

**PSYCHOLOGICAL VIOLENCE AS WORK TRAUMA
IMPACTING ON TEACHERS' HEALTH IN LESOTHO:
GUIDELINES FOR TEACHER SUPPORT FOR HEALTH
PROMOTION**

Malineo Agnes Matsela

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DECLARATION

I Malineo Agnes Matsela hereby declare that *psychological violence as work trauma impacting on teachers' health in Lesotho: Guidelines for teacher support for health promotion* is my own original work. It is being submitted for the PHILOSOPHAE DOCTOR degree to the Potchefstroom campus of the North West University. All the sources I have used or quoted have been indicated and acknowledged.

.....

Malineo Agnes Matsela

.....

Date

DEDICATION

I dedicate this thesis to the following most important people in my life:

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My Loving husband, Simon Moqhali Matsela, who literally put me on the road to pursue this dream, for the love and unwavering support he provided me during my studies and for being both a wonderful father and mother to our children while I was away from home. Thank you love, I am indebted to you.

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OPSOMMING

Die doel van die studie was om die voorkoms, erns, oorsprong en impak van psigologiese geweld as werktrauma op die gesondheid van onderwysers in Lesotho te ondersoek. 'n Verdere doelstelling was om riglyne te ontwikkel vir onderwysondersteuning wat kan lei tot gesondheidsbevordering. Om hierdie doelstellings te bereik, fokus hierdie studie meer spesifiek op die volgende: dit ondersoek eerstens die voorkoms van psigologiese geweld teen onderwysers by hoërskole in Lesotho; tweedens ondersoek dit die erns van psigologiese geweld soos onderwysers dit ervaar; derdens ondersoek dit die oorsprong van psigologiese geweld teen onderwysers; in die vierde plek poog dit om die impak van psigologiese geweld as werktrauma op onderwysers se gesondheid te bepaal, en laastens word riglyne ontwikkel wat ondersteuning aan onderwybers bied om hul gesondheid te bevorder.

Navorsingsmetodes wat beide kwalitatiewe sowel as kwantitatiewe benaderings insluit, is gebruik om data in te samel vir hierdie studie. Hierdie tipe navorsingsontwerp is gebruik omdat dit die navorser toelaat om dieper ondersoek op die navorsingsprobleem in te stel en ook om 'n groot aantal deelnemers te bereik. Kwantitatiewe data is verwerk met behulp van beskrywende statistieke en faktoranalise. Die kwalitatiewe data is verkry deur die gebruikmaking van fenomenologiese onderhoude, tesame met 'n simptome-kontrolelys en die oop vrae van die psigologiese geweldskaal. Data is in hoof- en sub-kategorieë verdeel.

Bevindings van die studie toon dat psigologiese geweld teen onderwysers tot 'n groot mate voorkom. Die studie wys verder daarop dat psigologiese geweld wat deur onderwysers ervaar is, 'n baie ernstige impak gehad het op al die vyf kontekste van hul bestaan, naamlik die biologiese-, psigologiese-, spirituele-, ekologiese- en metafisiese en kan beskryf word as werkstrauma. Psigologiese geweld wat deur onderwysers ervaar word, vind tot 'n groot mate oorsprong by die bestuur van skole, kollegas van gelykwaardige status, ouers, die gemeenskap, en in 'n mindere mate by studente (leerders).

Bevindings van die studie dui verder daarop dat ouer onderwysers wat langer in die onderwys is, meer psigologiese geweld ervaar as jonger, minder ervare onderwysers.

Die studie dui ook daarop dat beide geslagte onderwysers psigologiese geweld ewe veel ervaar.

Die bevindings van die kwalitatiewe en kwantitatiewe ondersoek is saamgevoeg en op grond hiervan en die literatuurstudie, is riglyne vir die ondersteuning van onderwysers ontwikkel. Riglyne is soos volg gekategoriseer: riglyne vir die ondersteuning van onderwysers vir die psigologiese geweld wat hulle ervaar en riglyne vir die ondersteuning van onderwysers vir die impak van psigologiese geweld wat hulle ervaar.

Op grond van die studie word aanbeveel dat ondersteuningsprogramme ontwerp en aan onderwysers beskikbaar gestel word om hulle te help om psigologiese geweld en die impak wat dit op hulle gesondheid het, te hanteer. Verder word aanbeveel dat 'n holistiese gesondheidsbevorderingsbeleid geïmplementeer word in die verskillende ministeries se departemente van mannekragbestuur. Ten slotte word aanbeveel dat indiepte navorsing gedoen word van psigologiese geweld en die impak daarvan op al die vlakke van onderwys in Lesotho, beginnende by die voorskoolse vlak tot op die tersiêre vlak.

Ten slotte: hierdie studie het die voorkoms, erns, oorsprong en impak van psigologiese geweld teen onderwysers bepaal. Dit het verder die traumatiese impak wat die psigologiese geweld op hulle het, bepaal. Die studie toon dat onderwysers ondersteuning nodig het om hul ervaring van psigologiese geweld te hanteer en om hulle eie gesondheid te bevorder.

SLEUTELTERME: Geweld, psigologiese geweld, afknouery, molestering, werktrauma, gesondheid, gesondheidsbevordering, onderwysers

ABSTRACT

The purpose of this study was to investigate the prevalence, severity, source and impact of psychological violence as work trauma on the health of teachers in Lesotho and to further develop guidelines for teacher support for the promotion of their health. In order to achieve this aim, the study focused on the following specific aims: firstly, it set out to investigate the prevalence of psychological violence against teachers, in the secondary and high schools in Lesotho. Secondly, to examine the severity of psychological violence experienced by teachers. Thirdly, to investigate the sources of psychological violence for teachers. Fourthly, establish the impact that psychological violence has as work trauma on teachers' health and finally on the basis of the findings to develop guidelines for teacher support in order to promote their health.

The mixed method research design was used to gather data for the study. This involved the use of research methods from both qualitative and quantitative approaches. Mixed method research design was used because it allowed for a deeper investigation of the research problem and to reach a large number of respondents. Quantitative data was subjected to descriptive statistical analysis and factor analysis. On the other hand the qualitative methods involved the use of phenomenological interviews together with the symptoms checklist, and open ended question from the psychological violence scale. Data from these methods was organized into categories and sub-categories.

The findings from this study indicate that psychological violence against teachers is highly prevalent. It further emerged that the psychological violence they experienced had a serious impact on all of the five contexts of their existence namely biological, psychological, spiritual, ecological and metaphysical contexts that can be regarded as work trauma. The sources of psychological violence experienced by teachers are the management of schools to a large extent, followed by colleagues of equal status and parents, community and the students to a lesser extent.

The findings further indicate that the longer serving and older teachers experience more psychological violence than younger teachers who are coming into teaching service.

It also emerged that there was no gender differences in terms of the experience of psychological violence, thus men and women experience psychological violence equally.

Findings from both the qualitative and quantitative research methods were synthesized and on the basis of the conclusions drawn and the literature search, guidelines for teacher support were developed. The guidelines were categorised as follows, guidelines for teacher support based on the teachers' experiences of psychological violence and guidelines for teacher support based on the impact of psychological violence they experienced.

In the light of the findings the study recommends that, teacher support programmes should be put in place in order to address issues of psychological violence and its impact on teachers' health. It further recommends that a holistic health promotion policy be implemented within the human resource management departments in the various ministries. Finally an in-depth research study of psychological violence and its impact should be undertaken at all levels of education in Lesotho, starting from early childhood care level up to the tertiary level.

In conclusion the study established the prevalence, severity, source and impact of psychological violence against teachers. It further established the traumatic impact of their experiences. The study has revealed that due to their experiences of psychological violence teachers need support in order to promote their health.

KEY TERMS: Violence, Psychological violence, Bullying, mobbing, work trauma, health, health promotion, teachers.

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CHAPTER ONE

ORIENTATION TO THE RESEARCH

1.1 Introduction

This chapter presents the orientation to the study. Teachers are subjected to stressful lives in their workplaces, yet they have a major responsibility of providing education that prepares the country's future working force that would contribute to the economic development of the country. The unpleasant experiences that teachers face in their workplaces emanate from various sources. These are the management, colleagues, students, parents and the communities. Furthermore, the severity of these experiences is observed on the impact they have on teachers' health which manifests itself in both physical and psychological illnesses such as heart problems, stress headaches and other related health risks (Dunham, 2001: 145).

The foregoing argument notwithstanding, the specific research literature on psychological violence and its impact on teachers' health in the Lesotho secondary and high schools is lacking. Therefore, the central concern of this study is to investigate the prevalence, severity, sources and the impact of psychological violence as work trauma on teachers' health in the Lesotho secondary and high schools and to further provide the guidelines for the promotion of their health.

1.2 Motivation and statement of the problem

Teachers are identified amongst the workers who experience significant degrees of psychological violence (Di martino *et al.*, 2003:37). This results in a situation where teachers feel trapped by the abusive colleagues and management and they get distressed by their unpleasant experiences and consequently suffer from trauma. Psychological violence in the schools also affects the most self confident and conscientious teachers (Hall, 2005:47).

Blasé and Blasé (2003:368) indicate that teachers are also increasingly becoming victims of learners' violence in the schools, which leaves them stressed and trauma-

tized. Unfortunately this relentless abuse negatively affects their self-confidence professionally and personally, leading to various health problems.

Despite this situation, psychological violence in the work place has only received due attention in the last few years with most of the psychological violence research undertaken in the health sector. There has been very little research on psychological violence in the workplace undertaken and none has been undertaken in Lesotho. However, countries of Europe, Asia and Australia have lately, researched and debated on this issue (Sheehan *et al.*, 1999; Di Martino, 2003:1; Liefoghe, 2004:265).

The assumption is often made that, the lack of high publicity regarding this issue is caused by the fact that, only a few victims of psychological violence report their experiences of psychological violence such as threats and harassment. Furthermore, ignorance on the part of victims regarding their rights seems to play a major role towards unreported events (Perimaki-Dietrich, 2002:18).

According to Namie and Namie (2003:1) and Sheehan *et al.* (1999:52) Heinz Leymann is the founder of international anti-bullying movement in the workplace. Leymann was concerned with how psychological violence impacts on individual's health. He established the world's first work trauma clinic in Sweden in the 1980's. This is where he reported on the trauma that results from sustained psychological terrorization in the workplace. He termed psychological violence as mobbing, but the pioneering British journalist, Andrea Adams brought up a new term, bullying, which she applied to adult misery.

Psychological violence leads to work trauma. This is seen in the symptoms of ill health that are experienced by the victims. Therefore this study sets out to investigate the prevalence, severity; source and impact of psychological violence as work trauma on the health of teachers in Lesotho and on the basis of the findings guidelines for teacher support are to be developed.

On the basis of the foregoing discussion, the research questions which guided this study were formulated as follows:

- What is psychological violence as work trauma in the workplace?
- Does psychological violence as work trauma in the workplace have any impact on the health of the victims?

- What is the prevalence of psychological violence as work trauma amongst teachers in Lesotho?
- What is the severity of psychological violence as work trauma experienced by teachers in Lesotho?
- What are the sources of psychological violence as work trauma experienced by teachers in Lesotho?
- What is the impact of psychological violence as work trauma on teachers' health in Lesotho?
- What guidelines for teacher support can be developed for health promotion of teachers?

1.3 Aims of the study

1.3.1 The general aim of the study

The general aim of this study was to investigate psychological violence as work trauma and its impact on the health of teachers in Lesotho. The findings of this study provided the basis for the development of guidelines for teacher support for the promotion of teachers' health in chapter 6.

1.3.2 The specific aims of the study

The specific aims of this study are to:

- Investigate through a literature study what psychological violence as work trauma is;
- Investigate through a literature study if psychological violence as work trauma has any impact on the health of victims;
- Determine the prevalence of psychological violence against teachers in the secondary and high schools in Lesotho;
- Examine the severity of psychological violence as work trauma experienced by teachers in the schools in Lesotho;
- Investigate the sources of psychological violence as work trauma experienced by teachers in Lesotho;
- Establish the impact that psychological violence has as work trauma on teachers' health in Lesotho;

- Develop guidelines for teacher support in order to promote teachers' health.

1.4 Hypotheses

1.4.1 Main hypothesis

Psychological violence as work trauma has a severe impact on the health of teachers in Lesotho.

1.4.2 Sub-Hypotheses

1.4.2.1 Psychological violence in the workplace leads to work trauma.

1.4.2.2 Psychological violence as work trauma has severe impact on the health of the victims.

1.4.2.3 Teachers in the secondary and high schools in Lesotho experience psychological violence as work trauma.

1.4.2.4 The sources of psychological violence as work trauma are the Management/ superiors in the schools, colleagues of equal status, students, parents and the community.

1.4.2.5 Psychological violence as work trauma has severe effects on the health of teachers in Lesotho.

1.4.2.6 Guidelines can be developed to address the experiences and the impact of psychological violence as work trauma on the health of teachers in Lesotho.

1.5 Method of study

Research questions was answered as follows:

- What is psychological violence as work trauma in the workplace?

A literature study in the following fields was undertaken, Education, Educational Psychology, Industrial Psychology, Organisational Psychology, Positive Psychology, Human Resource Management, Sociology, Physiology, Medical Science, Economics, Philosophy, Spirituality, Psychiatry, Religion and Law.

- Does psychological violence in the workplace have any impact on the health of the victims?
A literature study was undertaken in the fields of Education, Educational Psychology, Industrial Psychology, Organisational Psychology, Positive Psychology, Human Resource Management, Sociology, Physiology, Medical Sciences, Economics.
- What is the prevalence of psychological violence among teachers in Lesotho?
The prevalence of psychological violence was measured through quantitative and qualitative research methods. The quantitative part of the study utilized a psychological violence scale while the qualitative part utilized phenomenological interviews together with the symptoms checklist and an open ended question from the psychological violence scale.
- What is the severity of psychological violence experienced by teachers in Lesotho?
The severity of psychological violence was also measured through the quantitative and qualitative research methods. The quantitative part of the study will utilize a psychological violence scale while the qualitative part utilized the phenomenological interviews together with the symptoms checklist and an open ended question from the psychological violence scale.
- What are the sources of psychological violence against teachers in Lesotho?
The sources of psychological violence will be determined through the quantitative and qualitative research methods. The quantitative part employed the psychological violence scale. The qualitative part utilized the phenomenological interviews and an open ended question from the psychological violence scale.
- What is the impact of psychological violence as work trauma on teachers' health in Lesotho?
The impact of psychological violence as work trauma on the health of teachers was measured with both the quantitative and qualitative research methods. The psychological violence scale from the quantitative research design was used together with phenomenological interviews, an open ended question in the psychological violence scale and symptoms checklist from the qualitative research part of the study.

- What guidelines for teacher support can be developed for health promotion of teachers?

Research findings related to both the experience and the impact of psychological violence as work trauma provided the basis for the development of guidelines for teacher support for health promotion. Literature from the following research fields will be used to draw the guidelines for health promotion of teachers: Education, Educational Psychology, Industrial Psychology, Organisational Psychology, and Positive Psychology. Human Resource Management, Sociology, Physiology, Medical science, Economics, Philosophy, Spirituality, Psychiatry, Religion, Law and Counselling Psychology.

1.6 Paradigmatic perspective

The paradigmatic perspective of the researcher is the world of experience that defines for the researcher, the nature of the world, the individual's place in it and the general or some specific view of the world and the range of possible relationships to that world and its parts (Denzin & Lincoln, 1994:107).

