EXPLORING MENTAL HEALTH AWARENESS AND THE WELL-BEING OF SECONDARY SCHOOL TEACHERS WORKING IN UNDER-RESOURCED RURAL SCHOOLS IN BUSHBUCKRIDGE MUNICIPALITY, MPUMALANGA PROVINCE

By

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Declaration of originality

I, Kgahliso Antoineth Dibakoane, hereby declare that the mini-dissertation titled “Exploring mental health awareness and the well-being of secondary school teachers working in under-resourced rural schools in Bushbuckridge Municipality, Mpumalanga Province” submitted at University of KwaZulu-Natal (Howard College campus), for the degree of Master of Social Science in Clinical Psychology, has not been submitted previously for any other degree or at another training institute, and that it is my own work. All material contained herein has been duly acknowledged. The reference style used is APA 7th edition.

Date .......... Signature ..............
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Abstract

South African rural secondary schools provide a particularly unique environment. They are under-resourced, overcrowded and continuously marred by violent actions from the learners. The study aimed to explore mental health awareness and well-being of secondary school teachers working in under-resourced rural secondary schools in Bushbuckridge Municipality, Mpumalanga Province, and the impact that mental health might have on teacher performance. This was a qualitative study, which adopted an explorative design. A purposive sample of nine teachers from two secondary schools, with five participants from school A and four participants from school B, which are schools in Shatale circuit, Bushbuckridge, was interviewed. The data were analysed using thematic analysis. Participants highlighted various factors contributing to the mental health of teachers working in under-resourced rural schools, which are culture, heredity, the teachers’ past experiences, workload, limited support, limited resources, and the different roles that teachers play, including care giving, role modelling and facilitating. All these have an impact on the mental health of teachers and influence their work performance. It became evident in this study that the teachers’ understanding of mental health was associated with environmental factors and biological factors. The participants’ understanding of mental health revolved on how a person behaves or reacts to situations and to a particular problem. The research findings further elicited the need to prioritise the mental health of teachers in rural schools. Interventions, including workshops and seminars, should be organised regularly in rural schools to increase teachers’ awareness of the importance of mental health. Thus, an Employee Assistant Program (EAP) should be established for public school teachers, who are facing various challenges that impact on their mental health, and thus affecting their work performance.

Key words: mental health awareness, mental health, well-being, mental health problem, teacher mental health, and rural schools.
List of Acronyms

APA: American Psychological Association
ANOVA: Analysis Variance
COVID-19: Coronavirus Disease 2019
DSM-5: Diagnostic Statistical Manual-5
EAP: Employee Assistant Program
HBM: Health Belief Model
HSRC: Human Science Research Council
ISASA: Independent Schools Association of South Africa
NECO: National Examinations Council
S.A: South Africa
UKZN: University of KwaZulu-Natal
UNESCO: United Nations Educational, Scientific and Cultural Organization
WAEC: West African Examination Council
WHO: World Health Organization
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CHAPTER ONE
INTRODUCTION AND BACKGROUND OF THE STUDY

1.1 Introduction

Teachers’ mental health awareness and their psychological well-being have become a very interesting topic in academic circles, in the last two decades (2000-2020) (Gustems-Carnicer & Calderón, 2013; Johal & Pooja, 2016; Sisask et al., 2014). Scholars have investigated how teachers’ mental health awareness and their psychological well-being affect their readiness to effectively carry out their duties (Sisask et al., 2014). The mental health awareness and the psychological disposition of teachers are thus conceived as critical factors affecting on how teachers relate with their students (Sisask et al., 2014). A mentally stable and psychologically disposed teacher is likely to provide quality service to their learners and employers. In contrast, a mentally disturbed teacher is thus unlikely to provide good services to their learners and employers (Poormahmood et al., 2017). In other words, teachers’ mental health awareness and their psychological well-being are critical factors in understanding teachers’ job performance.

In light of the importance of these elements in teachers’ performance, mental health care workers who work in education now study the internal and external factors enhancing the mental health awareness of teachers and their psychological well-being in different communities. Interestingly, Poormahmood et al. (2017) have shown that teachers’ mental health awareness and their psychological well-being are often compounded by such extra-curricular activities as counselling, caretaking and gate-keeping. Teachers working in secondary schools often engage in multi-tasks, so that they rarely have time to take care of their own personal needs. In the long run, this leads to burning out and thus affecting mental health awareness and their psychological well-being, as well as productivity in their job output (Mahmoodi-Shahrebabaki, 2019).

Teachers’ mental health awareness and their psychological well-being are also affected by such external elements as teacher-student violence. As the United Nations Educational, Scientific and Cultural Organization (UNESCO) (2017) state, 246 million children are affected by school violence worldwide. Such an environment creates tension and increases teachers’ stress level. Hence, in such a tense environment, teachers are highly unlikely to develop a sense of purpose for their job, feel relaxed in their workplace, or feel positive and be more engaged with their work and colleagues (Kreifels & Wartson, 2017). Therefore, it is important not only to focus on the actual acts of violence, but also on the impact that these acts have on both the learners’
and teachers’ well-being, and how they affect the ability to teach and learn (Kreifels & Wartson, 2017).

This is the case for secondary school teachers in South Africa, who often experience violence at the workplace (Ncontsa & Shumba, 2013). The South African education system bears the legacy of apartheid and schools are thus characterised by lack of discipline, physical violence and abuse of teachers, unmotivated learners, threats of retrenchments, and lack of resources and retirement packages for teachers (Ncontsa & Shumba, 2013). As the South African Department of Education (2012) highlighted, among the 14 million learners that attended schools in 2012, more than 18% of them experienced school-based violence.

These findings have also concurred with Burton and Leoschut (2013), who revealed that an estimated 1 020 597 learners had experienced a form of physical violence at their schools. According to Chabangu (2014), the situation is further compounded by increased lack of safety measures, lack of educator support, lack of parental support or guidance, and the presence of shebeens and taverns operating near the schools. These elements transform South African schools into challenging workspaces for teachers, and sources of pressure that affect the teachers’ mental health awareness and their psychological well-being. In most cases, this results in teachers’ inability to perform their duties in their respective schools (Mouton et al., 2013).

In addition to the above-mentioned challenges, the situation is even more critical for teachers working in rural settings, who also face significant lack of support from the state, gross unavailability of resources; classroom over-crowdedness, low student motivation and he schools are also marred with constant violent activities towards teachers (Wessels & Wood, 2019). These factors contribute negatively to poor mental health and psychological well-being, and as such affect the teachers’ ability to perform their duties. Thus, society should invest more in teachers’ psychological well-being and mental health awareness in order to obtain the best services from them. This seems to be the best way in which the teachers’ services to both the society and the students can be maximised. The next section presents the problem statement.

1.2 Problem statement

Teaching is often recognised as an emotionally challenging and potentially frustrating occupation (Wessels & Wood, 2019). This is mostly because teachers have expectations that are often impossible to accomplish. In most cases, they are expected to work with learners from
different psychosocial backgrounds and needs, often with little or no support from the state or the public (Wessels & Wood, 2019). These challenges impact negatively on teachers’ mental health awareness and their psychological well-being.

Limited teaching staff has been found to be a major problem in the education system, which contributes greatly to the high matric failure rate (Okeke & Mtyuda, 2017). As a result, emotional exhaustion and burnout affect teachers’ performance on their duties, leading to anxiety or somatic symptoms (Marek et al., 2017). In some cases, this has led teachers to lack motivation and dropping out from work. According to Arnup and Bowles (2016), 25% of teachers have planned to leave the profession within two years of employment whilst one third have indicated that they were planning on leaving the profession earlier. Furthermore, teachers who choose to remain in the profession later face burnout and have trouble of coping with work and other aspects of their life (Kilgallon et al., 2008).

Thus, in light of various challenges militating against teachers’ mental health awareness and their overall well-being, South African teachers are increasingly becoming more reluctant to work in rural areas. According to Du Plessis and Mestry (2019), teachers in White River, Mpumalanga Province, have revealed that they were hesitant to work and stay in rural areas. They often cited lack of professional opportunities, as well as the lack of such facilities as clean water, sanitation, electricity, and decent classrooms and work environment (Du Plessis & Mestrey, 2019). Hence, these challenges contribute to teachers’ poor mental health and their general psychological well-being, thus making it difficult for them to work in rural settings (Kidger et al., 2016).

Therefore, the thrust of this study is to deepen our understanding of the role of external factors in teachers’ mental health and their psychological well-being. The study hopes to identify important strategies that would help the South African government formulate policies on how to address mental health issues among secondary school teachers in rural areas.

1.3 The aim of the study, objectives and research questions

The aim of the study is to explore the mental health awareness and well-being of teachers, working in under-resourced rural secondary schools in Bushbuckridge Municipality.

1.3.1 Research questions

Based on the above aim, this study was guided by the following research questions:

1.3.1.1 How do teachers in selected secondary schools understand mental health?
1.3.1.2 Which factors affect the mental health awareness and well-being of secondary school teachers in Bushbuckridge Municipality?

1.3.1.3 Under what conditions do various factors affect teachers’ performance in selected under-resourced secondary schools?

1.3.1.4 What copying strategies are used by teachers working in selected under-resourced rural secondary schools?

1.3.2 Research objectives

1.3.2.1 To explore secondary school teachers’ general understanding of mental health.

1.3.2.2 To identify the external factors that affect secondary school teachers’ mental health awareness and their well-being in under resourced rural schools.

1.3.2.3 To analyze the conditions under which various factors affect teachers’ performance in under-resourced secondary schools.

1.3.2.4 To explore copying strategies adopted by secondary school teachers working in under resourced rural schools.

1.4 Significance of the study

This study is significant in many ways. First, it provides more insight into the different factors that contribute to good mental health awareness and well-being of secondary school teachers. There are very few studies, if any, of the mental health awareness and well-being of secondary school teachers working in rural areas, especially in Bushbuckridge, Mpumalanga Province. Thus, the study provides opportunity to fill that gap.

Second, the study is particularly crucial in South Africa because of its potential policy implications. Rural secondary schools in South Africa provide a particularly unique environment. They are under-resourced, overcrowded and continuously marred with violent actions from the students. Understanding how such external factors can impact on teachers’ mental health awareness and well-being enables the government to formulate policies that are in line with secondary school teachers’ expectations. Good government policies are based on informed research.

Finally, this study provides the opportunity to understand mental health awareness and the well-being of secondary school teachers from the experiences of teachers themselves. Most
previous studies concentrated on teachers’ situations through the learners, in which teachers’ perceptions of their learners’ mental health problems in a disadvantaged community were studied (Skinner et al., 2019). Therefore, there is a dearth of literature on how the teachers themselves conceptualise the phenomenon. By participating in the study, the teachers would provide first-hand information about their own experiences, how they conceptualise their own mental health and well-being, and how such elements interact with diverse external factors in the environment where they work.

1.5 Definition of key terms used in the study

- **Mental health awareness**: refers to the knowledge and attitude one has on mental health conditions which helps them in recognizing, prevention and management (Jorm et al., 1997).
- **Mental health**: According to the World Health Organization (WHO) (2014), mental health is a state of well-being in which an individual realises his or her own abilities, can cope with normal stresses of life, can work productively and is able to make a contribution to his or her society.
- **Mental health problem/disorder**: According to the Diagnostic and Statistical Manual of Mental Disorders 5th edition (DSM-5) (APA, 2013, p.20) mental disorder refers to a syndrome characterised by clinically significant disturbance in an individual’s cognition, emotion regulation, or behaviour that reflects a dysfunction in the psychological, biological, or developmental processes underlying mental functioning.
- **Well-being**: Refers to feelings of happiness, satisfaction, competence and enacted purpose.
- **Teacher**: A person who helps learners to acquire knowledge, competence or virtue.
- **Rural area**: According to Mukeredzi (2016), the term ‘rural’ remains multifaceted and challenging to define. In South Africa, rural areas are defined by those areas that are without access to or ordinary public services. They are characterised by the limited infrastructure, low income, unreliable water availability and poor access to health care.
- **Mental health of teachers**: The mental health of teachers is believed to be an individuals’ general sense of personal professional fulfilment, satisfaction, purposefulness and happiness constructed in a collaborative process with colleagues and students (Soini et al., 2010).
1.6 Outline of the dissertation

This dissertation is divided into five chapters. In Chapter One, the dissertation provided a general introduction and a precise background for the study. This includes an introduction, problem statement, significance of the study, aim and objectives, and the research questions that guided the study and the definition of key terms used in the study.

Chapter Two covered literature review and theoretical framework. The chapter covered a review of literature from previous studies, to gain more insight on teachers’ mental health and well-being. It focused on various factors that affect teacher’s mental health and wellbeing, including work related, internal and external factors. It also discussed how such factors have affected teachers’ performance in different contexts. It concluded with detailed information about the Health Believe Model, which is the main theoretical framework that underpinned the study.

In Chapter Three, the methodological issues and the data used for the research were elaborately discussed. In other words, the chapter discussed how the study unfolded and which methods were followed. This includes issues related to the research design, data collection and analysis, as well as the ethical considerations which are critical when working with human participants in such a sensitive study.

Chapter Four covered the presentation and analysis of research findings. This was guided by the study’s research questions.

Chapter Five concluded the study. The chapter discussed and interpreted the data as presented in Chapter Four. Like in Chapter Four, this was done in line with the research questions and objectives. General conclusions and recommendations were also presented at the end of the chapter.
CHAPTER TWO

LITERATURE REVIEW AND THEORETICAL FRAMEWORK

2.1 Introduction

Discussions about the mental health of teachers especially in secondary schools are well documented in extant literature. However, according to Manwell et al. (2015), there is no general consensus in the definition of mental health; rather it has been used as a synonym for mental illness. Furthermore, scholars have linked mental health with well-being and this is often used to refer to feelings of happiness, satisfaction, competence and enacted purpose (Hernandez-Torrano et al., 2020; Manwell et al., 2015). This study therefore sought to explore the mental health awareness and psychological well-being of secondary school teachers working in under-resourced rural schools in Bushbuckridge Municipality, Mpumalanga Province.

This chapter focused on the role of these elements in teachers’ performance. First, it focused on how these elements interact with different external factors in South Africa and across the globe. In the South African context, these factors are traced back to the South African education system in the post-apartheid era, in order to identify important research gaps within the literature. Subsequently, the factors that influence teachers’ mental health were introduced, as well as the theoretical framework of the study.

2.2 Global research on teachers’ mental health

There is a general consensus in existing literature that teachers experience stress, which eventually has an impact on their mental health (Grey et al., 2017). The World Health Organization (WHO) continuously creates awareness on the increasing problem associated with mental health in the workplace (WHO, 2017). Therefore, several preventative measures and programmes have been put in place, especially in developed nations to tackle this problem. To develop effective programmes for workers, it is pertinent that expansive and in-depth research on mental health risk factors found in different workplaces be conducted. Scholars have considered being among the mental health high risk professions (Yang et al., 2019; Amalu, 2014). This consideration has informed this study, concerning the mental health of teachers in rural secondary schools.
2.2.1 Europe’s perspective on teachers’ mental health and well-being

According to the European Agency for Safety and Health at Work (In Health and Executive Work, 2019), 28% of European workers have health problems related to job stress. Hence, over these period (2016/17–2018/19), the average prevalence rate for self-reported work-related stress, depression or anxiety for people employed in primary and secondary education in Great Britain was significantly higher statistically, than the average rate across all the industry sectors (Health & Executive Work, 2019). School teachers are regularly reported to have higher levels of mental health problems and lower well-being than might be expected, as a result of their working environment and other contributing factors (Kidger et al., 2016). Hence, teachers with poor mental health find it more difficult to form positive and supportive relationships with their pupils, or to manage classroom behaviour effectively. In Scotland, between 44% and 60% of both primary and secondary school teachers frequently feel stressed at work and are not effectively doing their job (The Search Strategy, 2014).

According to the Office of the Teachers Well-being Index (2020), 63% of teachers leave the profession due to pressure of work, whilst 53% could not copy due to mental health and psychological well-being factors. The study suggests that while most people experience stress, teachers are at a greater risk of developing mental health problems, such as depression and anxiety, as well as a myriad of other psychological, behavioural and physiological difficulties. It is therefore important that certain measures be put in place to enhance teachers’ performance at work. As Evers et al. (2016) reveal, learning climate, learning values, and social support from the teachers’ immediate supervisors and colleagues, act as important resources for the development of teachers’ performance. Hence, in some situations, work pressure and emotional demands also have the potential to improve teachers’ performance at work.

Furthermore, in Scotland, the increase in work-related stress has led to poor mental health of teachers. A majority of teachers who responded to occupational surveys felt stressed due to pressure from workload, administrative paperwork, challenging pupil behaviour and lack of class preparation (The Educational Institute of Scotland, 2019). According to Iancu et al. (2018), 54% of working days were lost in 2018/19 due to stressors related to work; as a result these might lead to burnout which is characterized by emotional exhaustion amongst others (Health & Safety Executive Work, 2019). According to Borrelli et al. (2014), approximately half of the teachers in Italian schools have scored above the threshold for depression on the
self-rating questionnaire. Also, the teachers with poor mental health were significantly associated with high job demand and low social support.

