”</i> .	Better able to handle school traumas: <i>“The one thing that stood out for me in these sessions was the day that C was shot and we had that debriefing here”</i> .
Calm, more control: <i>“The process ... truly taught me ... to become a whole lot more calm”</i> .	Compassion and understanding among educators: <i>“I think the value of the workshops was to relate and meet with each other as beings, as persons”</i> .	Tools to manage learners: <i>“The breathing, the calmness, taking learners into a safe space, into secret places - tapping, acupuncture for headaches”</i> .
To listen to yourself: <i>“It also allowed you to listen to yourself at times, secret spaces and things like that”</i> .	Group cohesion: <i>“If one could have these sessions fairly regularly, one would automatically start relating to each other”; “What I liked about this session was the sense of togetherness and the fact that I got to know my colleagues”</i> .	Focus shift from learning to growth and healing of learners: <i>“I try to be calm and try to enjoy the learners who want to learn in class and try to be part of the class”</i> .
Quiet, healing space: <i>“That statement about falling asleep in the workshop was one statement that kept me coming back”</i> .	Change of staff focus: <i>“... We are familiar, we are happy, we sit around, we chat, we know each other, we automatically go into relaxed mode”</i> .	Classroom has become a more spiritual place: <i>“The morning meditation in the classroom really revitalised me and my spirit”</i> .
Personal benefit: <i>“This works for me,”; “It gives us a chance to say how we feel on a personal level with our families as well as here at school”; “I feel much better, more energised”</i> .	More empathic listening: <i>“Normally we never speak about ourselves because we don’t have time to listen to each other and er, this is one of the great things I got from here. I found that teachers, all of us, have the same emotions, feelings and needs”</i> .	Improved discipline: <i>“I find that things are definitely different. Learners are more respectful towards me, they do listen ... I think discipline has improved at the school”; “In the classroom also I feel much better. I think I can handle conflict situations better with the learners”</i> .

Table 37  
*Summary of TP Dominant Themes (continued)*

Relationship with Self	Relationship with Others	Relationships with School
<p>Empowering techniques: <i>“She said you missed out on something: I’m rushing around, driving and I missed the best session ... sleeping and massaging each other”.</i></p> <p>Learnt to relax: <i>“The other day I was so stressed because I had to do so many things. I said: ‘Let me do that, stop and breathe’”.</i></p> <p>Less panic, more self-organisation: <i>“I don’t panic anymore, I am organising myself now and it is really good”.</i></p>	<p>Recognise change in others: <i>“J is much calmer, for me she is much calmer. She used to rant and rave”.</i></p>	<p>Confidence to use touch to connect with learners: <i>“I touch them a little bit more ... and the kids tend to appreciate a physical acknowledgement like that”.</i></p> <p>Take control of class through presence: <i>“I’ve got new ways to deal with the learners. I don’t talk much with them, I don’t tell them to be quiet. I just stand in front of them and it works”.</i></p> <p>Competent class: <i>“A competent class has clear, negotiated expectations with a good work ethic, inclusivity, transparency, competency and trust. Educators are well prepared for lessons. There is acceptance of the child, with forgiveness, focusing on strengths, differentiating behaviour from person”.</i></p>

### 5.5.3 Transactional analysis intervention

**5.5.3.1 Dominant themes.** TA themes were grouped under personal, other (group, family) and classroom/school. From a personal point of view, educators gained self-insights, with improved emotional intelligence, being more in control of their emotions and better able to understand their own behaviours and recognise personal growth, leading to healthier lives and reduced stress:

*What is interesting is that when we are doing this course, when we fall in a trap, immediately after that we realise we have made a mistake - I was the rebellious child – and then we come to each other and confess, I did wrong, and so it shows that growth in our lives. (Male educator, 50 years old)*

*I have made personal decisions I should have made long ago, but realise because of TA I should have taken these steps, trust these steps and just do it. (Male educator, 44 years old)*

*What was very good was the stress drivers, I also liked that. When you can actually pick up when you are stressed, what emotions are coming into play and you say: 'Listen, here, get a hold of yourself', which is very good. I thoroughly enjoyed TA, I must say, every section of the work, from start to end, I found it very interesting. (Female educator, 51 years old)*

*I have found that definitely, my stress levels have gone down quite a bit – in fact when I was at the doctor the last time (I have been on high blood pressure tablets for almost 10 years), he wanted to reduce them because my blood pressure was too low (laughter from the group) and he said I must come back in a month's time because he might consider lowering my medication". (Male educator, 48 years old)*

Relaxation contributed to this reduced level of stress:

*I have learnt to relax, take time for myself, take time for the gym and a lot of this is because of what I have learnt here. For example, one of the ways that I dealt with stress was withdrawal and this causes all kinds of other problems. I don't get things done and I get behind in my school work and I recognised it as a survival strategy that is not working and I now recognise when I am doing this, I can see the warning lights.*

Personal insights helped an educator to deal with a conflict around leadership in her church; she felt empowered and in control: *"The impact on my personal life was very great. I was able to address certain issues that were bothering me and I kept thinking, 'I'm OK, you're OK' and I felt good, I felt excellent"* (Female educator, 46 years old).

One teacher felt enskilled with many tools: *"I think we have all been very fortunate to have been on this programme. We have picked up many skills and we have many tools here that we can use in different aspects of our lives"* (Male educator, 50 years old). Another educator mentioned heightened levels of awareness: *"The level of becoming aware of all of us has really improved. We are growing as a person and also we are very aware now. Like H was saying, in a game maybe, how you can move out of the drama (triangle)"* (Female educator, 46 years old).

This awareness is also used out of awareness, as one teacher pointed out how she intuitively and interactively used the skills with a colleague, playing a leading role in a

meeting: *“I think we used our knowledge of TA. Um, yes, with awareness we used it but he, he wasn’t aware that I was going to use my skills and neither did I know that he was going to use his skills”* (Female educator, 51 years old).

One educator tracked her journey in TA, saying she started out *“extremely negatively”* but that she became aware of profound shifts in herself:

*I haven’t been an exemplary student going through the notes again, but I have noticed I am doing things better than what I am used to doing things. I hate rudeness. If someone was rude I used to pounce. I don’t pounce like I used to pounce (laughs).* (Female educator, 50 years old)

She described how gradually she changed and started to look forward to TA:

*I used to say sometimes, initially I would always say: “It’s again TA today, oh, I’m tired,” (others start to laugh) and as time went on, for the last couple of sessions (group laughs loudly) I haven’t been saying that - I was actually looking forward to it. Before I did not want to look at you (researcher) because you represented an afternoon session (group laughs loudly) and now it was nice to see you (laughs with the group). I could look you in the eye and I was happy to see you. And so, as time went along, I just felt that this is good for me, and I could see and in my personal life, I could see.*

One educator missed the first few workshops and was encouraged to join by attending a few catch-up sessions. He expressed his appreciation and described the profound changes in him, feeling calmer and more in control:

*So yes, thank you Sharon for hounding me, haunting me and victimising me (laughter from the group). I told Mr B, I am going to the meeting. I am cool and calm, even with my wife. My whole perspective has been changed, even getting here for a few workshops - it has changed me and I will carry that and I can progress more and maybe be a better person.* (Male educator, 45 years old)

As a cognitive intervention, TA showed educators the power of knowledge:

*Someone said ... that knowledge is power and that is true. Because when I hear other people acting out, I think: ‘If only you knew what we know; then you won’t act like that’. And sometimes it’s laughable the way some professionals act. And that is only because of TA that we can see through different eyes.* (Male educator, 50 years old)

From the group point of view, TA brought people closer:

*I am a lot closer now to people within the group because of the TA. In terms of our understanding, I look at them and I don't just see them as my colleagues, as staff. I see much deeper, I see people now.* (Male educator, 44 years old)

One educator said there was better understanding among his peers: *"I think it is obvious that people have a better understanding of each other"* (Male educator, 50 years old).

Another was aware of group growth: *"And I think, even we as a group, we can see in each other that we have really grown"* (Female educator, 46 years old). Another educator noticed the divide between staff who had done TA and those who had not: *"The other teachers pick up that we are different because we speak TA language. They say: 'We don't know what you are talking about', and they sometimes sound envious, you know"* (Female educator, 51 years old).

Appreciating the power of the "token" research group of TA educators, one teacher imagined the power of a greater number of people taking part: *"Just imagine, we are just a token group doing TA. What would have happened if the whole staff was doing this? What would have happened if the whole school was driving TA?"* (Male educator, 44 years old).

In terms of family, educators felt the insights learnt in the TA workshops helped them at home too. One educator did not experience emotional shifts but had an improved family life: *"So for me personally, TA has been a great help - I won't say for my emotional state, but personally in my family life as such"* (Male educator, 44 years old).

An educator was helped to understand her daughter better after her husband's death:

*Also with my daughter, because of the death of my husband, I had a really big struggle with her. And as Mrs O was saying, with her I can really check out which ego state she is in and how to deal with her. Um, um and I can really say there is a big improvement by using positive strokes.* (Female educator, 46 years old)

Improved communication skills resulted for one educator:

*I am much more open to talking about it (stress), especially to my wife, for example, whereas before I never used to talk about my problems. She doesn't know anything about what I go through at school but now I tell her I feel this way because this has happened, that has happened. So definitely I am still learning and going through my notes and seeing where I can do something better. It has helped the marriage.* (Male educator, 48 years old)

The drivers taught to educators were powerful tools to understand sources of stress. One

educator learnt that she was a people pleaser, and this gave her insights on how to improve her relationships with her family and friends. Having had these insights, she describes how she is still struggling to modify old behaviour patterns:

*Yes, I was shocked because I was a people pleaser, and it was so true. Because I thought, no I am not there, because I am in control with other people, but then I realised that when you enter my home, if you enter my home and you are going to sleep there, you will get the best. If you go to sleep and I know you are asleep, then I am going to take off my shoes and I tiptoe and I don't want to put on lights because I mustn't disturb you and I've been doing that for years. I mean I have always tried to do for my family and friends things that worked for them. And I realised subsequently that I am the one to suffer because I am doing everything for everyone else and they are sometimes not even demanding... it. So that was also quite a shock to me, that I am still in this and I thought I was out of it (laughter).* (Female educator, 50 years old)

Turning to TA effects in the school environment, the ability of the workshops to improve discipline meant it was a great stress reliever: *“If we have positive behaviour, the discipline problems will drop. Much of our stress results from disciplinary problems, so this will reduce our stressors”* (Male educator, 50 years old). He hoped that as part of Integrated Quality Management Systems being introduced, where teachers identify areas needing improvement, TA would then be taught to all educators as part of managing discipline in the classroom. He continued to spell out how the positive TA approach helped educators:

*As professionals and teachers, we come to a school where the learners have a certain way of doing things, influenced by the community, so some of us in the past expected the learners to be different when they are in school, in class. Now we know: “No, we are the ones that have to be different because we are the professionals,” and by applying our TA skills to our learners, we will have a positive influence.*

Part of the change was improved communication skills, with a change of attitude: *“I can relate to learners, I can talk to them, I remain calm and inform them – I wasn't loud, I wasn't rude, I wasn't aggressive”* (Male educator, 45 years old). Many teachers shared the positive insights TA gave them to improve their behaviour with learners: contracts; cycles of development; the drama triangle were some of the tools mentioned:

*I have learnt in the classroom you can now set up an agreement, a contract - that will still be my favourite part because from there I have learnt such a lot. Sometimes we as teachers get this idea that we are, agh, they are the students, we don't give them the*

*same platform, privilege because they are students, we've come to teach them, they have not come to teach us. So in that sense we don't treat them accordingly on the level you are supposed to... Now through the TA I can see you are emotionally immature, now I can handle you (laughter). No, no, no, I have learnt and I can identify.* (Male educator, 44 years old)

*As a teacher I have learnt such a lot. You treat them all the same - but hell no they are not, because according to TA they are still at certain stages in their life, (from) which they must move on. Through TA I have actually learnt that you treat an individual as an individual, and not as part of the group. Even though he is part of a group in the class, he is still an individual. That to me was an eye-opener – that is why I stayed in the (TA) group, I have not given up yet (laughter).* (Male educator, 44 years old)

*An interesting discovery was the drama triangle. Um, whenever something happens in front of you, or even when you are involved, it is being able to identify that this is a game and so then I can make a conscious choice whether I am going to take part in this game or not, or whether I am going to move into the winner's circle. When your eyes are opened about these things, you see it a lot – in the staff room, in the classroom, you see the games, you see positions people take and, and I am just glad that we are now equipped to realise these things and not fall into the emotional trap, er again".* (Male educator, 50 years old).

Another tool which had a great impact on educators was the concept of positive strokes, where they learn that their behaviour positively influences learners:

*The positive strokes were for me the best; it has such an impact on our learners. I complimented a girl on her smile and I said, 'As good as your smile is today, give me a good answer to the question I have asked now', and she gave me the correct answer and an even bigger smile and so for me that was important. I think the children are picking up on my behaviour as well in the classroom, so their reaction is also more positive. It seems that our relationship is more positive as a result of TA and I think it has its inroads, good inroads, so I like that.* (Female educator, 51 years old)

An educator recalled how giving an appropriate positive stroke to a learner made him feel empowered:

*At the end of a function one of our kids came up to me and said: 'Sir, are you proud of me?' and I immediately understood that he wanted to be stroked, that's all. Very*

*innocent, and I could understand that immediately. (It was) empowering understanding the needs of the next person. (Male educator, 50 years old)*

Other teachers spoke about improved emotional intelligence in the classroom, which led to relaxation and less stress:

*Let's say the learners are rude, then I gave it to them because I hate when they are rude to one another or in my presence. But now I find I would rather defuse that situation and if I do get angry with somebody, it's not angry at you, but at the action. I would stop afterwards and make you say what the situation was all about. (Female educator, 50 years old)*

*I must say I am more relaxed in class. Last year I was off for stress and it was, like, I couldn't handle the children, but ever since I am busy with TA I am quite in control of my emotions and I am quite in control of the class. My relationship with the children...we've got a good relationship, a much better relationship than we used to have, and also I have gained a lot. (Female educator, 40 years old)*

A dominant theme in the TA focus group was the educator capable of being the change agent in the school, which was an important realisation for the competent classroom:

*I used to be very angry with this particular class because of their behaviour, not being attentive, not being what it should be. But as times have changed, I have seen that I need to change towards them and, as I have changed, they have also so now it's a love/love relationship when it used to be a love/hate relationship. I was also not OK and they were not OK, but now we are both OK and that to me is good.*

*Many teachers have the attitude that they can do nothing with the learners, they are from xx, there is nothing good about them. And I think this is quite a comfortable excuse we are making. What TA has highlighted for me is that this is an excuse for us to do nothing. And TA shows us that there is something we have to do, that we can do and that we should do. And we can make a difference. The moment we look at the learners and are comfortable to do something, they are normal people and we can do something to change them". (Male educator, 48 years old)*