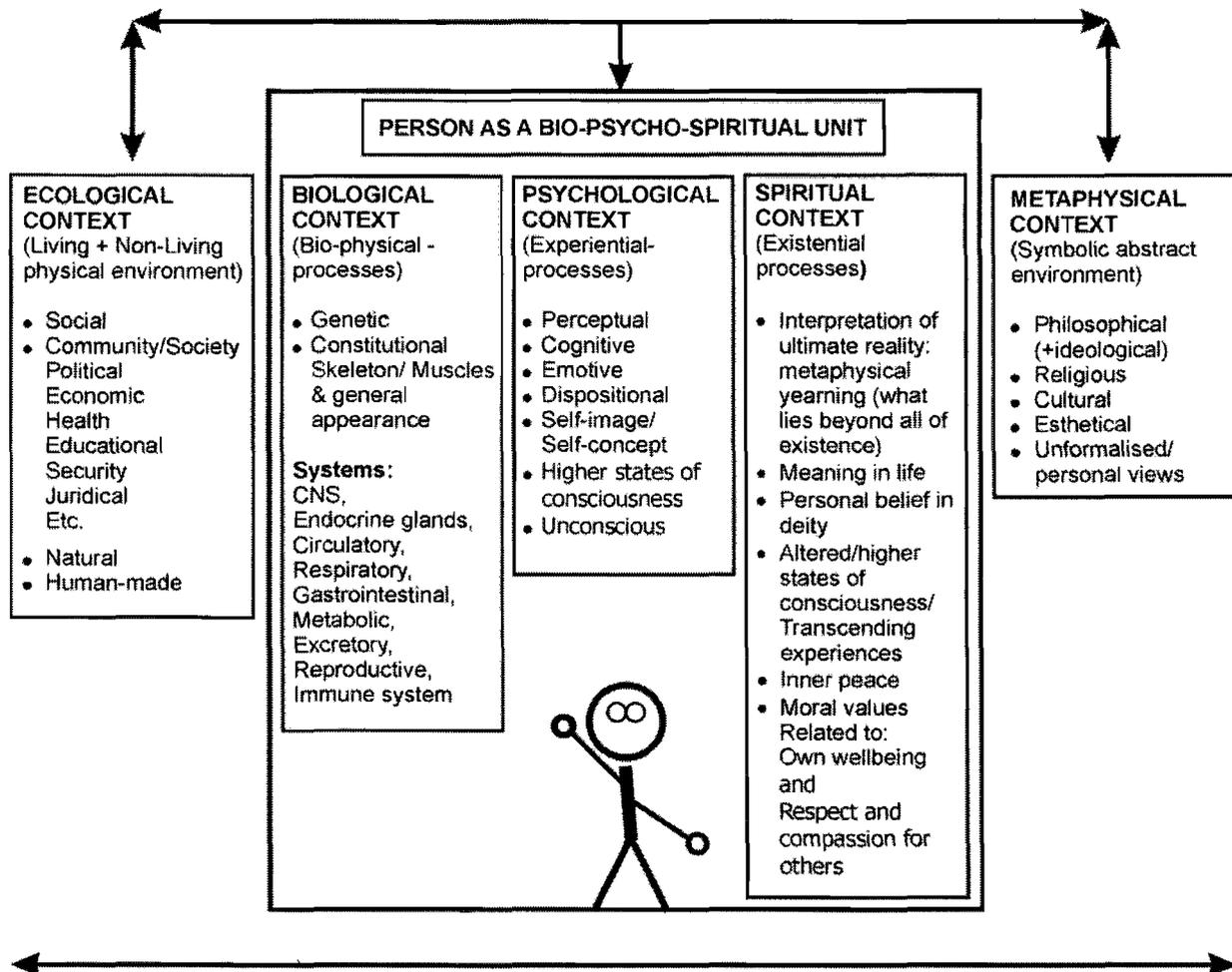
1.6.1 Paradigm

The word *paradigm* as described in Webster (*in Modise, 2003:6*) comes from the Greek language and it refers to a model, theory, perception, assumption or frame of reference (Covey *in* Kirsten, 2001:10; Modise, 2003:6). This generally refers to the way people perceive their world, understand it and interpret their experiences in the world. The researcher's paradigm has a direct bearing on the planning execution and findings of research. (Kirsten 2001: 10; Denzin & Lincoln, 1994:107)

The paradigmatic perspective from which the researcher in this study approaches the research problem is that of eco-systemic theory. This is expounded by Jordaan and Jordaan (1998) and further presented by Kirsten *et al.* (2009) According to their view a teacher as an individual is seen and studied as a whole system consisting of five contexts, being the ecological, biological, the psychological, the spiritual and the metaphysical. According to Kirsten *et al.* (2009:11) all the contexts are holistically involved in the life of the human being. Therefore existence without some other context is inconceivable. The holistic eco-systemic view of the health, well being and wellness, serves as a model and frame of reference that contain inherent assumption that

facilitate perception, understanding and interpretation of the selected domains of research of this study. The five contexts of human existence are presented in figure 1.1

FIGURE 1.1: INTRA- AND INTERACTIVE CONTEXTS OF HUMAN EXISTENCE



Source: Kirsten, *et al.* 2009:10

1.6.2 Theoretical assumptions

The following is a summary of theoretical assumptions for this study:

- Five contexts of existence are identifiable in the life of a teacher as a whole being namely; biological, psychological, spiritual, ecological, and metaphysical contexts and they are in constant intra- and interactive (Kirsten *et al.*, 2009:11). Human beings function in these five contexts.
- These five contexts can serve as potential sources and contributors to psychological violence and its impact as experienced by teachers.

- The impact or effects of psychological violence are experienced in all the five contexts.
- Health does not only refer to the biological realm but it also refers to the psychological, ecological, spiritual and metaphysical environments.
- Research endeavours aimed at identifying the nature experience and prevalence of psychological violence and its impact on the health of teachers can help to accurately predict, prevent and alleviate the unpleasant experiences and their impact.
- Health promotion strategies and models will provide and support guidelines to promote the health of teachers and can also form part of a whole school development which can contribute to a healthy school development.
- Healthy school development can contribute to the development of a holistically healthy population both in the present and in the future in order to maintain teaching and learning.
- Healthy school development can contribute to the establishment of a Health Promoting School.

1.7 Clarification of concepts

Several concepts are inherent in this study and they are clarified in the following section.

1.7.1 A holistic eco-systemic view of health, wellbeing and wellness

In this study the holistic eco-systemic view of health wellbeing and wellness was used as a conceptual framework to study the world of experience of teachers and their experience of psychological violence and its impact on their health. This view articulates that people's health is inextricably intertwined with community health and natural environment health. It describes human beings' existence in five contexts, namely, biological, psychological, ecological, spiritual and metaphysical (Kirsten, 2001:34; Jordaan & Jordaan, 1998:38-41; Jordaan & Jordaan, 1989:40-46; Kirsten *et al.*, 2009:28). It further states that the effects of stress and the impact of psychological violence in the context of this study occurs in these five contexts. Theoretically, the five contexts are separable however, in practice these are intertwined and therefore any

change in one context affects other contexts as well. Furthermore a stressor can originate from any one of the five contexts and the effects of a stressor can also be experienced in any of the contexts or all of them at the same time.

1.7.2 Psychological violence

There are various definitions of psychological violence evolving in the research literature. It is important to understand psychological violence within the broad concept of workplace violence, hence the need to start by defining workplace violence.

Workplace violence is defined as;

... any incident, in which a person is abused, threatened or assaulted in circumstances relating to their work. These behaviours would originate from customers, co-workers at any level of the organisation. This definition would include all forms of harassment, bullying, intimidation, physical threats / assaults, robbery and other intrusive behaviour (ILO-1999: 1).

Workplace violence manifests itself in two forms, namely: physical violence and psychological violence. Physical violence refers to physical attacks such as hitting and shoving and other threatening behaviour like destroying and throwing objects. While Psychological violence is defined as a form of negative behaviour or action in the relations between two or more people. It is characterized by aggressiveness, which is sometimes repeated and severe. It is often unexpected and has harmful effects on the safety, health and well being of employees and their workplace. While physical violence causes immediate and obvious physical injuries to the victim, prolonged exposure to psychological violence rather causes psychological injuries like posttraumatic stress disorder and anxiety attacks. Additionally, physical violence in the workplace has attracted more attention because of its immediate visibility and yet psychological violence is as equally detrimental to the workers' health (Perimaki -Dietrich, 2002:18-19; Tehrani, 2001: 4; Randall, 2001:8).

In the research literature several concepts are identified as components of psychological violence and the definition of psychological violence advanced above relates to them as well. In the context of this study these concepts (presented in chapter 2) shall

be understood as building blocks of the phenomenon of psychological violence. They are as follows:

- Bullying
- Harassment
- Workplace deviance
- Workplace aggression
- Generalized workplace abuse
- Workplace incivility
- Abusive supervision
- Ethnic Harassment
- Emotional abuse at work
- Mobbing
- Intimidation
- Victimization

There are different views on what exactly constitutes workplace psychological violence in the literature. The understanding of what constitutes psychological violence is largely dependent on the nature and perceptions of ones' job as well as the context of one's study. Thus the interpretation of what psychological violence is and what it is not is shaped by the researcher's cultural and research orientation. Nevertheless there are consistencies in the behaviours that describe this phenomenon. The fundamental issue is systematic psychologically damaging mistreatments of individuals. Therefore behaviours that constitute psychological violence in the workplace can be identified despite the use of different concepts to label the same thing (Di Martino *et al.*, 2003:3-4).

1.7.3 Work trauma

Work trauma is the kind of distress emanating from psychological violence from one's workplace. Trauma is observed in the person's inability to continue to carry his or her normal healthy functions. These normal functions are assessed with reference to cognitive functioning, happiness and capability. It also shows on the negative impact on the victim's health which is seen in health problems, for example, depression

headaches and loss of sense of purpose. Moreover work trauma involves a feeling of helplessness when a person's life, integrity and sanity are threatened. This occurs when a person's familiar ideas about the world are violated which leaves the person both confused and insecure. Work trauma is also observed when institutions and people that one depends on for survival violate or betray the person in some unforeseen way as happens in abusive workplaces (Rick *et al.*, 1998:21; Tehrani: 2004a).

1.7.4 Health promotion

Health promotion originates from the Ottawa Charter for Health promotion of 1986 whose objective was the achievement of Health for All by the year 2000 and beyond. It defined health promotion as the process of enabling people to increase control over their health and to improve their health in order to reach a state of complete physical, mental and social wellbeing. An individual or group must be able to identify and to realize their aspirations, to satisfy their needs and to change or cope with the environment (Ottawa Charter for Health Promotion, 1986).

Health promotion encompasses all activities which are intended to prevent disease and ill health and to increase wellbeing (Kemmer & Close, 1995:3). It is further conceptualized as the combination of educational environmental supports for actions and conditions of living conducive to health (Egger, *et al.*, 1999:5; Vergnani *et al.*, 1996).

Furthermore Health promotion is a social, educational and political action that enhances awareness of health, fosters healthy life-styles and community action in support of health. It aims at empowering people to exercise their rights and responsibilities in shaping environments, systems and policies that are conducive to health and well being. Furthermore, it is a multidisciplinary issue which depends not only on doctors and nurses and other medical professionals but also on other professions like teaching as well (Egger *et al.*, 1999:5; Vergnani *et al.*, 1996).

Health promotion forms the basis for workplace health promotion, embracing the same principles, approaches and conceptualization.

1.8 The structure and course of the study

Chapter one: This chapter acts as the orientation to the research and contains the problem statement and aims of the research.

Chapter two: This chapter describes the nature of psychological violence and work trauma. It describes psychological violence as it applies to the workplace. It further explores the concept of work trauma with a view to demonstrate the impact of psychological violence on the health of the victims. It also provides general global view on the prevalence of workplace psychological violence. Finally it provides a link between psychological violence and work trauma by describing the nature of work trauma resulting from psychological violence and how it presents itself on the health of victims.

Chapter Three: The chapter presents the conceptual framework for understanding the experiences and the impact of psychological violence on the health of victims. It also discusses the impact of psychological violence in the workplace on the health of victims within the five contexts of human existence, namely, the biological, psychological, spiritual, ecological and metaphysical contexts. It describes the concept of health promotion with a view to addressing psychological violence and the associated work trauma. The various conceptualizations of health promotion in the form of different modes and models of health promotion are described. Furthermore the key principles and different approaches to health promotion are outlined. Workplace health promotion as a category of health promotion is also discussed. This includes a description of approaches and some initiatives of workplace health promotion. Finally it describes the situation of health promotion in Lesotho in an attempt to situate the study in the context of development in the areas of promotion of teachers' health.

Chapter Four: This chapter discusses all the research designs and methods that were utilized to collect and analyze data in this study. It describes the mixed method research design and all the associated methods from both quantitative and qualitative research approaches.

Chapter Five: This chapter presents the findings of the two parts of the study. These are the qualitative and quantitative empirical research parts of the study. It also synthesizes the findings within the eco-systemic model of health and well being, within the five contexts of human existence as proposed in this model.

Chapter six: This chapter focuses on the development of guidelines for teacher support for their health promotion. On the basis of the literature and the research findings from both the quantitative and qualitative data the health promotion guidelines for teachers were generated. Two categories of themes were merged from both the qualitative and quantitative research findings, being the experiences and impact on health. The guidelines were developed on their basis. The two categories of guidelines are, firstly guidelines for teacher support concerning their experiences of psychological violence and secondly, guidelines for teacher support concerning the impact of psychological violence on the health of victims.

Chapter seven: This chapter presents the summary, limitations, conclusions and general recommendations and specific research recommendations from the study.

1.9 Summary

This chapter has presented an orientation and background to the study. It contains the problem statement, aims of the research, clarification of concepts, a brief overview of the research design and the researcher's paradigm. The next chapter presents the literature review on psychological violence and work trauma.

CHAPTER 2

THE NATURE OF PSYCHOLOGICAL VIOLENCE AND WORK TRAUMA

2.1 Introduction

Psychological violence in the workplace is an old phenomenon that has existed as long as there have been workplaces. However, the research in this area has only intensified in the last decade with most of it being carried out in the health sector. This therefore explains the many conceptualisations that are evolving in the understanding of what psychological violence in the workplace is and what it is not. Furthermore in the literature bullying has been widely used to refer to various forms of abuses and mistreatments that occur in the workplace. However, in the context of this study the term psychological violence instead of bullying is used therefore the definitions and conceptualizations advanced in this chapter should be understood in that light.

This chapter describes psychological violence as it applies to the workplace. This description presents the understanding that is shaping the current research in the area of workplace psychological violence. It further explores the concept of work trauma with a view to demonstrate the impact of psychological violence on the health of the victims. It also provides a general global view on the prevalence of workplace psychological violence. Finally, it provides a link between psychological violence and work trauma by describing the nature of work trauma resulting from psychological violence and how it presents itself on the victims. This review is intended to guide the empirical research for the study.

In reviewing the literature on psychological violence it has become apparent that this phenomenon has not yet been the focus of research in Lesotho. This implies that the prevalence, severity, source and the impact of psychological violence in the workplace has not been studied. Therefore, the literature reviewed in this chapter emanates largely from the research undertaken in the first world countries where the research in this area

is advanced and South Africa (in a small scale) where the research output in this area is still relatively low.

2.2 Brief historical background to psychological violence

The study of psychological violence in the workplace emerged in the 1990`s and it is still gaining further recognition internationally (Rayner & Keashly, 2005:271; Notelaers *et al.*, 2006:3). Studies in this area started in clinical work with severely traumatized individuals by Heinz Leymann, a German psychiatrist. He established the first trauma clinic in the 1980`s. Furthermore, he also reported on the trauma that occurs as a result of persistent psychological terrorization that occurs in the workplace. He estimated that 11% of the country`s suicides at the time, emanated from work related terrorization. Nevertheless, Andrea Adams who is viewed as the pioneer in the research on workplace psychological violence gave the new term bullying` to the same phenomenon. The seriousness of the nature of this phenomenon became evident to the public in the way she exposed it in the newspapers and other media (Lewis, 1999).