2.2.2 South America’s perspective on teachers’ mental health and well-being

According to Soares’ (2014) study in the Municipality of Sao Paulo, Brazil, general health is the proper physiological functioning of the body and mental health is the balance between mind and body, as a requirement for happiness. The study reveals that there is little empirical data on mental health of the teachers, so that strategic plans need to be developed and implemented, in order to promote the teachers’ mental health awareness. This concurs with the European context reviewed in section 2.2.1

Furthermore, Cezar–Vaz et al.’s (2015) study on the “Mental health of elementary school teachers in Southern Brazil: working conditions and health consequences”, identifies self-reported stressful working conditions and their bio-psychosocial consequences, in order to establish best working conditions for the teachers. Such bio-psychosocial consequences include anxiety, stress, and sleep disorders. The study established that inadequate salary, an excessive number of activities and taking school-related work home were major contributors to stressful working conditions, whilst good relations among colleagues in the workplace promote teachers’ psychological well-being.

2.2.3 Asia’s view on teachers’ mental health and well-being

Investigations in Hong Kong reveal that 99.5% of teachers suffer from health problem, of which tiredness was the most frequently reported (Chong & Chan, 2010). Further studies show that more than 50% teachers in China have mental health problems, for which more than 10% had moderate psychological barriers and approximately 2% had mental illness (Peng, 2013).

According to Yang et al.’s (2019) review of 116 studies on the mental health of Chinese teachers between 1998 and 2013, the mental health of teachers is generally deteriorating, especially in areas of hostility and psychoticism. Hence, the teachers with poor mental health suffer from occupational stress like frequently changing regulatory framework, too many non-teaching tasks, emphasis on competitions, and excessively centralised control of teaching and low socio-economic status. The study recommends that it is pertinent to pay more attention to the teachers’ occupational stress. This concurs with Jijia and Aitao’s (2008) review of the mental health of different groups of teachers since 1994.
However, as Jijia and Aitao (2008) observes, more pathological preference was given to college teachers than kindergarten, primary or secondary school teachers. Hence, teachers working in town, and teachers aged above 40 years, as well as female teachers, have more severe mental disorders. As Jijia and Aitao (2008) recommends, urgent attention should paid to further improve the research level by highlighting the methodological consideration, especially focusing on the in-depth survey investigation, refined experimental study, as well as high-calibre qualitative research, and thus clarify the mechanism of teachers’ psychological disorders.

In Mumbai, India, Sebastian’s (2017) study on the mental health of senior teachers reveals that teachers face certain challenges like the personality of children are overburdened by factors such as over demanding parents, extensive evaluation and lack of infrastructural facilities. As Sebastian (2017) reveals, senior teachers are in good mental health, as shown in the index of the Mental Health sub-scales. Most of them show low anxiety, low depression, high emotional control, and contentment than the majority of teachers. Hence good mental health enjoyed by senior teachers result from good working environment and high job satisfaction. This has led to high productivity in the workplace. As Sebastian (2017) recommendations, activities or exercises such as yoga should be conducted in schools to better enhance the mental health of the teacher. Hence there is need for in-service training to update teachers with the latest modes of communication with learners, parents as well as colleagues.

Furthermore, In Jammu District in India, Galgotra’s (2013) study on the comparison of government and private high school teachers with respect to their intimacy and job satisfaction reveals that government school teachers possess better mental health, when compared to the private school teachers. This is as a result of better job satisfaction observed among teachers in government schools. In this study, the sex of the teachers had no significant effect on the mental health of the teachers.

2.2.4 North America’s view on teachers’ mental health and well-being

As The American Psychological Association annual stress in America (APA) (2015) reveals, 60% of working class in the United States report that work was a major contributing factor to developing mental health problems. In addition, the American Federation of Teachers (2015) reveals that 78% of teachers have reported feeling exhausted, which then affects their work interest.
Furthermore, Fisher’s (2011) quantitative study on stress, burnout, satisfaction and preventive coping skills of approximately 400 secondary school teachers in the United States, reveals that burnout levels between new and experienced teachers are significantly different, with the novice teachers having higher burnout, whereas their difference in stress levels is not statistically significant. In three multiple regression tests, stress and burnout are found to be statistically significant predictors of job satisfaction; years of experience, job satisfaction, and burnout are statistically significant predictors of stress; and job satisfaction, preventive coping skills, and stress are statistically significant predictors of burnout (Fisher, 2011).

2.2.5 The state of mental health among teachers in Africa

According to Woudstra et al.’s (2018) study on the learners-teachers bulling in a South African secondary school reveals, 62.1% of teachers reported exposure to verbal bullying, 34.6% to physical bullying, 27% to indirect bullying and 6.6% to cyber bullying. The Mann-Whitney U test was utilized; it is used for comparing two independent samples and does not require the assumptions of a parametric test. It was originally proposed by Frank Wilcoxon in 1945 for equal sample sizes but in 1947 H.B Mann and DR Whitney extended it to unequal sample sizes providing probability values for the distribution of \( U \), the test statistics (Salkind, 2010). In the above mentioned study, the Mann-Whitney U test shows a significant difference in teachers’ mean anxiety and depression across the types of learners-teachers bullying. Hence, learners-teachers bullying can result in negative emotions, disempowerment, low morale and low motivation of various role players in the school. Therefore, as Woudstra et al. (2018) recommends, there is need to protect the teachers’ mental health and their well-being, by creating adequate resources to eradicate learners-teachers bullying.

Furthermore, Nyagaya’s (2015) study to determine the factors influencing the teachers’ level of job satisfaction in public primary schools in Nairobi, reveals that 27% of the teachers are dissatisfied because they teach from 31 – 40 lessons per week; whilst 32% of teachers are dissatisfied because of much work load, and approximately 30% of the teachers are dissatisfied with the state of their classrooms. Hence, the teachers have also revealed that remuneration has a significant impact their job satisfaction, as well as the school infrastructure, because a poor working environment impedes the performance of the teachers (Nyagaya, 2015). Moreover, Boshoff et al.’s (2014) study on the occupational stress and mental well-being of cohort Black teachers in South Africa reveals that majority of the teachers have high level of mental health
despite having high levels of stress from their work place. Thus, the teachers have the ability to cope with the workplace stress, while maintaining their mental health.

Therefore, the review of the teachers’ mental health has shown similar results across the world. It reveals that secondary and primary school teachers across the world are prone to several mental health challenges. However, these challenges seem to be unique based on different working conditions. It was also noticed that these studies have been conducted mainly in urban centres or big cities, and little research has been conducted on teachers working in rural-based schools, especially in South Africa. This existing gap in literature has informed this study, which was conducted to expose mental health challenges that teachers are facing in their workplace in rural South Africa. It is thus critical to understand the historical trends of the South African educational system, in order to fully appreciate the mental health challenges that are faced by teachers in South Africa.

2.3 The education system in South Africa

2.3.1 Education post 1948
The year 1948 saw the formalisation of the system of apartheid, after the National Party won elections in South Africa. The ideology of the apartheid regime was political jingoism, based on racial superiority, racial segregation and mal-distribution of resources on racial lines. This affected most Black South Africans in all spheres of life, as it determined which South Africans were given privileges and which ones were oppressed. As Hill (2003) observes, the effects of the apartheid were more visible in education, employment and places of residence.

According to Pienaar and McKay (2014), the South African apartheid education system favoured White leaners over other racial groups. Schools were racially segregated, leading to inequality. Hence, the majority of the education budget was allocated to the White learners, leaving schools that cater for other racial groups rigorously with less equipment and staff. Black-African schools were thus over-crowded (Fleisch, 2008). Furthermore, there was an identifiable difference in salaries. White teachers were paid more than teachers of different (Bell & McKay, 2011).

2.3.2 The Bantu Education Act and Soweto Uprising
In 1953, The Bantu Education Act was passed and the government took over the training of Black learners from provincial authorities. There was no uniformity on the medium of
instruction, and the learners’ mother tongue as well as English and Afrikaans became the medium of instruction in secondary schools. However, in 1974 the government made Afrikaans the medium of instruction and this led to the 1976 learners’ uprising in Soweto and countrywide.

2.3.3 Education post 1994

South Africa attained independence in 1994 after the democratic elections. Education was de-racialised and the administration of education was changed (Bloch, 2010). However, despite the dawn of democracy, many schools that catered for the education of Black Africans have scarce resources and have no libraries, school halls, computers, nor laboratories (McKay, 2015). This leads to poor matriculation results, and the schools are also characterised by violence and inadequate learning opportunities. Although public education can be perceived as integrated, it still bears the legacy of apartheid, with unsatisfactory resources in public schools that have majority Black Africans.

2.3.4 Private schools in South Africa

Private schools in South Africa are defined by the Independent Schools Association of South Africa (ISASA) as those listed with the appropriate authorities, but derive most of their income from non-government foundations (Hofmeyr et al., 2013). There has been an incredible rise of private schools in post-apartheid era (Tooley & Dixon, 2006). As Hofmeyr and McCay (2010) elaborate, there are two reasons to the increasing number of learners enrolling in private schools. First, there is a demand for education that cannot be met by the state, such as catering for learners who are considered too old for the public education system. Second, parents regard private schools as offering quality and better education than public schools (Hofmeyr & McCay, 2010).

The number of private schools has since increased, from 1994 there were 518 private schools and up to 1399 by the year 2010 (Hofmeyr et al., 2013). In 2013, the number increased by 20% (DBE, Republic of South Africa, 2015). It is important to note that the statistics of learners in private schools may be higher than reflected (Van der Berg et al., 2017).

2.3.5 Public schools in South Africa

In South Africa, the term “public school” refers to a school that is run by the government. In 1921, the education system introduced the regulation of private schools, which had to be
formerly registered with the superintendent general authorised to check any private school and see whether or not it was in good condition. The law was provided for the “Europeans” and “non-European” children, therefore making school attendance compulsory for the Europeans and not for the other racial groups (Cape Consolidated Education Ordinance 5 of 1921).

Thus, education did not escape the consequences of South Africa’s colonial and apartheid past. While a minority of public schools can trace their origins back to the colonial period, the “public education system” during that period was inadequate. During the apartheid era, the government regulation of private schools increased (Pretorious, 2019). According to Msila (2010), schools located in the rural areas of South Africa struggled to maintain educational changes than ‘well-off’ schools. These factors have therefore affected the mental health of teachers in both public and private schools of South Africa.

2.4 Factors influencing teachers’ mental health

Teachers’ mental health is influenced by many factors which include life gratification, individual contentment, personal growth, and the ability to form good interpersonal relationships with others (Harding et al., 2019). These factors are categorised in related literature as work-related factors, environmental factors, and individual factors.

2.4.1 Work-related factors

Work-related factors include those elements that have an impact on teachers’ mental health and wellbeing within the workplace. Such elements include extensive workload, career development pressures, and the curriculum-based stressors.

Workload: As described by Amalu (2013), workload is the sum of all activities that take the time of the worker. Workload can be heavy or light. Heavy workload or work overload is the sense of feeling the teacher feels when they are been asked to perform a certain task with limited time or ability. Working under time pressure can be very stressful because this increases teachers’ anxiety before the deadline and as the time runs out a feeling of impending failure increases. This therefore could lead to stress and concomitant gross ineffectiveness, which in turn, affects their mental health (Lever et al., 2017).

Psychological problems can also be attributed to teachers’ work overload, and role ambiguity can also be a contributing factor towards a teacher’s well-being. As Berndt and Oosthuizen (2008, p.94) suggests, “Role ambiguity occurs when a person does not know how to perform
on a task and the consequences thereof”. Furthermore, it may be a result of the lack of understanding of what is expected, or not knowing how to perform the task at hand. On the contrary, Amalu (2013) posit that stress from work overload had no significant influence on professional effectiveness of secondary school teachers, because they are given enough time to rest and relax both physically, mentally and emotionally to regain their lost vigour and strength.

**Career development pressures:** In an educational system, teachers have always been the core factor. Therefore, their career development is very important towards an improved educational system (Clelik, 2017). Therefore, in order to create a well-developed and well-sustained educational system, teachers should take it among themselves to constantly develop their field of knowledge and teaching skills. It is somewhat problematic to view teachers as only knowledge transmitters. Teachers are meant to be philosophers, sociologists, psychologists and good technocrats. Therefore, the incessant improvement in the educational programme and the flexibility of their implementation requires teachers to be better equipped with the knowledge of programme development.

Many schools lack professional development, especially in disadvantaged and rural communities, and thus making it difficult to implement the educational programme, leading to teachers’ psychological implications (Bisshoff et al., 2009). Furthermore, the insufficient and irrelevant teacher training programmes also leads to stress, because teachers are not provided with the required skills to meet the demands of teaching. Incompetently trained teachers have also been shown to lack self-confidence and doubt their ability to communicate effectively with learners. Thus, teachers are therefore left with uncertainties and may lack motivation.

**Curriculum-based stressors:** After the dawn of the new era of the democratic dispensation in South Africa in the year 1994, there was hope that the education system would change for the better (Mbiza, 2018). In 1995, the Minister of Education at the time proclaimed the outline of a new curriculum, with outcomes-based education (OBE) as the foundation (DoE, 1997). The curriculum was therefore launched in March 1997 and became known as Curriculum 2005. The fundamental changes for assessment proposed by OBE also contributed substantially to teachers’ negative reactions and resistance as they found it difficult to maintain a balance between teaching and assessment time (Warnich & Wolhuter, 2010). It was further elaborated that the OBE’s advocate saw the new curriculum as a way of ensuring that learners’ needs were met regardless of their environment (Lombard, 2010). In 2012, the new South African curriculum known as Curriculum and Assessment Policy Statement (CAPS) was implemented
in Grades 1, 2, 3, and 10 and was also implemented to Grades 4, 5, 6 and 11 in 2013 (Lombard, 2010). The new curriculum was therefore viewed as a repetition of OBE because it was implemented without providing teachers with adequate training (Nkosi, 2012). Therefore, with all of these confusions from the curriculum, teachers have found it difficult to adjust and this impinges on their work performance and brings about poor mental health.

Pay and benefits stressors: As Arain et al. (2014) argue, the salary of teachers is an important factor that influences the performance of both teachers and learners. Hence, there is a link between the salary of the teachers with job satisfaction, motivation, and desirability of profession, job preferences and continuation of teaching career. Factors like starting salary, salary after fifteen years’ experience, salary per hour of net teaching time and salary ratio to GDP per capita are primary factors influencing the performance of both teachers and learners. Thus, teachers’ salaries have a positive impact on the performance of both teachers and students and this in turn influences their mental health. This concurs with William (2018), who reveals that the increase in remunerations for secondary teachers in Tororo District, in Uganda, has a positive impact on teachers’ performance and productivity. Hence, the most commonly used type of performance-based incentive was promotion, which leads to salary increment. Moreover, there is a general consensus in academic circles that teachers’ salary packages and incentives influence their performance, increase their job satisfaction and in turn increase their mental health (Armstrong, 2014; Iwu, 2013; Armstrong, 2015; Mestry et al., 2009).

However, certain disadvantages and some criticisms have been attributed or linked to teachers’ remuneration increment and job performance. Some teachers in the quest for a better pay and salary raise can manipulate learners’ results, so as to seem the students are performing well. This can then lead to reduced or low performance on the teachers who do not receive rewards or salary rise. Also, individual teacher salary increment might lead to unhealthy and harmful competition among the teachers and back-biting (Meiers, 2007). The collegiality in the school might be compromised if one teacher gets an increased salary package than the others. All these could lead to poor performance at work, reduced job satisfaction and ultimately poor mental health.

It is however pertinent that the school management learn better techniques on how to incentivise teachers, because of the significant role of remuneration on job performance of teachers in their workplace.
2.4.2 Environmental factors that impact on teachers’ mental health

According to Rahman (2016) it has been recorded that mental health emerges from different influences, the environment impacts on individuals’ behaviour differently and it can either be positive or negative. This section will focus on such environmental factors that impact the mental health of a teacher and they are categorised as follows: school climate, violence in schools and learner misbehaviour.

**School climate:** The concept of school climate can be diverse and include different factors. These factors may be the actual building and its size, physical condition of the building as well as interpersonal relations between different bodies within the school (Chirkina & Khavenson, 2018). As Emu and Nwannunu’s (2018) study in West Africa indicates that the academic performance of students in the West African Examination Council (WAEC) and National Examinations Council (NECO) together with other internal examinations are deteriorating. There is a drastic change in English and Mathematics performance for the NECO between the years 2012 to 2014, which has reduced drastically by 45%. There is also 29.5% reduction in English performance for WAEC between 2013 and 2014. Coupled with this dwindling academic performance, public school safety for teaching and learning is a major problem. As Emu and Nwannunu (2018) suggests, the problems result from staff hostility, dilapidated buildings and infrastructure, and unfriendly school environment.

Furthermore, the mode of leadership of the principals of Secondary schools in the area was reviewed, with 2313 teachers and 98367 students from 72 public secondary schools in the Calabar education zone used to determine the influence of school climate (safety of school environment and principal’s leadership style) and the teachers’ job performance (Emu & Nwannunu, 2018). The study reveals that increase in safety of school environment and principal’s leadership style significantly improves teachers’ performance and their mental health. Thus, there is general consensus in academic circles that a positive school climate is associated with academic achievement, school success, effective violence prevention, student healthy development and teachers’ mental health (Cohen, 2009; Makewa et al., 2011; Chirkina & Khavenson, 2018; Emu & Nwannunu, 2018).