Table 38 lists a summary of dominant themes in the TA intervention:



Table 38

*Summary of TA Dominant Themes*

Relationship with Self	Relationship with Others	Relationships with School
Gained self-insights: <i>“When we fall in a trap, immediately after that we realise we have made a mistake”.</i>	Deeper relationships with staff: <i>“I am a lot closer now to people within the group because of the TA. In terms of our understanding, I look at them and I don’t just see them as my colleagues, as staff. I see much deeper, I see people now”.</i>	Stress reduction through improved discipline: <i>“Much of our stress results from disciplinary problems, so this will reduce our stressors”.</i>
Improved emotional intelligence: <i>“... You can actually pick up when you are stressed, what emotions are coming into play and you say: ‘Listen, here, get a hold of yourself’, which is very good”.</i>	Better staff understanding: <i>“People have a better understanding of each other”.</i>	More positive approach: <i>“Now we know, ‘No, we are the ones that have to be different because we are the professionals’, and by applying our TA skills to our learners, we will eventually have a positive influence”.</i>
Self-care: <i>“I have learnt to relax, take time for myself, take time for the gym...and a lot of this is because of what I have learnt here”.</i>	Belief in group power: <i>“What would have happened if the whole staff was doing this? What would have happened if the whole school was driving TA?”.</i>	Change of attitude and improved communication: <i>“I can relate to learners, I can talk to them - I remain calm and inform them”.</i>
Gained skills with tools: <i>“We have picked up many skills and we have many tools here that we can use in different aspects of our lives”.</i>	Improved communication skills: <i>“I am much more open to talking about it (stress), especially to my wife, for example, whereas before I never used to talk about my problems”.</i>	Greater understanding: <i>“(It was) empowering understanding the needs of the next person”.</i>

Table 38

*Summary of TA Dominant Themes (continued)*

Relationship with Self	Relationship with Others	Relationship with School
<p>Personal growth: <i>Um, yes, with awareness we used it but he, he wasn't aware that I was going to use my skills and neither did I know that he was going to use his skills</i>"; <i>"Through TA I have started to realise that learners have problems and I have become more aware and sympathetic"</i>.</p> <p>Profound shifts: <i>"I haven't been an exemplary student going through the notes again, but I have noticed I am doing things better than what I am used to doing things"</i>.</p> <p>Calm and in control: <i>"I am cool and calm, even with my wife. My whole perspective has been changed"</i>.</p>	<p>Tools to understand behaviour: <i>"I mean I have always tried to do for my family and friends things that worked for them. And I realised subsequently that I am the one to suffer because I am doing everything for everyone else and they are sometimes not even demanding or expecting it"</i>.</p>	<p>Improved emotional responses: <i>"I must say I am more relaxed in class. Last year I was off for stress and it was, like, I couldn't handle the children but ever since I am busy with TA I am quite in control of my emotions and I am quite in control of the class"</i>.</p> <p>Educator is change agent: <i>"I have seen that I need to change towards them and, as I have changed, they have also so now it's a love/love relationship when it used to be a love/hate relationship"</i>.</p> <p>Competent class: <i>"Has respect both ways (I+U+) with acceptance of diversity. The educator boosts learner self-esteem and behaviour is governed by contracts"</i>.</p>

#### 5.5.4 Summary of qualitative data analysis

In analysing dominant themes in TRE, TP and TA interventions, the different impact of these approaches became evident. In the relationship of educators with themselves, with their peer group and families and with the learners in the classroom, powerful insights and realisations were gained. In the case of TRE, teachers were aware of becoming grounded and centred and felt in touch with their bodies, releasing stress and burnout on a physical level. They felt emotional benefits of being calm and in control and changed perceptions of self-concept and thinking processes. In the case of TP, there was a feeling of becoming

calm and controlled, with renewed energy, emotional intelligence and powerful group connection, reducing feelings of isolation and thus assisting in stress and burnout reduction. In the case of TA, psychological insights into their own and learner behaviour reduced the greatest reported cause of stress: discipline in the classroom. Educators thus felt more in charge and able to become change agents in their schools.

### **5.6 Summary of Mixed Methodology**

Three methodologies in this study gave different insights into the impact of three stress and burnout interventions based on physiological, emotional and cognitive approaches. Firstly, statistical analysis compared the three intervention groups with a control group and showed the extent to which stress and burnout were significantly different both between and within groups. Secondly, coding analysis summarised responses of educators as they attended the workshops, analysing questionnaires and analyses of classroom interactions. Thirdly, the nature of this improvement was more fully explored in qualitative data analysis, where dominant themes were discussed in focus groups, helping to understand the process of change.

### **5.7 Chapter Summary**

This chapter began with a contextual analysis of all educators participating in the study, including personal, work and classroom stressors and burnout levels. The results and findings of three mixed-methodologies were given. In the next chapter, Discussion, an in-depth analysis of the impact of each intervention is made.

## CHAPTER SIX

### Discussion

*“I am not so negative about my work because you have a role to play. I think what does get me down are discipline issues in the classroom. Learners have become very aggressive, you know they question you, they don’t take very well to authority, especially the Grade 8’s - it’s a difficult stage where they are at. So you’ve got to actually put down punishment measures. But our school does not have what we call detention, because our learners have to walk home in the afternoons, which is a problem, so it sort of hampers discipline because you can’t say: ‘Right you do something, then this afternoon you go to detention’. You actually have to enforce that discipline and it’s very difficult, your body and your voice take it all, and the day you are tired, you have to be strong, you have to have the energy to deal with them. In the past I did have a stick, but this year I have not used the stick; just once. If you hit a child there are repercussions, so I don’t want to go there. I try to use my voice where I can and I think that is where the burnout comes in a lot of the time, what it is doing to me physically. But teaching, as a whole, it gives you a purpose in life. I don’t know how I would manage without teaching as part of my life.”* (Female educator, Cape Flats, 2011)

### 6.1 Introduction

Occupational stress is a major issue of concern, receiving increased research attention (Schaufeli & Greenglass, 2001). In this study, the focus is on a mixed-methodology approach to analyse the impact of interventions dealing with stress and burnout of educators in the context of traumatic classroom environments in high-risk schools. This chapter begins with the relevance of this study’s approach in the context of stress and burnout research, with an overview of the socio-cultural teaching environment and demographic details of participants, considering educator responses to the major stressors encountered. A detailed mixed-methods analysis for each intervention is then given.

### 6.2 Three Intervention Approach

Stress and burnout research has focused on individual, interpersonal and organisational aspects (Halbesleben & Buckley, 2004). While this research primarily considered individual responses, there was also a broader focus on the influence of interpersonal and organisational

relationships. The three interventions in this study utilised physiological, emotional and cognitive elements of the stress response to threat, engaging educators in a primary focus on one of these areas. In the physiological intervention, educators were engaged with the stress in their bodies and the release of this stress through neurogenic tremors. In the emotional intervention, educators followed mindfulness practices with guided meditations, body work, touch and exercises to increase heart coherence through calm and quiet. In the cognitive intervention, educators analysed their communication patterns and gained insights into social psychology, using self-tests and discussions to better understand interactions. While the focus was on individual characteristics and responses, cognisance of job-related stressors should also be taken into account (Kokkinos, 2007), with the Department of Education needing to address stress-inducing working conditions, such as large classes and inadequate resources, in high-risk secondary schools on the Cape Flats.

### **6.3 Contextual and Demographic Summary**

Before a detailed discussion of the impact of each intervention, it is important to first consider the socio-cultural context when examining individuals and their reactions to life events (Egan, 2011). This study took place in the ganglands of the Western Cape, which are amongst the most violent and traumatic areas of South Africa (Benjamin, 2011; Crawford-Browne, 2011; Plato, 2012). Educators described their stress and burnout in classrooms, dealing with noisy, uncooperative and violent learners, who often made the classroom seem like a battleground, where discipline became a matter of survival and where there was a poor work ethic. Work load and bureaucracy and personal stressors, such as financial worries, also took their toll on teachers' ability to cope. The majority of educators felt stressed and burnout, with teaching affecting their emotions, physical health and well-being.

Within this context, men ( $n=32$ ) and women ( $n=31$ ) were equally represented. Considering the gender difference, 51% ( $n=21$ ) of educators who reported burnout were women. The evidence that women appraise stressors as more severe is stronger than the evidence that women are exposed to more stressors than men (Helgeson, 2011). Having better recall to stressful life events, women encode emotional events in more detail than men, with more complex emotional representations. Men are reported to be more prone to depersonalisation, which is characterised by callousness and being impersonal towards clients, or in this case, learners (Schaufeli & Greenglass, 2001). Accepted norms of strength, independence, separation and invulnerability associated with the male gender role

(Greenglass, 1991) could explain men's tendencies for repressed emotionality. Work and financial stressors affect men more than women, with women being more vulnerable to interpersonal stressors (Helgeson, 2011) as a result of communal or relationship cultural orientation. In addition, laboratory research has demonstrated that men and women are differentially responsive to different classes of stressors that can be divided along gender-role lines. In the context of this study, with teaching being both a male and female profession, work is not clearly divided along gender-role lines, although female educators could be expected to have been more responsive to emotionally orientated practices (as in Capacitar workshops) and enjoy interpersonal discussions in groups more than men. Men could be expected to be more concerned with financial stressors.

In most groups, the majority of teachers were aged between 40 and 50. The TA intervention had older participants, with 40% (n=4) of teachers over 50. Most teachers had taught for 20 to 30 years, but a minority, in the TA group, had 10 to 20 years' teaching experience. Some teachers (n=10; 14%) were new to the profession, with less than 10 years' experience. A lack of experience has been associated with burnout, with difficulty in conveying feedback and a sense of ineptitude to assist (Turner et al., 2005), which could put more inexperienced teachers at risk. In considering age differences in stress vulnerability, Folkman (2011) points out that this varies depending on whether the individual is facing a physical stressor or a psychosocial one. Both the very young and old are more vulnerable to physical stressors, with greater susceptibility when exposed to chronic illness or physical danger. As educators in this study's context are exposed to violence, this could be a vulnerability factor for older educators. As far as psychosocial stressors are concerned, little research has been conducted on age vulnerability. Timing of events may be more important – off-time events, like having a child in adolescence or early 40s, may be more stressful than in the mid-twenties. Older educators could be considered to be more resilient than their younger counterparts when exposed to psychosocial stressors due to survivor effects and factors such as coping and appraisal processes, religiosity and emotional stability (Folkman, 2011). Most educators were married (n=48; 76%), which is considered to be an important contributor to burnout reduction as a result of social support outside the workplace (Boscarino, Figley, & Adams, 2004).

Learner discipline was the major source of stress for educators. In considering job demands and resources in the JD-R model of burnout (Demerouti et al., 2001), the role of social exchange relationships has become a trend for research. Feelings of inequity result in

learner burnout for educators, when they invest more in the relationship than what is reciprocated by the students. Before interventions, disciplinary demands by the students were not perceived to be adequately addressed by educators with what they understood to be available resources.

Administrative overload is a factor causing burnout in the Conservation of Resources model (Hobfoll, 2001), when educators feel threatened by the volume of work expected to be carried out, resulting in a perception of excessive work demands. Financial issues are also a factor, when there is insufficient return of resources which impacted as major life stressors. Before the interventions, educators turned to sport and exercise or spent time with others in order to relieve these stressors. In terms of well-being, they sought wholeness, contentment and happiness by turning to family, friends or religion as major ways of self-improvement. For a minority of educators (n=7), teaching was described as a means of improving well-being, indicating that meaning-making, with the ability to make a lasting impact, could be a factor in burnout reduction for this cohort (Cherniss, 1995).

## **6.4 Overview of TRE Mixed-Methods Analysis**

**6.4.1 Demographic summary of TRE group.** The TRE group (n=17) had an almost equal representation of women (n=9; 53%) and men (n=8; 47%), with the majority (n=11; 65%) described themselves as burnt-out. Of these, seven were women (64%) and four were men (36%). Challenges included poor learner discipline and work ethic and long hours of work. Most educators were Christian (n=10; 59%), with 35% (n=6) being Muslim and the majority were married (n=12; 70%). Most participants were between 45-50 years of age (n=10; 59%) with five educators (29%) being over 50. Most educators had taught for 20 – 30 years, with some 10 to 20 years (n=4; 23%) and a few over 30 years (n=3; 18%).

**6.4.2 Summary of TRE mixed-methods analysis.** Descriptive statistics revealed that the TRE group's mean scores pre- to post-intervention dropped in stress, personal, work and learner burnout (see Table 6). However, it was the only group to drop in well-being, with the control group (see Table 7). Inferential statistics determined the significance of these results, with stress (p=0.00) and learner burnout reduction (p=0.02) being statistically significant.

Coding analysis revealed learner behaviour to be the most significant stressor for this group, with educators being angry, agitated, disillusioned, frustrated and helpless in their reactions to learners before the TRE interventions. To cope, educators adopted an authoritarian style with learners shouting and confronting them about their behaviour. Others

attempted to stay calm, with a positive response and/or following disciplinary procedures. In terms of classroom competence, educators were learner and school focused before the intervention, wanting children to have a good work ethic or positive behaviour. The TRE intervention offered intra-individual tools, leading to self-understanding and body awareness. It was also considered a self-help tool and was effective for calm and relaxation.

TRE dominant themes covered physical impact of the exercises, with emotional benefits. Self-concept of wholeness, balance and control, together with finding time for self, also emerged. On a cognitive level, more information needed to be given to reassure participants that neurogenic tremors were natural, safe and beneficial. While there were issues around trust and safety at school, relationship with peers improved and there were renewed insights around discipline and educators taking responsibility for the learners' behaviour.

Challenged by the need to manage discipline in the classroom, educators considered the multiple aspects of TRE, including groundedness, and goals important to their profession. There was an appreciation of centredness, discipline, balance and focus on the self. Personal struggles of resistance and regret of not having gained maximum benefit from the opportunity presented also emerged.

**6.4.3 Benefits of TRE.** After the TRE intervention, educators reported having better understanding of the self as one of the main effects, with greater positivity. They became calmer, relaxed and grounded. Their attitude in the classroom changed to being more in control, filled with respect, caring and humour. There was a fine balance between simultaneously experiencing the freedom of letting go, while gaining more control. They became more aware of their bodies, tapping into the stress and tension they were experiencing, yet at the same time becoming aware of the powerful presence of their physical being as a controlling force in the classroom. Even shouting at the children for one educator took on a different tone and intensity. Classroom competency resulted from educators recognising their role as instruments of change, bringing calmness, relaxation and greater understanding of themselves, treating the learners with more respect. Educators developed more intra-individual tools, with better self-understanding and body awareness. They gained self- help tools for improved self-regulation.