2.3 The nature of workplace psychological violence

Although research on psychological violence in the workplace is advancing there are various views given in the literature. Different authors and researchers describe it in terms of their research orientation and cultural orientation which actually determines how the phenomena is recognized and explained (Rayner *et al.*, 1999:2; Namie & Namie, 2000:3; Randall, 2001:9; Gilioli & Fingerht 2003:11; Omari, 2003:8; Sheehan, *et al.*, 2004). This is observed from the various definitions given in the subsequent paragraphs.

Firstly, in order to aptly understand psychological violence it is appropriate to start by defining violence. According to WHO (1998);

violence is the intentional use of physical force or power, threatened or actual, against another person or against oneself or a group of people which results in or has a high likelihood of resulting in injury or death, psychological harm, maldevelopment or deprivation. It is important to note that this definition includes structural violence as well where violence is a result of the workplace environment itself.

Following from this definition of violence Di Martino *et al.* (2003:4) define Psychological violence as *the intentional use of power against another person or group that results in harm to physical, mental, spiritual, moral or social development*. It is this type of violence that impairs the victim's psychological integrity.

This is similar to the definition given by Van Der Merwe (1989:3) who defines violence as the application of force, action, motive or thought in such a way (overt, covert, direct or indirect) that a person or group is injured, controlled or destroyed in a physical-psychological sense.

According to Namie and Namie, (2000:1) workplace psychological violence is also viewed as *repeated, malicious verbal treatment of a target by a harassing bully that is motivated by the wish to control the targeted individual*. The latter researchers further argue that this control is a combination of intentional humiliation and embarrassment of the target or interference with his or her work and withholding of resources and support with an objective of preventing the targeted individual from succeeding at work.

Einarsen *et al.* (2003:15) defines psychological violence (bullying) in the workplace means harassing, offending, socially excluding someone or negatively affecting someone's work tasks. In order to be psychological violence the activity has to occur regularly. Again, Einarsen *et al.* (1994:384) expounded on the definition of psychological violence and described it as a situation where one or more persons persistently, over a certain period of time, perceive themselves to be on the receiving end of negative actions from one or several people in their workplace. This is aggravated by the fact that the victim has difficulties defending himself or herself against such actions. According to them, psychological violence does not necessarily include incidents of sexual/racial harassment and this is the view which is also supported by Graves (2002:6). Nevertheless issues of sexual/racial harassment are still being implied in the definition by Einarsen *et al.* (1994:2.)

This definition is given around the parameters of frequency, longevity, reaction to the behaviours and power differences even though different authors try to emphasize different aspects of it (Rayner, *et al.*, 1999:3). It is important to note that the emphasis in this definition shifts the focus to power imbalances throughout the organization instead of only the individual victims and perpetrators (Lewis & Orford, 2005:44).

In South Africa, Steinman (2003:4) defines psychological violence as:

repeated and overtime offensive behaviours through vindictive, cruel or malicious attempts to humiliate, marginalize or undermine an individual or groups of employees and includes, but is not limited to psychological pressure, harassment, intimidation, threats, coercion, conspiracies, manipulation, extortion and unfair behaviours which could impact on the worth, dignity, emotional and physical wellbeing and health of the victim.

Kirsten (2007:2) adapted Steinman's (2003) definition and puts it concisely and in a more inclusive manner that;

Psychological violence may be construed as unwanted conduct based on age, disability, race, colour, language, religion, political, trade union, or other opinion or belief, national or social origin, association with a minority, birth or other status ... that negatively affects ... the worth, dignity, emotional and physical well-being and health of the victim.

From the above exposition of various conceptualizations of psychological violence, it shows that this phenomenon is not a minor misunderstanding and conflicts that occur daily. However, when such conflicts get out of control, a worker may find himself/herself in a prejudicial position where he or she ends up as a subject of stigmatization by his/her colleagues and management (Einarsen,1994:2). It is, therefore, concluded from these various literature sources that psychological violence is a highly dynamic process and therefore the presence of negative behaviours should be seen as the necessary part of the problem but not a sufficient feature to explain the phenomenon as a whole as shall be demonstrated in the subsequent sections (Rayner *et al.*, 1999:2; Namie & Namie, 2000:3; Tehrani, 2001:5; Randall, 2001:9; Einarsen *et al.*, 2003:2).

While scholarly debates continue and various definitions continue to evolve as indicated in the preceding paragraphs, it is clearly apparent from the literature that psychological violence occurring in the workplace is a serious problem (Jackson & Ashley, 2005).

In order to elucidate the various conceptualization of psychological violence in the research literature, Rayner and Keashly (2005:273) state that various definitions of psychological violence in the work place contain the following main elements:

- The experience of negative behaviours
- Behaviours that are experienced persistently
- Targets experiencing physical - psychological damage
- Targets labeling themselves as psychologically abused in the workplace
- Targets with less power and having difficulty defending themselves.

Workplace psychological violence is an escalating process in the course of which the person who is targeted ends up in an inferior position and becomes the victim of systematic negative social acts by others. It is evident, therefore, that a conflict cannot necessarily be labelled as psychological violence if two people of approximately equal power are in non destructive conflict (Rayner & Keashly, 2005:273).

2.3.1 The major concepts of psychological violence

In the research literature the concepts psychological violence occurring in the workplace and workplace bullying are used in a similar way to encompass all forms of psychological abuse taking place in the work place, which cause harm on the whole person of an employee (Hogh *et al.*, 2005). As mentioned in the introduction. Therefore, in the context of this study bullying is subsumed under psychological violence and therefore psychological violence instead of workplace bullying will be used. Furthermore, psychological violence will be used in a more inclusive manner to include other forms of unpleasant behaviours and experiences in the workplace that may not necessarily be labelled as bullying as shall be described hence forth:

As indicated in the previous section there is a wide range of views regarding what psychological violence entails with different countries using different labels for the same phenomenon (Vartia-Vaananen, 2003:8;Omari, 2003:9). For instance in Scandinavia, the term victimization is used while in Germany, Italy, Australia and France mobbing or psychological violence are used interchangeably. In the USA the concepts workplace harassment, workplace mistreatment and emotional abuse are used (Sprattlen, 1995; Keashly, 2001). In South Africa the concepts, bullying, mobbing and psychological

violence are used (Timo, *et al.*, 2000; Steinmann, 2003). Other concepts include psychological terrorisation (Leymann, 1990), workplace trauma and employee abuse (Wilson, 1991), workplace aggression, (Geffner, *et al.*, 2004:126), Neuman and Baron (2005), victimization, (Smith, Singer, Hoel & Cooper, (2003), Aquino & Bradfield (2000) and finally psychological harassment by Poilpot-Rocaboy (2006).

Einarsen *et al.* (2003:33) presents a comprehensive definition of the key concepts of psychological violence as identified in the research literature as described hence forth:

- **Harassment**

Brodsky (*in* Einarsen, *et al.*, 2003:33) describes harassment as repeated and persistent attempts by one person to torment, wear down, frustrate or get a reaction from another. It is a persistent negative treatment which pressurizes intimidates or otherwise discomforts. It is also described as any kind of unwanted behavior which may range from mildly unpleasant remarks to physical violence. It is further defined as an improper conduct directed at someone, that a reasonable person finds unwelcome, offensive and harmful. Harassment can come from a colleague, a supervisor, a subordinate, another person in the workplace or a member of the public.

- **Workplace deviance**

Robinson and Bennet (*in* Einarsen *et al.*, 2003:33) describes workplace deviance as voluntary behaviour that violates significant organizational norms and in so doing, threatens and risks the well being of the organization or its members, or both.

- **Workplace aggression**

It is described by Baron and Neuman (1996) and Neuman and Baron (*in* Fox & Spector, 2005:16) as the efforts by individuals to harm others with whom they work, or have worked or the organizations in which they are currently or previously employed. This harm is done intentionally and includes psychological and physical injury.

The defining features of aggression are firstly that, it involves intentional behaviour. Secondly, the nature of this intentional behaviour is to harm one or

more people. Thirdly, it involves both direct and indirect harming actions and finally victims of aggression are motivated to avoid such behaviours meaning that such behaviours are not invited by the victims (Robertson, 1993:27).

According to Baron (*in* Fox and Spector, 2005:17) and Robertson (1993), there are various key elements or dichotomies of aggression and these are described as follows:

- Physical - verbal
- active - passive
- direct - indirect

A physical dimension involves physical actions such as assault . It also involves unwanted touching or defacement of property. Verbal dimension causes harm and pain through words such as yelling at someone and shouting at them. It also involves unfair criticism leveled against the targeted individuals, as well as damaging gossip.

Indirect aggression is observed in situations where an actor inflicts harm on something or someone that the victim values or cares about. Direct aggression on the contrary, is seen through a direct harm on the victim.

Workplace aggression can be summarized as any form of behaviour directed by one or more people in a workplace with the intention of harming one or more people in the workplace in ways the intended target is motivated to avoid. The outlined features of aggression given in the foregoing paragraphs do apply to workplace aggression as well (Fox & Spector, 2005:18).

- **Generalized workplace abuse**

It is defined as violations of worker's physical, psychological and/or professional integrities. It is nonsexual, psychologically demeaning or discriminatory relationships in the workplace Richman *et al.* (*in* Einarsen *et al.*, 2003:33).

- **Workplace incivility**

This is low intensity deviant behaviour with ambiguous intention to harm the targeted individual, which violates the workplace norms for mutual respect. Uncivil

behaviours are characterized by rudeness and lack of courtesy instead displaying a lack of regard for other people (Andersson & Pearson *in* Einarsen *et al.*, 2003: 33).

- **Abusive supervision**

This is the situation in which supervisors display hostile verbal and non verbal behaviours (excluding physical contact) towards their subordinates (Tepper, 2000:178).

- **Ethnic Harassment**

This is a threatening verbal conduct or exclusionary behaviour that has an ethnic component and is directed at a target because of his or her ethnicity. These are behaviours that may be encountered on a daily basis and may contribute to a hostile environment, particularly for ethnic minorities (Schneider *et al.*, *in* Einarsen *et al.*, 2003:33).

- **Emotional abuse at work**

This refers to interactions between organizational members that are characterized by repeated hostile nonverbal, often nonphysical behaviours directed at a person(s), such that the target's sense of himself/herself is negatively affected (Keashly, 2001:232).

- **Mobbing**

According to Di Martino *et al.* (2003) and Sheehan *et al.* (2004) mobbing is a mistreatment of one person or a group of people by a group of people in the organization. Nevertheless in such circumstances there is a ring leader who will incite others to engage in an adversarial interaction with the target.

- **Intimidation**

It involves the use of violence or threats to force the person to do something they are not legally obliged to do or to prevent someone from doing what he has a right to do. Examples include, persistently following a person, depriving him/her of

objects he/she uses and watching his/her home or workplace (Di Martino *et al.*, 2003).

- **Victimization**

Victimization as a concept that describes people's unpleasant experiences in the workplace has been identified in the research literature (Aquino & Bradfield, 2000:525).

Victimization is defined as the individual's self perception of having been exposed to aggressive acts that emanate from one or more people in the workplace (Aquino & Bradfield, 2000:526).

In the context of this study, the concepts described in the foregoing, adapted from Einarsen *et al.* (2003:33) and the concept, victimisation as described by Aquino and Bradfield (2000:526) are used as components of psychological violence. Therefore, experiences and behaviours that fall within the description of each one of them are viewed as psychological violence. This is because an observation has been made from the research literature that studies that measure the same behaviours and experiences have been labelled with different concepts. Therefore, to bring together these seemingly fragmented but related concepts, psychological violence is used and it shall be understood as such throughout this study.

While these concepts are varied in their meanings the central core that binds all of them is systematic psychologically, damaging mistreatments of individuals by others in their workplace. When continued this may cause relentless social-psychological and psychosomatic problems in the victim (Einarsen, *et al.*, 2003:3). Therefore, the term psychological violence is used in this study, to encompass all the workplace mistreatments that could be explained with concepts that have been defined in this same section.

The next section discusses the features of psychological violence in the workplace. It does so in a manner that helps to exclude other normal conflicts that can occur at work.

- **Long -term duration:**

Although organizational intervention may cut the psychological violence period or the victim may decide to leave the organization, long term duration is nevertheless one of the prominent features of this phenomenon.

- **Power imbalance**

Power imbalance between the perpetrator and the victim results in power games where perpetrators use their power over their victims in order to undermine them for their own ends. This is the case despite the fact that psychological violence can take many forms, for example manager against employee, employee against manager, peer against peer, and customer against employee. This is because power can either be formal or informal. Thus formal power can be drawn from one's hierarchical position within an organization, such as in a manager to employee psychological violence. Informal power on the other hand can originate from personal contacts, organizational standing, experience and knowledge of the victim's vulnerabilities (Rayner & Keashly, 2005:277). This therefore explains why in some cases the subordinates can still abuse their managers or superiors.

As indicated, power imbalance between the perpetrators and the victims plays a very significant role in terms of continuous abusive behaviours. This is related to the victim's inability to defend himself/herself against unpleasant behaviours. As alluded to earlier, a minor, non persistent misunderstanding between people who have equal power demonstrated by having access to similar resources will, according to Einarsen (2003:15) pass off as ordinary conflict.

- **Subjective perceptions:**

These are subjective perceptions that targets have about the negative behaviours that are leveled against them and the meaning they attach to such experiences. Rayner *et al.* (2002:12) and Rayner and Keashly (2005:275) further make reference to labeling workplace psychological violence as such. They argue that it is questionable whether it should be used as a criterion for defining workplace psychological violence. This is because of lack of awareness of psychological violence as a phenomenon by the targets and other contributing factors such as organizational culture are likely to make labeling certain behaviours as

2.3.2 Features of workplace psychological violence

Various studies have identified the basic features of psychological violence which provide a framework for understanding how psychological violence occurs. The following features have been identified:

- **Negative acts**

This is a central feature of workplace psychological violence behaviours. It involves personal derogation through humiliation, and personal criticism. They may also include physical aggression. They show in covert tactics against the target, social isolation where an individual is treated differently, undermining of professional status, tempering with tools that people need to do their job, being intimidated, micro management of one's work duties and more personal attacks on one's credibility as a person and as a professional. It further includes withholding information that a person needs to perform his/her duties. These kinds of acts can render an employee ineffective more so when coupled with removing ones' responsibilities which can further make employees redundant and unwanted in their job (Hoel & Cooper *in* Tehrani, 2001:4; Einarsen *et al.*, 2003:9; Rayner & Keashly *in* Fox & Spector 2005:273 – 277).

- **Persistence**

This is another feature that has been recognized as characteristic of psychological violence, thus, psychological violence behaviours are repeated and they persist over a period of time (Rayner & Keashly, 2005:274; keashly & Jagatic, 2003). Hence some researchers argue that psychological violence is not a once- off incident between co-workers but persistence is appropriate conceptually because it helps to distinguish between simple misunderstandings between co-workers and negative relationships with psychological violence featuring under the latter. Logically, psychological violence is highly interpersonal in nature hence it cannot happen between strangers (Graves, 2002:6).

psychological violence, difficult. Rayner *et al.* (2002: 276) and Einarsen *et al.* (2003:11-12) name this same feature subjective vs. objective psychological violence. They identify this as a definitional core of workplace psychological violence since it depends on the victim's subjective perception. Two important issues that arise are whether it is observable and whether it is objective. Some acts are not observable, so it becomes evident that workplace psychological violence is a subjective reconstruction and therefore, according to them psychological violence would be somewhat difficult to prove. However, this argument would not necessarily hold because the impact, experience and effect of any unwanted particular behaviour is felt by the victim and understood from his/her own perspective (Einarsen *et al.*, 2003: 9).