**Violence in schools:** According to Grobler (2018), the caring relationships between teachers and learners suggest that teachers would act caringly, and attend to learners’ academic, social
and emotional needs. In school settings, a teacher can either be a witness, a victim or a perpetrator of violence and this has an effect on teachers’ psychological well-being (Espelage et al., 2013). The centre for Justice and Crime Prevention (2016, p.5) defined school violence as:

“Any acts of violence that take place inside an educational institution, when travelling to and from school or even school-related events or during such an event. These school-based acts of violence can be both physical and may not result in bodily or emotional harm to the victim. This violence typically takes the form of learner-on-learner, learner-on-educator, or educator-on-educator and educator-on-learner violence, and severely disrupts the normal functioning of the schooling system”

Similarly, as Espelage et al. (2013) states, school violence comprises of physical violence (including corporal punishment), psychological violence (including verbal abuse), sexual violence (including rape), and bullying (including cyber-bullying). Further, Kreifels and Wartson (2017) argue, it is important not only to focus on the actual acts of violence, but also focus on the impact of fear these acts have on the well-being of both the learner and the teacher, and on their ability to teach and learn. Thus the impact of school violence on teachers should not be overlooked, because chronic exposure has led to the “battered teacher syndrome” (CJCP, 2016, p.8), which also affects teachers’ attendance and teacher–learner relationships (Brown et al., 2016).

Furthermore, as UNESCO (2017) elaborates, the consequences of trauma can be long or short term and teachers experience common symptoms of trauma or psychological distress. The teachers may socially withdraw, which may have implications with relationships in the workplace or family (UNESCO, 2017). According to De Wet (2010), some teachers have experienced headaches, sleep deprivation, burnout, and eating disorders in response to trauma, whilst others have hypertension and stomach ulcers. A minority of teachers can be diagnosed with Post Traumatic Stress Disorder as specified in the DSM-5 (APA, 2013). Some teachers react with overwhelming negativity towards learners who are perceived as bullies or violence perpetrators, leading to their unwillingness to assist them with learning in the classroom, or resulting in them leaving the profession (Bester & Du Plessis, 2010).

The school plays a significant role in a young learner’s education, hence it is vital for the environment to be a safe place to ensure that authentic learning and development can take place (Ngqela & Lewis, 2012). Unfortunately, schools have become a haven for violence in recent
years as reported in social media and newspapers. The case of Lufuno Mavhunga, a 15-year-old learner from Nzhelele in Limpopo Province, who committed suicide in April 2021 some hours after a video footage of her being repeatedly beaten by her classmates went viral on social media, serves as an example (Times Live, 2021). Thus, violence raises concerns regarding the safety of the learners as well as that of the educators. According to Mouton et al. (2013), learners in historically disadvantaged areas tend to become victims of gangs and drug abuse, and this indirectly affects teachers because learners often become aggressive and defiant, which places the life of teachers at risk.

*Learner misbehaviour:* Challenging learners’ misbehaviour in schools is a major contributing factor to teachers’ distress, and there is lack of consistence among teachers in South Africa in this practice (Marais & Meier, 2010). The most common troublesome misbehaviour of students is talking out of turn, particularly in the form of disruptive conservation, coupled with non-attentiveness, day dreaming and idleness (Sun & Shek, 2012). Disobedience and rudeness are also the most unacceptable and problematic misbehaviours of students. All this affects teaching and learning adversely, and in turn affects the teachers’ mental health.

According to Cornelissen (2016), failure to challenge learners’ misbehaviour affects the teachers’ resilience. Teachers who are unable to cope with emotional characteristics of their work are more vulnerable to depression and fatigue (Mansfield et al., 2012). The situation is compounded by the fact that corporal punishment was abolished in South Africa. As the National Education Policy Act No 27 of 1996 elaborates, “no person shall administer corporal punishment or subject a student to psychological or physical abuse at any educational institution”. Thus, teachers have found it difficult to deal with the change and view this with a sense of helplessness and disempowerment. Therefore, as Mansfield et al. (2012) observe, it is necessary to identify factors that help strengthen the teachers’ resilience and these include selflessness, motivation, and determination/perseverance.

### 2.4.3 Individual factors

Individual factors refer to those factors that are found within an individual such as their knowledge, experiences and their personality (Sacau et al., 2008); therefore this section will look at factors such as gender and teaching experience and marital status.

*Gender and teaching experience:* According to van der Linde (2006), the gender of the teacher as well as their experience in teaching, more specifically the type of school they work in and
how long they have been a teacher, may also affect levels of perceived stress and their mental health. Studies indicate that females report significant mental health problems, while male teachers report receiving social support from family and friends (Kamper & Steyn, 2006). Moreover, the longer the work experience the more stressed the female teacher would be. Therefore, the experience of teaching and gender may also contribute to increasing levels of perceived stress within the South African education system (van der Linde, 2006). However, as Kamper and Steyn (2006) observe, their characters might influence the way they respond to the stressful situations/ experiences.

Furthermore, according to Kovess-Masfety et al.’s (2006) epidemiological study, conducted to examine the mental health of different categories of public-school teachers from June 1999 to March 2000 in France, the prevalence of mental health problems among the teachers differed between men and women. Hence, men teaching in special education (nursery and intermediate schools) and women working at regular secondary schools were both at risk of psychiatric disorder and psychological distress. The study also confirms that teachers’ mental health is dependent on their social demographic factors, such as gender, age and family status. As Kovess-Masfety et al. (2006) observe, lack of support from colleagues and, depending on the mental health problem, the fear of physical or verbal abuse, and the reasons for choosing the teaching profession were the main occupational risk factors that increased poor mental health among the teachers.

**Marital status:** According to Rothman and Viljoen (2009), the ability to balance the pressure of both family and work life pressure has been well researched, with studies linking it to different stressors. Hence, employed females who also have to attend to their families’ needs seem to be struggling. They have significant challenges in fulfilling the demands of both work and family (Buys et al., 2009). As Kamper and Steyn (2006) concur, the unequal division of labour at home is reported to be a source of stress to women as compared to men. This inequality may result in conflict which may lead to less focus on parental role, lack of productivity at work, as well as less life satisfaction and anxiety (Buys et al., 2009).

Furthermore, according Oosthuizen and Van der Bijl (2007), there are challenges in balancing work and family life. Hence, men and women play different roles and where women take the role of being providers from men they would have to attend to different responsibilities which clash with their responsibilities at home. This has a negative impact on a person and therefore causes stress (Nelson & Quick, 2006). Likewise, studies show that household problems, such as separation and death, are contributors to stress. Therefore, the success of balancing both
work and home life rests mainly with the individual. In the South African context, the situation is critical as a result of the family structure. Women are perceived to have difficulties in balancing work and family, which leads to less life satisfaction and work stress (Buys et al., 2009).

2.5 Teachers and mental health

The well-being of a teacher is most likely to be overlooked, as teachers work in an environment where the main focus is on results (Fouche, 2015). Teachers perform different roles within their profession, including the learner’s moral development and classroom setting. Although such expectations are higher among stakeholders, little or no consideration is taken on the teachers’ well-being, although investment into a teacher’s well-being increases school outcomes and teachers’ positive attitude towards their work environment.

According to Mbulaheni et al.’s (2017) study within Vhembe Municipality in Mutale, Limpopo Province, the school conditions are not conducive to promote the mental health of teachers. Hence, problems related to the teacher’s well-being have a huge impact on the promotion of quality teaching and learning. Health promotion is about realising people’s potential to make them more resilient and involves building strengths, competencies and resources. As Mbulaheni et al. (2017) observe, poor mental health of teachers negatively affects their commitment to provide quality teaching in dysfunctional secondary schools, whilst mentally healthy teachers can be motivated to improve and sustain the quality of teaching and learning in schools. Therefore, secondary school teachers need motivation in order to promote productivity and educational quality (Kutame et al., 2014).

The workplace provides an appropriate environment to educate individuals, or raise their awareness, about mental health difficulties, and to target mental health problems and prevent them from developing. This can be done as part of the human resource management policy, which incorporates occupational health care services in early recognition and identification of mental health difficulties in the workplace. This does not, however, ignore the multidimensional nature of effective mental health services or the multiplicity of factors contributing to an individual’s mental health (Dussault & Dubois, 2003).

Furthermore, according to Vazi et al.’s (2013) study on “The relationship between wellbeing indicators and teacher psychological stress in Eastern Cape public schools in South Africa”
stress is dominant amongst teachers. Subjective and psychological well-being factors contribute significantly to stress variance. Furthermore, both negative effects and role problems have significant positive correlations with stress, whilst psychological well-being has a strong inverse relationship with stress.

According to Soltani et al. (2016), low and middle-income countries face significantly increased structural challenges with respect to mental health literacy and awareness-raising. Policy makers in these countries tend to be pre-occupied with infectious conditions and other higher mortality concerns due to limited resources. In such countries, individuals are more likely to use their social support systems and religious leaders instead of mental health professionals. Barriers such as insurance costs, lack of culturally competent care, and stigma are also shared among Black people (Derr, 2016). As the Western Australia Mental Health Commission (2010) concludes, almost one in four individuals feels depression as a sign of weakness, whilst one in five endures depression in silence.

2.6 The role of a teacher in the school setting
Teaching is considered as a profession that is unique and therefore requires one to behave in a certain manner. An individual who becomes a teacher is required to act as an example in society (Okeke, 2014). As Davidson (2010) observes, in some cases, teachers are the only adults that children encounter who appear to be socially and spiritually well or fit. Hence, this has, however, come as a drastic change when compared to teachers of the past who were not expected to act as parent substitutes, counsellors or mentors. Thus, parents and the community at large place a huge responsibility on teachers.

According to Berzin et al. (2011), teachers get the opportunity to spend time with learners on a daily basis and they are usually the first few to notice behavioural changes in learners. Thus, it has been suggested that teachers should be included in the intervention strategy to improve learners’ behaviour and encourage positive changes (Berzin et al., 2011). Learners have usually two primary internal support systems accessible to them, which are the teacher and, in some schools, the school counsellor. As Berzin et al. (2011) observe, although it is understandable that the role of the teacher is to provide instruction in the classroom, the student-teacher relation in the classroom can also affect the development of the student. Furthermore, as the qualitative study on teachers’ perceptions of their learners’ mental health problems in a disadvantaged community in South Africa reveals, teachers are concerned about the emotional state of their
learners. Hence, the children’s problems are believed to have been caused by children’s background (Skinner et al., 2019).

Teachers are considered role models through the way they conduct themselves and perform their duties (Drake, 2014). Kagoda (2011) highlights the importance of teachers’ behaviour and their personal well-being. Thus, there is a general consensus in academic circles that students learn from their teachers in many ways; from the way teachers speak, dress, and behave. As Harden and Crosby (2000, p.10) observe, whether teachers want to be seen as role models or not, “it is difficult for learners not to be influenced by the living example set before them”.

2.7 Help-seeking behaviour among teachers

Literature indicates that the knowledge people have regarding mental health influences their help-seeking behaviour. According to Griffiths et al. (2009), seeking assistance involves using an outside resource when one finds he or she needs help with their problems. When seeking help, an individual explores and addresses the benefits and obstacles of seeking outside help (Herzberg, 2013). Further, factors such as age, gender and ethnicity influence the willingness of an individual to seek help (Jones-Hazledine et al., 2007). According to Oliver et al. (2005), men were less likely to engage in help-seeking behaviours. Thus, significant gender differences exist among teachers. The mental health for males is than that of females. As Herzberg (2013) argue, people are prevented or discouraged from seeking help/treatment because of the fear of being labelled different or due to ‘stigma’, which is a form of social-cognitive process encouraging individuals to avoid labels connected to mental health problems. Hence, stigma can be prolonged by cultural believes and the characteristics of a certain environment (Herzberg, 2013).

2.8 Consequences of stressors

*Teacher attrition:* Attrition could be viewed as the number of teachers quitting their job either voluntarily or involuntarily (Oke et al., 2017). According to Oragwu and Nwabueze (2017), teachers who have been in the profession for more than 30 years have an attrition rate below 5% and teachers who have an average career of 10 years have an attrition rate of above 10%. Further, as Madumere-Obike (2018) observes, teachers are leaving the profession due to the constant challenges they face. There economic, political, social and personal factors that contribute towards attrition in public senior secondary schools. Hence, economic factors include
inadequate salary, shortage of instructional materials in schools, and poor classroom conditions which do not conform to Kasambira (1998)’s criteria in terms of adequacy, suitability and efficiency. They either have inadequate ventilation for students to learn with ease; or their shape and dimension are unsuitable for a variety of activities; or the classroom space is inefficient in terms of instructional effectiveness.

Political factors include low level of recognition of secondary school teachers by government officials, low socio-economic status of secondary school teachers, and insufficient support of teachers by the school management. Social factors include the frustration of teachers in schools as a result of students’ disciplinary problems. All these factors impinge on the teacher’s profession, leading to personal factors including mental health and psychological problems. Similarly, as Mafukada and Mudau (2016) observe, most participants who resign or opt for early retirement are motivated by pressures of the education system in South Africa, including such factors as workload, lack of security and indebtedness.

Alcohol use and abuse among teachers: According to Grimsrud et al.’s (2009) extensive study in South Africa which involved 4351 participants, alcohol use was 38.7%, tobacco smoking was 30%, cannabis use was 8.4%, other drug use was 2.0% and extra medical psychoactive drug use was 19.3%. Thus, alcohol is the most used substance. As Oosthuizen and Van der Bijl (2007) observe, teachers are likely to use alcohol to relieve their anxiety and depression. Hence teachers totalling 16%, indicate that they use alcohol as a means of handling psychological stress.

Teacher burnout: Burnout is accompanied with feelings of detachment during work (Larrivee, 2012). As Marek et al. (2017) states, burnout occurs mostly with individuals who work closely with learners and later exhibit psychological symptoms such as irritability, anxiety and lowered self-esteem. According to DiGregorio and Liston (2018), although the use of electronic technology has received high praises, it now costs teachers because they have to constantly check for updates from learners, administrative feedback and consulting parents. Therefore, teachers are unable to spend quality time with their families. Moreover, most teachers lack sufficient training on operating such gadgets. According to Evers et al. (2004), burned out professionals, including teachers have a hard time in their work place. Teachers who are experiencing burnout are easily irritable and often responsible for their learners’ boredom in the classroom. Thus, such teachers continue working, albeit serious implications on their classroom management skills. Individuals experiencing burnout also experience emotional
exhaustion, which is a reduced sense of personal accomplishment, coupled with a negative evaluation in their workplace.

2.9 Coping strategies

As a coping strategy in the face of accumulated stress at the workplace, teachers tend to discuss their problems with their family members, friends or colleagues (Aldrup et al., 2017). Some teachers seek psychological counselling, as well as taking part in training programmes for personal development and resilience (Sandilos et al., 2018). Hence, teachers also rely on religion to help them during tough times; they pray and believe in divine intervention and optimism of grace. However, as Fengler (2016) observes, teachers who live a healthy lifestyle, with less psychological distress, practice physical relaxation exercises.

Teacher resilience is also seen as a coping strategy. According to Smith (2007), resilience is a skill that improves the social well-being of human beings, which includes the skill for one to be flexible and be able to adapt to any given situation. Teacher resilience is however succinctly defined as a component that motivates teachers to stay in the profession, regardless of the challenges they may face (Brunetti, 2006). This concurs with Gu and Day’s (2007) view that it is the teacher’s ability to maintain professionalism and dedication. Thus teacher resilience is the way in which teachers challenge and accomplish difficulties in order to safeguard the success of their learners (Singer, 2011).

2.10 Theoretical framework

2.10.1 The Health Belief Model

The Health Belief Model (HBM) originated in the 1950s mainly to help comprehend why individuals did not view the need to avoid contracting diseases and promoting interventions (Viswanath et al., 2008). It was developed by a group of social psychologists, who were working for the Public Health Service of the United States of America (Rosenstock, 1974; Hochbaum, 1958). The psychologists believe that a human being has three major characters in dealing with life, which include positive, negative and neutral standards (Rosenstock, 1974). Thus, influencing people’s behaviour (Bond, 2013). When applied to mental health, this model provides a structure for developing and evaluating programmes designed to increase mental health awareness and appropriate use (Henshaw & Freedman-Doan, 2009).
The six elements of the Health Belief Model

The fundamental notion of this model is rooted in health behaviour being determined by individuals’ personal opinions or insights about sicknesses and the approaches available to decrease its occurrence (Hochbaum, 1958).

1. **Perceived severity**

   Perceived severity refers to an individual’s personal belief about the significance of an illness and the consequences of contracting an illness or being in an unhealthy state. If a person believes that negative effects may result from acquiring an illness which may later lead to severe consequences such as physical, mental/emotional or social effects, that person is motivated to act or to prevent a given incidence from occurring (Orji et al., 2012). However, if a person is misinformed or lacks insight about an illness and believes that they are in perfect health, it is highly unlikely that they will seek any preventive measures. Therefore, the significance of health issues, such as mental health problems, might lead to help seeking behaviour in cases where individuals perceive benefits from seeking intervention. For example, an individual may not consider their psychological well-being as a priority. However, if he or she recognizes that there would be severe consequences such as being retrenched from work or financial difficulties because of not being productive at work and failing to go to work because of depression, then he or she may identify depression to be a serious health problem.