On a physical level, TRE helped educators to relax and on the sports field enhanced sporting performance. An awareness of breathing brought a greater sense of self-control. A connection to the body led to a sense of groundedness and calmness. TRE did not only



impact the body, but also the emotions. For some educators, trembling helped them connect to a heart space and improve emotional intelligence. There was a sense of achieving a degree of wholeness, described by many educators as the definition of well-being. The meaning of wholeness for TRE participants was to take off the mask and be grounded in reality.

Benefits were felt beyond the classroom, with some educators taking the exercises home and trying them with their family. One educator became so relaxed with her children that she was struck by her lack of a conventionally agitated response to negative behaviour. Another educator went into hospital for an operation and remained calm and relaxed throughout, remembering to use the breathing techniques.

**6.4.4 Challenges of TRE.** Despite a reduction in stress and learner burnout for educators who practised TRE, well-being improvement was not statistically significant. This suggests that while the reduction of stress and burnout improved physical presence and emotional reaction, an overall improvement in wellness needs to incorporate factors affecting educators on multiple levels. These could include cognitive insights and interpersonal connection and move beyond the classroom, taking into account work (administrative load) and personal challenges (family and finances) and other systemic factors. There is the possibility that heightened awareness of stress and burnout in the body could exacerbate these symptoms as educators became concerned about their well-being. Educators reported confusion and lack of knowledge about what was happening to their bodies due to the focus in workshops on experiential body-work rather than intellectual discussion.

TRE in the school did not offer a safe space for all educators and while the researcher did her best to provide floor mats, blankets, pillows and music, conditions in the classroom where the workshops took place were not hygienic and often noisy. Some educators did not report benefits as a result of poor attendance or a sense of obligation to be at the workshops. Another teacher felt TRE conflicted with existing psychotherapy she was undergoing. On learning of the benefits accrued by others, these educators regretted not giving TRE the time and attention they felt it deserved.

**6.4.5 Conclusions and recommendations of TRE.** The findings from all methodologies revealed that TRE offered a profoundly personal experience of stress and burnout release, with educators individually processing whatever was going on in their bodies. Sometimes there was laughter, sometimes tears, sometimes music, other times silence. Tremors were so deep and subtle that they were unnoticeable, or they were violent and strong with loud breath-work. While no one TRE experience was similar to another, overall there was a sense of calm

and quiet after the sessions, with educators processing stress on a non-verbal level and sharing and reorienting themselves before going back to their lives.

While educators enjoyed the experience, several male participants compared this with the gym and felt that exercise was more about activity than relaxation. With well-being reduction being statistically insignificant after the TRE intervention, Friedman (1992)'s constructs of emotional stability; self-esteem/self-confidence; joviality; sociability; and happiness may need to be reconsidered. Lazarus and Folkman's (1984) distinction between well-being in the short term and morale in the long term could be relevant in terms of Siegel (2010)'s neurological integrative definition of well-being. With regular practice, TRE's improvements in body regulation, attuned communication, emotional balance, fear modulation, response flexibility, insight, empathy and intuition could lead to improved morale over the long-term.

For those who participated fully, TRE helped educators to take better control in the classroom, improving learner discipline and helping them to feel more whole in terms of connection to self. For one educator it gave a deeper sense of control while at the same time allowed him to let go. As far as staff cohesion was concerned, it was described as groundbreaking, although not everyone elected to participate and for some there were issues of safety and trust.

In terms of classroom competency, the focus turned on the educator, with an awareness of the need for respect, compassion and safety for learners, with critical thinking, positive reinforcement and happiness. Educators after the intervention appreciated the importance of safety, harmony, unity and co-operation.

With limited time available for stress reducing activities in schools, the meaning of the process of tremoring and the differences in exercise and TRE should be made clearer to participants. Educators enjoyed having time for themselves, which needs to be built into future school timetables in order to give staff a quiet space for sharing and processing the stress and trauma to which they are exposed. Finding time to do this at home regularly was difficult with noisy, busy lives and demanding family commitments. As part of staff development, educators could be exposed to TRE as a long-term stress reduction technique and in the event of mass trauma, a whole class, grade or even school could be put through the exercises in a group intervention.

Educators would benefit if TRE was offered regularly, in a safe and clean room equipped with mats and other items such as blankets and pillows. This could be facilitated by an

outsider who has no boundary issues with educators, or educators could be left to find time to work in groups, facilitating themselves through the process or electing an internal facilitator, such as the gym instructor, to lead the exercises and facilitate briefing and debriefing to process the tremoring experience. This could be done at the end of each term to allow teachers to destress and leave on holiday feeling more positive and rejuvenated.

## **6.5 Overview of TP Mixed-Methods Analysis**

**6.5.1 Demographic summary of TP group.** At the TP school, 16 educators signed up for and completed the course, made up of nine females (59%) and seven males (41%). In this group, 69% (n=11) of the educators described themselves as burnout, comprising six females (55%) and five males (45%). Areas of burnout were around heavy work load, especially marking during exam time and at the end of term, and uncooperative and difficult learners. The majority were married (n=12; 81%), with a few being single (n=3; 19%). Most were Christian (n=10; 62%), with the balance Muslim (n=6; 38%). Sixty-nine per cent of TP educators were aged between 40 - 50 years (n=11), 19% over 50 (n=3). One educator was between 20 - 30 years and one between 30 - 40 years. Most TP participants had taught for 20 - 30 years (n=10; 63%), with the balance 10 - 20 years (n=4; 25%), with 2 teachers having less than 10 years' experience (12%).

**6.5.2 Summary of TP mixed-methods analysis and findings.** The TP participants showed reduction in stress levels (M=1.60) which were significant when compared with the control group (M=1.94; p=0.03). Within-group differences showed a trend of reduction of stress, pre- to post-intervention (p=0.07), assuming a p value below 0.10 was a trend. Post hoc comparisons between groups on the variable work burnout showed significant scores for control post (M=53.30) vs TP post (M=39.18), p=0.03. There were significant differences in results in post hoc comparisons for learner burnout between groups: Control post (M=56.2) vs TP post (M=40.71), p=0.01.

In response to a variety of trauma and stressors, ranging from the death of a learner to excessive noise, learners not settling down in class and not doing homework, educators in the TP group described their response as angry, frustrated, helpless, aggressive, threatened, sad and concerned. Before the TP intervention their response was authoritarian, with shouting, swearing and a contained desire to hit. Some educators felt positive and accepting of their circumstances, seeking help from higher authority. An attempt at light-heartedness got a violent response from a learner.

Content analysis revealed that both intra- and inter-individual tools were offered, leading to better interaction in the classroom with more body awareness. Educators gained self-understanding and were equipped with self-help tools, together with improved spiritual awareness and theoretical insights.

Themes covered included connection with self and more control; safety and quiet healing space allowed release of stress and tension. There was more self-awareness and personal empowerment, with practical tools to implement for the self and to teach to others. Connection to their peer group was a major theme to emerge, with compassion and understanding among educators; there was a change in staff focus, with familiarity, happiness and informal chatting.

**6.5.3 Benefits of TP.** After the TP intervention, educators felt more contained and in touch with their feelings, better able to handle emotions. In dealing with the death of a learner, the TP intervention offered a healing space for emotional processing and the ability to better handle traumas.

Emotional and physical connection was felt in the group, with educators being caring, calm and peaceful. Some educators felt more respectful and appreciative of people, two felt more spiritual connection with God and one felt more compassion. Group sharing taught the power of interaction and educators learned empathic listening skills, appreciating positive behaviour after the TP workshops and wanting to model this new way of being. New staff felt that they understood and interacted with their colleagues better and there were improved family relationships. There was a calmer energy and yet also more revitalisation with renewed energy. Vigor, referring to high levels of energy and mental resilience when meeting life's challenges, has been suggested by Shirom, cited by Hobfoll (2011), as a vital area of engagement in burnout reduction, together with dedication and absorption.

With TP skills, educators experienced relaxation as a stress coping tool, together with the ability to reason and understand the learners better. In the classroom, learners responded with appreciation and respect and educators felt empowered to take control of discipline issues. There were reports of better connection to others, with improved interaction in the classroom, with a willingness to understand and process emotions.

Mindfulness led to more thoughtful responses, discernment in appraising the situation, with greater self-insights and courage to respond appropriately. Educators felt empowered with a variety of transpersonal psychology practical tools, including the use of touch and

laughter. Some wanted to lighten up, while others still struggled to let go of negative behaviour, such as shouting. Their awareness of their choices was greater, with one educator just wanted to let learners be.

**6.5.4 Challenges of TP.** TP workshops are designed around the principle of “healing ourselves, healing the world”, with the understanding that once participants have experienced and understood the benefits of self-connection and quiet introspection, these tools can be facilitated with others – in this context, in the classroom with learners. While educators appreciated the personal shifts made in the workshops, some found it difficult to take these practical tools into the classroom and use them confidently. There was a feeling for some that TP needed to be more internalised to become a natural process to use and pass on to others. Others, like the educator who started daily meditation time in his class in the mornings, found the transition of taking what he had learnt into the classroom easier.

For some, emotional processing in a group can be difficult and it is necessary to create a safe and confidential space so that teachers can feel able to express themselves. In the case of a learner’s death in the TP intervention school, male educators allowed themselves to cry and share, which they had never done before in a staff setting and then felt better equipped to share emotions in the class with the learners who had lost a colleague. Due to the volunteer nature of the research, educators were not obliged to attend workshops, and this frustrated teachers who attended. There was a sense that staff who did not attend were alienated from the group, leading to discord.

**6.5.5 Conclusions and recommendations of TP.** All methodologies revealed that transpersonal psychology taught in Capacitar workshops offered powerful yet easy-to-apply tools for the educator both personally and in the professional setting of the school and classroom. In a typical workshop, educators could be seen in deep personal quiet, following a meditation, or dancing together in unison, with multicultural music adding to the healing process. Participants also connected with hand and body massage and learnt the power of touch. There was much laughter and fun. For team building, it offered an excellent opportunity for educators to feel heard and to understand their co-workers and to process emotions. However, an effort should be made to include all educators for group cohesion. For those participating, feelings of isolation, which can result in burnout, are mitigated. It could be used on a regular term basis for staff development, techniques can be used as ice-breakers in meetings and workshops could be held for end-of-term relaxation.

There is the added bonus that educators were better equipped to deal with the learners, although interventions should have allowed time for participants to practise facilitation skills to become confident in using these tools in the classroom. To improve life-skills, it could be introduced into the schools as part of subject curriculum in, for example, Life Orientation.

## **6.6 Overview of TA Mixed-Methods Analysis**

**6.6.1 Demographic summary of TA group.** The TA group had the smallest number of educators (n=10) taking part in the intervention research, with 58% male (n=6) and 42% female (n=4). This group had the lowest level of reported burnout (n=4; 40%), citing learner ill-discipline, departmental regulations, student apathy and attention level of learners as major stressors. With the control group, this was the only group to have more males than females. Seventy per cent were married (n=7), with the balance single and one participant widowed. Fifty per cent (n=5) were Christian, 40 per cent (n=4) Muslim. This was the oldest group, with all participants over 40 - 60% being 40 - 50 and the remainder over 50. Despite their age, this group had the least teaching experience of all the groups – 60% (n=6) had 10 to 20 years, 20% had less than 10 years' experience and 20% had 20 - 30 years.

**6.6.2 Summary of TA mixed-methods analysis.** The TA pre-test measures of perceived stress ( $p=0.047$ ) and work burnout ( $p=0.043$ ) were significantly lower than other groups. In post hoc comparisons between groups, significant results were measured for TA in all types of burnout - personal burnout: control post (M=55.03) vs TA post (M=39.58)  $p=0.02$ ; work burnout: control post (M=53.30) vs TA post (36.78),  $p=0.03$ ; learner burnout: control post (M=56.2) vs TA post (M=30.00),  $p=0.02$ . This was the only group to measure significant post hoc differences with the control group on the well-being variable ( $p=0.00$ ). Significant between group differences for learner burnout were TA pre (M=42.50) vs TA post (M=30.00),  $p=0.02$ . Overall, the TA participants exhibited a significant reduction on scores related to learner burnout.

Content analysis revealed a variety of emotional responses to stressors, from angry, upset, stressed and anxious to powerless and hopeless. To cope, educators tried to use stories to relate to learners, others became aggressive and threatening. Some ignored or disregarded the learners, or appealed to reason. After the intervention many educators felt more positive and confident; they felt calm, grateful and empowered. They were better able to cope with rational analysis and awareness. They had psychological tools to implement in their

understanding of learners and felt in control. TA supported inter-individual transactions, offering the most techniques for the classroom and created a connection with the group.

Major TA themes to emerge for the self were gaining self-insights and improved emotional intelligence, relaxation and self-empowerment, with a sense of personal growth as a result of profound shifts, being calm and in control. In terms of relationship to others, deeper bonds developed between members of the group, with better understanding and a sense of power. There were improved family relationships with better communication skills and understanding of behaviours. Educators were able to improve discipline in their relationship with learners. They had a more positive approach, with a change of attitude and improved communication. Practical tools, like contracting, were used with learners, which led to greater understanding and better emotional responses.

**6.6.3 Benefits of TA.** After the TA intervention, educators had powerful insights and gained realisations which improved relationships with themselves, their peer group, families and learners in the classroom. By acquiring social psychological tools, they understood learner behaviour better and saw themselves as the professional change-agents in the classroom. They were also able to apply these tools to themselves, better understanding their emotional and cognitive responses and were able to modify their behaviour in appropriate ways. They gained in self-confidence, with an ability to be in control and plan for the future.

Relationships in the classroom changed from love/ hate to love/ love, or in the language of TA to (I+, U+) – I'm OK, you're OK (Berne, 1961). The definition of a competent classroom after the intervention was one of mutual respect between educator and learner, where the educator boosted learner self-esteem and where behaviour was governed by contracts.

**6.6.4 Challenges of TA.** Initially it was not easy to convince educators to attend workshops when their timetables were filled with classes of undisciplined learners, meetings, administrative and marking workloads and this was especially in the case of TA, where workshops involved sitting for extended periods of time, with long discussions which required focus and attention. There were no opportunities for any relaxation techniques, as in TRE or TP interventions, and educators admitted that they were hesitant and resistant to begin with. This was reflected in the low number of educators who participated in the research. However, as the workshops progressed, educators quickly began to appreciate the power of TA to make profound changes in their lives and especially the classroom, so an

enthusiastic engagement replaced the negativity, which was an initial major challenge to overcome.

Some educators wanted topics to be discussed in more depth to be better understood, and others wanted more variety of presentation than a flipchart and lecture. More application in the classroom was requested by one educator with greater discussion and interaction. Several educators wanted the workshops to be more inclusive, involving all the school, as a divide was created amongst staff between those who attended and understood TA and those who did not.