- **Intentionality:**

This refers to deliberate effort and intention by the perpetrator to abuse the victim. There is some debate regarding intentionality as one of the core features or descriptors of psychological violence. Intentionality is mostly acknowledged by authors who are pro-aggression theories. According to them, without a proven intentionality then no behaviour can be positively identified as psychological violence. However, intentionality is not easy to either verify or even falsify and yet it cannot be ruled out due to the systematic nature of unpleasant acts meted out to individual employees (Hoel & Cooper *in* Tehrani 2001:5; Einarsen *et al.*, 2003:12; Rayner & Keashly, 2005: 279 & Tehrani, 2004b:4).

Other researchers have also identified other features of psychological violence, for instance and Keashly and Harvey *in* (Fox and Spector, 2005:204) reviewed literature on psychological violence and they proposed seven features or dimensions of psychological violence which are inherent in the features described in the foregoing section. These are verbal or nonverbal defining, repetitive and patterned, unwelcome and unsolicited violations of standards of appropriate conduct towards others, harmful or causing psychological or physical injury to the target, intended to harm or controllable by the actor and acts of commission and omission (Graves, 2002:9). Nevertheless, these features are inherent in the features of psychological violence that have been described in this section.

There are different types of psychological violence described in the literature and the next section gives an exposition of that.

2.3.3 Types of psychological violence

According to Graves (2002:38-40) and Perriat (2007:593) psychological violence can manifest itself in the following ways:

2.3.3.1 Corporate psychological violence

According to Singh (2008:1) this is where employers abuse employees with the knowledge that the law is weak and jobs are scarce. It shows in imposing unmanageable work conditions and acts of discrimination against the victim who does not submit to the demands made upon him/her.

2.3.3.2 Client bullying

This occurs when employees are abused by the people they serve such as teachers being abused and violated, sometimes through physical violence rage and anger by the parents, students and the community they serve (Graves, 2002; Pollack, 2003:20; Singh 2008).

2.3.3.3 Serial bullying

It takes place when the source of all dysfunction can be traced to one individual in the workplace who picks on employees one after the other and destroys them. The bully would victimize the victim until he/she breaks down, after which he/she will pick on another victim to abuse (Field, 1996:40; Graves, 2002).

2.3.3.4 Residual violence

This is the kind of psychological violence that occurs even when the serial bully has left the organization. But his/her influence remains and then people continue to bully each other (Singh, 2008).

2.3.3.5 Secondary bullying

This is the involuntary psychological violence that people display when there is a serial abuser in the workplace. It occurs like a learned behaviour that others adopt as normal in their workplace (Graves, 2002).

2.3.3.6 Ganging up/mobbing

This is also known as mobbing in Europe. It involves scapegoating and victimization by a number of people against one individual. Related to this is pair psychological violence where two people engage in the victimization and abuse of one individual. In such cases, there is one person who is leading the mistreatments and another one is watching or even helping in the abuse (Leymann & Gustafsson, 1996:252; Singh, 2008).

2.3.3.7 Explicit/ vicarious bullying

This psychological violence that occurs when two parties are encouraged to engage in unpleasant interaction or conflict (Graves, 2002).

2.3.3.8 Regulation/compliance/legal bullying

This is observed where the bully forces the target to comply with rules, regulations, procedures or laws regardless of their appropriateness, applicability and necessity. The victim is mostly forced to comply with ambiguous and unclear regulations and the perpetrator may even make unwarranted formal complaints about the victim's professional behavior (Graves, 2002; Sigh, 2008).

2.3.3.9 Third party bullying

It occurs where the bully attacks the one closest to the target because he/she is not able to get at the target directly knowing that the effects will be felt by the victim and the associated target (Field, 1996; Graves, 2002).

2.3.3.10 Cyber Bullying

This is the type of psychological violence that is sustained through the use of electronic media such as sending offensive email messages and even invading the person's

privacy through those. This is prevalent in modern workplaces (Peyton, 2003:51; Keith & Martin, 2005:224; Aricak *et al.*,2008:252).

These different types of psychological violence can either be present individually or in combination upon an individual. The next section discusses the levels of psychological violence.

2.3.4 Levels of workplace psychological violence

Psychological violence in the workplace cuts across professional boundaries and in the same way it occurs at different levels of workplaces as identified in the literature. Rayner *et al.* (2002:274) identified only three levels which are; interpersonal, workgroup and organizational levels. Hoel and Cooper (*in* Tehrani (2001:3) identified more inclusive levels namely; individual, dyadic interactional, the group, organizational and societal levels. It has been observed in the literature that the same levels are sometimes presented as a conceptual framework of workplace psychological violence (Einarsen *et al.*, 2003:21). Nevertheless the same explanation is given regarding where workplace psychological violence occurs so the issue of conceptual framework does not detract from the levels approach as outlined in this section. This is because psychological violence is characterized by multi-causality identifiable at different levels depending on whether the focus is on the behaviours of the actor or perceptions, reactions and responses of the victim. The levels are described as follows:

2.3.4.1 Individual level

It is where the personality of the perpetrator and victim may be causes of psychological violence behaviours and the victim's perceptions of being psychologically abused. Thus individual factors would contribute to a potential lack of coping and other emotional and behavioral reactions to the evident maltreatment (Hoel & Cooper *in* Tehrani, 2001:6-8; Einarsen *et al.*, 2003).

2.3.4.2 Dyadic interactional level

The focus at this level is on the relationship and the interaction between the alleged perpetrator and the alleged victim. This can be in the form of power difference, personality mismatch, pathological and deviant personality of the perpetrator or the victim.

This is the level where dynamics of conflict escalation and dynamic transaction between the perpetrator and the victim come into play (Hoel & Cooper *in* Tehrani, 2001:8-10; Einarsen *et al.*, 2003; Heames & Harvey, 2006:1220).

2.3.4.3 Social group level

At this level psychological violence is explained or understood in terms of scapegoating processes in groups and organisations. The concept of witch hunting arises here when groups displace their frustration and aggression on to a suitable less powerful group member (Hoel & Cooper *in* Tehrani, 2001:10-11; Rayner, *et al.*, 2002, Salin, 2003; Heames & Harvey, 2006:1221).

2.3.4.4 Organizational level

The focus is on various factors that are intrinsic to the organization Einarsen *et al.* (2003:13) refers to this as *structural* mobbing where organizational practices and procedures are perceived to be demeaning, humiliating and occur so frequently that an employee feels victimized (Hoel & Cooper *in* Tehrani, 2001:11-13, Einarsen *et al.*, 2003; Salin, 2003a; Heames & Harvey, 2006:1222).

It is observed empirically that psychological violence is a gradually evolving process. Thus in the beginning the victims are subjected to aggressive behaviour which is not easy to pinpoint. This gradually develops into a destructive and observable behaviour (Einarsen *et al.*, 1994:2; Einarsen *et al.*, 2003:13). The different processes, through which psychological violence escalates, are described in the form of conceptual models studied from the research literature, in the following section.

2.4 Conceptual models of workplace psychological violence

These models help to describe the development process of workplace psychological violence. Different as they may seem, they all help to further unravel the phenomenon of psychological violence in the workplace. Conversely, each one of them is not necessarily conclusive on its own. Other aspects need to be understood from the perspective of other models as well (Einarsen *et al.*, 2003:16).

2.4.1 Leymann model

This model is a four-stage process development model progressing through three phases (Leymann, 1990, 1993, and 1996 *in* Einarsen *et al.*, 2003:14). It is described as follows:

Phase one: It is the stage at which indirect aggressive and negative behaviours against the victim are demonstrated. This may be labelled as indirect aggression because such behaviours could be subtle, devious and difficult to confront. At this phase the victim would be unsure of what is happening. However this phase is very brief.

Phase two: At this phase direct negative behaviours are displayed and are directly observable. For example, in a situation where the perpetrator repeatedly screams and shouts at the victim.

Phase three: This is the phase where the effects of psychological violence become apparent and stigmatization and trauma occurs.

Phase four: This is the final stage where the victim is either, dismissed, made redundant or volunteers to leave.

This model identifies the four organizational factors that can lead to psychological violence at the workplace. These are deficiencies in how work is designed, inappropriate leadership behaviors, victim's socially exposed position and low departmental morale. Nevertheless, it is argued that while these are outstanding they are not necessarily conclusive on their own (Einarsen *et al.*, 2003: 14).

2.4.2 Predatory model

This is the model in which the victim has not provoked the bully to justify the displayed behaviour but the bully targets the victim with malicious intent (Einarsen *et al.*, 2003:18; Vartia-Vaananen, 2003:12; Glaso, *et al.*, 2007). The stages of this model are:

- **Antilocation:** This is where damaging gossip against the victim begins and this occurs mainly in groups.

- **Avoiding the victim:** This is the level where the victim feels isolated from the group and where others in the workplace seem to want to sever ties with the victim.
- **Open harassment and discrimination:** This happens through alienation, exclusion and offensive remarks and jokes against the victim.
- **Extermination:** This occurs in the form of either the victim's suicide or quitting the workplace as a result of trauma from his/her experiences.

2.4.3 Dispute related model

This model focuses mainly on escalation, duration and frequency of acts of psychological violence and not on the actions exclusively. It articulates that conflicts are a necessary part of working life in organizations. However when those are allowed to escalate and get out of control, they become destructive to both the individuals and organizations. (Einarsen *et al.*, 2003:18; Vartia-Vaananen, 2003; 12; Glaso *et al.*, 2007).

This model has three phases as follows:

- **Phase one:** This is the stage where the conflicting parties attempt to settle their differences amicably and in a rational manner however, when the dispute escalates, it becomes impossible to achieve this objective.
- **Phase two:** At this level the initial issue subsides and what remains is the strained interpersonal relationship between the conflicting parties. *Now the issue of the conflict is more to do with who is the problem than what is the problem* (Einarsen *et al.*, 2003:20). This is the phase where both parties stop communicating with each other, instead they work hard to destroy each other, they also work even harder to protect their own reputation and label their opponents negatively. It further involves seeking support against the opponent from others in the organization. This stage is characterized by mistrust, open hostility and aggression and other risky behaviours which are aimed at destroying the opponent.
- **Phase three:** This phase is reached where victim quits the workplace or in some cases, go to court to sue for damages against the perpetrator.

The next section describes the causes of psychological violence.

2.5 Causes of psychological violence

There are lots of debates in-as-far as antecedents or causes of psychological violence are concerned. Thus some researchers argue for individual antecedents exclusively, while others are more inclined towards organizational and social antecedents (Zapf & Einarsen, 2003 *in* Einarsen, *et al.*, 2003:174; Poilpot-Rocaboy, 2006).

The three will be presented below because the interplay between and among them is critical in understanding causes of workplace psychological violence

2.5.1 Individual causes of psychological violence

- **The inability of the victim to defend himself or escape**

This is usually due to dependency which can be social in the form of hierarchical position, power relations and group membership. It can also be in the form of physical stature of the victim mainly through having smaller physical stature in relation to the perpetrator. Finally, psychological dependence can be through the victim's low self esteem, unacceptable personality and low cognitive capacity of the victim.

- **Salience and outsider position of the victim**

This is seen through victim devaluation which can lead to displaced aggression because the target does not belong to the group. Social identity theories explain this as lack of social support (Zapf & Einarsen *in* Einarsen *et al.*, 2003).

- **The vulnerable victim: Social competence and self esteem.**

These are individuals who are low on self-assertiveness, unable to defend themselves, unable to manage the possible conflicts effectively and constructively, which makes them natural victims. Evidence in the literature points to the factors such as, being low on social competencies, high on social anxiety and humourless in nature as predisposing people to psychological violence in the workplace.

Moreover the relationship is drawn between psychological violence occurring in the schools among pupils and that which occurs in the workplace. Thus the likelihood of being a workplace victim is higher for someone who has been a victim of

psychological abuse at school as well (Zapf & Einarsen *in* Einarsen *et al.*, 2003: 178).

- **Overachievement and clash with group norms**

According to Zapf and Einarsen (*in* Einarsen *et al.*, 2003) this shows in the tendency for the victims to be exceedingly conscientious, achievement-oriented, literal-minded and unsophisticated, too empathetic, over critical, all of which may clash with the norms of the work group. When the victims display these qualities, they are seen as threats, because they are popular and efficient, while on the contrary abusers in the workplace tend to have low self esteem, feel inadequate, threatened or jealous. They restrain their victims simply because their position allows them to and this lessens their own feelings of inadequacy. Some of these victims are vulnerable, for example, single parents, main bread winners, those who suffered trauma recently e.g. divorced and bereaved individuals whose unfortunate situation exposes them to psychological violence by others

2.5.2 Social causes of psychological violence

The causes at this level relate to society's norms and culture of survival and toughness (Salin, 2003b:25). These societal norms and culture help to enforce psychological violence. Thus the norm of reciprocity is reflected through statements such as, exacting justice, and working to even the score or balancing the scales. Other concepts like reciprocity are also brought to the fore; reciprocity is based on the fact that all contacts among people rest on the schema of giving and returning the equivalence. As a result of these societal influences and norms, a lot of injustice perceptions and fairness perceptions pervade employment relationships, for example, these are seen in selection processes, performance evaluations, promotions, and merit pay etc. It therefore becomes evident that psychological violence is born out of societal norms and influences and the same norms and culture get carried over to the workplace (Neuman & Baron *in* Einarsen *et al.*, 2003:186).

2.5.3 Organisational causes of psychological violence

- **The changing nature of the workplace**

The role of situational and contextual factors in psychological violence scenarios has been identified. Organisational factors such as the economic environment, organisational restructuring as well as downsizing as part of the change process in the workplace (Hoel & Salin, *in* Einarsen *et al.*, 2003:205; Martinko *et al.*, 2002). The likelihood of psychological violence increases as the managers adopt autocratic styles of management in order to meet the demands of the marketplace.

- **Work organisation**

The link between psychological violence and negative, stressful working environment has been made in the research and literature and it is established that certain work factors produce occupational stress which increases the risk of conflict and inevitably, psychological violence.

Role conflict and role ambiguity have been linked to psychological violence in the workplace. This is particularly the case in role ambiguity where employees may feel that unreasonable demands are being made on them due to lack of clarity on their legitimate roles in their workplaces. This is seen where employees observe contradictory expectations, demands as well as values in their jobs. Furthermore psychological violence seems to thrive where people are uncertain of their job expectations. This also includes situations where employees have very little control over their jobs.

Furthermore, poorly organized workplaces promote psychological violence (Hoel & Salin, *in* Einarsen *et al.*, 2003:207- 209). Other factors include physical aspects of the workplace which may increase the likelihood of psychological violence. For example working in a cramped place may increase the likelihood of the feelings and attitude of hostility.

The size of an organization is also a determinant of psychological violence. For instance there is a higher likelihood of psychological violence in small and medium sized organisations than larger ones, which explains why psychological violence may be more prevalent in private organisations (Hoel & Salin *in* Einarsen *et al.*, 2003:210; Steinman, 2003).

- **Organisational culture and climate**

When new members are recruited into the organization they gradually tend to adapt to the norms that are shared in the organization. This happens through the processes of socialization. Examples of such organisational cultural practices include the *watch culture* where there is no room for diversity because people are allocated to the tightly knit work team.

Another one is the autocratic leadership culture in which the manager has been brought up and socialized in the same organization making it extremely difficult to break the cycle of authoritarianism. Others include organisations characterized by a high degree of conformity and group pressure, compliance and enforced discipline as one would find in the military and hospital setting (Hoel & Salin *in* Einarsen *et al.*, 2003:210). Such cultural practices in the organisations enable psychological violence to be systematically built into the organisations and to be perpetuated.