2. **Perceived susceptibility**

   It refers to being able to accept that one has contracted a particular disease (Rosenstock, 1974). According to Sharma (2016), an individual who believes are at greater risk for getting an illness will take preventative measures in order for it not to occur. Predisposition presents means of dealing physically and psychologically with the situation of an individual who is vulnerable to illnesses. Predisposition also points to the likelihood of one’s denial, or acceptance of one’s health condition (Rosenstock, 1974). For example, an individual who has a family history of mental health problems might think that he or she is likely to develop any form mental health problem and might seek help to reduce the risk of suffering from any kind of mental health problem.

3. **Perceived benefit**

   It refers to a person’s individual opinion of the importance of engaging in healthy behaviour to eliminate perceived health threat (Orji et al., 2012). Similarly, Jones (2015) stipulates that the notion refers to one’s belief of the helpfulness of a new behaviour in eliminating the risk of contracting an illness. For example, individuals who believe that seeking psychological
intervention about their problem will prevent mental health problems are more likely to go and see a psychologist or a mental health practitioner and address their problems.

4. Perceived barrier

This refers to negative characteristics of health action that act as obstacles or barriers to undertake a recommended behaviour (Janz & Becker, 1984). This explains the position of a person who has the motivation to act but their action has negative aspects, as opposed to one with the will to act but potential negative effects pose a risk (O’Connor et al., 2014). The limited information about the benefits of the process leads individuals to make uninformed decisions. As Sharma et al. (2017) states, it is important for a person to recognize that the benefits of the new behaviour overshadow the consequences of an on-going an old behaviour.

5. Self-efficacy

This implies that self-efficacy is determined by the self-esteem of an individual in performing certain behaviour. For example, an individual might believe in the beneficial of performing a new behaviour; however has low self-esteem in performing it, and then this might lead to low self-efficacy (Orji et al., 2012). It follows that the likelihood of executing the behaviour would be low. Self-efficacy has been recognised as a strong tool in determining the behaviour of an individual regarding their disposition towards behaviours that lead to good health (Schwarzer, 2014).

The HBM was utilised in this study because it focuses on a person’s knowledge and beliefs about health problems, such as mental health/psychological well-being (Norman & Conner, 2005). This model is best suited to this study because it best explores the psychological wellbeing of teachers and whether their opinions and/or understanding of mental health or psychological wellbeing are related to their attitudes and help-seeking behaviour. In addition, this model is most suitable because it emphasises that the improvement of health care involves people’s behaviour, beliefs and their understanding of health matters (Maggie & Macdowall, 2006).

2.11 Summary

The literature reviewed in this section focused on the historical background of education in South Africa, the mental health of the teacher, role of the teacher in the school setting, and help seeking causes of mental health problems, as well as perceived factors contributing to the mental health of a teacher, which include work related factors, environmental factors, and
individual factors. The consequences of stressors were also discussed and how they may negatively affect the psychological well-being of teachers. Coping strategies and the resilience of teachers were reviewed. The theoretical framework focusing on the Health Belief Model and its significance to the study was also discussed. With regards to the research topic, not much information was found on the exploration of teachers’ psychological well-being, particularly in the context of a rural setting. The study is therefore of significance, not only to the researcher, but also to South African teachers, since the study could inform occupational health policy on teacher-related mental health, which may help minimise levels of stress and increase job satisfaction amongst teachers.

CHAPTER THREE
RESEARCH METHODOLOGY

3.1 Introduction
This chapter discussed the different research components, as they were utilised in the process of conducting the study. Such components include study setting, research design, research approach, study sample and selection of participants. The chapter also covered data collection method, data collection instruments, researcher as key instrument, data collection procedure,
ethical considerations, and data analysis, as well as ethical considerations. The chapter reiterates the aims and objectives of the study in the discussion of research methodology. It also justifies the rationale behind the choice of the research methodology for this study.

3.2 Study setting: Map of Bushbuckridge, within Mpumalanga Province

Figure 3.1: Location of the Bushbuckridge municipality in Mpumalanga Province

Source: https://www.municipalities.co.za

This study was conducted in Bushbuckridge (or in Afrikaans, Bosbokrand) local Municipality, which was established in 1884. The town is believed to have derived its name “bushbuck” from the large herds of bushbuck rampant in the area at the time. Bushbuckridge Local Municipality (MP325) is part of the Ehlanzeni District Municipality (DC32), Mpumalanga Province. The municipality is divided into 11 regions and 32 wards. The main townships are Mkhuhlu, Bushbuckridge, Thulamahashe and Acornhoek. The townships are bordered to the north by Maruleng Local Municipality in the Mopani district municipality of Limpopo Province, with Hoedspruit being the closest to the centre (Bushbuckridge Draft Integrated Development Plan 2017/22). As a school circuit, the Municipality has 19 schools: 12 Primary and 7 Secondary schools. The areas comprise of a range of settlements, including tribal settlement, township areas and farms. It is considered as one of the most typical rural areas in the province.
Nowadays, Bushbuckridge has the second highest population in Mpumalanga Province (after Mbombela). According to Statistics South Africa (2011 Census), it has a population of about 541,248 people, which constitute the 32.1% of Ehlanzeni’s entire population. Ehlanzeni’s district itself is the second highest of all districts in unemployment rate. It is also the district with the highest number of people that are receiving social grants within the province (Bushbuckridge Draft Integrated Development Plan, 2017/22). Most of these peoples are residing in Bushbuckridge. Even though Bushbuckridge may not have been the most rural area in the province, it represents an appropriate setting for understanding the role of teachers’ mental health in their performance at the workplace. The community presents a perfect setting for understanding how teachers working in under-resourced environments conceptualise the role of mental health in their performance.

3.3 Research design

According to Gibson and Brown (2009), research design represents the ways in which the researcher illustrates interactions and questions, which can then be transformed into noticeable methods of producing data. A good research design helps the researcher both in the choice of participants and the population of the study.

This study utilised an exploratory research design. Exploratory design is most suitable when little or nothing is known about the research topic (Burns & Bush, 2006). This is because it provides the opportunity for the researcher to delve into the unknown, in order to dig out information and insights about the subject matter. It permits a high degree of flexibility and enables the researcher to identify prominent factors that are significant to the research questions.

3.4 Research approach

Given that the study explores the impact of good mental health on the performance of secondary school teachers working in under-resourced rural secondary schools in Bushbuckridge Municipality, a qualitative research approach is appropriate for this enquiry. In general, qualitative research is guided by three main features: first, an acceptance of an inductive view of the relationship between theory and research, whereby the former is generated out of the latter; second, an assumption of an interpretive epistemological position, which stresses the understanding of the social world through an examination of the interpretation of that world by its participants; and third, an adoption of the constructivist
position, which sees social properties as outcomes of the interactions between individuals, rather than phenomena “out there”, separate from those involved in its construction (Bryman, 2010). In the context of this study, these features represent the basic theoretical, epistemological and the ontological assumptions through which the data is collected, analysed and interpreted.

Thus, qualitative research is important for an interpretative and exploratory study. It attempts to understand phenomena in ‘natural settings’. It focuses on how people interpret and make sense of their experiences (Eisner, 2017). It often presents information in words (in a descriptive narrative), rather than in numbers.

In light of these assumptions, the study utilised a qualitative approach to explore both the meaning teachers attach to their experiences, as well as, how such meanings assists them in making sense of their lived experiences in their work performance (Delyser & Sui, 2013). In this context, the social phenomenon (that is, teachers’ mental health) is studied in detail from the teachers’ own understanding of the role of their mental health state on their performance (Patton, 1980). In other words, the emphasis is placed, as Silverman (2013) explains, on the subjective experience of the people’s understanding of their human experience. By doing this, the study is able to gain deep understanding into the relationship between mental health and teachers’ performance in the secondary schools under study.

These assumptions are also extended in the data collection and data analysis and interpretation. Leaning closely to Bradshaw et al.’s (2017) views, the study adopted an approach that allowed for “rich descriptions” of the teachers’ mental health, from their own perspective (Babbie & Mouton, 2005). Since the assumption is that knowledge is socially constructed and that experiences are subjective (Babbie & Mouton, 2005), it was necessary not to lose the participants’ voices and views in the analysis and interpretation of the data. In other words, the lived experiences of the secondary school teachers in this study are correctly depicted in a way that is different from those of teachers in other settings.

3.5 Study sample and selection of participants

According to Bryman (2010 p.168), population is “the collection of well-defined individuals or objects known to have similar characteristics” for the given study. The general practice is that from this identified population, the researcher can then select a ‘sample’, from which to investigate the identified problem (Bryman, 2010, p.168). In other words, the samples
generated from the general population provide the researcher with the opportunity to generate the data needed to investigate the research problem.

Therefore, the current study utilised the above assumptions. Given the aim of the study, the study population comprised all teachers from the seven secondary schools in Bushbuckridge Municipality. However, because it was impossible, and, in fact, time consuming and expensive to use all the teachers from the seven secondary schools, the researcher selected a sample of teachers from different schools within the Municipality. This sample was selected using the purposive sampling technique. Thus, a few teachers were identified from the population (through the researcher’s contact), which the researcher believed to possess useful information and data for the study (Neuman, 1997). Participants were recruited from two secondary schools in Shatale circuit within Bushbuckridge Municipality. The initial number of participants recruited for the study was twelve teachers. However, due to personal reasons, three of the participants withdrew. The total number of participants was nine, four males and five females ranging from 25 to 50 years and five were married whilst four were single. The participants’ ethnicity was Swati, Pedi and Zulu. Furthermore, their length of service ranged from one month to 23 years.

The research involved a rigorous and painstaking procedure. First, the researcher sought approval to conduct the research at the local Department of Education in the Municipality and at the office of the circuit managers. Upon receiving the approval letter, the principals of the secondary schools were individually contacted on telephone and appointments for separate physical meeting were made. The researcher explained the aims of the study and sought permission from the principals to carry out interviews. Approval letters from the circuit manager and the local education department were also produced in the process. Eventually, the researcher made appointments with respective teachers from different secondary schools. These appointments were purposively scheduled on convenient dates, which were the days of staff meetings.

3.6 Data collection method

The data for the study was collected through face to face semi-structured, in-depth interviews. Semi-structured in-depth interviews are mostly used in qualitative research and consist of a dialogue between the researcher and participant (DeJonckheere & Vaughn, 2019). The idea of using this data collection method was to ensure a correct and detailed understanding of the
teachers’ experiences (De Vos et al., 2011). According to De Vos et al. (2011), a semi-structured interview helps the researcher to dig deep into the experiences of the participants. Through the exchange of information or knowledge involved in this kind of data collection method, the researcher provides the participants with a more flexible platform to articulate their experiences. The researcher is also able to formulate open ended questions that make it easier for the participants to talk freely about their experiences (Depoy & Gilson, 2008). However, the semi-structured interviews are time consuming, and the interviewer needs to be sensitive and knowledgeable about the phenomena understudy (Wholey et al., 2015).

(i) Data collection instruments

The current study utilised open ended questions and an interview guide was used in the engagement with the participants. Such questions guided the interview proceedings. In some cases, a follow up to the questions was made for clarification. This gave participants the opportunity to reflect on their experiences, in terms of the role of their mental health on their performance. Most of the interviews lasted for approximately one hour. In all the cases, appointments with the participants were made some weeks before the interviews. This ensured that the times for the interview schedules were suitable and that the interviews were conducted in places that were convenient for the participants. The interviews were recorded with permission and, for those who did not consent to being recorded; notes were taken to ensure that the researcher had the participants’ information, which was later transcribed for analysis.

3.7 Data collection procedure

The researcher met the teachers on convenient dates, which were the days of their staff meetings. A short presentation that detailed the aims, purpose and need to participate in the study were made by the researcher. Afterwards, the teachers who were interested in the study were listed and recruited. The teachers’ names, contact details and other relevant information were taken. Documents such as the consent form, information sheet and ethical clearance letter from the Ethics committee of the University of KwaZulu-Natal UKZN Howard College campus were presented. The appointments were then made on individual basis on venues and times, which were convenient for the participants. All the interviews were done in line with the South African government Coronavirus Disease-2019 (COVID-19) regulations and measures, such as social distancing, the wearing of face masks and regular washing of the hands.
3.8 Ethical considerations

In line with the (UKZN) ethical code of conduct for conducting research, the following ethical practices were observed throughout the research process.

3.8.1 Obtaining ethical clearance from relevant bodies

Before the commencement of the study, the ethical clearance was obtained from the Faculty of Humanities and Social Sciences Research Ethics Committee at (UKZN) Howard College campus (Protocol Reference number: HSSREC/00001812/2020). An application for ethical clearance was uploaded on the UKZN RIG system and was reviewed by the school academic reader, and was then approved by the ethics committee (Appendix 1).

3.8.2 Obtaining informed consent from the participants

Another important ethical practice adopted in the study involved obtaining informed consent. The participants have the sole of right to decide whether to participate in the study or not. Such rights are as old as the human rights. This right was maintained both during and after the researcher agreed to the study.

The researcher made sure that all the participants consented to participate in the research knowingly, voluntarily, and intelligently, in line with Armiger (1997 cited in Burke et al., 2014). The participants were asked to sign an informed consent form (see document attached as appendix 3), which ensured that they voluntarily participate in the study. The participants’ permission was also sought before any audio of the interviews were made.

3.8.3 Ensuring confidentiality

This pertains to the treatment of information that an individual has disclosed in a relationship of trust and with the expectation that it would not be divulged to others without permission in ways that are inconsistent with the understanding of the original disclosure (Burke et al, 2014). The researcher ensured confidentiality by explaining to the participants that the participants’ private information would not be disclosed without their consent. Moreover, the researcher further explained that she can disclose the participants’ private information only when subpoenaed for legal purposes. This promise of protecting information from the participants was kept throughout the research.
Another way in which the researcher ensured the participants’ confidentiality is by using pseudonyms in the storage of the data. All the informants who expressed to remain anonymous were respected and this was maintained throughout the study. Any information that may give out the identity of the individual was replaced with pseudonyms or numbers. Throughout the process of data analysis, the data were saved with encrypted password and stored in a safe place. The hard copy of the data has also been stored in a safe place in a locked cupboard at the UKZN Howard College campus. It would only be accessible to the researcher and the researcher’s supervisor.

3.8.4 Maintaining non-maleficence and beneficence

As part of ethical considerations, the researcher has also made sure that, throughout the research process, she did not do anything that brought harm either physically or psychologically to the participants (directly or indirectly). The researcher consulted with a Psychologist and Social Worker from the local hospital to refer patients should the need arise. For fear of infecting the participants, all the interviews were done in line with the South African government Coronavirus diseases-2019 (COVID-19) regulations and measures, such as social distancing, the wearing of face masks and regular wash of hands. Rather than harm, the assumption is that the current research would benefit the participants.

3.8.5 Maintaining equity and fairness in the treatment of participants

As a practice, the researcher had ensured that teachers involved in the study were treated with fairness and equity throughout the whole process of the research. This entailed providing care and support for participants who were distressed during the interviews. In most cases, brief debriefing sessions or emotional support were offered to the participants.

3.9 Data analysis

For the purpose of data analysis, a thematic analysis model was utilised. Thematic analysis is simply the process of identifying important and significant patterns in a pattern that is thematically relational and significant to the research questions of a given study (Braun & Clarke, 2006; Clarke & Braun, 2013). The goal is not just to arrange the data in themes and patterns, but rather to use them to address the identified research problems. Such analysis brings out the meaning of the data collected mostly from the participants’ views, in a highly inductive way that does not allow the researchers themselves, to impose their own individual meanings on the data (De Vos et al., 2011).
Thus, in accordance with Braun and Clarke (2006), the study has adopted a six-step approach, namely:

1. Familiarisation with the data
2. Generation of initial codes
3. Searching for themes
4. Reviewing themes
5. defining and naming themes
6. Producing the report

3.9.1 Step 1: Familiarising yourself with your data
After transcribing the data, the researcher had first immersed herself in the data to the extent that she was familiar with the depth and breadth of the content. The researcher repeatedly read the data in an active way by means of searching for meanings, patterns and so on. It was ideal to read through the entire data set at least three times before commencing the coding process. This ensured the researcher that the data was making sense in terms of understanding the connection between the teachers’ mental health and their performance.

3.9.2 Step 2: Generating initial codes
The familiarisation stage was followed by the coding process. After the researcher had familiarised herself with the data, she generated the initial list of ideas about how the data speaks to the research questions. For instance, what part of the data answered specific research questions? How do I categorise that part? Reflecting on the data like this made it possible for the production of initial codes from the data. Codes identify a feature of the data (semantic content or latent) that appears interesting to the analyst, and refer to “the most basic segment, or element, of the raw data or information that can be assessed in a meaningful way regarding the phenomenon” (Boyatzis, 1998, p. 63).