**6.6.5 Conclusions and recommendations of TA.** With many educators responding negatively to Department of Education workshops, it required something special to attract and retain participants in workshops in high-risk secondary schools, where there was little time to include outside activities into busy teaching and meeting schedules. However some headmasters, including the one at the TA school, were prepared to include this stress programme into the curriculum. At first TA seemed intellectually challenging and demanding to understand, but educators soon began to appreciate the insights gained and started to notice changes in themselves and their colleagues. In the end, there was much laughter and animated discussions around relationships and psychological games, especially in the school and classroom.

TA provides powerful tools for educators to manage learner discipline and should be introduced into the curriculum at teacher training institutions to teach basic social psychology. Alternatively, it could be introduced into schools as part of staff development. International programmes for teachers and learners are available in South Africa, where Proficiency Awards are given to encourage educators and children to apply what is learnt and produce portfolios of evidence. This supervised application could ensure that TA is implemented, understood and practised for the benefit of both educators and learners in challenging and traumatic classroom contexts.

## **6.7 Overview of Control Group Mixed-Methods Analysis**

**6.7.1 Demographic summary of control group.** Twenty educators took part in the study as the control group. Of these, 55% were male (n=11) and 45% (n=9) female. Even though overall more females (n=21; 51%) in the study were burnout than men, in the control group, 75% (n=15) of the educators reported themselves to be burnout, the majority of whom were men. As in other groups, most control group members were married (n=16; 80%), with the



balance, single. Most control group educators were between 40- 50 years (n=12; 60%) with the balance being over 50 (n=4; 20%) and between 30 - 40 years of age (n=3; 15%). Most educators had taught for 20 to 30 years (n=8; 40%), with 25% under 10 years and 25% 10 to 20 years. A minority (n=2; 10%) had taught for over 30 years.

**6.7.2 Summary of control group mixed-methods quantitative analysis.** As the control group only took part in pre- and post-testing of quantitative measures, these are the only results which are reported. As each group has been compared throughout the study with the control group, this section will only give a general summary of these findings. Stress, personal burnout, work burnout and learner burnout were highest among the control group. This group's levels of stress and burnout remained unchanged or increased slightly from the period pre- to post- intervention, with the exception of work-burnout, which was somewhat reduced. This could have resulted from work burnout reduction at the end of term, when marking was complete and educators were preparing to go on holiday. The well-being level of the control group dropped, over the period pre-to post-intervention, although this was not significant.

## **6.8 Chapter Summary**

This chapter presented a discussion of quantitative and qualitative findings. The three-intervention approach was discussed, followed by a summary of contextual and demographic issues. Mixed-methods analysis, taking all data into consideration, was then given for each intervention.

## CHAPTER SEVEN

### Conclusion

*“Many people assume that context specificity limits the generalisability of findings ... Ironically, in my experience, just the opposite is more often the case: Well-characterised contexts allow greater precision in defining correlative or predictive relationships that turn out to be relevant in diverse contexts,”* (Folkman, 2011, p. 460).

### 7.1 Introduction

This chapter revisited the goals addressing the research aim which guided the study, focusing specifically on theoretical interpretations of stress and burnout, coping and well-being and classroom competency. An attempt is made to graphically represent mixed-methodology crystallisation, considering the transformative nature of the juxtapositioning of different data. Limitations of the research were then outlined, followed by recommendations for future studies, ending with overall reflections.

### 7.2. Theoretical Conclusions

#### 7.2.1 Research goals.

**7.2.1.1 Stress and burnout.** Teachers in this study suffered from high levels of stress and burnout, which is in line with international and local research findings (Scaufeli & Enzmann, 1998; Schwarzer & Hallum, 2008; Savicki, 2002; Van Wyk, 2006; Wood & McCarthy, 2002). Environmental antecedents triggering stress and burnout were present, such as role ambiguity, work overload, disruptive students and amount of red tape (Schwarzer & Hallum, 2008). Perceived stress levels of educators taking part in the research were significantly reduced after the TRE, TP and TA interventions, with insights and tools leading to improved self-efficacy, which is important for burnout reduction (Brouwers & Tomic, 2000; Schwarzer & Hallum, 2008). Confronting unpleasant feelings and experiences, which is linked to lower levels of burnout (Savicki, 2002), was achieved in each intervention as emotions were processed in different ways and stressful events discussed in group sharing.

Social support of group work improved communication with others and opportunities to control work and learn and apply new ideas contributed to stress reduction (Savicki, 2002). An awareness of authoritarian and overcommitted personality type being susceptible to

burnout (Borritz, 2006) helped lower stress and burnout levels. Educators were better able to assess their own responses to learners in the classroom, determining whether helper motives dominated or whether they were insensitive to learners' problems (Haberman, 1995). In the TA intervention, for example, understanding of drivers was studied and applied. In TRE and TP interventions, new approaches to managing stress - such as groundedness, centredness and breathwork - broadened educators' understanding and responses. While feeling calmer and more in control, educators also reported heightened levels of energy. Vigor, referring to improved energy and mental resilience, is a vital area of burnout reduction, together with dedication and absorption (Shirom cited by Hobfoll, 2011).

An improvement in emotional-social competencies, such as empathy, optimism, assertiveness, self-awareness, reality-testing, flexibility, impulse control, social responsibility and stress tolerance (Van Wyk, 2006) became features of not only the emotionally focused intervention, TP, but also became evident in TRE and TA interventions. Hardiness leading to transformational coping (Leon, 2000) is also an element of burnout reduction, evident in all interventions as educators faced their challenges and saw themselves as change-agents, rather than blaming learners.

**7.2.1.2 Well-being.** Happiness as an element of well-being could be viewed as a western construct which is not relevant to diverse traumatised communities (McElheran, 2013). Well-being of educators did not improve after the interventions in this study, despite the reduction of stress and burnout. In fact, in the TRE intervention, as in the control group, well-being declined. McElheran, a clinical psychologist specialising in PTSD, suggests that well-being is related more to the transformation in individuals once they have re-emerged from struggle and that people should rather strive for integration, feeling the value of all experiences and embracing fear, sadness and uncertainty as well as happiness, pride and satisfaction. This more holistic view of well-being could be more appropriate in diverse traumatic contexts, such as the Cape Flats in this study.

**7.2.1.3 Mixed-methods investigation.** The impact of the interventions was measured and analysed in a mixed-methods approach. A crystallisation (Richardson cited in Guba & Lincoln, 2005) rather than triangulation approach was adopted throughout the study, allowing nuances and meanings to emerge from different juxtaposed foci, exposing many dimensions and angles of understanding (See Figure 18).

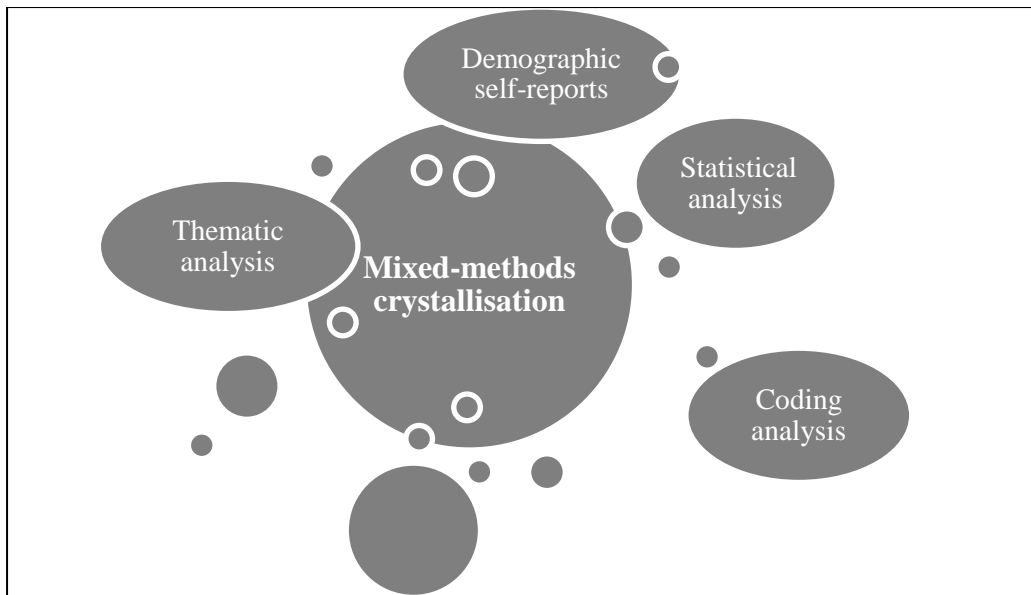


Figure 18. Overview of crystallisation of mixed methodology.

The first spotlight of demographic self-reports (See Figure 19) gave a general overview of educators in the context of their lives. High levels of stress and burnout were reported by many participants, who turned to different activities, such as family, religion and friends to improve well-being. The greatest stressor was learner discipline. Wholeness defined well-being, integrating mind, body, spirit and emotional wellness.

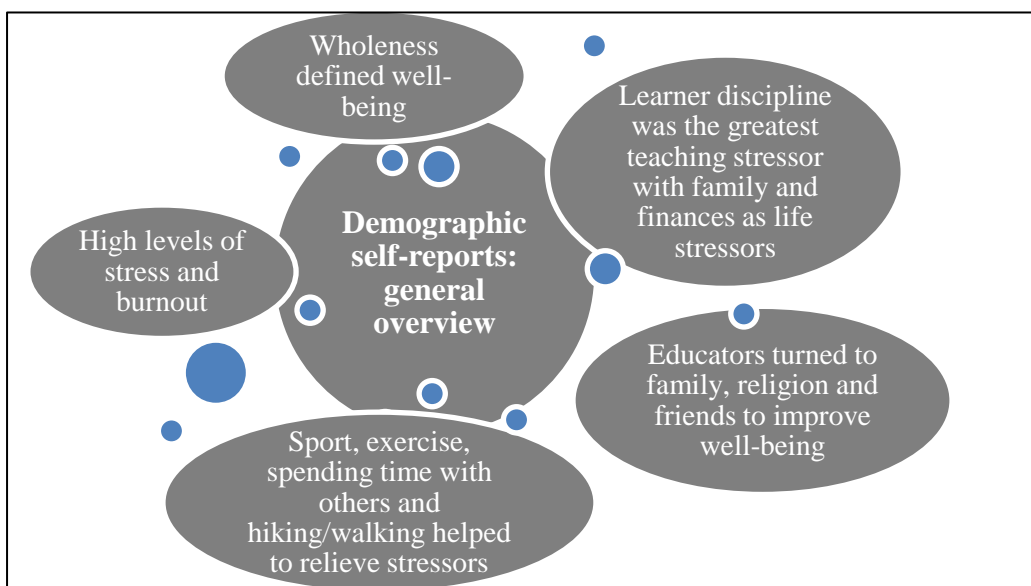
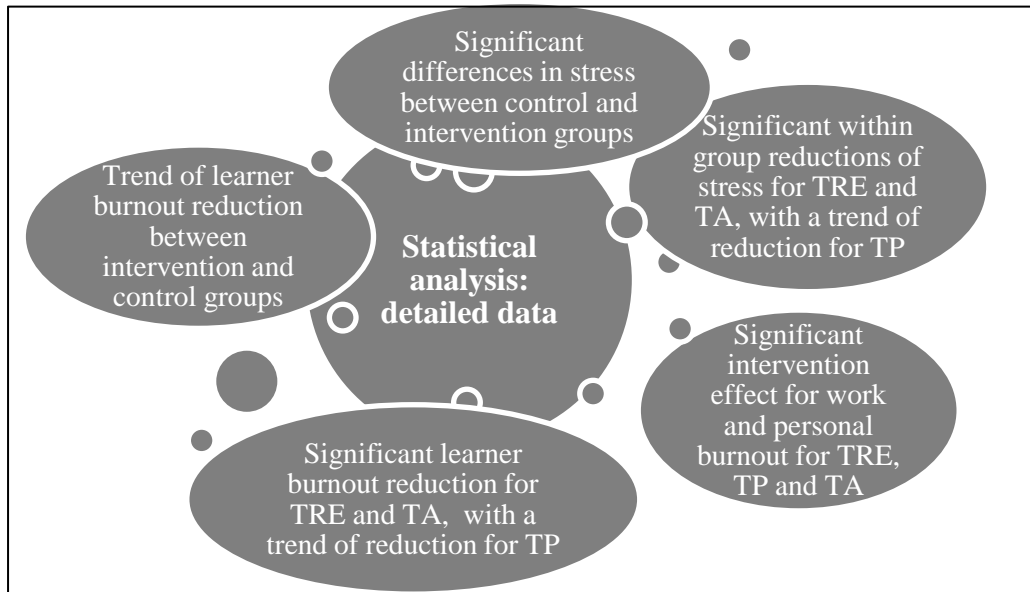


Figure 19. Crystallisation of mixed methodology – demographic self-reports.

Statistical analysis highlighted statistically significant reduction of stress levels pre-and post- interventions between all groups and the control group. There was a significant reduction of stress within groups for TRE and TA, with a trend of reduction for TP. There was significant interaction effect for work burnout and personal burnout for all intervention groups. There was a trend for learner burnout reduction between TRE, TP and TA groups compared with the control group and significant burnout reduction for TRE and TA, with a trend of reduction for TP (See Figure 20).



*Figure 20.* Crystallisation of mixed methodology – statistical analysis.

Coding analysis comprised self-reflections during workshop training, revealing different inter- and intra-individual effects for each intervention, deepening the understanding of impacts of TRE, TP and TA (See Figure 21). TRE offered intra-individual tools of self-understanding and body awareness. TP offered both intra- and inter-individual tools, resulting in better interactions and more self-connection. TA supported inter-individual transactions, leading to better self-understanding and offering self-help tools.

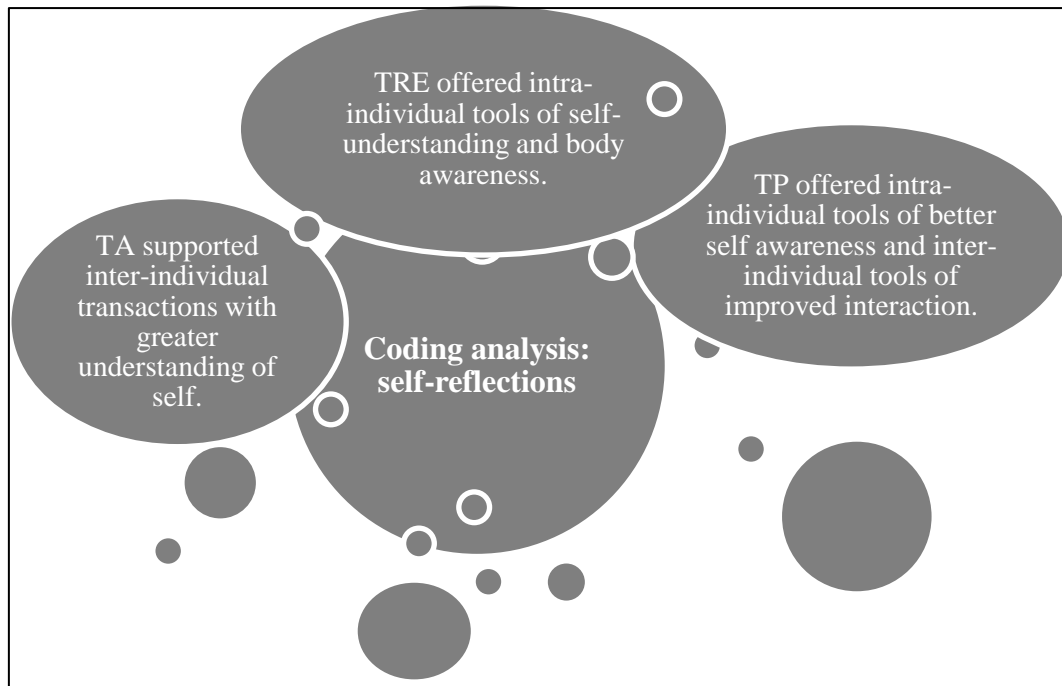


Figure 21. Crystallisation of mixed methodology – coding analysis.