Other organizational cultural practices include humiliating jokes, surprises and insults that are used to test the new employees. Unfortunately this can spin into psychological violence particularly when an employee is not able to defend himself as indicated earlier. It is also observed that psychological violence may be indirectly permitted by those in management when such abusive culture is allowed to thrive.

- **Leadership**

Lewis (1999) argues that leadership styles of managers have been associated with psychological violence in the workplace. These are autocratic and authoritative styles of settling conflicts. However, abdication of leadership or a laissez-faire/lenient style of management allows psychological violence to endure. This is highly likely in cases where the management fail or ignore and do not intervene in psychological violence cases.

Another scenario associated with leadership relates to the managers' inability to provide adequate guidance, instructions and feedback which may lead to psychological violence particularly when the victim is unsure of the expectations of his job.

It is imperative to note that while factors identified in the foregoing paragraphs are very crucial in understanding workplace psychological violence. This is a complex phenomenon and attributable to various factors. Furthermore, workplaces are not monolithic as mentioned in the earlier sections of this chapter. There are a lot of dynamics and diversities at workplaces even if such workplaces may be categorized as the same for example, schools in the context of this study. For example, an empirical study by Lewis (1999) identified different factors that cause or lead to psychological violence among staff members in higher education in Wales. The factors are lack of professionally-trained middle and senior managers, power imbalances between managers and lecturers, short term contracts and job security, values and beliefs about the organization and post incorporation changes to employment contracts. These factors can be linked to the causes discussed in this same section.

The next section gives an exposition of the common traits and personality disorders associated with people who abuse others in the workplace.

2.6 The nature of psychological abusers

Psychological abusers exhibit a number of traits which distinguishes them from other people. According to Namie and Namie (2003: 4) and Hall (2005: 46), various traits have been identified:

2.6.1 Common traits of workplace abusers

- **The screamer**

This is the person who controls everyone's emotional tone. He/she displays mood swings and unpredictable displays of anger. He/she also enjoys public humiliation of victims with a view to instil fear among other workers.

- **The constant critic (a hypercritical knit picker)**

This person conceals his/her own short comings and insecurities by being overobsessed with the performance of others. He/she over emphasizes other people's incompetence. He also trivializes the victim's feelings.

- **The two headed snake/Jekyll and Hyde**

The people in this category use defamation of reputation in an attempt to boost their own self-image. They use the divide and conquer scheme and unfortunately their side of the story is always believed. The abusers appear friendly on the surface while they destroy their victims behind the scenes.

- **The Gatekeeper**

The gate keeper makes sure that the victims fail by how he/she allocates resources such as time, money and information without which the victims can never do their job properly. This will make them more prone to abuse.

The traits of the workplace abusers as evidenced from the literature (Randall, 2001:88) play an important role in the perpetuation of workplace psychological violence.

The following sub section discusses the relevant personality disorders that are displayed by people who abuse others in their workplaces.

2.6.2 Personality disorders associated with psychological abusers

Psychological violence can in addition, be attributed to the personality of the perpetrators. Personality disorders have been identified in the research literature as helpful in the explanation of psychological behaviour in the workplace.

Andreasen and Black (1991:335) and American Psychiatric Association (2000:685) define personality disorders as behaviours or traits that are characteristic of a person's long-term functioning, normally starting at adolescence through to adulthood and they deviate notably from the person's cultural expectations. These are not limited episodes of illness, but they represent a person's long term functioning and are persistent and not flexible and lead to distress or impairment. They further state that individuals with personality disorders are difficult to work with.

Randall (2000:9) postulates that the attitudinal behavioural patterns of workplace psychological abusers fit within the description of a personality disorder. Their attitude is outlined as follows:

- Being selfish

- Need for undeserved self-enhancement
- Indifference to others' needs
- Compulsiveness to lie for self preservation.

Field (*in* Randall 2001:90) links these attitudes to psychopathology and then to personality disorders. The following personality disorders are reported in the literature:

2.6.2.1 Anti social personality disorder

Based on the research studies, anti social personality disorder is correlated with psychopathy. Hare (1996) highlights the fact that there are opposing views among professionals regarding the relationship between anti-social personality disorder and psychopathy and as to what constitutes psychopathy. Nonetheless the detailed discussion of this issue is beyond the scope of this thesis. Despite that, the discussion of both psychological conditions highlights their relevance in understanding the behaviours of perpetrators of psychological violence in the workplace.

According to Andreasen and Black (1991), Hare (*in* Barlow and Durand, 2005:443) and American Psychiatric Association (2000:706) people with anti social personality disorders are social predators who have a persistent pattern of disregard for, violation and the rights of other people. They also exhibit the following symptoms :

- They are manipulative and lacking in conscience and empathy.
- They are selfish and act as they please and in the process violating social norms and expectations with absolutely no guilt and regret.
- They are aggressive, destructive, they lie, play truant, and have poor peer relations and rejection of authority.

These traits result in failure to conform to appropriate behavioral conduct. People with anti social personality disorder are impulsive, irritable, manipulative, irresponsible, have low empathy, callous (heartless, insensitive, cruel) and cynical (pessimistic, suspicious, distrustful) and are contemptuous with an exaggerated arrogant self opinion which traits are observed in people who abuse others in the workplace.

2.6.2.2 Psychopathy

According to Hare (1996) the following are symptoms of psychopathy:

- Glib and superficial.
- Psychopaths are witty and articulate. They are also amusing and they are good conversationalists, convincing liars and know how to present themselves in a favourable light. As a result, they are likable and charming as well. They also try to appear as experts in various disciplines, such as psychiatry, medicine, psychology etc. The identifiable trait is when they have no concern when it is discovered that they do not possess such knowledge.
- They are egocentric and have an exaggerated sense of grandiose and lack of remorse or guilt for the wrong things they do to others.
- They lack empathy and are deceitful and manipulative.
- They possess shallow emotions which reflects in how they act and react towards their unacceptable actions.
- They are impulsive and have poor behaviour controls.
- They have excessive need for excitement and are very irresponsible.
- They have a history of earlier behaviour problems.

2.6.2.3 Narcissistic personality disorder

According to Andreasen and Black (1991:348), American Psychiatric Association (2000:717), de Vries, (2001:100), Sadock and Sadock (2003:811), Barlow and Durand (2005:456) and Miller *et al.* (2007) this is observed in people who have an exaggerated sense of grandiose and self importance exaggerating their achievements and talents, as such demanding recognition to be superior without the relevant achievements. Secondly, the person is obsessed with special people emanating from the belief that he/she is special or unique and requires excessive admiration. Thirdly, such a person demands unreasonable favourable priority treatment, he/she is interpersonally exploitative, lacks empathy, envies others and believes others feel the same about him/her. Finally, he/she is arrogant and haughty with attitudes of rage when frustrated, contradicted or confronted.

Individuals with the above personality disorders are very much likely to abuse others in the workplace regardless of their positions in employment. The described personality

traits fit in with the behavioural patterns associated with psychological violence outlined in this same section. It is emphasized that workplace psychological abusers and non-abusers are basically different in terms of their cognitive make-up. For instance workplace psychological abusers are specifically hostile and will react aggressively even with minimal provocation. However, there is often no provocation as such, but it is invented by the perpetrator in order to justify his/her behaviour. It is also important to mention that workplace psychological abusers select their victims. Ellis (2002:7) highlights the importance of an audience for the perpetrator. Perpetrators like an audience because it helps to spread rumours about their power, which is something they wish to establish.

The personality disorders presented in this section are somewhat interrelated in terms of the symptoms that are exhibited.

Psychological abusers fit in these personality disorders. Although debates and disagreements abound whether the diagnosis is relevant in explaining the behaviour of perpetrators, given the evidence in research studies, of the behaviours and attitudes that abusers show, this leaves the case for diagnosis open for consideration (and research). However this is beyond the scope of this study.

2.7 Reported psychological violence in the workplace: an international perspective

The foregoing discussion thus far has attempted to highlight the current understanding of workplace psychological violence. Since the study of psychological violence is fairly new, spanning only the last decade the review will be presented in a road map and a Déjà vu, approach as presented by Obezinger (2005).

There is a great variation on the prevalence of psychological violence because the results depend on how it is measured and the investigation group understanding of the phenomenon. Therefore, direct comparison between studies is complex due to these differences in research approaches and orientations across countries and workplaces (Sheehan, 1999:13-14; Beswick *et al.*, 2006:27; Hansen *et al.*, 2006:63).

Firstly, the most dominant method used in the research into psychological violence occurring in the workplace is the operational classification method. In this approach the participants are presented with an operational definition of psychological violence so

that everyone involved has a similar understanding of the phenomenon under study which helps to reduce the influence of competing perceptions or personal definitions. Coyne *et al.* (in Beswick *et al.*, 2006:5) term this a subjective approach. Nevertheless, it seems that this particular method mostly helps to identify the workers who have been subjected to psychological violence from those who have not been subjected to psychological violence (Notelaers *et al.*, 2006:288).

Secondly, a closely related method that is utilized is where no definition is given but a list of negative acts or unpleasant experiences is presented and the victims or research respondents are requested to respond to this list of items in terms of experience. The importance of this is evidenced through empirical studies in which a list of psychological violence behaviours was given to research participants and therefore they did not have to have to grapple with what constitutes psychological violence. For instance, the importance of unpacking this phenomenon made it easy for the respondents to identify psychological violence behaviours in various studies (Matthiesen *et al.*, 1989; Leymann, 1996; Björkqvist *et al.*, 1994; Rayner, 1997; Quine, 1999; Cowie *et al.*, 1999; Salin, 2001; Mikkelsen & Einarsen, 2001; Kivimaki *et al.*, 2000; HAS, 2001; Hoel *et al.*, 2001; Einarsen *et al.*, 1998). In the current research literature this seems to be the trend in how psychological violence is measured.

It has been evidenced from the literature research in the countries of Europe and Scandinavian that despite differences on how it is measured, psychological violence is escalating. For instance Chappel and Di Martino (1999:4) highlighted the fact that a 1996 European survey indicated that 8 % of employees, which translates to 12 million workers, were intimidated and bullied at work. It was further revealed the fact that workplace psychological violence is escalating at an alarming rate with 53 % of the workers in the UK being abused at work and 78% reporting to have witnessed that. Furthermore, evidence from Hoel and Di Martino *et al.* (2003) suggests that trends in the European countries show that reported cases of psychological violence stood at 8% in 1996, to 9% in 2000.

In another study in Finland a study undertaken by the same researchers yielded almost similar results where 40 % of the respondents reported being highly stressed while 49% felt unusually tired and 30 % were often and constantly nervous. Additionally, Mikkelsen and Einarsen (2002) reported that in a study of negative acts experienced in the workplace 88% of the respondents were exposed to such acts. Lee (2000) also found

that in a sample of 50 respondents 35 of them reported incidences of psychological violence. This was further observed by Hoel and Cooper (2000) who concluded that indeed psychological violence in the workplace is escalating at an alarming rate. This conclusion was drawn from a study undertaken with 5288 respondents from 70 organisations. 10.6 % of them were abused within six months and retrospectively 5 years back. 24.7 %, had witnessed it and the prevalence rate for the teaching profession stood at 15.6 % with more women being abused than men. What also emerged from these studies is that psychological violence is prevalent across all age groups and in more than a third of the reported incidents a colleague was a perpetrator. This is further corroborated by Lehto and Pänänen (2004) who reported that prevalence for psychological violence stood at 14.1%.

In a study of workplace psychological violence in further and higher education in Wales prevalence rate stood at 25% for the victims and 22 % for those who had witnessed it (Lewis, 1999).

Another research study of psychological violence among support staff in a higher institution undertaken by Thomas (2003) discovered that the victims *reported different types of trauma resulting from psychological violence in the workplace*. This explains why interventions against psychological violence are of prime importance in many countries, for example, in Sweden through Heinz Leymann initiatives and in the United Kingdom through Andrea Adams Trust and in Australia through initiatives such as the Beyond Bullying Association. Sheehan *et al.* (1999) and Mikkelsen and Einarsen (2002:397) confirm that psychological violence exposes victims to psychosomatic health problems.

In a sample of 433 employees in another study in Finland, 88% of the study population were exposed to negative acts in the workplace (Einarsen *et al.*, 1994). This shows that workplace psychological violence is on the increase. Finally, in South Africa the impact identified match with other studies as evidenced from the country case study by Steinman (2003:38) which was undertaken in the health sector with two categories of the health sector, namely the public and private sectors. According to this study psychological violence has been reported to be very high and verbal abuse was highest on the list at the rate of 49, 5 % with specific psychological violence and mobbing at 20.4% (Steinman, 2003:24).

It seems that despite the differences in how psychological violence is measured, the research literature provides the evidence that it is escalating. The next section discusses the gender dimensions of workplace psychological violence.

2.8 Gender dimensions of psychological violence

Both men and women bully one another. This is the conclusion by Serghis (1998) from the study conducted with 342 employees including nurses. The study also concluded that same gender based psychological violence in the workplace was more prevalent than opposite gender based psychological violence. Namie and Namie (2003:2) also reported similar findings which are also corroborated by Hall (2005:47) who found out that women make up 58% of the perpetrators and men on the other hand make up 42 % of the perpetrators. It is further interesting to note that in 63 % of the cases psychological violence is woman on woman while man on man psychological violence is 62 %. Women are the largest group of the victims of psychological violence with a whopping 80% rate. Smith *et al.* (2003:175), also supports the fact that women more than men are at a higher risk of being psychologically abused in their workplaces.

Lewis and Orford (2005) studied women's experiences of workplace psychological violence and changes in the social relationships. Their research focus is on the relationship between psychological violence and wellbeing as well as health with the assumption that psychological violence is an objective and a measurable phenomenon. This study yielded results that are similar to other studies in the literature where gender was not found to be a determining factor in the presence or absence of workplace psychological violence (Steinman, 2003).

What emerged in the research studies is that both men and women can either be victims or perpetrators and that gender does not necessarily determine vulnerability or predisposition to psychological violence.

The next section discusses psychological contract with the purpose of demonstrating how unwritten expectations are violated by psychological violence.

2.9 Psychological violence and the psychological contract

The concept of psychological contract was initially used in the 1960's but became popular in the 1990's. Psychological contracts play a very important role in the relationships amongst employees in the workplace. Stein (*in* Tehrani (2004b:24-25) describes a

psychological contract as sets of expectations operating at all times between members of an organization. This refers to appropriate ways of relating which are implied in job expectations and duties. It further represents the mutual beliefs, perceptions, and informal obligations between an employer and an employee. It sets the dynamics for the relationship and defines the detailed practicality of the work to be done. It is distinguishable from the formal written contract of employment which, for the most part, only identifies mutual duties and responsibilities in generalized form.

According to Thomas-Peter (*in Saunders et al. 2007:50*), psychological contracts are more subjective as opposed to formal written contracts and furthermore both parties may not necessarily share the common understanding of the elements of the contract those are not necessarily agreed upon by both parties. However the parties believe that they share a common interpretation of the contract.

Robinson and Rousseau (*in Saunders et al. 2007:51*) assert that psychological contracts are both relational and transactional. Transactional aspect relates to principles of economic change, for instance that, employees expect payment for work they have done. On the other hand, the relational aspect is concerned with issues of fairness, mutual respect and trust. Psychological violence in the workplace violates the psychological contract when employees are subjected to various forms of abuse in their workplace.

Much as a psychological contract is unwritten it is a powerful tool for determining behaviour in organisations. When it is broken through psychological violence in the context of this study, it has traumatic effects on the health of the victims.

The relationship between psychological violence and work trauma has been alluded to earlier. Therefore the following section discusses work trauma with a view to demonstrate how it stems from psychological violence in the workplace.