The researcher coded her data by writing notes on the texts she was analysing, by using highlighters or coloured pens to indicate potential patterns. The researcher identified the codes, and then matched them up with data extracts that demonstrated that code, but it was important in this phase to ensure that all actual data extracts were coded, and then collated together within each code. This involved copying extracts of data from individual transcripts or photocopying
extracts of printed data and collating each code together in separate computer files or using file cards. The researcher coded for as many potential themes/ patterns as possible.

### 3.9.3 Step 3: Searching for themes

This step began when all data have been initially coded and collated. Now with an initial list of different codes as a data set, the researcher was able to re-focus on identifying themes that speaks to the research questions on the broader level. This was arranged as patterns. In practical terms, this involved sorting the different codes into potential patterns and collating all of them in a meaningful organised way. This is then later combined to form overarching themes, in relation to the research questions.

### 3.9.4 Step 4: Reviewing themes

Having assembled some meaningful themes, the researcher began the fourth stage. The stage involves two levels: reviewing and refining of themes. While in the first level, the researcher reviewed the themes from the coded data extracts, in the second level she had read again all the collated extracts for each theme and considered whether they appear to form a coherent pattern. The researcher had considered other elements such as themes being coherent, whether or not they are meaningfully coherent, and whether they are strictly addressing the research questions and objectives. At the end of this stage, the researcher was confident that clear and refined themes had emerged from the data.

### 3.9.5 Step 5: Defining and naming themes

After having derived a satisfactory thematic map of the data, the researcher began defining and naming the themes. Here, the essences of the themes were critically identified and determined. Measures were taken to make sure that each theme had an aspect of the research questions it captured. The researcher tried not to get a theme to do too much, or to be too diverse and complex. Above all, the researcher ensured that the themes carried a coherent and internal consistent narrative that represented the participants’ views.

### 3.9.6 Step 6: Producing the report

This was the final step. It involved a write up of the data. This stage meant that at the end of the analysis, a report is produced, in a way that makes sense for the study. Extracts from an
analysis journal kept by the researcher throughout the data analysis process, were embedded within an analytic narrative that illustrated the story about the data.

3.10 Trustworthiness of the study

In effort to ensure reliability and trustworthiness of the research, the researcher had taken steps to improve the credibility, confirmability, transferability and dependability of the research.

3.10.1 Credibility

Credibility refers to the confidence placed in the truth of the research findings. Credibility establishes whether the research findings represent plausible information drawn from the participants’ original data and is a correct interpretation of the participants’ original views (Amankwaa, 2016). This is very important in a qualitative research.

Hence two main practices were adopted. First, there is corroboration of information from the participants. As a duty, the researcher had made it a practice to corroborate the respondents’ “stories” with responses from others. On claims made about issues at the work place, efforts were made to corroborate them with that of other teachers, either by comparing them with other’s descriptions or by assessing the plausibility of such claims with what is known in the literature about the South African school system.

The second important practice was “respondent validation”. Respondent validation also called “member validation” is a process whereby a researcher gives back participants an account of his/her findings (Bryman, 2010, p.377). Often the goal is to seek confirmation that the researcher’s account and impressions are congruent with the views of those among whom the research was conducted. It is also done to seek out areas in areas where there is lack of correspondence and the reasons behind it. This practice was maintained throughout the research. The transcripts from the interviews were all sent back to the participants, at most two weeks after each of the interviews, to make sure that the researcher has not misrepresented their thoughts during the interviews.

3.10.2 Confirmability

Confirmability refers to the degree to which the results of an inquiry could be confirmed or validated by other researchers (Anney, 2014). Confirmability is concerned with establishing
that data and interpretations of the findings are not figments of the inquirer’s imagination, but are clearly derived from the data (Simon & Goes, 2016). This is often achieved through an audit trial, analysis journal and triangulation (Lincoln & Guba, 1985). It is a very significant part of research process.

Conformability in the current study was mostly ensured through the data analysis process. Throughout the data analysis process, the researcher had ensured confirmability of the data through data triangulation. As a rule, the researcher had compared the result of the study against the initial impressions from the collected data. Some of these impressions were first established in the “analysis journal” kept by the researcher throughout the course of the study, particularly during the data collection. Right from the beginning of the research, the analysis journal had been kept by the researcher in order to reflect on, tentatively interpret, and plan data collection. This journal was used to record all events that happened in the field and personal reflections in relation to the study that aroused during the investigation. This had turned out to be extremely helpful.

In addition, there was also a practice of both data triangulation (through which it was possible to compare data from one participant to the other), and a back and forth comparison of the data, with similar studies on the field. These comparisons not only helped keep the researcher on track, they also helped in ensuring proper reflections and confirmability of the research findings. In this context, some of the studies detailed in the literature review were very significant. They served as the main theoretical frameworks for comparing the research findings.

3.10.3 Transferability

Transferability means that the findings of the research allow the application of the conclusions to other similar contexts (Cope, 2014). To ensure transferability, the researcher provided thick descriptions of both the process of the research, as well as the findings, which would allow readers to understand how these findings were generated, and that the study could be replicated by other researchers, or even applicable in other contexts.

3.10.4 Dependability

In the current research, effort to ensure dependability was achieved in two main ways. First, the provision of a detailed description of the entire research process was done in this chapter.
All the rigorous process involved in the study, including the data collection and data analysis were provided. Other than its analytic significance, this process also ensured dependability of the data. The ability to code and review the codes as themes provided the research with the ability for comparisons and further justifications of the data results (Patton, 2014). It also allowed and encouraged multiple observations by the researcher, which boosted confidence on the reliability of the data.

Second, the study’s use of purposive sampling is another aspect that complements the provision of detail of the research process, in the ensuring dependability. Using purposive sampling the study had been able to select units and participants (e.g. individuals and the institution) through which it was possible to gain significant and reliable information about the subject of enquiry (Patton, 2014). The concentration was not on any participant, but rather on those participants who have significant information regarding the subject under study. The key information from these informants was also constantly validated through comparing them with that of other informants. This has in a large extent helped in ensuring reliability of the results of the data.

3.11 Summary

This chapter has documented the different methodological components applied in the entire research process. It has explained the main philosophical and epistemological assumptions underpinning the study: how the study had adopted a qualitative and an exploratory research approach and design respectively. These choices were explained as based on the study’s research objectives. The chapter also explained how the study had drawn from semi-structured interviews of nine teachers in the Bushbuckridge Municipality, to thematically analyse the different data. Amidst the rigorous collection and analysis of these data, the chapter shows that researcher was able to maintain significant ethical practices that helped her produce a substantive research work. The results of this data are presented in the next chapter.
CHAPTER FOUR
PRESENTATION OF FINDINGS

4.1 Introduction

This chapter focuses on data presentation. A systematic narration of the participant’s views, as they emerged from the data is provided. The idea is to address the research objectives. All the significant and verbatim quotes supporting the narrative from the themes are presented below. They are coded as P1/M, P2/M, P3/F, P4/F, P5/F, P6/F, P7/M, P8/F, P9/M (representing the nine participants for the study) and as letters M or F (representing the gender; Male or Female, for the participants).

Initially, 12 participants were recruited to take part in the study. However, due to personal reasons three participants withdrew. Thus, only nine teachers took part in the study. The nine participants were from two secondary schools in Shatale Circuit, within the Municipality. A demographic representation of these participants is presented in the table 1.
Table 4.1: Demographic representation of participants

<table>
<thead>
<tr>
<th>Participants</th>
<th>Age</th>
<th>Gender</th>
<th>Ethnicity</th>
<th>Length of service (years/months)</th>
<th>Marital status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant 1</td>
<td>45</td>
<td>Male</td>
<td>Pedi</td>
<td>17 years</td>
<td>Married</td>
</tr>
<tr>
<td>Participant 2</td>
<td>50</td>
<td>Male</td>
<td>Pedi</td>
<td>23 years</td>
<td>Married</td>
</tr>
<tr>
<td>Participant 3</td>
<td>44</td>
<td>Female</td>
<td>Pedi</td>
<td>16 years</td>
<td>Married</td>
</tr>
<tr>
<td>Participant 4</td>
<td>24</td>
<td>Female</td>
<td>Pedi</td>
<td>1 year</td>
<td>Single</td>
</tr>
<tr>
<td>Participant 5</td>
<td>31</td>
<td>Female</td>
<td>Pedi</td>
<td>1 month</td>
<td>Single</td>
</tr>
<tr>
<td>Participant 6</td>
<td>49</td>
<td>Female</td>
<td>Swati</td>
<td>27</td>
<td>Married</td>
</tr>
<tr>
<td>Participant 7</td>
<td>26</td>
<td>Male</td>
<td>Pedi</td>
<td>2 years</td>
<td>Single</td>
</tr>
<tr>
<td>Participant 8</td>
<td>33</td>
<td>Female</td>
<td>Zulu</td>
<td>7</td>
<td>Married</td>
</tr>
<tr>
<td>Participant 9</td>
<td>25</td>
<td>Male</td>
<td>Venda</td>
<td>2 years</td>
<td>Single</td>
</tr>
</tbody>
</table>

TABLE 4.2: Thematic results derived from the data collected

<table>
<thead>
<tr>
<th>Themes</th>
<th>Sub-themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceptions of mental health</td>
<td></td>
</tr>
<tr>
<td>Internal factors affecting mental health and psychological well-being</td>
<td>Culture</td>
</tr>
<tr>
<td></td>
<td>Heredity</td>
</tr>
<tr>
<td></td>
<td>Past experiences</td>
</tr>
<tr>
<td>External factors affecting teachers' mental health and psychological</td>
<td>Work-related stressors</td>
</tr>
<tr>
<td>well-being</td>
<td>Marital problems</td>
</tr>
<tr>
<td></td>
<td>Financial strain</td>
</tr>
<tr>
<td></td>
<td>Learners' home background</td>
</tr>
<tr>
<td></td>
<td>Limited support</td>
</tr>
</tbody>
</table>
### The impact of poor mental health on teacher’s work performance

- Teachers’ role as a caregiver
- Teacher as a role model
- Teacher as a facilitator
- Help-seeking behaviour

### Coping Strategies employed by teachers to address the challenges of teaching in an under-resourced school.

- Resilience and positive attitude
- Efforts towards being in a healthy work environment
- Seeking social support

### 4.2 Perception of mental health

The conceptualisation of mental health and well-being is viewed differently across different communities. It became evident in this study that the teachers’ understanding of mental health was associated with different factors. The participants had a similar perception on the understanding of mental health. The understanding of mental health by the participants revolved around how a person behaves or reacts to situations at a particular problem. The following responses from in-depth interviews help illustrate this point:

“[Mental health is] being able to understand things the way a normal human being is able to understand and react to situations using the mental capacity in the right way, yah. That is my understanding: it is your reasoning; you reason properly, you analyse and give right conclusions to situations and environment” (P2/M).

“Mental health, in my understanding, means one has to be sober-minded. When they say someone is emotionally healthy, it means he/she is emotionally intelligent, they can read situations without judging” (P3/F).

From the teachers’ perspective, general health is defined as the proper physiological functioning of the body and mental health is related to the balance between mind and body, as a requirement for happiness.

### 4.3 Factors affecting teachers’ mental health and well-being
In analysing the data, few elements were identified from the participants’ views as important factors that affect teachers’ mental health and psychological well-being. These factors are divided into internal and external factors. Together, they represent the different elements that affect secondary school teachers working in under-resourced secondary schools in the area under study.

4.3.1 Internal factors affecting teachers’ mental health and well-being

Reading through the interview data, three main factors were identified as important elements that affect mental health and psychological well-being of teachers working in Bushbuckridge, Municipality. These include:

- Culture
- Heredity
- Past experiences

**Culture:** Based on the analyses of the interview data, culture seems to be the first factor that influences teachers’ mental health and psychological wellbeing. Culture, according to the participants, has important role in shaping how people understand and experience things, as well as how they interpret and assign roles to them. The views and interpretations of what is considered right or wrong, or what one believes ought to be done at any given time is often dependent on the categories the person’s culture provides. It is often such categories that determine how people assimilate and interpret the different issues they encounter on their day to day activities. The following responses from in-depth interviews help illustrate this point:

“People need to act to situations or react to situations according to the culture of that particular society, so if you are not reacting or acting according to customs and norms and values of that particular society, it means that you have got a mental problem. This culture affects your understanding of issues and whether you should be bothered by such issues or not” (P2/M).

“Well I think culture plays a crucial role on how we understand the importance of mental health and its implications on our performance. Culture influence what people consider as being ‘sick’ and works to address it when they work” (P3/F).
As part of the cultural background, some participants highlighted that witchcraft may influence the mental health of a teacher. The following responses from in-depth interviews help illustrate this point:

“...like I am talking, as Africans there is witchcraft. There is another thing people call black magic. People can make you do things that you have never planned for; so that is the spiritual part of it...” (P1/M).

“In terms of our beliefs and culture, it is witchcraft [giggling] yeah... mostly if you are not mentally well, we say you were bewitched. Something might happen and someone becomes jealous of me and they bewitch me” (P9/M).

**Hereditry:** The responses from in-depth interviews show genetic elements as an important determinant of mental health. In general, teachers whose family members had mental health issues were judged by the participants to be most likely to be in unstable psychological state than those who did not have such family members. The argument is that mental health and well-being in most cases has more roots in genetics than in any other factor. Thus, the genes of teachers working in under-resourced schools in Bushbuckridge, Municipality, played a very important role on whether they developed mental health problems or not. The following responses from in-depth interviews help illustrate this point:

“Sometimes even the questions of heredity are very important. You find that there is a history of mental stability in the home of many teachers who have mental issues and under-performed. People end up inheriting such from the genes” (P1/M).

“Mental health can be generational. You find one in that line of the family, whom you know is not mentally in order. So that can affect the future generation...” (P 2/M).

‘Heredity is one of those factors. You may not be aware of that but you will find out at a later stage. The other reason might be pressure and the feeling that I am unable to deal with the situation” (P3/F).

**Past experiences:** Another important internal factor that seem to affected teachers performance, is their individual past experiences. As participants intimated, teachers are often
affected by their unpleasant past experience. Past experiences have the ability to alter people’s views and opinion of how they see and understand themselves. In particular, it can also affect how they feel about their psychological wellbeing and mental health. These in turn affect the way the teachers relate to their work environment and performance. The following responses from in-depth interviews help illustrate this point:

“...one other thing can be because of one’s upbringing. You will find that some teachers have been abused in one way or the other in the past. Such things are not easy to let go off. They end up affecting the teachers’ mental state and performance in the future...” (P2/M).

“...A person’s experience in the environment can change someone; peoples’ background can also affect someone. For example you might find that I have issues that I didn’t deal with when I was growing up, or those that are still in my past can come up when I am an adult. Trauma can also affect the mental part...and thus performance” (P3/F).

“...past experiences and growing up in households that is very abusive can affect someone. And again you know, not only problems that I experience can cause problems, but as a black child growing up in different households sometimes our parents’ problems become our own. Knowing that what my father is dong to my mother is not good so those things affect us” (P7/M).

4.3.2 External factors affecting teachers’ mental health and well-being
Other than the internal factors, certain external factors, such as work related stressors, marital problems, financial strain, learners’ home background, and limited support were also observed as important elements that affects teachers’ mental health and psychological wellbeing. In working within such under-resourced environment teachers encounter certain obstacles that impact on their mental health and psychological wellbeing. These in turn affect their performance.

Work related/Workload stressors: Most participants have reported that the pressure they get from their superiors to deliver on their work were the major sources of poor mental health.
Such pressure often happens during exam periods. As the superiors intend teachers to set examinations, administer exams and mark the scripts, they exert pressure on the teachers. When this pressure mounts, it becomes a major source of frustrations for the teachers. Thus, this periodic frustration makes it difficult for teachers to be in good mental state. The following responses from in-depth interviews help illustrate this point:

“...it is not like the teacher will be intentionally refusing to produce what is needed by the principal, but the person would be strained by the workload. The workload affects you mentally whether you like it or not” (P5/F).

“Sometimes when you have too much workload you end up being frustrated, especially during the time of exams. With the pressure of marking and everything, you really can’t escape it. Also the more frustrated you are due to the work load, the more you are mentally drained” (P 9/M).

**Lack of resources:** Furthermore, participants raised concerns regarding lack of resources, such as the shortage of staff, laboratories, classrooms, as well as additional stationery in their schools. Lack of these resources, in their view, negatively affects the teaching and learning process. In most cases, teachers end up improvising, but such improvisations are often hardly good enough, and often do not produce the desired results. This results in frustration that ends up affecting the teachers’ mental health and psychological wellbeing. The following responses from in-depth interviews help illustrate this point:

“I am a Maths and Physics teacher and sometimes I become frustrated because I feel like I don’t have the resources to help my students, you know [deep sigh]. Sometimes just a text book is not adequate ...I don’t know... that is my opinion. I just wish I had the equipment and that will also boost the learners to enjoy the subject ...” (P7/M).

“...it is a challenge for our school because we cater for children who come from very poor backgrounds and we don’t have the resources. Sometimes they are required to buy things that we know some of them would not afford...” (P8/F).

“...We are a small school and we are understaffed, so you find that one teacher teaches more than one subject in different classes and that becomes a challenge ...” (P9/M).