Thematic analysis offered insights into educators' relationship with themselves, with others and within the school environment. The focus was on content rather than process; although the researcher did conduct constructionist analysis of focus group interviews, this information was excluded as it was considered to be beyond the scope of this study. Content analysis revealed multiple insights into the self, relationship with others as in family and peer group, and relationship in the classroom with learners (See Figure 22).

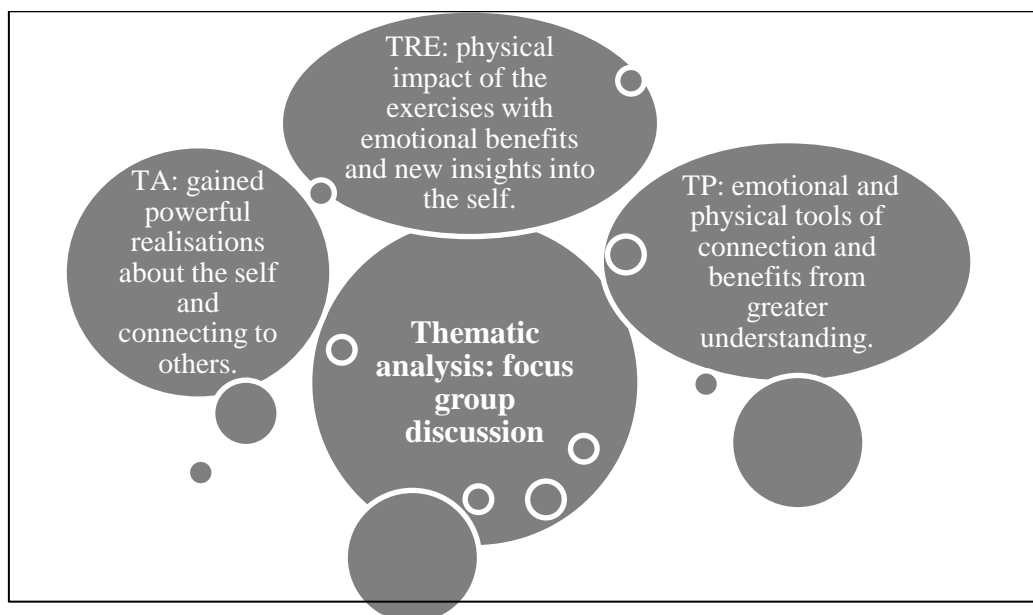
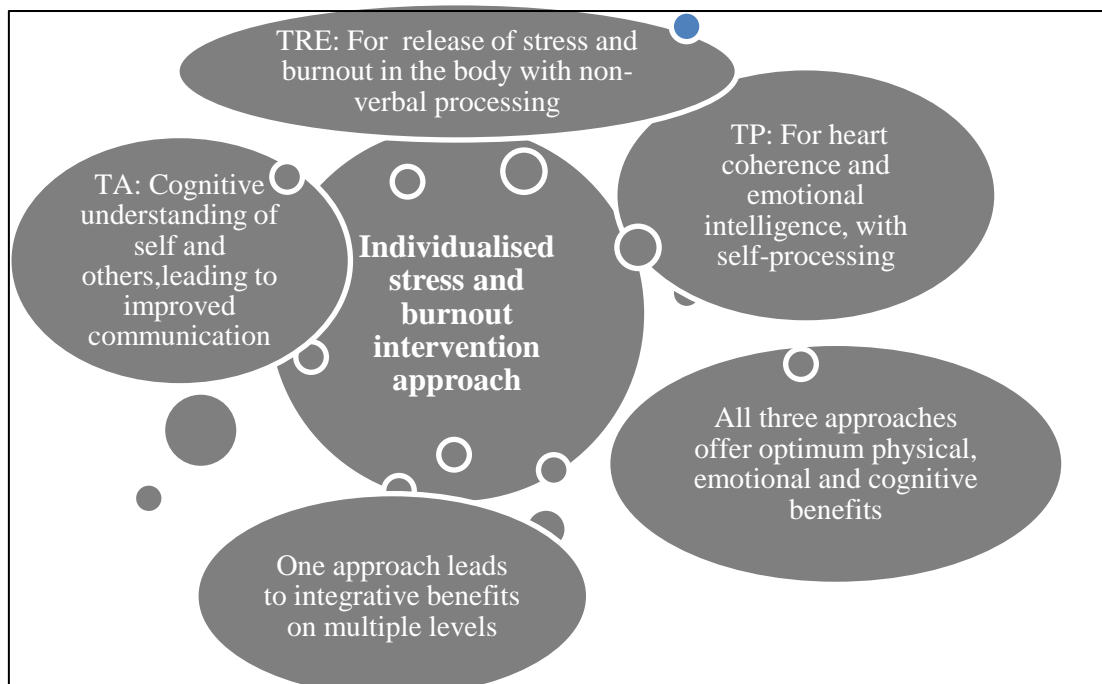


Figure 22. Crystallisation of mixed methodology – thematic analysis.

A combined understanding of mixed-methods crystallisation revealed physical, emotional and cognitive benefits and insights for each intervention, suggesting that educators could choose from the multiple approaches offered, thus helping to reduce stress and burnout with interventions which resonated for them as individuals according to their specific preferences (See Figure 23). For those who prefer body work, TRE could benefit; for those who seek heart coherence, TP could be the intervention of choice. Some educators who prefer rational analysis and gaining knowledge could benefit from TA. If offered all interventions, educators could gain the optimum benefits from physical, emotional and cognitive healing.



*Figure 23.* Individualised stress and burnout approach with multiple physical, emotional and cognitive benefits.

**7.2.1.4 Classroom competency.** This study set out to understand classroom competence in the context of high-risk schools and how this changed over the course of group interventions. For the TRE group, insights included that a calm teacher, with a relaxed attitude, was important. Teachers needed more understanding and to role model respect. The learners needed to adopt a good work ethic, with greater understanding. Fun was also important for both learner and teacher. These attributes of the competent classroom mirror the safety and threat elements in the neurological findings of Lieberman (2007) and Rock (2009). After TRE, the teachers had a greater understanding of the social needs of the learners and how to set up the classroom as

a safe space for optimal academic performance. Cultural tolerance (Mindell, 2002) is also an important consideration of respect cited by educators in the TRE intervention.

For educators in the TP intervention, educator competency became an important element of classroom competence, with the creation of a safe, happy space. There was better communication with parents. Learners had a good work ethic in smaller classes. These insights reflected the classroom competency described by Jennings and Greenberg (2009), with teachers able to model effective classroom management as models of social and emotional competence. Safety is also an important element of enabling academic performance (Rock, 2009).

In the TA workshop classroom competence was described as positive interactions between educator and learner, with the teacher being informed. Safety was also important, with an environment conducive to learning. These aspects mirror the safety and threat realisations of Rock (2009) and Lieberman (2007) and revealed the importance of kindness (Levine, 2010) and compassion (Armstrong, 2011) in education, focusing on social and emotional competence (Jennings & Greenberg, 2009).

**7.2.1.5 Relevance of coping tools.** Workshops provided diverse coping tools for stress and burnout responses, which became effective depending on orientation of the teachers to healing processes. In discussing improvement to working conditions, coding analysis in particular revealed the frustration of educators with large classes, excessive work load, limited resources, uninformed and/or complacent parents and financial stressors. While these conditions fall beyond the scope of interventions for improvement, the systemic environment of high-risk schools needs to be addressed by the Department of Education. Teachers were doing their best in challenging conditions and while they welcomed measures to alleviate stress and burnout, they remained frustrated with environmental working conditions which were not conducive to learning.

**7.2.1.6. Contextual issues.** Teachers were not positive about Department of Education interventions, which were a source of further stress. Therefore the challenge for future stress and burnout interventions, whether physical, emotional or cognitive, is to address contextual issues of no time, energy or often interest of educators in improving their health and conditions in the classroom. Workshops could be recommended for those educators who demonstrate unhealthy behaviours, such as angry outbursts, failure to teach or resorting to violence, but interventions should not be seen as punitive. Later in this chapter,



recommendations for the future suggest ways of including these interventions as positive contributions in schools for educator stress and burnout reduction.

**7.2.1.8 Future applications.** The researcher has been asked to become a service provider for one of the metros in the Western Cape Department of Education, and so practical ways forward are being considered. Whether these interventions are offered individually or as a multiple approach will depend on time, resources and funding available. It is hoped that community initiatives can be developed to bring much-needed skills into schools and particularly classrooms, empowering local counsellors and caregivers to care for themselves, and then pass tools on to educators and learners, who can in turn, in a multiplying effect, heal themselves and others, such as family members and friends.

### **7.3 Limitations of the Study**

**7.3.1 Non-random sampling.** Major limitations in this study included logistical constraints encountered, with participants coming from four different schools. This meant that they could not be randomly assigned to the intervention and control groups, limiting the generalisability of the findings. While the interventions were randomly assigned to schools, one school cohort elected to be the control group and only took part in pre- and post-measurements. All educators who were in schools willing to take part in the study were invited to participate. Thus the researcher relied on volunteers, which resulted in small sample groups and rendered the study a quasi-experimental design, difficult to implement using random sampling. However, the use of a control group, with pre-test equivalence of groups tested through descriptive statistics, helped to mitigate this design limitation (Colosi & Dunifon, 2006).

**7.3.2 Intervention and control group profiles.** While every effort was made to match the intervention and control groups, more men volunteered to take part in the TA and control groups, which could have affected the research findings.

**7.3.3 Time challenges.** As the Department of Education stipulated that no interventions were to take place in schools in the final term due to exam and marking pressures, the researcher was limited in the time availability to complete the workshops. With unavoidable delays in implementation due to traumatic events such as bomb scares, violent incidences and community gangster activity, it was difficult to complete the work simultaneously in all three schools. However, post-measures were completed in the intervention and control schools as timeously as possible. The researcher was also not able to attend and observe all the workshops as TA and TRE interventions took place at the same time in different locations.

No longitudinal study was carried out to measure effectiveness of the training over time, which could be a further area for research.

**7.3.4 Reasons for withdrawal.** As it was an ethical right of participants to withdraw from the workshops without explanation, it was difficult to ascertain the reasons for attrition. Most TA educators withdrew from the research on signing the consent form and realising the voluntary nature of the training, despite encouragement from the headmaster who supported the programme as part of staff development and allocated school time for educators to attend. In the TRE intervention, several educators said they were too busy to attend and one educator did not feel it was the right time for her as she was undergoing psychotherapy. Although some educators disclosed not feeling safe in the space, they continued to attend. In the TP intervention, two staff members informed the researcher voluntarily that they did not feel safe in the group and did not attend further workshops. This highlighted the need for respect amongst staff and adherence to the confidentiality clause contracted at the start of each intervention.

**7.3.5 Placebo effect.** The placebo effect refers to a person improving after attending an intervention of any kind. It is possible that the mere fact that workshops were introduced into schools and that attention was given to staff that stress and burnout symptoms were reduced. While the researcher acknowledges that groups of any nature can be a powerful healing tool, an attempt was made through in-depth analysis using mixed-methods to understand these differences. Interventions did not only draw on group cohesion, but also physiological, emotional and cognitive orientations.

**7.3.6 Hawthorne effect.** The behaviour improvement of research subjects could be the result of being measured and not the result of any experimental manipulation. The fact that the control group completed the measures at the same time as participants, yet consistently recorded dissimilar results, suggested that interventions affected results and not the research procedures. Also, intervention groups recorded different results on different measures. Longitudinal studies in future research could measure how lasting improvements in stress and burnout are sustained and, if there were improvements, how long these would last.

## **7.4 Recommendations for Future Research**

There is scope for further research to be undertaken on separate as well as combined interventions:

- Trauma release exercises can be researched on larger populations of not only teachers, but any traumatised community, such as victims of rape or domestic violence or mass trauma. TRE can also be introduced into schools for large-scale trauma management, with physiological and psychological measures to assess pre-and post- intervention results.
- TP practices could become part of staff training and development in schools, with body practices introduced to manage emotional distress and trauma suffered by learners. It could be researched in many settings apart from schools, including mental health centres.
- TA has scope to be added to teacher training, with simple social psychological tools taught to new educators to equip them to manage discipline of the learners. Research could be conducted on large groups of learners, assessing the impact of TA on issues such as self-esteem, bullying and discipline.
- A combination of all these approaches could be introduced to special needs schools, such as institutions dealing with problem behaviours, where physiological, emotional and cognitive tools could be taught to educators and professional staff, such as psychologists and occupational therapists. The impact of these psycho-educational interventions could then be assessed in psychotherapeutic group work and researched further as a qualitative study. Clinics dealing with issues such as domestic violence and trauma could also adopt all three interventions as stress and burnout prevention measures and the results researched both quantitatively and qualitatively on different population groups.
- Longitudinal studies could be carried out over several years to measure the impact of the interventions over time and the interrelatedness of well-being in the short term and morale in the long term.

## **7.5 Conclusion**

This study set out to answer the research question: How do interventions, based on trauma release exercises, transpersonal psychology and transactional analysis, impact stress and burnout of educators in high-risk secondary schools? Transformative findings of the study from juxtaposed data in a crystallisation analytic approach indicated that each intervention can have profound physiological, emotional and cognitive impacts on educators' coping responses, reducing stress and burnout. There were also significant shifts in the

understanding of classroom competency for educators, who took more responsibility for managing discipline rather than seeing it exclusively as a learner problem. There was meaning making (Cherniss, 1995; Folkman, 2011; Savicki, 2002) in the positive role the teacher could play as change agent and professional among learners (Goleman & Lantieri, 2008; Ray, 2007). This was achieved over a relatively short period of time, with simple insights and techniques facilitated in group psycho-educational workshops. The transactional stress model (Lazarus & Folkman, 1984) provided a theoretical framework for the study, taking into account educators' responses when exposed to threat and trauma, resulting in different coping reactions based on physiology, emotions and cognitions. Latest response theory (Porges, 2012) deepened understanding of these different ways of coping, with focus on the importance of social engagement before flight, fight and immobilisation reactions to threat, stress and trauma.