2.10 Work trauma

Work trauma is the kind of distress emanating from unpleasant experiences from one's workplace. As it was stated that psychological violence causes trauma to the victims and in order to understand the ramifications of traumatic experiences in the workplace, it is imperative to start off by defining trauma.

2.10.1 Trauma

The definition of trauma has evolved tremendously since it was first introduced into the research literature. The focus has shifted from the nature of the traumatic event to the reaction of the individual. The shift in focus has been helpful in that it does not concentrate on the external perception of the researcher in terms of what qualifies as trauma by definition; instead it acknowledges the individual's unpleasant experience (Rick *et al.*, 1998:17; Flannery, 1999).

According to Rick *et al.* (1998:22-23) trauma is conceptualized as an external stressor, that is an event which overwhelms a person's normal ego functioning. Furthermore it involves a change in the steady state which is disequilibrium. In addition to that, trauma causes reduction of ego defensive and coping capacity. It also disrupts the body's equilibrium called homeostasis.

In order for an event to qualify as trauma the individual must have responded in an intensely fearful, helpless or horrified manner and Paton, Smith and Stephens (1998) among others explored the theoretical nature of work related traumatic stress reactions and the context within which such reactions take place. Furthermore the point raised is that the research instruments used to assess traumatic stress typical of any given psychological construct, consider the construct under investigation as having some degree of stability.

2.10.2 The nature of work trauma

The definition for work trauma narrows down the general definition to the workplace as is accurately stated in Steinman (2003) that work trauma is the unpleasant effects and impact on the employee's physical and or emotional wellness, health, and safety as a result of physical and psychological violence that they experienced in the workplace. work trauma refers to the impact of an extreme stressor on the victim's psychological and biological functioning (Flannery, 1999:78).

Work trauma is observed in the person's inability to continue carrying out his/her normal healthy functions; this inability is assessed with reference to cognitive functioning, happiness and capability. It also shows in the appearance of a new phenomenon of a distressing nature that includes experience of strain, depression, low self esteem as well as sleep problems. This is a result of every day events in certain types of work

(Rick *et al.*, 1998:21). Work trauma also involves a feeling of helplessness when faced with a real or perceived danger to one's life, bodily integrity, or sanity.

People feel this way as a result of the violation of their familiar ideas about the world leaving them both confused and insecure. Work trauma is observed when institutions and people that one depends on for survival violate or betray the person in some unforeseen way as seen in the experiences of psychological violence in the workplace.

According to (Steinman, 2003) common elements of work trauma regardless of the source trauma are:

- It was unexpected
- The person was unprepared
- There was nothing that a person could do to prevent it from happening.

The harmful effects of work trauma have been highlighted in many research studies (Vartia, 1996; Mikkelsen and Einarsen, 2002; Niedl *in* Lewis (2004: 286).

2.10.3 Cognitive framework for work trauma

According to Einarsen *et al.* (2003:131-133) and Tehrani (2004a) psychological violence leads to traumatic reactions. They further state that events are traumatic when they threaten to destroy the people's most basic cognitive schemas. These core schemas involve fundamental beliefs that the world is good and meaningful, that individuals are worthy, decent and capable human beings who deserve others' affection and support. Unfortunately psychological violence as it occurs in the place destroys all these. Exposure to events, such as psychological violence threatening to destroy these schemas leads to a psychological crisis where victims are supposed to rebuild new and more viable schemas. Unfortunately other people are not able to do so and instead of resolving the cognitive emotional crisis forced upon them by the traumatic event, they remain in a chronic state of cognitive confusion and anxiety. Tehrani (2001) proposes the following perspectives, which can be used as a framework for understanding traumatic reaction due to psychological violence.

- **Socio biological perspective:** This perspective asserts that exposure to ostracism poses the danger of exclusion from an important social group which in this

case will be a workgroup. From evolutionary perspective human beings fear a lack of attention from important and significant others in their life.

- **Existential perspective:** The view of existential perspective is that social exclusion is life threatening and it symbolizes what death is. This can explain why the victims of psychological violence describe it as a psychological drowning which leads to anxiety, and breakdown in basic physiological processes. Ostracism which occurs on the other hand deprives people of a sense of belonging to others. Furthermore it threatens the victim's self-esteem by indicating that they are unworthy of other people's love and affection. This is why psychological violence threatens victim's feelings of being capable individuals which further damages their desired identity images.

Moreover, isolation involves aggression; it threatens and reminds people of their temporary, fragile existence. It is described as some kind of social death. In the short term this causes pain, anxiety, worry and long-term effects such as extreme anxiety, depression and even psychotic reactions. As a result the victim displays the symptoms such as, desperation, erratic behaviours and aggression. Unfortunately being ostracised can lead to a vicious cycle of victimization thus the victim's irrational reaction or behaviours leads to more victimization which results in severe psychological and psychosomatic health problems.

2.10.4 The symptoms of work trauma

According to Mikkelsen and Einarsen (2002) and Tehrani (2004a) there are various ways in which psychological trauma is observed on individuals exposed to traumatic experiences. They are discussed below:

- **Intrusive symptoms:** These refer to persistently re experiencing of the event in images thoughts, recollections, daydreams, and nightmares. They also show in acting and feeling as if one is re-living the event and becomes distressed in the presence of symbolic reminders of the experience.
- **Avoidance symptoms:** These are referred to as acts of deliberately avoiding places and thoughts symbolic of the trauma. Victims also have problems in recalling the event. There is also loss of interest in important activities, restricted emotions and sense of foreshortened future.

- **Arousal symptoms:** These manifest themselves in hyper vigilance, exaggerated startle response, sleep disturbances, difficulty concentrating and irritability or angry outbursts.

Flannery (1999:79) posits that domains of human functioning that contribute to physical and mental health are, meaningful purpose in life, which refers to *a central event or value that motivates a person to actively participate in the world each day, and which provides direction in life's darker moments*. Reasonable mastery means one's ability to shape the environment to meet their needs and caring attachments to others which has to do with provision of emotional support, information, companionship, and occasional instrumental support.

When traumatic events disturb any of these domains, the resultant effect is faulty mastery which manifests itself in super control, where the victim is hyper vigilant in an attempt to control every aspect of his/her life to prevent the second disaster from striking. On the other end of the continuum is the helplessness where the person resigns himself to the presenting situation. Self medication through the use of drugs and alcohol is common. Another faulty mastery technique identified is repetition compulsion where a person places himself in a similar situation as the one he initially found himself in. Inadequate caring and attachments to others can also be observed where the victim may withdraw in an attempt to avoid the painful disturbing memories.

Untreated trauma is likely to result in permanent disability, legal and medical expenses, increased sick leave, lost productivity and intense psychological distress which compound the psychological distress that the victim would be experiencing already.

2.11 Summary

Workplace psychological violence leads to work trauma. Psychological violence as a concept is undergoing a lot of evolution particularly because it is a fairly new concept. There are many concepts that are used to label this phenomenon however despite this definitional dilemma the core issue that binds all of them is the mistreatments of individuals by others in the workplace. Workplace psychological violence is a dynamic multi-causal issue that emanates from several factors. Those are individual, organizational and societal antecedents. It also occurs at different levels in an organization. The interplay amongst these different aspects is very critical in understanding the causes of

workplace bullying. Furthermore it cuts across the professional and cultural boundaries with perpetrators from different work settings conforming to the typical profile of a bully. Work trauma resulting from psychological violence has a dire impact on the victims. It affects their normal functioning and it is the kind of distress that occurs unexpectedly and it is beyond the victims' comprehension.

Since this chapter has discussed psychological violence and work trauma, the next chapter presents the conceptual framework for understanding the experiences and impact of psychological violence as work trauma and discusses the impact of psychological violence on the health of victims. It also, accordingly, discusses health promotion whose necessity is demonstrated by the dire impact of psychological violence.

CHAPTER THREE

THE IMPACT OF PSYCHOLOGICAL VIOLENCE IN THE WORKPLACE AS AN IMPERATIVE FOR HEALTH PROMOTION

3.1 Introduction

Chapter two discussed psychological violence in the workplace and the various forms in which it occurs. This chapter presents the conceptual framework for understanding the experiences and the impact of psychological violence on the health of victims. It also discusses the impact of psychological violence in the workplace on the health of victims. It describes the concept of health promotion with a view to address psychological violence and the associated work trauma. The various conceptualisations of health promotion in the form of different modes and models of health promotion are described. Furthermore, the key principles and different approaches to health promotion are outlined. Workplace health promotion as a category of health promotion is also discussed. This includes a description of approaches and some initiatives of workplace health promotion. Finally, it describes the situation on health promotion in Lesotho with a view to situate the study in the context of development in the areas of promotion of teachers' health in that country.

3.2 A conceptual framework for a holistic eco-systemic view of the experiences and the impact of psychological violence

Holistic eco-systemic model of health wellbeing and wellness is utilized as a conceptual framework that explains the holistic view of the impact of psychological violence on teachers' health. A general exposition of holistic eco-systemic model was given in chapter one (cf. par. 1.7.1) and it is discussed in detail in the following sections.

This view articulates that people's health is inextricably intertwined with the health of their environment. It describes human beings' existence in five contexts, namely: biological, psychological, spiritual, ecological, and metaphysical contexts (Kirsten: 2001:34;

Jordaan & Jordaan, 1998:38-41; Jordaan & Jordaan, 1989:40-46; Kirsten *et al.*, 2009:28). It further proposes that the effects of stress and the impact of psychological violence in the context of this study, occurs in these five contexts. Kirsten (2001:34) and Kirsten *et al.* (2009), postulate that the five contexts are both interdependent and intra-dependent. Thus they view a person as a biopsychosocial and spiritual being. Phillips (1988:78) states that according to Winnicott's (1967) explanation;

... the body is at the root of development out of which psychosomatic partnerships evolved. The self was first and foremost a 'body self' and the 'psyche' of the partnership means the imaginative elaboration of somatic parts, feelings and functions that is of physical aliveness.

The use of holistic eco-systemic model expands beyond the biological and psychological and spiritual contexts. It includes the environmental context in which people live, that is both the ecological and metaphysical contexts. These represent the broad existential (living and non living, physical and symbolic) contexts in which the experience and behaviour of human beings (as psychobiological entities) are evoked, maintained and modified (Kirsten, 2001:36; Kirsten *et al.*, 2009). It is important to note that a stressor can originate from any one of the five contexts and the effects of a stressor can also be experienced in any one or more of the contexts at the same time (Jordaan & Jordaan, 1990:40-46; Kirsten, 1994:3-4; 18-16 Jordaan & Jordaan 1989:40-46; Kirsten *et al.*, 2009:10).

A detailed description of the five contexts of human existence in the holistic eco-systemic view of health, wellbeing and wellness are presented in the next section.

3.2.1 Biological context

The importance of biological context begins from conception to death and it is concerned with biophysical processes of human functioning. It entails the physiological development and the outward physical development and appearance. Thus the general function of the human body is the central core of the biological context. The biological context consists of the genetic and constitutional sub-contexts, for example the nervous system and the immune system (Jordaan & Jordaan 1998:77; Kirsten, 2001:37).

The biological context is composed of the following specific sub-contexts:

- Genetic sub-context (Jordaan & Jordaan, 1998:87-102): This mainly consists of the genealogy and heredity and human nervous system.
- Neuropsychological systems (Jordaan & Jordaan, 1998:201-229): This refers to consciousness and neuropsychological arousal related to experiences that people have, such as the experience of stress emanating from psychological violence in a person's workplace.
- Endocrine glandular system, blood circulatory, respiratory system, gastrointestinal system, metabolic system, excretory system, reproductive system, immune system are all part-systems of biological context and are vital to the functioning of human body (Kirsten, 2004:36).

3.2.2 Psychological context

The psychological context is concerned with experiential processes. Thus the psychological context consist of a person's ability to develop self awareness as a person, his/her ability to perceive, to think, to learn, to remember, to have feelings, needs desires and plans and to form own self image (Jordaan & Jordaan, 1998:279; Modise, 2003:26). According to Jordaan and Jordaan (1998:282-284) and Kirsten, (2001:38) and Kirsten *et al.* (2009:10) the psychological context consists of the following part-systems:

- Perceptual processes, which refer to a higher level of information processing converting the information received from perceptual modalities namely: vision, hearing, taste, smell and touch into meaning.
- Cognitive processes, which relate to ways of knowing how people think, learn, remember and forget.
- Emotive processes, which refer to processes that result in feelings (emotions) indicating how intensely a person is involved with someone else, a cause or an idea.
- Dispositional processes which are processes of relating to ways in which people's desires, wants, needs and plans create a state of motivation and readiness to act.
- Self processes which, are processes through which people form impressions of themselves and evaluate themselves.
- Higher states of consciousness and the unconscious.

3.2.3 The spiritual context

This consists of existential processes which refer to interpretation of the ultimate reality which is metaphysical yearning (Kirsten *et al.*, 2009). It relates to the following:

- Meaning in life;
- Altered/higher states of consciousness/transcending experiences.
- Inner peace;
- Beliefs in the deity;
- Moral values related to own well being and respect as well as compassion for others;
- Ethics that guide people's life.

3.2.4 Ecological Context

According to Jordaan & Jordaan (1998:641), Kirsten (2001:38) and Modise (2003:27) ecological context consists of all the systems within which an individual exists. These are both natural and man-made, living and non-living physical environment. The sub contexts are:

- Interpersonal sub-context: Person-to-person interaction evokes, maintains and modifies people's experiences and behaviour;
- Group dynamic sub-context: People's experiences and behaviour are again evoked in, maintained and modified in-group context (e.g. Peer groups);
- Work sub-context: People's experiences and behaviour are evoked maintained and modified in job situations and through job circumstances such as professional status and job hierarchy;
- Social sub-context: People's experiences and behaviour are evoked, maintained and modified in social situations that include politics, distinctive culture, ethnic structures and economy;
- Natural-physical and physical-cultural sub-context: People's development as psychobiological beings does not occur in a vacuum. Instead, human beings are in constant contact with the geographical environment, climatic conditions and living conditions.

3.2.5 Metaphysical context

This is composed of things that are beyond our sensory perception and whose existence or none existence we cannot prove. This is called the symbolic abstract environment (Jordaan & Jordaan, 1998, Kirsten, 2001:38-39; Kirsten *et al.*, 2009:10). The sub contexts of this context are:

- religious
- philosophical and ideological
- cultural
- esthetical
- unformalised/ personal values

The following section presents how the eco-systemic model functions, by describing the core principles that underpin it.

3.3 The core principles of a holistic eco-systemic model

According to Jordaan and Jordaan (1998:41-42) the eco-systemic works according to the following principles:

- **Open hierarchy**

This principle states that the contexts are organized in terms of a functional classification. This classification is done by putting together parts that belong together, for instance, each context is put together with its sub-contexts. Furthermore, the principle points out that there are permeable boundaries within and between different contexts as well as their sub-contexts. Finally none of the contexts is more important than any other.

- **Interdependence and recurring patterns**

This principle affirms that the contexts are interdependent with a recurring pattern. This means that the occurrences in any one context influence events and behaviours in other contexts and conversely occurrences in any context are influenced by situations and events in other contexts. Finally the interaction between the contexts has a tendency to form recurring patterns.

- **Contextual analysis and synthesis**

The contextualization of interdependence and recurring patterns are characteristics of the relationship between contexts and this is promoted by contextual analysis and synthesis. This operates according to the following rules:

- A context is a prerequisite for understanding experiences, behaviour, phenomena and problems.
- Experiences, behaviour, phenomena and problems can occur in more than one context.
- If experiences, behaviour, phenomena and problems can occur in more than one context, it means that all these can be described in different but equally valid (but not necessarily appropriate) ways.
- The relationship between lesser contexts and the whole is based on the interdependence of parts and the whole from which a specific pattern or organisation emerges.
- The interdependence of lesser contexts and the whole and the pattern or organisation that emerges from it form a contextual spiral.