**Marital problems:** Marital and domestic issues teachers have at home were also identified as a serious contributing factor for good or bad mental health of the teachers under study. Often
the emotional state of teachers is a product of issues the teachers have at home. Issues and conflicts that teachers have at home are often carried over at the place of work. They end up impacting how the teachers relate with both their students and colleagues at work. One participant shared the following:

“...it can be problems in your marriage, you see! I know this personally because I had problems in my marriage and that affected my mental state really badly. Even though you tell yourself that you leave your problems at home, with me it was difficult and I became even lazy to go to classes, and it was hard to pretend like I was fine” (P6/F).

Financial difficulties: Financial issues were also identified as a serious contributing factor for good or bad mental health of the teachers under study. Participants argue that lack of what they believe was “adequate salary” was a major contributing factor for poor mental health. In the midst of poor salaries, teachers struggle with alternative means in order to fulfil their needs and wants. The stress associated with such hustles leads to frustration and inappropriate mental predisposition for their main teaching duties. One participant shared the following:

“... even finances can play a big role, especially for us as educators because we have a lot to do, but the salary is bad. This leads us into many things. Such other activities leaves us exhausted and unprepared for our main job, which is teaching” (P6/M).

Learners Home Background: Other than activities around the teachers themselves, the data also points to the importance of activities around the learners. In most cases, the teachers’ mental state and psychological wellbeing are affected by learners’ experience or background. The learners from such rural schools in South Africa come from difficult backgrounds. In situations where teachers perceive dealing with such students as their primary duty, the environment becomes extremely stressful. This in turn affects the teachers’ mental state and psychological wellbeing. Participants further reported that they get emotionally attached and affected by the learners’ experiences. The following responses from in-depth interviews help illustrate this point:

“Children in our schools are often very difficult to handle. This is mostly because of problems at home. For example, certain children become bullies. Then when you see that obviously you also become affected because you think of what might be happening at home, or is this child not being abused at home” (P1/M).
“That’s how you get affected that’s why at the end of the day we get emotional because we try to get into their shoes, to feel what they are feeling. We feel that it is our primary job to help them. These problems affect you; you don’t have any choice... But you experience burnout down the line” (P 1/M).

“...you will realize that most of them come from financially constrained families where unemployment is rife. Dealing with such situations affects everyone involved, including us the teachers” (P2/M).

“Since I am working with children from different backgrounds, I have to make sure that the children are fit for class. This is a major challenge for my mental wellbeing” (P3/F).

“...learners come with different challenges from home; do you understand? Some come without having eaten at home, and the shoes that the learner might be wearing reflects a sorry state at home. So, you see, as an educator I must have a good way to handle it...You got to handle it well, or else you get misconstrued” (P7/M).

**Limited Support and lack of insight:** Overall, as participants intimates, that not having enough support from different structures especially the state, affects the teachers’ mental health and in turn their performance and dedication to their job. In most cases, this lack of support also makes them feel unappreciated and frustrated. The result of this, in most cases, is animosity towards the principal, who is seen as the representative of the state. The tension that emanates from tensions often creates an environment that is not conducive for proper teaching and learning to take place. It also disrupts the mental state of all involved. The following responses from in-depth interviews help illustrate this point:

“Well to be honest I think it is possible, I mean if you are going through a lot in your life with little support, you end up being crushed in the spirit because you feel like you are not appreciated. So, for example, if I don’t receive the kind of support from my sisters, I am telling I will be sick. The same way when I do not receive the adequate support from the state, I get frustrated in both my body and mind” (P6/F).

“Ah no, the only support we receive is that of workshops and it doesn’t help with the workload, they only focus on how to be an effective teacher” (P9/M).
As the participants intimate, these frustrations become even worse in situations where the teacher has to deal with most difficult students. Lack of state or departmental support in such cases creates tremendous additional stress and poor psychological wellbeing that further worsens the situation. Dealing with such students takes impinges on the mental health of teachers. Thus, lack of plan to in providing appropriate support for teachers (to be mentally fit for such duties) in such cases, the schools risks the danger of worsening the situation. Moreover, the teachers’ lack of preparedness could further exacerbate their own mental health and psychological wellbeing. The following responses from in-depth interviews help illustrate this point:

“...no I have not, and to be honest I would like to attend such seminars because they make one to be aware of mental health problems and how to take care of yourself mentally, what measures you need to take to have a healthy psychological well-being. We need constant support to keep up with the demands of the job” (P1/M).

“As a teacher you need to have an understanding and knowledge of these things so that you will be able to interact with learners in a manner that is appropriate” (P2/M).

“No, and I would love to because they will contribute significantly since we need to be educated about such things, especially as a teacher, not only for our mental health but for those of the learners” (P6/F).

“No, I will love to just that I have never heard of such seminars here in our community. And you know I believe this is the time to focus more on our mental health because of the pandemic. There was a learner that was allegedly diagnosed with COVID-19 and they expected us to come to work and continue as normal. So I think we need to feel supported” (P8/F).

“...I mostly attend content workshops that talk about how to teach, they don’t necessarily talk about mental health or your lifestyle. I think they will help a lot in terms of understanding what mental health is” (P9/M).

The participant further elaborates the importance of seminars as they will assist the teachers to identify learners who may be presenting with mental health issues. The following responses from in-depth interviews help illustrate this point:
“...at the moment the information that we have is the one that we get from other people and it’s not really professional information. So even if you come across a learner with a similar problem we don’t know how to treat the learner or assess the situation. So if we can have a seminar that can educate us on this issue we can have a clear understanding of what is mental health really” (P9/M).

“But we don’t have such information on how to deal with it; we only know that people are crazy, and we only know that people have depression. We don’t have that insight” (P3/M).

4.4 The impact of poor mental health on teachers’ performance

Having presented the different internal and external factors that influence mental health and psychological wellbeing of teachers, the next step is to present the implications of these factors on performance. The idea is to address the study’s second research question which seeks to investigate how these factors affect the teachers’ performance in the under-resourced secondary schools. Three main areas were identified from the data, which are; first, teachers’ role as caregivers, second, teachers’ role as instructors, and third, the teachers’ role as helpers or facilitators.

4.4.1 Teachers’ role as caregivers

Reading through the data, the first important area identified to have been affected most by poor mental health and unhealthy psychological wellbeing of teachers is on caregiving. In the context of working in secondary school in South Africa, caregiving is believed by the participants to be a huge part of the teaching profession. The assumption is that values are best transmitted through such caring process. If students do not see their teachers as someone who respects and cares about them, they are not likely to be open to anything he/she wishes to teach them, either about their education or about social values in general. As a result of this, teachers incorporate caregiving as part of their teaching procedure, especially in rural and under-resourced areas.

Unfortunately, poor mental health and unhealthy psychological wellbeing threatened the teachers’ ability to use this approach in the rural areas. Not having a healthy and strong mental attitude discourages and demotivates teachers from engaging with students through such approach. It also makes it difficult for the teachers to deal with tough situations. The following responses from in-depth interviews help illustrate this point:
“...as a teacher you are a loco-parent. You stand on behalf of all the parents of children you are teaching because they are under your care. It is important always to be positive and give a helping hand” (P1/M).

“As a professional teacher, you need to show the students how you care. A professional teacher needs to detect that what the student needs is care. You need to have the strong mental ability to do it. Also you need to be able behave as a parent; because we are parents when we are here, you need to detect a learner who came to school without eating, a learner who came to school... We have failed in such areas sometimes because of our situations” (P2/M).

“It is very important. Actually coming to work needs you to be mentally and physically well, so if you are not mentally okay you won’t be able to fulfil caregiving duties because the main aim of our job is to read the situation and provide assistance to the students” (P3/F).

“...I mean, with me, it was difficult to forget my problems when I entered the school but then again I had to think that I should not be selfish, focus about me and forget the children, because as much as I was going through my own problems, the learners also go through a lot and they need us. We are their parents here at school, so yes a good mental health is very important” (P6/F).

“...as a teacher you need to be mentally strong and fit so that you can deal with the situation you come across, so if you are not strong as an educator you can be shattered...At the end, you will be unable to provide care to the students” (P9/M).

It was also noted that the teachers were more concerned with the learners’ mental health than their own and this in-tern put strain on them and their work performance. The following responses from in-depth interviews help illustrate this point:

“...yes I could say that, even though we don’t do it intentionally but it ends up like that because you are a parent you say at least I am grown up, I am mature but this one might not understand what is happening. So that is why they end up coming first in your life as a teacher and your own mental health takes the back seat. That’s where the problem is” (P1/M).
“If I am weak mentally, it affects them negatively. In other words, they will be weak too so my strength is their strength and my weakness is their weakness and all that, so I think you need to be strong at all times because you need to handle every situation the learner presents to you, whether from home or from school premises; so as a teacher it is compulsory to be healthy at all times irrespective of what is happening in your life” (P2/M).

“As an educator I must be humble at all times, so I must not come with my own family problems in the classroom or to the learners. Therefore, according to my understanding, my mental health should not be my first priority” (P7/M).

4.4.2 Teachers as role models

The participants have also intimated that teachers are critical role models to the learners. The following responses from in-depth interviews help illustrate this point:

“You must remember we are role models no matter what situation learners come from. When they come and look at you strong as you are, you are their hope. They believe in that, if ‘Sir’ can do it, so why can’t they also do it. Because they adore us a lot; they draw strength from us” (P2/M).

“One has to be aware of their behaviour, even outside work, because you might be a role model in the community, so you have to make sure that your behaviour is good so that they can follow in the right foot steps...that on its own can add pressure on you because you are also human after all” (P4/F).

“As a teacher there is a certain image you have to portray because all the learners are looking at you. I know that it sounds easy but it is difficult to act out” (P6/F).

4.4.3 Teachers’ role as facilitators

A teacher is considered a facilitator in the classroom setting as they encourage active learning, promote student interaction and clear the barriers in learning. These however becomes a challenge in settings were learners are disruptive in class. Due to the disruptions caused in class, the participants acknowledged that teachers can also cause harm to the learners on days when they are not emotionally stable. The following responses from in-depth interviews help illustrate this point:
“...it is difficult for me to perform my duties in a class that is disruptive when I am also going through my personal problems on that day. I encourage learners to come with their own research on a topic that we will be discussing in class, but because some learners misbehave you find that I go to class and we don’t engage in discussions” (P1/M).

“I always say that as the teacher, you can actually cause harm to the children because of wrong behaviour. One may apply something corporal, something that might end up ruining the whole situation” (P1/M).

“...a teacher who might be dealing with other problems and not mentally fit might end up fighting the learners and take out his/her anger and frustrations on the learners” (P7/M).

“The other thing is the behaviour of learners, some will be disrupting the class and that affects other learners, and in turn you end up like them and being personal when you lose it. This affects your work because now you become something that is not okay for the learners and yourself” (P9/F).

4.4.4 Help-seeking behaviour

Help-seeking can be considered as seeking trusted help from people around you or professionals when facing stressful situations. Based on the above information, this sub-theme focuses on how participants seek help, professional or otherwise, if at all they do, when faced with any situation, and how has that contributed to their mental health. Despite having the majority of participants reporting not seeking professional help, it was evident that only one participant mentioned that they were able to seek out professional help, whilst others did not see the need to seek out help because they perceived themselves as mentally fit. The following responses from in-depth interviews help illustrate this point:

“Not yet, at times I would sit down and consider that. I think that would be very important in life because that would help me to be sure of my mental status. As teachers we seek mental help when we are no longer ok, so I think it helps to do so when one is still in the right state of mind” (P1/M).

“I’ve got that weakness. I believe in myself or maybe it is because I am a Christian and that is my weakness. We know that with God everything happens for a reason. But
to be honest I have never felt like I need help from somebody because I can always handle my problems just like I said I am a positive thinking person. Therefore I am just content with myself” (P2/M).

“No. I just think that mentally I am ok” (P4/F).

“I have a psychologist that I meet once a month. I was going through a lot, you see I blamed myself for everything but I later understood why. So, yah, I thank myself for taking the step” (P6/F).

4.5 Coping strategies

Given that the teachers are aware of the importance of correct mental health and good psychological wellbeing, they had employed certain healthy strategies to improve their performance. These strategies are categorised into three ways, namely:

- Resilience and positive attitude
- Efforts towards being in healthy work environment,
- Seeking social support.

Resilience and positive attitude: These were in other words conceptualised as general strategies to boost good mental health and psychological wellbeing. The following responses from in-depth interviews help illustrate this point:

“I am always you know….taking things as they come and not forcing myself to do things that are beyond what I can do. I developed an attitude of being content with what I have you know and what I can do. This was my big source of support to accept the job” (P2/M).

“It is always good to be happy and thankful with what God blessed you with. Spending time with the learners make me realise that I am lucky and I should not be complaining. Thinking about that always helps me” (P8/F).

Efforts towards being in a healthy work environment: Alongside the positive attitude, teachers also explained how they made effort to re-create a healthy environment. Some of such efforts include an open door policy, wherein teachers and the principals are willing to assist each other, especially the recently qualified teachers, in having healthy relationship with fellow colleagues and setting goals for oneself. Such efforts created a healthy environment within which the teachers had opportunities to develop ideas that help them deal with the challenges
associated with working in such under-resourced secondary schools. It also made them feel very appreciated and supported by fellow teachers. The following responses from in-depth interviews help illustrate this point:

“*I am the youngest staff member here, so ever since I started working I have always considered working here very easy because the other staff members who have been here longer are always willing to give me a hand and I appreciate it*” (P4/F).

“It is very good to have a healthy relationship with your colleagues, so for me I have one teacher whom I rely on to support me whenever I am not mentally ok here at work, and all the staff in general are very supportive” (P6/F).

“I make sure that I finish the batch of work that I have before I receive the other, so mostly workload is always there it depends on how you make it work” (P9/M).

**Social Support:** Social support was deemed important when one is dealing with a crisis or stressors affecting their mental health. This is represented in the following excerpts from the data collected:

“I share with my husband everything that I experience here at work, especially the stressful things because if you have a very strong family support you can overcome anything” (P3/F).

“I leaned to share what my experiences are, either pleasant or not, with my sister and that has been helpful, because even though I have never shared my problems with any profession I know I can rely on her” (P5/F).

“...okay, as I have said previously I consider myself as someone who is open. Like most of the time here at school, I normally talk to my colleague, so to me having someone to talk at work is very important ... ” (P8/F).

**4.6 Summary**

This chapter has presented the research findings. The research findings have revealed that teachers’ mental health and psychological well-being are affected by such factors as internal culture, financial strain, heredity and past experiences, as well as work-related stressors, marital problems, learners’ home background, and limited support. For easy comprehension and
presentation, the researcher has categorised these factors as internal and external, to distinguish those factors that are inherent, from those that emanate from the environment. These challenges affect the teachers mostly in three areas, which are: first, on their role as caregivers, second, as instructors, and third, as helpers or facilitators.

CHAPTER FIVE
DISCUSSION AND CONCLUSION

5.1 Introduction

This chapter presented the discussion of research findings on teachers’ mental health awareness and well-being in two selected schools in the Bushbuckridge Municipality, Mpumalanga Province. The findings of the study were discussed in relation to related literature on mental health and wellbeing reviewed in chapter two, and their impact on teachers’ work performance and well-being. Four major themes along with sub-themes emerged. Major themes include
teachers’ perceptions of mental health, internal and external factors affecting teachers’ mental health and well-being, the impact of poor mental health on teachers’ performance and coping strategies teachers employ to maintain their mental health. These themes and sub-themes were discussed and analysed in this chapter in relation to the literature reviewed. This was followed by the limitations of the study, recommendations and conclusion.

5.2. Teachers’ perceptions of mental health

The conceptualisation of mental health and well-being is viewed differently across different communities. According to the World Health Organisation (2014), mental health is a state of well-being in which an individual realises his or her own abilities, can cope with normal stresses of life, can work productively and is able to make a contribution to his or her society.

According to Helbich (2018), a human being is complex and as such their mental health is determined by environmental, biological and psychological factors. This is consistent with research findings from in-depth interviews as the participants revealed that mental health was associated with environmental and biological factors. Most of the participants had similar perceptions on mental health and their understanding of mental health revolved around individual behaviour, or reaction to situations, and/or to a particular problem. The participants intimated that when certain individuals behave in a sense that the society approves and accepts, they are regarded as normal persons without a mental health problem. On the contrary, when individuals behave in a way that does not conform to standards or norms of a particular society, they are regarded as having mental health problems.

As the participants revealed, individuals that have mental health problems exhibit such behaviour as talking alone or talking to people others cannot see, always being intoxicated or drunkenness, violent behaviour or irritability, and behaviour that is not socially accepted or aligned to a particular culture. Also such individuals rummage through rubbish bins, exhibit lack of concentration, and do not make sense when they talk. Nevertheless, some participants acknowledged that mental health necessarily deals with the community where they reside and where the individual grew up. This concurs with Sebastine’s (2017) study on teachers’ mental health implications for teaching-learning, who contends that mental health is the capacity to work and love. Hence, the indicators of good mental health among teachers include subjective well-being, perceived self-efficacy, autonomy, competence, inter-generational dependence, and self-actualisation of one’s intellectual and emotional potential, realisation of their abilities, coping with normal stress of life, productive work and contribution to their community.
However, indicators of poor mental health state among teachers include anxiety, depression, and loss of behavioural and emotional control. This concurs with Soares et al. (2014) who view mental health as the proper physiological functioning of the body and the balance between mind and body, as a requirement for happiness. Previous researches have also revealed the impact of stressful situations on the process of memory, as it is considered the most functional aspect of the central nervous system (Ghodrat et al., 2014). This can also have an impact on decision making, attention and judgement of the teacher (Sandi, 2013).