There were common elements in each workshop, with educators sitting in groups, laughing or crying in deep discussion, enjoying breaks and relaxing. There were also obvious differences. In TRE, educators would lie on the floor and do exercises. In TP there was quiet time with participants seated in chairs, active movement with song and dance and body touch. In TA there were intensive group discussions and reflection. In each group, most educators seemed to trust the process and willingly took part.

Overall, there were statistically significant differences between the intervention groups and the control group on measures of stress. With the focus of all workshops on the educator in the classroom and competency in handling learner discipline, learner burnout showed the most improved statistical results. However, coding and thematic analysis also revealed personal and work burnout reduction. Well-being results were statistically not significant, but there was a trend for improvement in the TP and TA interventions, and neurological themes of integrative wellness, such as body regulation, attuned communication, emotional balance, response flexibility, insight, and empathy (Siegel, 2010) matched themes arising from coding and focus group thematic analysis across all the interventions. This has wide-ranging implications for a neurological understanding of the impact of the interventions and the improvement of well-being in the short term and morale in the long term (Lazarus & Folkman, 1984). Long-term benefits for morale need further longitudinal study with inclusion of personal, occupational, familial, environmental and cultural systemic influences. In addition, transformative well-being, embracing all emotional responses, could be more relevant to healing in diverse traumatic communities rather than western constructs such as

happiness and sociability (McElheran, 2013), highlighting the need for norming of South African assessment instruments to local conditions and specific contexts.

In the crystallisation process (Richardson cited in Guba & Lincoln, 2005) of multi-methods investigation for greater knowledge and understanding, a multidimensional light, sometimes dim, sometimes bright, has been shone on stress, burnout, coping and well-being in this school context. We know more but, at the same time, question what we have seen, heard, read, felt and understood. Juxtaposing different data allowed transformative processes to take place, opening up the possibility of the unexpected.

This study showed that the threat and stress coping response of educators in high-risk schools can be positively influenced by focusing primarily on one of three areas covered by the interventions. Coping change achieved through a physical response, as in TRE, impacted on emotions and cognitions; an emotional response, as in TP, affected physiology and cognitions; cognitive insight into the behaviour of others, as in TA, resulted in emotional and physical changes, with a positive outcome in each intervention. Therefore, while each intervention had its own benefits and challenges, the neurological interaction effect of all three responses, skills for body awareness, emotional intelligence and cognitive insights into stressful situations, could in combination provide educators with optimum choices for achieving well-being with stress and burnout reduction. Those educators who did not engage fully in the intervention in this research would be able to select an approach which resonated more with them. TRE, TP and TA interventions could also be integrated into current stress and burnout reduction approaches, such as cognitive behaviour, arousal-reduction methods, and personal coping skills training (Dunham & Varma, 1998).

Educators defined wellness as wholeness and it has been found that addressing physical, emotional, cognitive, spiritual, and social aspects of well-being builds a foundation for preventing the development of traumatisation, with increased ability to manage symptoms when they occur (Williams, 2010). Problem-focused coping, with repetition of skills learned in workshops, could help educators to develop a sense of self-efficacy and optimism (Savicki, 2002). Wellness in terms of emotional processing and engagement and connection to others is also relevant for healing in stressed and burnt-out communities in traumatic contexts (McElheran, 2013). All interventions provided this space for emotional and social well-being.

With learner discipline being the greatest stressor in high-risk schools, educators need effective responses which do not exacerbate the violence and aggression present in gangland

communities. The role of civil society in these areas, described as strong by Bergman (2011), can become even more potent, spurred by liberated psychologists (Martin-Baro, 1994). In answering Levine (2010)'s call for innovation, this study has attempted an eclectic mix of historic and traditional psychology (Assagioli, 1999; Berne, 1961; Jung, 1981; Maslow, 1959), with modern insights (Barrow & Newton, 2004; Cabrera, 2002; Cane, 2000; Davis, 2000; Drego, 2005), and physiological considerations (Berceli, 2008; Scaer, 2005, 2007), combined with latest neurological (Arden, 2012; Porges, 2012; Siegel, 2010), and neuropsychiatric (Cummings & Mega, 2003) research. This took place in a group setting, inspired by Corey et al. (2010), Freire (1993) and Yalom (1995) with educators in the traumatic context of high-risk secondary schools on the Cape Flats (Benjamin, 2010; Crawford-Browne, 2011; Plato, 2012).

TRE, TP and TA interventions can contribute to educators becoming “warriors of the human spirit,” (Wheatley cited by Cane, 2013, p. 1), strengthening their ability to cope with multiple stressors and preventing burnout, “refraining from adding to the fear and aggression of modern times, seeing the world honestly and not fleeing from its harshness,” (p.1). The findings in this research project indicated that TRE, TP and TA stress and burnout interventions can make a meaningful contribution to this noble aim. As eloquently stated by Houston cited in Levine (2010), the striving and territorial protectiveness of the reptile, the nurturing and family orientation of the early mammal, and the symbolic and linguistic capacities of the neocortex can, indeed, grace our salvation rather than multiply our damnation.

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## Appendix 1

### Trauma Release Exercises Workshop Introduction

#### Session 1

**1. Introductions:** Name, class, subject, how are you feeling today; what are your aspirations for the course?

**2. Logistics:** Start and end times; tea; toilet breaks; materials

**3. Agreement:** Between facilitators and delegates. What is expected of each? For example: *Participants:* Start and end promptly; commitment to attend all workshops; confidentiality; ethical rights; food during fast?

**4. General outline of interventions:** Our three responses to stress and threat are physiological, emotional and cognitive. The three interventions of this study are based on these three responses: The cognitive brain intervention is transactional analysis; the emotional brain intervention is transpersonal psychology and the reptilian brain is accessed through trauma release exercises.

Neuroscientific findings (Lieberman, 2007) show that social and physical pain produce similar brain responses in the dorsal anterior cingulate cortex for degree of distress and right ventral prefrontal cortex for regulating the distress. The brain is described as a “social” organ, with physiological and neurological reactions affected directly and profoundly by social interaction (Rock, 2009), with social needs being equated with survival needs in terms of brain reaction. This poses great challenges to teachers to create an environment that addresses the social brain threats to optimal performance of learners. The conscious awareness learners have to potentially stressful interactions means that educators’ behaviour is interpreted and magnified in meaning, making sentences and gestures potentially threatening or distressful to the class, even though this response may be unintentionally evoked by the educators.

*Threat response:* The acronym SCARF is used by Rock (2009) to highlight ways to calm the threat response. This stands for: Status (treating people fairly); certainty (knowing what to expect); autonomy (allowing people to make decisions); relatedness (understanding each other enough not to feel excluded) and fairness (treating learners fairly). These qualities are used by Rock in organisational contexts, but could also be relevant in the competent classroom. The threat response is described by Rock as deadly, impairing creative thinking,

## Appendix 1 ctd

creative insight and preventing problem solving, debilitating employees (or learners) when they most need mental capacities.

### **4.1. Reptilian brain:**

*Description:* The reptilian brain system functions in a habitual way, unable to alter either inherited or learned patterns of behaviour (Pearce, 2002). This comprises the brainstem, medulla, cerebellum and pons, making a first layer functioning as a survival machine, reacting without rationally considering feelings or thoughts (Benjamin, 2010). It is responsible for fight, flight and freeze responses when faced with stress and trauma.

*Learner behaviour:* Translated into learner behaviours in the classroom, Benjamin (2010) describes the psychosocial impact of activation of the survival brain due to trauma and violence as hypervigilance, being jumpy and irritable and easily startled; unable to concentrate or focus, appearing to have attention deficit disorder. This can lead to withdrawal or apathy, anger, poor impulse control and learning difficulties.

Through the alliance of the neocortex with this low brain, educators and learners would also be prone to lying, gloating when successfully deceiving, lamenting and self-pitying when deceived in this way (Pearce, 2002). This author describes how, unimpeded by emotions, the reflexive system alerts the cognitive brain to a dangerous event and swift decisions can be made to mobilise our intellect to the reptilian brain's defence network.

## Appendix 2

### Transpersonal Psychology Workshop Introduction

#### Session 1

**1. Introductions:** Name, class, subject, how are you feeling today; what are your aspirations for the course?

**2. Logistics:** Start and end times; tea; toilet breaks; materials

**3. Agreement:** Between facilitators and delegates. What is expected of each? For example: *Participants:* Start and end promptly; commitment to attend all workshops; confidentiality; ethical rights; food during fast?

**4. General outline of three interventions:** (Appendix 1)

#### **4.1. Mammalian emotional brain**

*Description:* The transpersonal techniques adapted from Capacitar workshops in this study focus on calming and soothing the emotional brain. This brain, or limbic system, comprises several related areas: Amygdala, thalamus, hypothalamus and the basal ganglia. It is responsible for regulating the emotions and activating feelings ranging from fear and sadness to caring, social bonding and playfulness (Benjamin, 2010). This author explains that emotions are developed through social experiences, interactions and expressions, with the foundation of all future relationships and interactions in life being founded on early attachment and emotional bonds formed between a baby and the caregiver.

*Hormonal response:* It is immaterial whether a negative response signal is received from the neocortex or reptilian brain as the emotional response remains the same, flooding the entire body and brain. Reprimands, criticisms, fears and anxieties, whether real or imagined, will affect state-specific learning, with a resulting trigger of hormones (Pert, 1999).

*Learner behaviour:* In the classroom, Benjamin (2010) describes the child functioning poorly in the emotional brain as highly emotional, attracting attention and prone to heightened displays of, for example, rage or crying. They may seem self-absorbed and struggle to get things into perspective. They may live in a fantasy world, confusing reality with make-believe, not taking responsibility for their actions. “Traumatised learners struggle to control their emotions. They may display impulsive rage, revenge, mood swings and violent behaviour,” (p.6).

## Appendix 2 ctd

### 5. Brief history of Capacitar and Transpersonal Psychology

The Transpersonal Psychology intervention is based on the work of Dr Pat Cane (2000), who is founder and director of Capacitar International, a world-wide movement involved in trauma healing and transformation, established in 1988. “Capacitar” is a Spanish word meaning, “to empower, to bring to life”. Her doctoral dissertation, “Trauma healing and transformation: Awakening a new heart with mind, body, spirit practices”, resulted from her research efforts with trauma victims in the aftermath of Hurricane Mitch, Honduras.

Dr Cane was invited to South Africa in 2002 by the SA Catholic Bishops Conference to work with HIV/Aids caregivers. Dr Cane presented her multicultural popular educational approach for the healing and transformation of struggling populations of the world, affected by traumatic events such as natural disasters, violence, disease and poverty. The intervention was introduced to professionals working in schools suffering from inadequate psychosocial resources by Berenice Daniels, Chief Education Specialist: Specialised Learner and Educator Support at the Metro South Specialised Support Unit, WCED. The Rotary Club of Newlands offered sponsorship for workshops.

These workshops are founded on the popular education principles of Brazilian Paulo Freire (1983), who started to work in the 1950s with silenced and oppressed people living in poverty. Voiceless and apathetic people are empowered in this approach to take charge of their lives through active participation, critical awareness and social analysis (Cane, 2000). The vision of “healing ourselves, healing our world” empowers individuals to process their own stress and trauma and, in a multiplier effect, be better equipped to help others. Using ancient and modern transpersonal practices, Capacitar integrates mind-body-spirit through the balancing and harmonising of energy in the individual, leading to family, community and societal healing.



## Appendix 3

### Transactional Analysis Workshop Introduction

#### Session1

- 1. Introductions:** Name, class, subject, what do you like most about teaching; what do you like best about the school and its teachers (Appreciative inquiry)
- 2. Logistics:** Start and end times; tea; toilet breaks; materials
- 3. Contracting:** Between school, facilitator and delegates. What is expected of each? For example: Researcher: Length of workshops; attendance, pre- and post-workshop forms to be filled in, provide materials; pre- and post-test measures; post-support group; provide food. School: Provide venue, encourage participation, provide tea; part of staff development; ethical right to other interventions. Participants: Start and end promptly; confidentiality; ethical rights; food during fast? ; report-back on research.

#### **4. General outline of three interventions (Appendix 1)**

##### **4.1. Rational cognitive brain**

*Description:* The transactional analysis works with the cognitive, rational brain. The neocortex is the largest part of the brain, composed of the hippocampus and cerebrum, the most complex structure, which is divided into two hemispheres: Left for math, logic and language; the right for visual imagery, face recognition and spatial abilities. In addition, the four lobes, occipital, temporal, parietal and frontal, accept stimuli and input from the opposite side of the body via the survival and emotional brains. Any negative thought or experience will automatically shift attention and energy from our forebrain to our hindbrain, a shift which short-changes our intellect and severely impairs thinking and learning, literally locking the neocortex into the function of our lowest brain (Pearce, 2002).

*Learner behaviour:* Within the classroom context, the thinking brain or cortical areas need to be in an attentive calm state, which Benjamin (2010) describes as sadly, rarely achieved by the traumatised child. “Without the rational thinking brains being activated, learners are inattentive and they display poor decision-making, irrational and impulsive behaviour and poor problem-solving skills,” (p. 8).

*Goal of intervention:* The goal of the transactional analysis intervention is to develop and enhance adult autonomy. Adults working with teenage learners need to cultivate human capacities for awareness, spontaneity and intimacy to help prepare youth to be aware, authentic, flexible and spontaneous (Talob, 1994) in the competent classroom. With the

### **Appendix 3 ctd**

development of these characteristics rooted in the autonomous personality, Talob believes that social adjustment is likely.

#### **5. Brief history of TA**

Founder Eric Berne was born in 1910 in Canada. He moved to the USA and became a medical doctor and psychiatrist, developing an interest in psychotherapy. He wrote his famous book, "Games People Play," in 1964. He died of a heart attack in 1970. Transactional Analysis development was between 1955-1970.

TA is:

- A theory of human development, personality and communication.
- A set of interlocking concepts which can be understood and applied for personal change.
- An easily accessible language to describe and understand experience and behaviour.
- A set of concepts explained diagrammatically enabling people to readily understand and integrate the concepts into their lived experience, irrespective of their literacy levels.

The philosophical basis for TA states that:

- As human beings, all people are intrinsically OK, even though their behaviour may not be.
- People can think for themselves and take responsibility to make their own choices.
- People have an innate urge to grow, develop themselves and make new decisions about their lives.