Victims of psychological violence are exposed to a range of unpleasant behaviours and these experiences have impact in all the contexts of their existence. Therefore, the next section attempts to contextualize the impact of psychological violence within five contexts of human existence, namely; the biological, psychological, ecological, spiritual and metaphysical contexts.

3.4 The impact of psychological violence

People spend most of their “awake” time at work and this is psychologically and financially rewarding. However, work can also be destructive as a result of psychological violence, as it has been evidenced in teaching (Van der Linde, 2000; Olsen, 2005; Nolfé *et al.*, 2008:68-69). According to Hall (2005:47) persistent abuse in the workplace erodes the victims’ self confidence both at professional and personal levels. According to Dunham, (2001:130)) teaching is a profession in crisis with members who are exposed to various forms of psychological abuse in their workplace. This abuse of

teachers detracts from the importance of their job (Kiriyaou & Sutcliffe *in* Travers & Dunham 2001:131; Finlayson, 2006:1, Teacher support network, 2005a:12).

Teachers have expressed their concerns on the issue through various avenues including their unions and associations. Unfortunately disclosure of the level of the stress due to psychological violence they experience has not been widely possible due to the fact that they fear being labelled weak. Nevertheless, the problems are obvious.

Several empirical studies have yielded results indicating the high levels and intensity of this phenomenon in the teaching profession. For example, the prevalence of teacher stress emanating from their abuse in the workplace has been estimated at 30 – 90%. This is according to British report which revealed that between one fifth and one third of teachers reported being unhappy and frustrated (Travers and Cooper *in* Travers, 2001: 131). They further state that one quarter to one fifth of teachers were at self-reporting levels of mental ill health as a result of psychological violence. Additionally, Dunham (2001:132) and Finlayson (2007:2) report that psychological violence is a global problem and that teaching profession ranks high among other professions in which psychological violence is rife and this is a global problem

As indicated, the impact of psychological violence is experienced in five different contexts. Nevertheless, while these contexts make it easy to understand the extent of impact, the interrelationship amongst them has to be appreciated particularly because it is the same individual who could be experiencing these problems at all levels and furthermore the impact in one context affects all the other contexts. Therefore, drawing an exclusive distinction of the impact to contexts is not pragmatic. Nonetheless, in the next section an attempt has been made to classify the impact within the specific contexts.

3.4.1 Biological context

The impact of psychological violence in the biological context is experienced in all the biological sub-contexts as reflected through the physical complaints that are experienced by the traumatized victims. In this context, pathogenic physiological changes usually accompany the symptoms from other contexts, for example, anger and depression in the psychological context may be accompanied by severe headaches and colitis.

3.4.1.1 A list of symptoms of the impact of psychological violence in the Biological context

According to Van der Linde (2000), Di Martino *et al.* (2003:1), Thomas (2003:280), Rook (2005), Olsen (2005), Hall (2005) and Nolfé *et al.*, (2008:68-69 (2007:68-69) the effects in the biological context are many, varied and severe. Some of the victim ailments that are believed to emanate from psychological violence are:

- Hypertension/high blood pressure
- Coronary thrombosis
- Migraine
- Hay fever and allergies
- Asthma
- Pruritis (intense itching)
- Peptic ulcers
- Menstrual difficulties
- Nervous suspension: flatulence and indigestion
- Hyperthyroidism
- Skin disorders
- Constipation
- Rheumatoid arthritis
- Colitis
- Sleep disturbances (sleeping more or less) including experiencing nightmares
- Chronic unexplained pain
- Reduced immunity to infection leading to frequent colds, coughs, flu, glandular fever, etc (especially on days off, e.g. weekends and holidays)
- Chest pains and angina
- Heart attacks and strokes
- Headaches and migraines
- Loss of appetite or increased appetite
- Irritable bowel syndrome
- Reactive vomiting at the thought of going to work
- Skin irritations and skin disorders (e.g. eczema, psoriasis, shingles, internal and external ulcers)

- Hormonal problems (disturbed menstrual cycle, dysmenorrhea, loss of libido, impotence)
- Disturbance of balance
- Joint and muscle pains with no obvious cause
- Back pain
- Scratching
- Physical numbness, especially in fingers, toes and lips
- Eye problems, such as new prescriptions needed "virtually overnight"
- Development of new allergies

There are also some suggestions in the research literature that diabetes, asthma, allergies, fibromyalgia, multiple sclerosis (MS), chronic fatigue syndrome (ME), hidradenitis suppurativa (painful skin disorder) and other types of cancer are caused or aggravated by stress resulting from psychological violence (Moayed *et al.*, 2006:311).

3.4.2 Psychological context

According to Flannery (1999:80), Kivimaki *et al.* (2000), Rayner *et al.* (2002:275), Thomas (2003:280) and Tekkin *et al.* (2007) acute stress disorder from psychological violence leads to medical and psychological complications which may last until death. The psychological effects of workplace psychological violence occur at perceptual, cognitive, emotive, dispositional and self processes. According to Rayner (2002), as a result of psychological violence the thinking processes are also affected which could result in various problems. Examples include decreased problem solving ability, concentration difficulties and irrational judgements. The victims also get emotionally exhausted. At behavioural level the victim may become withdrawn and (or) aggressive as a result of his/her experiences.

Leymann and Gustafsson (1996:251) state that workplace psychological violence also leads to psychological problems in the form of Post Traumatic Stress Disorder (PTSD), psychological injury and shame. The effects are discussed henceforth.

3.4.2.1 Shame

According to Lewis (2004:285) shame is another significant effect of psychological violence as opposed to many studies that have concentrated mainly on trauma and psychosomatic effects. The author puts it succinctly that the concepts, guilt and shame have been used interchangeably in the literature. He describes shame in the context of psychological effects. He states that shame is damaging particularly to the personal identity. It *penetrates the core of our character leading to feelings of exposure, degradation, situational avoidance and silence* (Lewis 2004:285-286). Prolonged feeling of shame does lead to PTSD after all (Einarsen and Mikkelsen, 2003 *in* Lewis, 2004: 286).

3.4.2.2 Psychological injury/damage

Psychological injury is a devastating impact of workplace psychological violence. Rayner and Keashly (2005:275) highlight the importance of psychological injury as an impact of psychological violence where they assert that this injury is stress related and all the effects would be typical occupational stress reactions. When victims are psychologically injured they experience the following symptoms:

- Intense humiliation and they also feel intimidated;
- They feel frightened and they also develop a sense of being punished;
- Clinical observations identified include social isolation, maladjustment, psychosomatic illnesses, depression, compulsion, helplessness, anger, anxiety, and despair, shock and psychiatric problems as symptomatic of psychological injury from psychological violence.

Moreover Rayner *et al.* (2002:14) emphasize that *the person becomes withdrawn, reluctant to communicate for fear of further criticism. This results in accusations of withdrawal, sullenness, not coping or communicating, lack of team spirit etc.* An attempt to cope sometimes leads to dependence on alcohol or other substances which in turn results in impoverished performances, poor concentration and failing memory which can bring accusations of poor performance (Field *in* Einarsen *et al.*, 2003:14; Einarsen & Mikkelsen, 2003,127 -128; Young, Kane & Nicholson, 2007).

Psychological injury is also marked by irritability, angry thoughts, crying, melancholy, paranoia and loss of mental coping resources (Mikkelsen & Einarsen, 2001:394; Hoel &

Faragher, 2004:368-369). It also shows in hyperactivity and compulsion. Suicide and suicidal tendencies are sometimes observed in psychologically injured victims (Di Martino: 2003:15). Additionally, the psychological injury is also identified by, for example, desperation, total helplessness, and significant rage about lack of legal remedies when faced with abuse in the workplace.

3.4.2.3 Post traumatic stress disorder

The effects of psychological violence and associated work trauma are observed in Post Traumatic Stress Disorder (PTSD). Liefoghe (2004) argues that in the research literature there is still a debate as to whether PTSD is an appropriate psychological diagnosis that can be linked to workplace psychological violence. However, evidence in research points to the direct link between PTSD and workplace psychological violence (Leymann & Gustafsson, 1996:251; Einarsen *et al.*, 1998; Mikkelsen & Einarsen, 2002; Randall, 2001:150; Di Martino, 2003:15; Hoel & Faragher, 2004:369).

This phenomenon presents itself through re-experiencing and relieving painful memories even nightmares as well as avoidance numbing of responsiveness. Fear arousal is one of the symptoms. Various studies provide empirical evidence to the effect that the symptoms that many long term victims of psychological violence have are indeed similar to those of post-traumatic stress disorder. This is further reiterated by Lewis (2004:295) who states that for many victims the physical-emotional scars run deep, The need to relive, dwell upon; anguish over their experiences presents a picture of people who remain connected to what happened to them long after psychological violence has ended.

A study undertaken by Einarsen *et al.* (1999) found that 75% of psychological violence victims presented with stress symptoms indicative of PTSD. Furthermore the level of PTSD symptoms related directly to the intensity of the reported psychological violence behaviours. This was further corroborated by Mikkelsen and Einarsen (2000) where they used the American Psychiatric Association (2001), DSM IV-TR manual criteria to assess the victims of psychological violence and 29% of the victims suffered from PTSD. It is interesting to note that psychological violence is so destructive that psychological impairment leads to a situation where the symptoms persist even long after psychological violence has stopped.

While various debates on the relevance of PTSD diagnosis for psychological violence victims continue with some researchers proposing or presenting alternative diagnosis such as prolonged duress stress disorder and generalized stress disorder the important issue is that psychological violence is very traumatic as evidenced from the research literature.

3.4.2.4 A list of symptoms of the impact of psychological violence in the psychological context

Many studies have provided evidence of the psychological impact of psychological violence for the victims, for instance, Leymann and Gustafsson, (1996) Einarsen *et al.*(1998), Flannery (1999), Mikkelsen and Einarsen (2000), Kivimaki *et al.*(2000), Randall (2001), Mikkelsen and Einarsen (2001), Rayner *et al.* (2002), Einarsen and Mikkelsen (2003), Di Martino (2003), Field *in* Einarsen *et al.*(2003), Thomas (2003), Lewis (2004), Hoel and Faragher (2004), Young *et al.* (2007) and Tekkin *et al.*(2007) .

The following is a list of symptoms of psychological distress generated from the research literature:

- Tearfulness
- Irritability, short-temperedness, sudden intense anger and occasional violent outbursts
- Hyper vigilance and an acute sense that time is passing
- Paranoia
- Flashbacks and replays which one is unable to switch off
- Impaired memory, forgetfulness, memory which is intermittent, especially of day-to-day trivial things
- Difficulty in learning new information
- Inability to concentrate
- Exaggerated startle response
- Hypersensitivity - almost every action or remark is perceived as critical or threatening, even when one knows that it is not
- Obsessiveness where the experience takes over one's life, one can't get it out of his/her mind
- Free-floating anxiety
- Depression (reactive, not endogenous)

- Excessive shame, embarrassment and guilt
- Undue fear
- Low self-esteem and low self-confidence
- Sullenness (a sign that the inner psyche has been damaged)
- Detachment, avoidance of anything that reminds one of the experience
- Physical and mental paralysis at any reminder of the experience
- Increased reliance on drugs (caffeine, nicotine, alcohol, sleeping tablets, tranquilizers, antidepressants, other substances) resulting in further compromised health
- Comfort spending (and consequent financial problems)
- Thoughts of suicide and in some cases homicide
- Exaggerated startle response
- Sudden anger or violent outbursts
- Flashbacks, nightmares, intrusive recollections, replays, violent visualizations
- Sleep disturbance
- Exhaustion and chronic fatigue
- Guilt
- Feelings of detachment
- Phobias about specific daily routines, events or objects
- Irrational or impulsive behaviour
- Loss of interest
- Loss of ambition
- Poor concentration
- Impaired memory
- Emotional numbness
- Low self-esteem
- An overwhelming sense of injustice and a strong desire to do something about it

3.4.3 Spiritual context

In the spiritual context the impact of psychological violence is seen in the existential processes. The impact in this context is observed in existential crisis and lack of inner peace. It is further perceived when the victim's sense of coherence of the world and events thereof, is compromised. According to Antonovsky (1987:19) a sense of coherence is a ... *global orientation to the world, perceiving it to a greater or lesser*

extent, as comprehensible, manageable and meaningful. Furthermore loss of meaningful purpose in life is also observed in that as a result of the experienced psychological violence the victim views the world as unsafe and disorderly due to the overwhelming nature of the traumatic event. Consequently victims are left without direction. They also experience a deep sense of betrayal and inability to experience joy and pleasure (Flannery, 1999:136 Rayner *et al.*, 1999:2; Namie & Namie, 2000:3; Randall, 2001:9).

Finally, the impact in the spiritual context, shows in a strong sense of denial, which is an inability to convince oneself that the experience actually took place. It is also seen in bewilderment and confusion in understanding what is happening and why it happened. Another effect is a deep sense of unworthiness undeserving and non entitlement. The victims have a sense of guilt and detachment from reality (Hoel & Cooper, 2000; Mikkelsen & Eirnasen, 2002).

3.4.4 Ecological context

The impact in this context is seen in interpersonal relationships both in and out of the workplace, which includes society, family and natural and cultural physical environment. It is important to highlight that the effects in both social and family network and in the workplace tend to overlap; nonetheless, an attempt is made to discuss them separately.

3.4.4.1 The impact on the social and family network

Turney (2003:2-3) argues that the impact in this context is reflected in how interpersonal relationships change negatively which can be very injurious on the victim who is damaged already. These include inability to maintain close relationships or even choose appropriate friends and mates. Other symptoms include social withdrawal, and hostility towards family which compounds the problem because family is supposed to be a strong support system that an individual can turn to in times of trouble. The victim sometimes loses the ability to perform even the basic tasks in the family and social network.

Randall (2001:7) states that evidence from clinical research attests that the impact of psychological violence is not only felt by the victims but it affects the people who are close to them as well. These include family members, who sadly *watch a saddening change steal over their mothers, fathers and partners ... they watch humour and confi-*

dence ebb away to be replaced by low mood and fearfulness. As a result of their experiences the victims' interpersonal relationships suffer through a loss of sense of self and they become too introspective in trying to understand why they are subjected to psychological violence.

In addition, some families have lost their members as a result of the psychiatric illnesses they develop as a result of their experiences. Randall (2001:163) and Thomas (2005:280) attest to the same effects and they also identify decreased sociability due to preoccupation with the unpleasant experiences as another effect.

Other effects are seen in palliative coping strategies such as smoking, drinking and drug abuse and losing personal possessions which affects the family network.

The following list summarizes the impact in the family and social network:

- desertion of social engagements
- detachment from family ties
- disengagements from father/mother, spouse, son/daughter roles and responsibilities
- intolerance of family problems
- loosening of friendship relations
- loss of income
- increased consumption of alcohol and other intoxicating substances at home

3.4.4.2 The impact in the work environment

According to Randall (2001:7), Turney (2003) and Thomas (2003) the social effect of psychological violence in the work environment manifests itself in the form of social isolation of the victim, stigmatization, voluntary unemployment and social maladjustment.