5.3 Factors affecting mental health and well-being of teachers

Research findings have revealed various factors that contribute towards the mental health and well-being of teachers. This main theme is divided into internal and external factors. Internal factors being culture, heredity and past experiences. External factors being workload, lack of resources, marital problems, financial difficulties, the learner’s home background and limited support and insight.

5.3.1 Culture

Culture is defined as a set of values and beliefs, or a cluster of learned behaviours that we share with others in a particular society, giving us a sense of belonging and identity (Lebron, 2013). As the participants have revealed, culture has an important role in shaping how people understand and experience things, as well as how they interpret and assign roles to them.

This factor tends towards the ideology that is especially considered in Africa, that one can be bewitched by people who do not wish them well or through generational curses. According to Mkhonto and Hanssen (2018), mental health problems are still associated with ‘madness’ or witchcraft in some societies, and this in turn causes the family and the individual to be subjected to stigmatisation.

The findings from in-depth interviews have revealed that a teacher can be bewitched by his/her enemies, and this can affect the mental health of the teacher. In South Africa, the belief in witchcraft is common and is associated with the use of charms, spells and rituals. It is believed that a witch or “moloi”, as described by the participants, can use magic to cause harm and misfortune on others (Nyundu & Naidoo, 2016). A participant giggled when he reiterated that witchcraft affects a teacher’s mental health, but he further explained that the use of witchcraft by their enemies is especially common in Africa. However, according to Mafoi (1986 cited in
Ally & Yew-Siong, 2020), the notion of witchcraft is a myth based on the acceptance of western academic view point held by many sociologists and anthropologists. He further elaborates that the believe in witchcraft and the accusations and labelling others of being "witches" may, in essence, be a means of the community seeking to get rid of people considered not belonging or fitting into a particular society.

5.3.2 Past experience

This highlights the way the teachers grew up and their childhood background. The findings from in-depth interviews have revealed that the teacher’s upbringing affects their mental health when they are older. The participants have suggested that some teachers may be affected by some certain traumatic events that had affected them in their childhood. This is consistent with Kascakova et al.’s (2020) observation that childhood trauma, or experiences that often bring undesirable consequences, can be a contributing factor towards mental health problems in adulthood. Hence, if some traumas are not dealt with in time or when children are still young, this could affect the teacher later in future. Thus, a teacher who had a trying and difficult childhood may end up developing mental health challenges during their teaching career.

Furthermore, according to Sorsdahl et al.’s (2010) study, mental health problems are a product of neglected family problems that escalate and turn into illnesses. Hence, considering the value of community and family in African cultures, disputes among family members can be stressful and deprive one of a social support structure.

5.3.3 Heredity

The narratives from the study also show genetic elements as an important determinant of mental health. In general, teachers whose family members had mental health issues were judged by the participants to be most likely to be in unstable psychological state than those who did not have such relatives. This concurs with Jeon et al.’s (2017) view that family members are at a greater risk of developing mental health issues in their lives by 10-25%, if there is a history of mental illness in the family. Hence, the brain neuroendocrine system vulnerability can be seen as a risk factor to the development of a mental health problem. Thus, mental health and well-being in most cases has more roots in genetics than in any other factor.

5.4 External factors
Participants highlighted different factors that affect the mental health of teachers in the workplace. These factors include workload, lack of support and lack of resources among other things. According to Harding et al. (2019), teachers’ mental health can be influenced by many elements which include life gratification, individual contentment, personal growth and the ability to form good interpersonal relationships with others.

5.4.1 Work-related/ workload factors

Work-related factors include those elements that have an impact on the teachers’ mental health and well-being within the workplace. Such elements include extensive workload and career development pressures. The findings from in-depth interviews have revealed that workload has an impact on teachers’ mental health and well-being. Some teachers reported that the pressure they get from their superiors to deliver on their work has an impact on their mental health in a negative way. This is consistent with findings from related literature as by Kaupa (2020) reveals that work stress does exist amongst high school teachers due to the demanding nature of their work. Hence, the main factors that have an impact on teachers’ mental health and well-being include the shortage of staff in schools, lack of resources, workload, poor remuneration and poor working conditions. The teachers are thus overwhelmed, resulting in absenteeism and high turnover of teachers, temper outbursts and suicidal thoughts amongst the teachers. There are the critical challenges that are stopping schools from reaching their full academic potential by solely affecting the mental health promotion and well-being of teachers (Kutame et al., 2014). These are the realities faced by rural school teachers.

Furthermore, the findings from in-depth interviews have revealed that secondary school teachers are overworked, especially when it is during the exam season. The lack of staff also perpetuates their mental health status which in turn affects their work performance and motivation. On the contrary, Amalu (2013) posits that stress from work-overload has no significant influence on the professional effectiveness of the secondary school teachers because the teachers and students are given enough time to rest and relax both physically, mentally and emotionally to regain their lost vigour and strength.

The findings from in-depth interviews have further revealed that the volume of work that teachers have to accomplish through the day is such a great burden to bear. This includes such responsibilities as scheming and planning, lesson delivery, assessment and supervision, administrative work and care-giving or attending to the learners’ problems, amongst other things. The situation seems even dire for teachers working in rural settings. In addition, to the
above-mentioned challenges, they also face significant lack of support from the government, unavailability of resources, classroom over-crowdedness and unsuitability (Wessels & Wood, 2019; Venktess, 2011). Due to the limited staff, teachers are responsible for teaching many subjects in different classes, leading to exhaustion on the part of the teachers. This in turn has an impact on the quality of work and educational outcomes.

This is consistent with the findings from literature review as Nyagaya’s (2015) study on factors influencing the teachers’ level of job satisfaction in public primary schools in Nairobi, Kenya, reveals. Hence, the teachers are dissatisfied with remuneration, working conditions, inconsideration of the teachers’ level of education and work load. For instance, 27% of the teachers expressed dissatisfaction because they teach from 31 – 40 lessons per week; and 32% of teachers were dissatisfied with their job because of much work load.

5. 4. 2 Lack of resources

Findings from the in-depth interviews highlight that lack of resources in these particular secondary schools prevent teachers to carry out their work with efficiency, which leaves the teachers frustrated and helpless. Similarly, du Plessis and Mestry (2019), report that teachers in rural areas are faced with difficult circumstances. The participants reported that sometimes they are forced to use their own resources, to purchase their teaching materials, or for self-sponsored training and this has led to lack of interest and efficiency on their part. Furthermore, McGrath (2007) observes that rural secondary schools had no budget provision for technological integration systems, computer gadgets and refresher training for the operations of the global education in the new secondary curriculum. Thus, teachers do get appropriate training and are ready to offer effective training to their leaners, only to face the drawback of lack of resources. This is regarded as one of the contributory factors of teacher stress and deterioration of mental health (Du Plessis & Mestry, 2019). As Nakidien et al. (2021) suggest, work-related stress and the development of mental health problems are related to poor working conditions. The research findings further highlight that there is limited staff and this in turn puts a toll on the teachers. This conquers with Nakidien et al. (2021); who states that rural schools experience teacher shortages in some subjects, which may cause occupational stress, which is one of the major causes of teachers drifting away from the teaching profession.

5. 4. 3 Marital problems
Home life and working life are two elements that affect each other and these two can often result in conflict (Oosthuizen & Van der Bijl, 2007). One participant highlighted that her performance at work deteriorated due to the problems she endured in her marriage. This shows that the environment at home can influence the workplace as well. These findings concur with Beauregard’s (2006) view that the family-work conflict impacts on the teachers’ health and well-being. Problems such as conflict within the family, lack of spousal support, and high number of responsibilities can affect the performance of the teacher at work. This concurs with Kamper and Steyn’s (2006) observation that the unequal division of labour at home is a source of stress to women as compared to men.

Marital and domestic issues teachers have at home were identified as a serious contributing factor for good or bad mental health of the teachers under study. Issues and conflicts that teachers have at home are often carried over at the place of work. They end up impacting how the teachers relate with both their learners and colleagues at work. On the contrary, Khurshid et al.’s (2012) study on the relationship between teacher self-efficacy and their perceived job performance in Islamabad, reveals that marital status affects the self-efficacy of teachers and that married male and female teachers have high self-efficacy, which lead to high job performance.

5. 4. 4 Financial difficulties

The findings from in-depth interviews have revealed that socio-economic related stress has a huge impact on teachers’ mental health. The majority of participants viewed insufficient salary as having an impact on teachers’ mental health and well-being. This concurs with Kyriacou and Chien’s (2004) observation that teachers’ salaries tend to be lower than other professions and hardly match the high cost of living, leading to job dissatisfaction and turnover in the profession. Furthermore, Ngethe (2013) observes that teachers leave the teaching profession for greener pastures due to poor remuneration.

Furthermore, as Arain et al. (2014) argue, the salary of teachers is an important factor that influences the performance of both teachers and learners. The meagre monthly salary is quickly dissipated in the face of too many dependants, the middle-class life style of the participants, and different loans secured which leads to financial strain. This concurs with Okeke and Mtyuda’s (2017) view that teachers who are deeply in debt opt to resign, so as to get their pension and settle their long standing debts. Hence, there is an imbalance in income distribution among teachers in the senior secondary schools in the Eastern Cape, and teachers in South
Africa engaged in industrial action several occasions asking for pay increments. Thus, it is now common knowledge that teachers in South Africa are underpaid (Armstrong, 2014).

Moreover, the teachers lack motivation and that has a serious impact on the learning process of their learners. Thus, there is a general consensus in academic circles that the teachers’ demanding working conditions and development of mental health problems are significantly correlated to inadequate salary and high financial strain (Cezar-Vaz et al., 2015). Hence, the poor salary of teachers has in turn been linked with poor turnover rates and performance of the teachers. However, other scholars contend that teachers’ salary package and incentives influences their performance, increases their job satisfaction, and in turn increases their mental health (Iwu, 2013; Armstrong, 2015; Mestry et al., 2009).

5.4.5 Learner background

The findings from in-depth interviews have revealed that secondary school teachers are affected by the learners’ home background, since the schools were in a rural community with high rate of poverty and unemployment. The research participants have intimated that the learners’ misconduct, especially in the classroom, during teaching sessions, can increase the chances of a teacher developing mental health problems. The participants observed that their mental health and wellness was of importance, not only to them personally but also to the learners as they had to be there for them. This is consistent with the findings from literature review as Kutame et al. (2014) reveal that teachers in the rural areas have to deal with learners from different backgrounds and the ones considered as needy, and this is stressful for teachers who may find it difficult to teach these learners. As a result, this has an impact on the mental health and well-being of both the teacher and the learner. Also Sun and Shek (2012) observe that the development of teachers’ mental health can be associated with the disruptive behaviour of their learners. Moreover, this concurs with Mouton et al.’s (2013) view that learners in historically disadvantaged areas tend to become victims of gangs and drug abuse, and this indirectly affects the teachers because learners become aggressive and defiant, which at times places the life of teachers at risk.

According to Human Science Research Council (HSRC) (2017), the majority of school violence witnessed includes learner-on-learner violence, and learner-on-teacher violence, as the teachers are bullied by recalcitrant learners, leading to negative emotions, disempowerment, low morale, and low motivation of various role-players in the school system. This concurs with Sun and Shek (2012) who observe that the most common troublesome misbehaviour of the students
was talking out of turn, particularly in the form of disruptive conservation and disrespecting teachers. Also, non-attentiveness, day dreaming and idleness were major misbehaviour problems. Hence, the most unacceptable and problematic misbehaviours of the students were disobedience and rudeness, followed by talking out of turn and verbal aggression. These misbehaviours do affect teaching and learning adversely and in turn affects the teachers’ mental health and well-being.

5.4.6 Limited support

The findings from in-depth interviews have revealed that secondary school teachers in South Africa, especially those working in rural areas, have limited support from the government and the department of education. The majority of participants mourned the prevalence of inadequate personnel in the education system that contributes greatly to the high rate failure of metric results. The participants further revealed that their limited insight on mental health perpetuated the way they felt about their environment, particularly their working environment, and this has a huge impact on the way they intervene in situations where they are most needed. This is consistent with the findings from literature review as Seedat and Suffla (2017) also observe that there are limited psychological services, especially in disadvantaged communities and rural schools, which means that there are limited or no psychological assessments and also limited knowledge regarding mental health.

Furthermore, the participants emphasised lack of support from their superiors, which put more strain on their mental health. This concurs with Mulaudzi’s (2018) study which shows that 79.4% of teachers experienced stress as a result of lack of support from superiors; 18.9% experienced extreme mental health problem; 16.6% much stress, and 21.1% moderate stress. Hence, there is deep-seated need for teachers to attend mental health seminars because they are often ignorant of which course of action to follow since some might feel insecure.

In same vein, the research participants in this study have also highlighted the need to receive more information on mental health in order to stay updated and know how to deal with it in their daily lives and the work place. There is lack of knowledge in mental health among professionals working in the education sector, especially in teachers (Feinstein, 2015). Teachers spend a considerable amount of time with students in their classrooms, where they have the possibility of visualising the development of children from day to day (House of Commons, 2017). Therefore, as Vieira et al. (2014) argue, it is vital to improve the teachers’ skills of identifying and presenting mental health issues.
5.5 The impact of poor mental health on teachers’ performance

The statement “Teachers are workers; teaching is work; and the school is a workplace” Connell, (1985, p.69) is considered to be of central importance to the current study as it explores to what extent does the school as a workplace influence teacher’s well-being. Teachers in South Africa may share similar challenges, but the teachers in the rural areas experience many barriers as compared to those in urban schools, due to the high level of poverty (Khanh & Rush, 2016).

The theme is divided into four sub-themes, which are teaching experience, role of a teacher, help-seeking behaviour, and teacher performance.

5.5.1 Teaching experience

The majority of participants highlighted the significance of the teachers’ mental health, more especially when teaching in the rural areas. However, it was noted that they stressed the importance of mental health in relation to the well-being of their learners, thus putting the mental health and well-being of their learners before their own. This concurs with Olsen’s (2017) view that the teachers’ well-being is not only of significance for the classroom setting, but also for the well-being of learners. This is achieved through the creation and maintenance of a safe and supportive learning environment.

Moreover, findings from in-depth interviews have underscored the importance of teaching experience in managing work-related stress. The majority of participants have revealed the existence of an open door policy, wherein teachers and the principals are willing to assist each other, especially the recently qualified teachers, in having healthy relationship with fellow colleagues and setting goals for oneself. Such efforts created a healthy environment within which the teachers had opportunities to develop ideas that help them deal with the challenges associated with working in such under-resourced secondary schools.

This is consistent with the findings from literature review as Kabito and Wam (2020) reveal that the length of teaching experience is significantly associated with the impact of mental health and well-being. Hence, this could be as a result of lack of time for newly hired teachers to complete their tasks adequately. Therefore, the senior staff minimise the workload due to their ability to assess the role. Furthermore, as Kabito and Wam (2020) reveal, poor job relationship was associated with work-related stressors. A possible reason could be that harmony and positive relationships between teachers may isolate stress triggers. In addition,
good relationships could continue to enhance self-esteem and allow teachers not to feel isolated, leading to stressors buffering.

5.5.2 Role of a teacher

Teaching is considered as a profession that is unique and therefore requires one to behave in a certain manner. An individual who becomes a teacher is required to act as an example to the society and often play different roles (Okeke, 2014). Different roles discussed below are categorized as: Teachers’ role as a caregiver, Teacher as a role model and Teacher as a facilitator.

5.5.3 Teachers’ role as a caregiver

The findings from in-depth interviews have revealed care giving has been most affected by poor mental health and unhealthy psychological wellbeing of teachers. In secondary schools in South Africa, caregiving is believed to be a huge part of the teaching profession. Hence, values are best transmitted through the caring process. If learners do not see their teachers as someone who respects and cares for them, they are not likely to be open to anything he/she wishes to teach them, either about their education or about social values in general. As a result of this, teachers incorporate caregiving as part of their teaching procedure, especially in rural and under-resourced areas.

The research participants have revealed different perspectives regarding the role they play in their workplace. It is shown from the findings that teachers view themselves as the student’s caregiver and are responsible for the student’s wellbeing especially in school. Some teachers identified themselves as loco-parents which means, they are standing in gap as parent figures to the learners and are responsible for the learners. The teachers also considered how important it is for them to be mentally and physically strong, so as to be able to read different situations and provide the needed assistance to the students. It was also noted that the teachers were more concerned with the leaner’s mental health than their own and this in turn put strain on them and their work performance, especially in the school vicinity.
5.5.4 Teachers as role models

The findings from in-depth interviews have revealed that the teachers perceive themselves as role models to the learners and the community. This puts pressure on them to be in their best behaviour always, which can be challenging. Most of the participants considered themselves as role models not only to the learners but to the entire community at large. This is consistent with the findings from literature review as Bajwa and Rana’s (2014) study also reveal that learners consider their teachers as role models. Hence, there is a need for both teachers and learners to become more socially attached with each other by keeping outside classroom relations and better understand each other.