## Appendix 4

### Demographic Questionnaire

Please complete the following information  
All information will be treated as confidential

Name: \_\_\_\_\_

1. Male \_\_\_\_\_ Female \_\_\_\_\_

2. Age \_\_\_\_\_

3. Race \_\_\_\_\_

4. Marital status:

Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_

5. Children: Son/s \_\_\_\_\_ Age/s \_\_\_\_\_

Daughter/s \_\_\_\_\_ Age/s \_\_\_\_\_

4. Religion \_\_\_\_\_

5. Home language:

English \_\_\_\_\_

Afrikaans \_\_\_\_\_

Xhosa \_\_\_\_\_

Other (specify) \_\_\_\_\_

6. Area where you live \_\_\_\_\_

7. School and area where you teach \_\_\_\_\_

8. Subjects/ Class that you teach \_\_\_\_\_

9. How long have you been teaching? \_\_\_\_\_

10. Level of education reached \_\_\_\_\_

11. What do you find most stressful about teaching?

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**Appendix 4 ctd**

12. What other stresses do you have in your life?

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13. What do you currently do to help you deal with stresses?

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14 Do you ever feel burnout, that your needs are not met and that you can't carry on anymore?

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14 What are the most positive things you do in your life to make you feel well and happy?

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15 What does feeling "well" mean to you? i.e. How would you define well-being?

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## Appendix 5

### Perceived Stress Scale

The questions in this scale ask you about your feelings and thoughts **during the last month**. In each case, you will be asked to indicate by circling *how often* you felt or thought a certain way.

Name \_\_\_\_\_ Date \_\_\_\_\_

Age \_\_\_\_\_ Gender (*Circle*): **M F** Other \_\_\_\_\_

**0 = Never 1 = Almost Never 2 = Sometimes 3 = Fairly Often 4 = Very Often**

1. In the last month, how often have you been upset because of something that happened unexpectedly?..... **0 1 2 3 4**
2. In the last month, how often have you felt that you were unable to control the important things in your life?..... **0 1 2 3 4**
3. In the last month, how often have you felt nervous and “stressed”? .....**0 1 2 3 4**
4. In the last month, how often have you felt confident about your ability to handle your personal problems?..... **0 1 2 3 4**
5. In the last month, how often have you felt that things were going your way?..... **0 1 2 3 4**
6. In the last month, how often have you found that you could not cope with all the things that you had to do? ..... **0 1 2 3 4**
7. In the last month, how often have you been able to control irritations in your life?..... **0 1 2 3 4**
8. In the last month, how often have you felt that you were on top of things?..**0 1 2 3 4**
9. In the last month, how often have you been angered because of things that were outside of your control? ..... **0 1 2 3 4**
10. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?..... **0 1 2 3 4**

### References

The PSS Scale is reprinted with permission of the American Sociological Association, from Cohen, S., Kamarck, T., and Mermelstein, R. (1983). A global measure of perceived stress. *Journal of Health and Social Behavior*, 24, 386-396.

Cohen, S. and Williamson, G. Perceived Stress in a Probability Sample of the United States. Spacapan, S. and Oskamp, S. (Eds.) *The Social Psychology of Health*. Newbury Park, CA: Sage, 1988.

## Appendix 6

### Copenhagen Burnout Inventory

**NB: The questions of the CBI should not be printed in the questionnaire in the same order as shown here. In fact, the questions could very well be mixed with questions on other topics. This is recommended in order to avoid stereotyped response patterns.**

**Part one: Personal burnout.**  
**(First edition. November 1999)**

**Definition: Personal burnout is a state of prolonged physical and psychological exhaustion.**

**Questions:**

1. How often do you feel tired?
2. How often are you physically exhausted?
3. How often are you emotionally exhausted?
4. How often do you think: "I can't take it anymore"?
5. How often do you feel worn out?
6. How often do you feel weak and susceptible to illness?

Response categories: Always, Often, Sometimes, Seldom, Never/almost never.

Scoring: Always: 100. Often: 75. Sometimes: 50. Seldom: 25. Never/almost never: 0. Total score on the scale is the average of the scores on the items.

If less than three questions have been answered, the respondent is classified as non-responder.

**Part two: Work burnout.**  
**(First edition. November 1999)**

**Definition: Work burnout is a state of prolonged physical and psychological exhaustion, which is perceived as related to the person's work.**

**Questions:**

1. Is your work emotionally exhausting?
2. Do you feel burnt out because of your work?
3. Does your work frustrate you?
4. Do you feel worn out at the end of the working day?
5. Are you exhausted in the morning at the thought of another day at work?
6. Do you feel that every working hour is tiring for you?
7. Do you have enough energy for family and friends during leisure time?

Response categories:

Three first questions: To a very high degree, To a high degree, Somewhat, To a low degree, To a very low degree.

## Appendix 6 ctd

Last four questions: Always, Often, Sometimes, Seldom, Never/almost never.  
(Reversed score for last question). Scoring as for the first scale. If less than four questions have been answered, the respondent is classified as non-responder.

### **Part three: Client burnout.** **(First edition. November 1999)**

**Definition: Client burnout is a state of prolonged physical and psychological exhaustion, which is perceived as related to the person's work with clients\*.**

**\*Clients can be: patients, students, children, inmates, or other kinds of recipients.**

1. Do you find it hard to work with clients?
2. Do you find it frustrating to work with clients?
3. Does it drain your energy to work with clients?
4. Do you feel that you give more than you get back when you work with clients?
5. Are you tired of working with clients?
6. Do you sometimes wonder how long you will be able to continue working with clients?

Response categories:

The four first questions: To a very high degree, To a high degree, Somewhat, To a low degree, To a very low degree.

The two last questions: Always, Often, Sometimes, Seldom, Never/almost never.

Scoring as for the first two scales. If less than three questions have been answered, the respondent is classified as non-responder.

NB: In these questions one should use the appropriate term for "clients" depending on the circumstances. E.g., in a questionnaire for nurses, the term patients should be used, while the term children or students should be used in a study of teachers' burnout.

## Appendix 7

### **PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM INTERVENTION GROUP**

**TITLE OF RESEARCH:** Degree of Doctor of Philosophy (Psychology): Impact of stress and burnout interventions on educators in high-risk secondary schools

**REFERENCE:** 551-2011. Promoter: Prof Tony Naidoo, University of Stellenbosch, Psychology Department, 021 8083461.

**PRINCIPAL INVESTIGATOR:** Sharon Johnson

**ADDRESS:** 2 Riverton Road, Rondebosch, Cape Town 7700

**CONTACT NUMBER:** 072 2644140

#### **Dear Participant**

You are invited to take part in a research project. Please take some time to read the information presented here, which will explain the details of this project. Please ask the researcher any questions about any part of this project that you do not fully understand. It is very important that you are fully satisfied that you clearly understand what this research entails and how you could be involved. Also your participation is **entirely voluntary** and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw from the study at any point, even if you do agree to take part.

All information gathered will be treated as confidential and will not be linked to you personally – your anonymity will be assured.

*What is this research all about?*

- The stress and burnout intervention which you will attend will take place at your school during times convenient to you, such as in the afternoon and at the start and end of term, as agreed by the headmaster. All teachers in your school are being asked to participate.
- The aim of the research is to measure the impact of participating in a stress and burnout intervention on your personal well-being and coping. The study will also consider the impact of the intervention on the competence of the classroom. Your reaction to the training could influence future stress and burnout workshops for teachers in the Department of Education.
- There will be no use of medication in the workshops. You will be taught the theory of stress and burnout, as well as the theory and practice of stress-reduction practices. Permission is always sought before touching another person.



## Appendix 7 ctd

*Why have you been invited to participate?*

- You have been invited to participate as a member of the educator staff at your school, where the headmaster and head of educators have expressed an interest in the intervention.

*What will your responsibilities be?*

- Your responsibilities will be to fill in questionnaires on stress, burnout and well-being before and after training. In addition, you will be asked to evaluate the workshops after each session. You will be asked to record your stressors in the classroom and how you coped with these. Delegates will be invited to participate in focus group interviews, which will examine your role as a teacher and the impact on the intervention on your well-being and on classroom competence.

*Will you benefit from taking part in this research?*

- Depending on the workshop, there should be physical, emotional and spiritual benefits resulting from taking part in the research. You will be given a set of self-help tools and insights which you can use to heal yourself and those around you.

*Are there risks involved in your taking part in the research?*

- There should be no risks involved. All theories and practices are safe, gentle and constitute no risk for the participant. Participants will also retain the right not to participate at any stage should they so wish. If emotions come up for you, you will be taught to deal with these effectively. Should you feel that you require one-on-one counselling about any issue, psychological support will be available from the Department of Education or from a locally sourced community counsellor.

*If you do not agree to take part, what alternatives do you have?*

- The Department of Education is involved in other care and support activities, such as wellness days and psychological counselling. Enquire from the educational psychologist in the Metro where your school is situated.

### **Further information about your rights:**

Enquiries about your rights as participants can be made by contacting Ms Maryke Hunter-Husselmann, Stellenbosch University. Tel: 021 8084623; Email: [mh3@sun.ac.za](mailto:mh3@sun.ac.za); Postal address: Unit for Research Development, B3207, Admin B, Private Bag X1, Stellenbosch, 7602.

## Appendix 7 ctd

### Declaration by participant

By signing below I.....agree to take part in a research study entitled: *Impact of stress and burnout interventions on educators in high-risk secondary schools*

#### I declare that:

- I have read or had read to me this information and consent form and it is written in a language with which am fluent and comfortable.
- I have had the chance to ask questions and all my questions have been adequately answered.
- I understand that taking part in this study is **voluntary** and I have not been pressurised to take part.
- I may chose to leave the study at any time and will not be penalised or prejudiced in any way.
- I may be asked to leave the study before it has finished, if the study doctor or researcher feels it is in my best interests, or if I do not follow the study plan, as agreed to.
- I give my consent to being audiotaped in a focus group interview if I am selected, on the understanding that I am guaranteed that this will only be used to assess the success of the intervention; it will not be used for staff evaluation by the Department of Education; and it will be destroyed immediately after use.

Signed at (place).....on (date).....2011

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Signature of participant

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Signature of witness

**Appendix 7 ctd**

**Declaration by investigator**

I (*name*).....declare that:

- I explained the information in this document to.....
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research, as discussed above

Signed at (*place*).....on (*date*).....2011

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Signature of investigator

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Signature of witness

## Appendix 8



WESTERN CAPE  
Education Department

Provincial Government of the Western Cape

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tel: +27 021 476 9272 fax: 0865902282  
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**REFERENCE:** 20110504-0007

**ENQUIRIES:** Dr A T Wyngaard

Mrs Sharon Johnson  
Stellenbosch University  
Private Bag X1  
Matieland  
7602

Dear Mrs Sharon Johnson

### RESEARCH PROPOSAL: IMPACT OF A STRESS AND BURNOUT INTERVENTION ON EDUCATORS IN HIGH-RISK, LOW-INCOME SCHOOLS

Your application to conduct the above-mentioned research in schools in the Western Cape has been approved subject to the following conditions:

1. Principals, educators and learners are under no obligation to assist you in your investigation.
2. Principals, educators, learners and schools should not be identifiable in any way from the results of the investigation.
3. You make all the arrangements concerning your investigation.
4. Educators' programmes are not to be interrupted.
5. The Study is to be conducted from **1 May 2011 till 30 September 2011**
6. No research can be conducted during the fourth term as schools are preparing and finalizing syllabi for examinations (October to December).
7. Should you wish to extend the period of your survey, please contact Dr A.T Wyngaard at the contact numbers above quoting the reference number.
8. A photocopy of this letter is submitted to the principal where the intended research is to be conducted.
9. Your research will be limited to the list of schools as forwarded to the Western Cape Education Department.
10. A brief summary of the content, findings and recommendations is provided to the Director: Research Services.
11. The Department receives a copy of the completed report/dissertation/thesis addressed to:

**The Director: Research Services  
Western Cape Education Department  
Private Bag X9114  
CAPE TOWN  
8000**

We wish you success in your research.

Kind regards.

Signed: Audrey T Wyngaard

for: **HEAD: EDUCATION**

**DATE: 04 May 2011**

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MELD ASSEBLIEF VERWYSINGSNOUMERS IN ALLE KORRESPONDENSIE / PLEASE QUOTE REFERENCE NUMBERS IN ALL CORRESPONDENCE /  
NCEDA UBHALE INOMBOLO ZESALATHISO KI YO YONKE IMBALILWANG

GRAND CENTRAL TOWERS, LAER-PARLEMENTSTRAAT, PRIVAATSAK X9114, KAAPSTAD 8000  
GRAND CENTRAL TOWERS, LOWER PARLIAMENT STREET, PRIVATE BAG X9114, CAPE TOWN 8000

WEB: <http://wced.wcape.gov.za>

**INBELSENTRUM /CALL CENTRE**

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**Appendix 9**

**Three intervention workshop  
WORKSHOP EVALUATION FORM**

Name.....Institution.....Date.....

What did you find most helpful during this workshop?

Any suggestions to improve future workshops?

What personal discoveries or insights did you get?

How do you plan to use the techniques you have learned?

Other suggestions or comments

## Appendix 10

### Appreciative inquiry self-reflections: Sessions 1 - 10

1. Describe a stressful situation you experienced in the classroom over the last week: What happened, what emotions did you experience and how did you cope?

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2. On reflection, what have you learnt from the transaction? How positive do you feel about your ability to cope with stressors in the classroom?

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3. Ideally, what would a best performing classroom be like for you? How could you make positive changes to your classroom?

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4. What action are you most proud of last week? Describe a successful transaction in the classroom.

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5. Have you used any insights from workshops in the last week to help you in the classroom? If yes, describe what has been most useful to you or how you feel you have been empowered.