Moreover, the findings from in-depth interviews have revealed that the perception of teachers as role models is a major source of stress. As one of the participants put it, ‘no matter what situation the learners present, and no matter how strenuous, the teacher has to be calm and behave in a manner which is deemed right and acceptable’. However, the sense of discomfort most of the teachers feel is of concern to them, because they have to behave in a manner that is acceptable to the learners and the school community. Moreover, the teachers should maintain their manners and attitude outside the school community.

Furthermore, according to Narinasamy and Logeswaran’s (2015) study on teacher modelling, good teachers were always observant of learners’ behaviour and affirmed their actions, be it their work in class or their behaviour. Learners consciously or unconsciously impersonate teachers’ behaviour in schools. Therefore, affirmation from teachers acts as a form of motivation to the learners and as such they are compelled to strive in their work (Noddings, 2010). It was further emphasised by Narinasamy and Logeswaran (2015) that the relationship between teachers and learners not only assist in shaping the character of the students, it also assists the teacher to relate with the students and make the learning and teaching process easier.

5.5.5 Teachers as facilitators

The findings from in-depth interviews have revealed that classroom disruption sometimes has an impact on their roles as facilitators. However, teachers are able to deal with disruptive learners if their own mental health and well-being are taken care of. Most of the teachers suggest that when they engage with the learners, they must be mentally fit because they might end up fighting or venting their frustration on the learners. These findings are supported by Mulaudzi (2018) as he highlights that teachers may become sensitive and end up being
aggressive to learners. Hence, they may shout at them, beat them, and these learners may get threatened and confused. This shows that stressed-teacher behaviour has a negative effect on classroom setting, as their concentration and thinking skills may be affected.

Furthermore, some learners can be very stubborn and disruptive, and also disrupting classes and causing other learners not to focus. This attitude can also be contagious to the teacher, thereby affecting the mood and the work of the teachers. The teachers suggest that they have to be careful on how they conduct and facilitate certain issues in class, so as to not make it personal to them.

5.5.6 Help seeking behaviour

Help-seeking can be considered as seeking trusted help from people around you or professionals when facing stressful situations. The findings from in-depth interviews have revealed that teachers do not seek professional help because they view themselves as not having a “problem” that warrants seeking help. In relation to the Health Believe Model (HBM) some participants raised that due to the fact they are religious they believe that there is a reason behind everything that is happening and therefore do not see the need to seek out help either from professionals or other people. As Herzberg (2013) emphasises, people are prevented or discouraged to seeking help/treatment because of the fear of being labelled different or due to ‘stigma’ a form of social-cognitive process encouraging individuals to avoid labels connected to mental health problems.

The HBM is about a belief that a phenomenon is real. Therefore, people are more likely to seek help if an illness is real to them (Brannon et al., 2013). The results of the current study highlighted that participants do not seek help regarding their mental health as they view it as not being real. Therefore, participants’ perceived beliefs about their mental health status leads to action. Hence, the HBM in this study associate participants’ beliefs about mental health, well-being and treatment with health actions. The model highlights that help-seeking behaviours, are the result of a set of core beliefs (Brannon et al., 2013). Therefore, if an individual does not believe that they are likely to get the help they need from the health professional, then the person would not seek help from the health professional. When participants were asked about the chances of them having mental health problems, a majority noted that it is not likely. According to the perceived susceptibility perspective in the HBM, people who think that they are prone to a health problem would engage in behaviours to reduce their risk of developing the health problem. And those that do not would not even go for a
psychological check-up (Glanz et al., 2008). The results have revealed that only one participant went to a psychologist when she experienced a mental health problem, due to marital problems.

According to Uzman and Tele’s (2015) study, for mental symptoms, most teachers seek help informally from their parents and/siblings and formally from psychologists or psychiatrists. The factors inhibiting help-seeking, assumes inability of understanding, lack of faith in the possibility of help, and fear of being judged by peers, hesitation to accept help and lack of knowledge about where to look for help are related to mental symptoms. Hence, there is the necessity to pay attention to the mental health of teachers’ and to promote formal sources, emphasise the role of informal sources to overcome obstacles in the way of seeking help. It appears that, in the context of mental health services, the development of psychological support may be useful in order to increase prospective teachers’ mental health.

Help seeking may be characterised as either effective or ineffective. Effective help seeking takes place when one knows when he/she needs help, what kind of help they need and to whom to ask for help, as well as how to ask for the help they require. Effective help seeking is viewed as an important strategy that contributes to self-regulation and vice versa. Teachers may feel overwhelmed or feel lacking the time to meet with their primary health care provider, particularly considering the increased workload and issues of work-life balance presented in the literature (CTF, 2014; STF, 2013).

5.6 Coping strategies

The ability of an individual to cope with a stressful situation or event is important as it renders the said situation less stressful (Brook, 1993 cited in Jurji et al., 2018). Furthermore, Jurji et al. (2018) define coping as the cognitive and behavioural methods used to master or reduce internal or external demands that they may be faced with and cause conflict. From the results the teachers highlight some coping strategies that are common to them, which include resilience and positive attitude, healthy work environment and social support.

5.6.1 Resilience and positive attitude

Resilience may be viewed as the teachers’ ability to maintain positive qualities and professional commitment when faced with a variety of challenges that form part of teachers’ everyday work. Teachers in possession of characteristics of resilience traits find it easier to adjust in new and unfamiliar environments and are less likely to leave the teaching profession (Roffey, 2012).
Also, maintaining a positive attitude is very important in dealing with the challenges of working in the under-resourced secondary schools. The findings from in-depth interviews have revealed that one of the first significant approaches adopted by the teachers is the change of attitude. Rather than see the challenges as “burden”, most teachers rather develop a more contentment attitude, a sense of happiness and contentment that made it easier for them to see more interesting and less challenging aspects of the job. Through such approach, they also felt empowered and were able to accept their situation better. Optimism and positive thinking are considered to be a good coping strategy in an effort to deal with stress in a more effective way (Seligman, 1990; Santrock, 2003). These authors view optimism as a matter of how an individual interprets causes of bad events.

5.6.2 Healthy work environment

The findings from in-depth interviews have revealed that teachers find comfort in the support they were receiving from their colleagues. In order to cope with the accumulated stress at their job, teachers tend to discuss their problems with their family members, friends or colleagues (Aldrup et al., 2017). The participants emphasised the importance of having relations with colleagues. This is consistent with the findings from literature review as Khan and Heaphyn (2014) observe that relationships deepen the meaningfulness of work through social identification. Also, as Mulaudzi (2018) reveals, teachers experiencing problems were more likely to talk to their friends, family, and fellow teachers. In addition, due to power dynamics, teachers were less likely to talk to their principals about their stressors as they may be the cause of the stressors. Furthermore, teachers are more likely to relate to one another’s problems in ways that friends and family outside the profession may not.

5.6.3 Social support

The concept of social support is defined as “the perception and actuality that one is cared for, has assistance available from other people, and that one is part of a supportive social network” (Taylor, 2011, p.192). The findings from in-depth interviews have revealed that support from friends and family enhances teachers’ work performance and improves their mental health and well-being. The participants highlighted that it is important to seek support and people can only support an individual who voice out his/her concerns.

Furthermore, family, friends, and significant others are considered common sources of social support (Taylor, 2011). Literature affirms that there is an existing connection between teachers’
mental health and social support (Ferguson et al., 2017). As Richards (2012) observes, relying on the relationships of friends and family helps teachers to cope with their day-to-day stressors. Also, Leung et al. (2009) notes that teachers with high levels of stress management, also reported higher levels of coping resources, including social supports, when compared to their peers with lower levels of stress management. The hypothesis that social support can mediate the effect of stress was proposed some decades ago (House, 1981). As Greenglass (1993) states, social support serves three distinct functions for an individual. First, interpersonal relationships may contribute to health because they are a source of acceptance and intimacy, such as emotional support. Second, there is consensus that social support may provide useful information, advice and guidance, such as informational support. Third, people may assist with providing financial assistance, goods, or services like instrumental support.

Although there is literature regarding social support of teachers, there is however mixed results with regards to the extent to which social support assist teachers to help reduce mental health problems. According to Qin and Wiehong (2007), support from a teacher’s supervisor is the most effective in alleviating stress and feelings of emotional exhaustion, and reduced accomplishment, while support from family and friends is the most effective in mitigating depersonalisation. There is also an emerging body of research looking at the impact of social media and online communities as a form of social support. For instance, Deryakulu and Olkun (2007) reveal that an online discussion community for teachers can provide emotional and instrumental support. As Leung et al. (2011) observe, novice teachers in Hong Kong reported that online discussion forums acted as a form of stress management.

5.7 Strengths of the study

5.7.1 The findings of the current study have a lot of value. It helps document mental health and well-being of teachers during a time of increasing socio-economic change, as well as the COVID-19 pandemic. It also helps document how teachers within a contemporary South African context in under-resourced rural secondary schools deal with challenges and different factors that have an impact on their mental health and performance. Such findings might have a very real positive effect on informing the Department of Basic Education on teacher related stress/mental health, which may help to minimise levels of stress and increase job satisfaction amongst teachers and promote mental health awareness.

5.7.2 The second significant value of the study is the role of filling the gap about mental health awareness and well-being of teachers because most studies focused on learners. By studying
the mental health and well-being of teachers in Bushbuckridge, this study has filled that gap. It has also deepened the understanding of mental health among teachers and the challenges they encounter by working in under-resourced rural schools.

5.7.3 The study’s findings regarding the teachers’ coping strategies in dealing with challenges within schools in Shatale circuit Bushbuckridge Municipality is a testimony of teacher resilience. It is an indication that teachers can be resilient amid the different factors and challenges they encounter.

5.8 Limitations of the study

5.8.1 The researcher acknowledges that the sample utilised was limited and only included teachers in Shatale circuit Bushbuckridge Municipality, Mpumalanga Province. Therefore, the results should be interpreted with caution as they cannot be generalised to a larger population other than the one used in this study.

5.8.2 The study was conducted with secondary school teachers from two different schools. It could be possible that similar studies conducted with primary school teachers may produce different results.

5.8.3 There is lack of diversity in the sample used in the study, as the sample is only limited to nine participants from under-resourced secondary schools and only four being male. Therefore, the sample may not reflect the findings of other demography.

5.9 Recommendations

Based on the key findings presented above the study recommends that:

5.9.1 Schools through the department of education should put in place emotion-focused programmes to assist teachers, whenever they show signs of being overworked or showing signs of mental health problems.

5.9.2 Workshops and seminars should be organised regularly in rural schools to introduce and remind teachers of the importance of mental health and well-being. There is also a need of offering or introducing strategies that would reduce the mental health strain and empower the teachers with motivation to do their job and value their work and the impact they have on the learners and significant others in their lives.

5.9.3 An Employee Assistant Programme (EAP) should be established for public school teachers who are experiencing different factors that impact on their mental health and/or well-being and their work performance. The EAP would assist teachers with mental health problems
in the form of therapy organisation of team building, fitness clubs and advice on how they should have a balance between work and personal life.

On future studies, the current study recommends that:

5.9.4 A quantitative study should be conducted on a larger sample to further explore the mental health awareness and wellbeing of teachers in the rural areas, specifically in Mpumalanga Province.

5.9.5 A study that concentrates on the perceptions of primary school teachers is recommended as it may yield different results/findings.

5.10. Conclusion

This chapter presented a discussion of results and made conclusions based on the research findings. Although there has been research conducted on mental health and well-being of teachers, there has not been one conducted in Shatale circuit Bushbuckridge Municipality, Mpumalanga Province. The aim of the study was to explore mental health awareness and well-being of teachers in under-resourced rural secondary schools, as well as the impact of job performance.

Participants highlighted different perspectives relating to mental health and well-being of teachers. It became evident in this study that the teachers’ understanding of mental health was associated with environmental factors and biological factors. The participants had similar perception on the understanding of mental health. The understanding of mental health by the participants revolved around how a person behaves or reacts to situations and/or to a particular problem. Also, they explained mental health as a state at which the individual’s well-being and health are balanced, as well as the ability to take things and think positively. Cultural conceptualisation or beliefs also influenced participants’ perceptions as some of them highlighted that witchcraft or sorcery was a huge contributing factor to the mental health problems of teachers. Although teachers showed their awareness of mental health, it was evident that mental health education should be prioritised to assist the teachers not only in making teaching and learning more desirable but in also improving their health and well-being. The findings also suggested that participants were unlikely to seek help from private health professionals, as they were seen as expensive. The findings also suggested that participants are also unlikely to seek help from public health professionals, as they were seen as less effective than private health professionals.
As part of their role, the teachers highlighted that they perceive themselves as individuals who have to play different roles such as care giving, instructing and role-modelling the learners and the community. They further highlighted that this puts pressure on them to be always in their best behaviour and it can be challenging. The socio-economic background of the learners took a great toll on the participants. Participants use their own funds to sponsor the learners with materials needed.

Thus, different factors impacted on the mental health of teachers. Participants put emphasis on how they have never attended mental health talks/seminars, either hosted by the Department of Education or their schools. There is a need for mental health awareness and psychological services in rural schools. Furthermore, the mental health and well-being of teachers should be prioritised. Due to the different factors experienced by the teachers, their work performance become affected in one form or another, because they are not as enthusiastic as they were when they started in the profession. However, despite these seemingly insurmountable challenges the teachers encounter, they have resilience and coping mechanisms which they use.
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Appendix 1: Ethical clearance certificate

10 November 2020

Miss Kghliso Antoineth Dibakoane [218064754]
School Of Applied Human Sc
Howard College

Dear Miss Dibakoane,

Protocol reference number: HSSREC/000018122/2020
Project title: Exploring mental health awareness and psychological wellbeing of secondary school teachers working in under resourced rural schools.
Degree: Masters

Approval Notification – Full Committee Reviewed Protocol

This letter serves to notify you that your response received on 31 October 2020 to our letter of 12 October 2020 in connection with the above, was reviewed by the Humanities and Social Sciences Research Ethics Committee (HSSREC) and the protocol has been granted FULL APPROVAL

Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment/modification prior to its implementation. In case you have further queries, please quote the above reference number. PLEASE NOTE: Research data should be securely stored in the discipline/department for a period of 5 years.

This approval is valid for one year until 10 November 2021
To ensure uninterrupted approval of this study beyond the approval expiry date, a progress report must be submitted to the Research Office on the appropriate form 2 - 3 months before the expiry date. A close-out report to be submitted when study is finished.

All research conducted during the COVID-19 period must adhere to the national and UKZN guidelines.

HSSREC is registered with the South African National Research Ethics Council (REC-040414-040).

Yours faithfully

[Signature]

Professor Dipane Hlaelele (Chair)

/dd

Humanities & Social Sciences Research Ethics Committee
UKZN Research Ethics Office Westville Campus, Govan Mbeki Building
Postal Address: Private Bag X54001, Durban 4000
Tel: +27 31 260 8350 / 4457 / 3087
Website: http://research.ukzn.ac.za/Research-Ethics/

Founding Campuses: Edgewood Howard College Medical School Pietermaritzburg Westville

INSPIRING GREATNESS
Appendix 2: Informed consent form

Declaration:

I…………………………………………….. (Full names of participant) hereby give consent to participate in this study as indicated in the information sheet.

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I also understand that I am at liberty to withdraw from the project at any time should I so desire and that the information that I provide will be anonymous, confidential and will only be used for research purposes.

Signature of participant: …………………

Researcher Signature: …………………

Date: ……………………………

Thank you in advance for your cooperation.

Regards

Ms. Kgahliso Antoineth Dibakoane

Researcher

E-mail: anto.kgahli@gmail.com/218064754@stu.ukzn.ac.za

Cell: 0794605086
Appendix 3: Interview schedule

Introduction (Establish Rapport) My name is Kgahliso Antoineth Dibakoane and we will be having an interview session that will take us about 45 to 60 minutes.

1. Demographics
   o Age.
   o Gender.
   o Length of service.
   o Marital status.

2. What is your understanding of mental health among teachers?
   o Prompt with: how can you identify mental health problems among teachers?

3. What do you think is the cause of mental health problems among teachers?

4. What is the importance of mental health among teachers in a rural secondary school?

5. What do you think are your chances of having a mental health problem?
   o If you were to be diagnosed by a mental health problem, what would it mean to you?

6. Have you ever tried to seek out help regarding your mental health?

7. Do you usually attend mental health talks or seminars?
   o Prompt: if yes/no; How have they contributed in your awareness about mental health?

8. What are your coping strategies?

Closure: The researcher will summarise and reflect on the interview.

Appendix 4: Psychologist Approval letter
To whom it may concern

This letter serves to confirm that Kgahliso Antoineth Dibakoane student no: 218064754 will refer research participants for psychological intervention at Mapulaneng Hospital (Psychology Unit) should the need arise. The research study is titled: Exploring mental health awareness and psychological wellbeing of secondary school teachers working in under resourced rural schools.

For further enquiries contact: 013 799 0214/EXT: 1140

B. Mthango
Clinical psychologist
PS: 0133906

Appendix 5: Social worker approval