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### Appendix 11

#### Tables 8, 9, 10: Coding frame: Stressors, emotional response and coping strategy, pre-TRE intervention

Table 8

*Coding frame: Stressors, pre-TRE intervention*

Theme	Code	Number	Percentage
Stressors	Learner behaviour: <i>“Disrespect”</i> ; <i>“Unruly, fighting, swearing”</i> ; <i>“Arriving late”</i>	9	56%
	Administration: <i>“Lots of marking”</i> ; <i>“System implementation”</i>	3	19%
	Poor work ethic : <i>“Homework not done”</i> ; <i>“Apathy towards work”</i>	2	13%
	Unreasonable parents: <i>“Argue, failure to attend meetings”</i>	1	6%
	Societal problems : <i>“Suffering children”</i>	1	6%
	Total	16	100%*

\*Total responses

## Appendix 11 ctd

Table 9

*Coding frame: Emotional response, pre-TRE intervention*

Theme	Code	Number	Percentage
Emotions	Angry	6	28%
	Agitated, upset	5	24%
	Disillusion	4	19%
	Frustrated	3	14%
	Feeling stressed	2	10%
	Helpless	1	5%
	Total	21	100%

Table 10

*Coding frame: Coping strategy, pre-TRE intervention*

Theme	Code	Number	Percentage
Coping strategy	Authoritarian : <i>“Shout”</i> ; <i>“Confrontation”</i>	10	52%
	Positive response: <i>“Encourage and motivate”</i> ; <i>“Try to relax”</i> ; <i>“Focus on present problem”</i>	6	32%
	Nothing: <i>“Feel powerless”</i> ; <i>“Walk away”</i> ; <i>“Procrastinate”</i>	3	16%
	Total	19	100%



## Appendix 12

## Tables 12, 13, 15: Coding frame: Emotional response, coping strategy and suggested improvements, post-TRE intervention

Table 12

*Coding frame: Emotions of teachers, post-TRE intervention*

Theme	Code	Number	Percentage
Emotions	Positive: <i>“I provided a learner who had recently had a baby the opportunity to catch up with work and assessment that she had missed”.</i>	8	38%
	Relaxed: <i>“I have learnt that I can relax” “I tried to relax, taking it step by step”.</i>	5	24%
	Calm: <i>“I realise I can handle myself and want to stay cool”;</i> <i>“To implement a calming approach in the classroom”.</i>	4	19%
	Helpless: <i>“Not quite sure how I can use the techniques”.</i>	2	9%
	Fearful: <i>“I become emotional when relaxed”.</i>	1	5%
	Grounded: <i>“I discovered this process removes my inhibitions, I feel more sensitive.”</i>	1	5%
Total		21	100%

**Appendix 12 ctd**

Table 13

*Coding Frame: Coping Strategy, post-TRE intervention*

Theme	Code	Number	Percentage
Coping strategy	Positive attitude: <i>“Own attitude affects others”</i> ; <i>“Respect”</i> ; <i>“Caring”</i> ; <i>“Smiling”</i> .	9	45%
	Physical presence: <i>“Calm”</i> ; <i>“Grounded”</i> .	7	35%
	Stay in control: <i>“Keep a healthy distance”</i> ; <i>“Make a plan”</i> .	4	20%
	Total	20	100%

## Appendix 12 ctd

Table 15

Coding frame: Suggested improvements for TRE intervention

Theme	Code	Number	Percentage
Improvements	No improvements : <i>“None”</i> ; <i>“Enjoying it totally”</i> ; <i>“Okay”</i> ; <i>“None so far”</i> ; <i>“At the moment it's fantastic”</i> .	6	27%
	Less talk: <i>“More exercise”</i> ; <i>“Exercise first”</i> ; <i>“Stay focused on me, do not get distracted by other issues”</i> , <i>“Good to hear grievances, but not too much of it”</i> .	4	18%
	Share more: <i>“Sharing sessions are vital”</i> ; <i>“More sharing as a group”</i> .	2	9%
	More theory: <i>“Keep up the presentations”</i> ; <i>“Relate more real life experiences”</i> .	2	9%
	More care: <i>“More time on tender, loving care, more me time”</i> .	2	9%
	Blankets: <i>“Supply throws”</i> .	1	5%
	More rest	1	5%
	Supply water	1	5%
	More air: <i>“Need more air in the room”</i> .	1	5%
	More positivity: <i>“More positive reassurance while trembling”</i> .	1	5%
	No workshops	1	5%
Total		22	100%

### Appendix 13

#### Tables 17, 18, 19: Coding frame: Stressors, emotional response and coping strategy of teachers, pre-TP intervention

Table 17

*Coding frame: Stressors for teachers attending TP intervention*

Theme	Code	Number	Percentage
Stressors	Learner behaviour: <i>"Uncooperative learners"; "Rude learners"; "Disrespectfulness"</i> .	11	41%
	Admin/workload: <i>"Loads of marking, IQMs and CA visits, managing my workload"</i> .	7	26%
	Poor work ethic: <i>"Learners non-commitment to do their work and stay focussed during lessons"; learners' apathy, attitude towards their education"</i> .	6	22%
	Large classes	2	7%
	Exam time	1	4%
Total		27	100%

## Appendix 13 ctd

Table 18

*Coding frame: Emotional response, pre-TP intervention*

Theme	Code	Number	Percentage
Emotions	Angry: <i>"Feel anger and undermined"; "Anger followed by upset and sad"; "Anger with humiliation and frustration"</i> .	8	23%
	Frustrated: <i>"Try to encourage, but felt disappointed"; "Frustration"</i> .	7	20%
	Helpless: <i>"Lost for words"; "Feel powerless"; "Shut down"</i> .	6	17%
	Positive: <i>"Turn to positive achievements"; "Try to motivate and encourage"; "Very positive"; "In charge, good stress"; "Quite positive"</i> .	6	17%
	Threatened/aggressive: <i>"Feel threatened (learner threw a dirt bin); "Feel out of control"; "Adopt punitive approach"</i> .	4	11%
	Sad	2	6%
	Negative: <i>"Feeling negative, stressed"; "Dislike, to anger, to disgust"</i> .	2	6%
Total		35	100%

## Appendix 13 ctd

Table 19

*Coding frame: Coping Strategy, pre-TP intervention*

Theme	Code	Number	Percentage
Coping strategy	Authoritarian: <i>"Confrontational with verbal explanation of my feelings"; "I have a sore throat from shouting".</i>	7	37%
	Positive response: <i>"I was reflective but accepting", "Low marks achieved, so I motivated them again"; "Learners were late for class, I deliberately remembered all that was good"; "I feel quite capable of coping".</i>	4	21%
	Ignored learners: <i>"Learner was noisy in class: I ignored him and refused him entry into the room the next day"; "I was angry and walked away".</i>	3	16%
	Set tasks: <i>"Set clear tasks to get work done".</i>	2	11%
	Sought help: <i>"I took fighting learners to the deputy principal".</i>	2	11%
	Light-hearted: <i>"I played hit and tickle - one learner became violent and rude".</i>	1	5%
Total		19	100%
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**Appendix 14****Tables 21, 22, 24: Coding frame: Emotional response, coping strategy and suggested improvements, post-TP intervention**

Table 21

*Coding frame: Emotional response, post-TP intervention*

Theme	Code	Number	Percentage
Emotions	Self-connection: <i>"More in tune with feelings"; "I have alternative options to respond to emotional concerns".</i>	10	20%
	Empowered: <i>"Feel empowered by relating to learners, realising that educators can make a difference"; "No matter what the profession throws at you, Capacitar programme gave me tools to cope".</i>	9	18%
	Group connection: <i>"Found connecting with others most helpful"; "Just listening and learning others' experiences".</i>	8	16%
	Positive: <i>"Caring, peaceful"; "I have learnt in the past week to be more calm".</i>	6	12%
	Relaxed: <i>"More relaxed: do not take your work too seriously"; "The exercise is good to relax body muscles".</i>	5	10%
	Negative: <i>"Out of depth, dissociation, irritation"; "Felt offended, upset, frustrated".</i>	4	8%
	Connected to others: <i>"I want to display more sensitivity to learners"; "I should be more patient with family, more non-judgemental".</i>	3	6%
	Respect and appreciation: <i>"I am constantly aware of how respectful I should be towards my colleagues, learners, friends, me!"</i>	2	4%
	Connected to God/spirit: <i>"Spiritually at peace and connected to God".</i>	2	4%
	Compassion: <i>"I need to treat my learners in a more dignified way".</i>	1	2%
Total		50	100%

**Appendix 14 ctd**

Table 22

*Coding frame: Coping strategy, post-TP intervention*

Theme	Code	Number	Percentage
Coping strategy	Calm/relaxation: <i>"I discovered ways to calm down and relax learners in the classroom"</i> .	11	19%
	Reason/understand: <i>"I do not shout anymore; I rather try to reason with my learners"</i> .	11	19%
	Self-insights: <i>"Anger, sadness, frustration have a physical impact and source of release"</i> .	9	15%
	Practical tools: <i>"I will use the five minute safe space technique to calm learners"</i> .	8	13%
	Sharing/connection: <i>"It helps to speak about your problems and tell others how you feel"</i> .	7	12%
	Positivity/model behaviour: <i>"Bring in more positive words", "I am better if I am in control of myself"</i> .	7	12%
	Lighten up: <i>"Laugh and go through the process together"</i> .	3	5%
	Negativity: <i>"Ignore"; "I had to shout (which I hate doing)"</i> .	2	3%
	Being: <i>"I plan to allow my learners to be"</i> .	1	2%
Total		59	100%



**Appendix 14 ctd**

Table 24

*Coding frame: Suggested improvements for TP interventions*

Theme	Code	Number	Percentage
Improvements	Time: <i>"Start on time to do more"; "Try and stick to cut-off time"</i> .	8	22%
	No improvements: <i>"None"; "No!"; "Good so far"</i> .	8	22%
	More input: <i>"More practical demonstrations and interactive activities"; "What about follow-ups after the 10 sessions. People forget so easily!"</i>	5	15%
	More people involved: <i>"I would like learners to be involved in the workshops"; "Not enough people participated"</i> .	4	11%
	Change facilities: <i>"Perhaps change of menu, drink"; "Use another room"; "More comfortable seating"</i> .	4	11%
	More sharing: <i>"Get educators to share what works for them"; "Allow staff to share experiences"</i> .	3	8%
	Not answered	3	8%
	Less sharing: <i>"Shorten length of time for people to talk"</i> .	1	3%
Total		36	100%

**Appendix 15****Tables 26, 27, 28. Coding frame: Stressors, emotional response and coping strategy of teachers, pre-TA intervention**

Table 26

*Coding frame: Stressors, pre-TA intervention*

<i>Theme</i>	<i>Code</i>	<i>Number</i>	<i>Percentage</i>
Stressors	Learner behaviour: <i>"Ill- discipline of learners"; "Misbehaviour of learners"</i> .	4	24%
	Admin/workload: <i>"Department regulations of teaching"; Too much administration work"</i> .	3	17%
	Poor work ethic: <i>"Student apathy"</i> .	3	17%
	School conditions: <i>"Area we teach"; "Too many principals"; "Lack of equipment and facilities"</i> .	3	17%
	Illiteracy of learners: <i>"Level of attention of students"</i> .	2	12%
	Parents who don't care	1	6%
	New subject area	1	6%
Total		17	100%

**Appendix 15 ctd**

Table 27

*Coding frame: Emotional response, pre-TA intervention*

Theme	Code	Number	Percentage
Emotions	Helpless, confused, out of control: <i>"I feel powerless and hopeless"</i> .	4	25%
	Anxiety: <i>"I got angry, upset, stressed and anxious when a learner would not take out his books and work in my class"</i> .	3	18%
	Sadness: <i>"I had to deal with a serious incident between an educator and learner and felt anxiety, stress and sadness"</i> .	2	13%
	Anger - <i>"I got angry as learner's apathy persisted", "I acted in anger and threw her out"</i>	2	13%
	Frustrated/disappointed - <i>"The lack of cooperation of the Grade 10 class made me feel despondent, disappointed and worried"</i>	2	13%
	Critical/out of control - <i>"I felt that I was not in control of my emotions"</i>	2	13%
	Positive - <i>"I am a very positive person and I deal and cope, in most cases, very well with stressors"</i>	1	5%
Total		16	100%

## Appendix 15 ctd

Table 28

Coding frame: Coping strategy, pre-TA intervention

Theme	Code	Number	Percentage
Coping strategy	Positive response: <i>"Learners had not done their homework. I tried to be relaxed, encourage, give extra time"</i> .	5	44%
	Control: <i>"I try not to come from a controlling state all the time"</i> .	2	18%
	Aggressive and threatening: <i>"I become aggressive and threatening when I am confronted with learners who are aggressive and threatening"</i> .	2	18%
	Ignore/disregard: <i>"I disregarded the learners and continued with the lesson"</i> .	1	10%
	Reason: <i>"I felt out of control of my emotions and used reason to appeal to noisy matrices"</i> .	1	10%
Total		11	100%
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**Appendix 16****Tables 30, 31, 33. Coding frame: Emotional response, coping strategy and suggested improvements, post-TA intervention**

Table 30

*Coding frame: Emotional response, post-TA intervention*

Theme	Code	Number	Percentage
Emotions	Positive: <i>"Positive, confident, in control"; "I am positive and think before taking action".</i>	12	32%
	Angry: <i>"I felt angry and called in the grade leader for support."</i>	7	18%
	Negative: <i>"I felt irritated, frustrated and disturbed"; "I felt powerless, angry and despondent".</i>	7	18%
	Rational: <i>"Felt understanding and in control"; "I managed to calm the situation by thinking about it".</i>	6	16%
	Calm: <i>"I have to be calm and control anger emotions"; "Calm, positive, rational".</i>	3	8%
	Disappointed: <i>"The learner made me feel mad, disappointed and fed up".</i>	2	5%
	Gratitude: <i>"Thank you for empowering me as a father, husband, educator, manager and church leader with these skills".</i>	1	3%
Total		38	100%

## Appendix 16 ctd

Table 31

Coding frame: Coping strategy, post-TA intervention

Theme	Code	Number	Percentage
Coping strategy	Rational analysis/aware: <i>"I managed to calm the situation by thinking about it"; "I need to become more the nurturing Parent"</i> .	16	36%
	Positivity: <i>"I feel positive, confident and in control"; "I need to remain level-headed and in the Adult ego state. I feel POSITIVE"</i> .	11	24%
	Self-insights: <i>"I shifted from disappointed, angry and disturbed to calm, positive and rational"; "I felt irritated, frustrated and disturbed but gave him positive strokes"</i> .	8	18%
	Empowered: <i>"The mere fact that I am aware of these interactions, life positions and games has empowered me"; "I dealt with learners and parents in the Adult ego state - I acted assertively"</i> .	5	11%
	Calm: <i>"I realised I have to be calm and self-aware of my emotions and not overreact"; "I feel calm, relaxed, assertive"</i> .	4	9%
	Empathy: <i>"I managed to calm the situation by thinking about it and showing empathy"</i> .	1	2%
Total		45	100%

## Appendix 16 ctd

Table 33

Coding frame: Suggested improvements for TA intervention

Theme	Code	Number	Percentage
Suggested improvements	No improvements: <i>"Workshop is good; no suggestions for improvement at the moment"; "Continue the good work"</i> .	9	29%
	More time: <i>"Time is really a problem - we are rushing through the discussions"</i> .	6	19%
	More interaction, discussion: <i>"Make it more lively"; "Was confused by transactions vs operations...needs to be better explained from the beginning"</i> .	5	16%
	Another venue: <i>"Change the venue from the staff room to the library"</i> .	3	9%
	More relevant: <i>"Relate the PAC to our learners in this environment"</i> .	3	9%
	Better materials: <i>"More detailed notes"; "Might show short video clips on observing different clues while detecting driver behaviour"</i> .	2	6%
	Different time: <i>"Time/earlier...loved the morning workshop!"</i>	2	6%
	More inclusive: <i>"Currently we are having psychology chats and not including the five teachers who did not study psych!"; "Do it with the whole school"</i> .	2	6%
Total		32	100%