Other identified general effects related to the workplace include high turnover where victims would resign or take early retirement. A high rate of sickness absence for the victims is also rife, which also leads to an intention to leave the profession. The breakdown of interpersonal relationships at work is also evident. Development of cynical attitudes towards colleagues and management and evaluating oneself negatively, results in feelings of lack of personal accomplishment. In the teaching profession some-

times the relationships with pupils also deteriorates. The impact observed in the workplace is as follows:

- avoiding meetings
- complaints of physical discomfort
- difficulties in qualifying for other jobs
- litigation
- additional retirement costs
- damage to the company's name
- decrease of competitiveness and product quality
- disability and unfitness for work
- high staff turnover
- reduced individual and group productivity
- reduced motivation, satisfaction and creativity
- reduced number of clients
- repeated transfers
- replacement costs
- sick absenteeism
- increased consumption of alcohol and other intoxicating substances in the workplace

There is an experience of reduced performance as well as mood changes. Behavioural changes observed from psychological violence could include unreasonable and reckless behaviour. There is further evidence that victims of psychological violence become aggressive and less tolerant of other people. They also have their trust and confidence destroyed through the maltreatment by others in their workplaces. It is also significant to note that as with the effects in all the contexts, this situation cuts across all cultures (Arikewuyo, 2004:196).

According to McCormick (2007) and Horiuchi and Mingus (2008), as a result of incessant abuse in the workplace, in a well known case of violence in the American postal services, this led to a spate of killings committed by postal services workers. The murdered victims included colleagues, the management, members of the police force and members of the public. It is stated that between 1986 and 1997 forty people had been killed in approximately twenty incidents. These series of events seemed to stem

from workplace rage fuelled by poignant experiences that the people were exposed to in their workplaces. A term "going postal" evolved from these distressing events that involved United States postal workers in 1986. "Going postal" means suddenly becoming extremely angry beyond control, possibly to the point of violence. This is a further evidence of the destructive nature and consequences of psychological violence in the workplace.

3.4.5 Metaphysical context

The impact of psychological violence in the metaphysical context is experienced in the symbolic abstract environment for the victims. According to Herman (*in* Liebenberg 2008:40), traumatized individuals believe that they have no meaningful purpose and are also not able to make sense of themselves. Furthermore, they question the religious, esthetical, cultural belief systems and values within which they were raised. They also tend to view every being as malicious and insensitive to other's suffering, as a norm and not an exception. Finally, they may also believe that everyone is out for themselves and have a fatalistic view of life which leads them to believe that alteration of their circumstances is impossible. Consequently, this leads to helplessness on their part.

It is evident from the impact of psychological violence discussed in the foregoing sections, that psychological violence is traumatic for the victims. Therefore, it becomes critical that their health be promoted in order to counteract the impact of psychological violence and to prevent further problems. Hence the next section discusses health promotion with a view to demonstrate its absolute necessity for addressing psychological violence.

3.5 Health Promotion

According to Arandelovic *et al.* (2006:28) the links between work and health are clear. These authors also state that distressing working practices and stress such as that emanating from psychological violence affects the employees' health. This is demonstrated by for example, high levels of sick absences. They further argue that while working life has changed, attitudes towards work have also changed. According to them, workplaces provide opportunities for social contacts for employees, which determine or influence their health. This means that when such relationships are good they

result in enhanced health of the employees. But if the relationships are destructive the employees' health gets negatively affected.

Health promotion is important in the workplace for prevention of disease, disability or even death. This is also due to the fact that the workplace provides a setting and the opportunity to deal with health issues and improve the health of employees (Sanders & Crowe, 1996:199). According to Scriven and Orme (1996:9) various scholars and groups bring their own professional orientation to the description of health promotion meaning that to some extent there is still no commonly accepted definition of health promotion. In order to understand health promotion it is important to start off by defining the concept health because it is the understanding of what health is which underpins health promotion (Katz *et al. in* Huiskamp, 2002:38).

3.5.1 Health

Everything connected with wealth and happiness and a long life depends upon health (Means *in* Miller, 2003:5). Health is a dynamic concept that is prone to various interpretations across a broad spectrum of professions. World Health Organisation, (1986:9) describes health *as a state of complete physical, mental, and social wellbeing and not merely the absence of disease or infirmity*. This definition has been widely criticized for its narrow view of health (Downie, *et al.*, 1996). According to Kirsten *et al.* (2009:1) health, *is the state of optimal functioning by a human being, a state of enjoying a good quality of life and experiencing a feeling of complete equilibrium, both as a result of having succeeded in optimizing the potential in the total living environment*.

According to Naidoo and Wills (2000:6) and Banyard (2004:2-3) the etymology of the word *health* serves to direct our understanding and the use of the concept, health. It is derived from an old English word *heal* which means whole. This therefore means that when reference is made to health, this should be done holistically, including the person's whole wellbeing. In order to accommodate the holistic view of health, Aggleton and Homanns and Erwel and Simmet (*in* Naidoo and Wills 2000:6-7) and Butler (2001:3-8) classify health into various dimensions namely:

- Physical health
- Psychological health
- Ecological health

- Spiritual health
- Sexual health

This particular stance takes cognizance of the various contexts within which a person exists and how their health can be affected within any or all of the dimensions as observed in the impact of psychological violence on the health of victims. These dimensions are related to those identified within the eco-systemic model (Kirsten *et al.*, 2009) which serves as the conceptual framework for this study. The dimensions are

- Biological
- Psychological
- Ecological
- Spiritual
- Metaphysical

The different dimensions individually and collectively interact to determine a person's health (Kirsten *et al.*, 2009).

Following from the definition of health, the focus of the next section is health promotion which is the basis of workplace health promotion.

3.5.2 Conceptualization of health promotion

Health promotion has its origins in the Ottawa Charter for Health promotion (1986) which emerged from the first international conference of Health Promotion whose main objective was the achievement of Health for All by the year 2000 and beyond. It defined Health promotion as the process of enabling people to increase control over and to improve their health in order to reach a state of complete physical, mental, and social wellbeing. It is critical for an individual or group to have the ability to identify and to realize aspirations, to satisfy needs and to change or cope with the environment (Ottawa Charter for Health Promotion, 1986).

Kemm and Close (1995:3) on the other hand, state that health promotion refers to all activities which are intended to prevent disease and ill health and to increase wellbeing. It is further conceptualized as the combination of educational environmental supports for actions and conditions of living conducive to health (Egger, *et al.*, 1999:5). According to

Vergnani, *et al.* (1996: 92) health promotion is a social, educational and political action that enhances awareness of health fosters healthy life-styles and community action in support of health. It also aims at empowering people to exercise their rights and responsibilities in shaping environments, systems and policies that are conducive to health and well being.

It is evident from these various definitions that health promotion is a multidisciplinary issue which does not only depend on doctors, nurses and other professions aligned to medicine, but health and enjoyment of life is seen as everyone's responsibility (Kemmer & Close, 1995:15; Kirsten *et al.*, 2009).

As such health promotion emphasizes the importance of effective prevention of disease and increasing of well being for all the people in the society. In order to achieve this, there are modes of delivery of health promotion which are discussed as follows:

3.5.3 Modes of health promotion

According to WHO (1986), Naidoo and Willis (2000) and Tones and Green 2004:15) there are three strategies that can be employed in order to promote health and they are discussed accordingly.

3.5.3.1 Advocacy

This involves creation of conditions that are favourable to health. It also has to do with representation of the interests of the disadvantaged group through speaking on their behalf and even working to influence policy.

3.5.3.2 Enablement

It has to do with creation of a supportive environment. This is achieved through presentation of equal opportunities to enable all people to achieve their optimum health potential. It involves assisting communities and people in organizations to identify their felt needs and real needs which will lead to the development of support networks to cater for the identified needs. This gives the power to people to help themselves.

3.5.3.3 Mediation

This happens between and among different role players and interest groups through campaigns and participation in working groups in order to ensure the pursuit of health (WHO, 1986; Naidoo & Wills, 2000).

The next section presents the models of health promotion. These models form the basis on which various elements of health promotion are derived, for example, principles, strategies and interventions.

3.5.4 Theoretical models of health promotion

Different researchers conceptualize the concept of health promotion differently as evidenced by different theoretical models which are used to explain health promotion in the research literature and they are presented as follows.

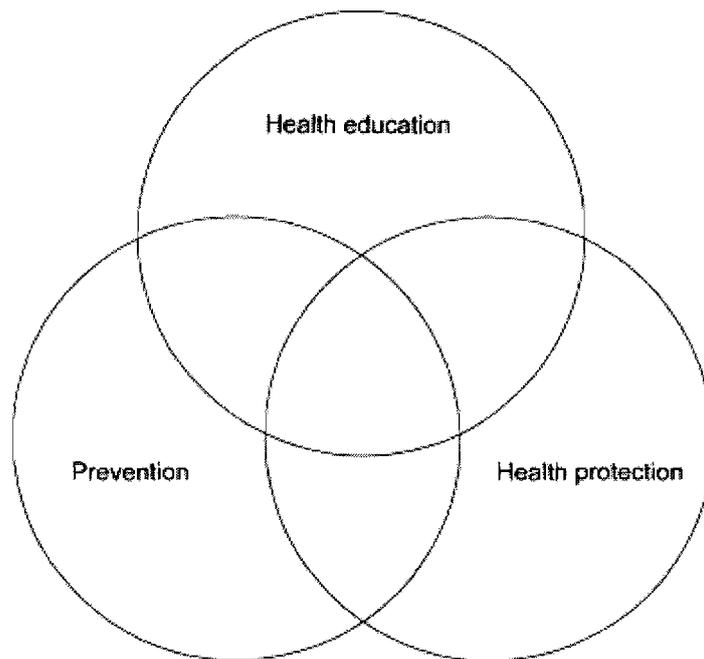
3.5.4.1 Tannahill model

According to Downie *et al.*(1996:102) and Naidoo and Willis (2000:108), this is a comprehensive model which is described in terms of overlapping spheres which are health education, health prevention and health protection (cf fig 3.1). It identifies seven domains within health promotion namely:

- preventive services;
- preventive health education;
- preventive health protection;
- health education for preventive health protection;
- positive health education;
- positive health protection;
- health education aimed at positive health protection.

The core concepts of these model address health promotion in the following manner: health education primarily focuses on the enhancement of well being and prevention of ill health by influencing knowledge and attitudes, while on the other hand prevention combats the risk of developing ill health through medical interventions and finally health protection safeguards population health through legislative, fiscal or social measures.

Fig 3.1 Tannahill health promotion model : Downie *et al.*(1996:59)



3.5.4.2 Caplan & Holland (1990) model

According to Naidoo and Wills (2000:104-105) this model views health promotion in terms of four paradigms namely:

- The traditional perspective which advocates the provision of knowledge by the experts which will result in behaviour change.
- The second one is the humanistic paradigm in which the emphasis is on enabling people to use their personal resources as well as skills to allow them to develop their own perceived healthy life styles.
- The third paradigm is the radical humanist paradigm which is concerned with empowering people by raising their consciousness and also exploring their personal responses to health issues. Individuals are then encouraged to form social organizational and economic networks.
- Finally there is the radical structuralist perspective which focuses on the structural inequalities as the cause of health problems. According to this perspective the role of health promotion is to tackle the relationship between health and social inequalities. The model is useful in showing that practice is the outcome of deeper social conflicts and values.

3.5.4.3 Beattie's (1991) model

Naidoo and Wills (2000:105) state that Beattie's model of health promotion is generated from the four strategies as follows:

- Health persuasion, where by the interventions are directed by the experts yet targeted for the individuals.
- Legislative action in which the aim of the intervention is to protect communities.
- Personal counselling strategy, which is where the client is the leader and the role of the health promoter, is one of facilitator than expert.
- Community development strategy has some similarities to personal counselling strategy because it aims to empower communities through enhancement of their skills.

3.5.4.4 Tones' model

This model has the empowerment approach at its core. It does this through enabling people to take control of their own health. It views empowerment as both a core value and core strategy which serves to define health promotion. This model further states that education is very critical to empowerment and consciousness raising. Thus when people's level of consciousness is raised they are then able to influence and create pressure for a healthy public policy (Naidoo & Wills, 2000:109).

The emphasis on these models is that positive change through health promotion can occur when everyone is involved.

The next section presents the principles of health promotion

3.5.5 Principles of health promotion

The following key principles are identified by Scriven and Orme (1996:11-12) and they form the basis for more detailed stated principles of health promotion. These are firstly, an ideological principle which states what the purpose of health promotion should be and it serves as a kind of moral imperative; and secondly, there is a functional principle which is best viewed as a means to a moral end in terms of what health promotion is supposed to achieve. According to Scriven and Orme (1996), Oliver and Peersman (2001) and Tones and Green (2004), the following principles focus on health (it should

be viewed holistically with attention given to its positive aspect that is wellbeing should be acknowledged yet this should not be viewed as an end in its own right but a means to an end, which is an achievement of a socially and economically productive life):

- **Equity**

This emphasizes that inequality between and among nations is fundamentally unacceptable.

- **Health Public policy**

This states that the major determinant of health and illness is the physical, cultural and socioeconomic environment in which people live and work. It is critical of a narrow individualistic focus on personal responsibility for health. This is viewed as blaming the victim at the macro level. Accordingly, the most important purpose of health promotion is building a healthy public policy in order to create a healthy environment which will enable people to make healthy choices.

- **Reorientation of health services**

The emphasis here is on the critical nature of health, which warrants that it should not be the sole responsibility of medical professionals as indicated earlier. Therefore, demedicalisation of health is an important goal of health promotion. This involves acknowledging the substantial contributions which other services are making. Thus services such as housing, transport, leisure and recreation and economic development may all influence health for good or for ill. This demonstrates that intersectoral collaboration is very fundamental in realizing health promotion in all the services for the public good.

- **Empowerment principle**

Naidoo and Wills (2000:5) and Mark *et al.* (2005) posit that empowerment approach comprises a mixture of ideological and technical attributes. Empowerment is a state in which an individual actually possesses a relatively high degree of power, that is having the resources which enable that individual to make genuinely free choices. Power cannot be absolute even if it does, that can be undesirable since it would militate against the rights of other people to make

choices. Indeed one of the key features of empowerment is the system of checks and balances which safeguards the rights of other people.

When individuals are empowered, they demonstrate significant psychological characteristics such as believing in personal control which includes realistic causal attributions coupled with a high level of self esteem guided by a realistic self concept, valuing other people and their right to self-determination and finally possessing health and life skills (Tones, 1994, *in* Scriven & Orme, 1996). According to Naidoo and Wills (2000:86) when people are empowered the dimensions of health gain are realized, these being, equity, adding years to life, adding health to life and adding life to years.

3.6 Workplace health promotion

Workplace health promotion has its roots in the health promotion as discussed in this chapter. Workplace health promotion focuses on the combined efforts of employers, employees and society to improve the health and well being of people at work in the broadest sense. This includes for example, improving quality of life and psychological, physical and social contexts (Harvey *et al.*, 2000 & Mauri, 2005).

3.6.1 Approaches to workplace health promotion

Harvey *et al.* (2002:42) states that the issues of work related violence, both physical and psychological provides challenges within the context of the development of a health promoting workplace, advocated by the European Union in the Luxembourg declaration on workplace health promotion.

For a very long time employee health issues have been addressed from a secondary prevention and compensation approach which mainly focused on identifying, treating and rehabilitating employees whose job performance has been negatively affected by the abuse of alcohol and drugs. However, the current trend is to address health issues of employees before they become problems. Many organisations adopt policies, programmes and procedures that aim at promoting health and preventing illness. These are primary prevention and health promotion orientation. Therefore, in order to succeed in their endeavour workplace health promotion orientation combines the following, diagnostic, educational and behaviour modification activities and these are initiated, endorsed and supported by the employing organisations (Murphy, 1995:74).

There are four basic approaches to health promotion identified in the research and literature. They are presented henceforth.

3.6.1.1 Medical or preventive approach

This particular approach focuses on three levels of intervention which are primary prevention level where the major focus is preventing the illness. The secondary level deals with combating aggravation of an illness once an individual is ill. Finally, the secondary prevention deals with the reduction of further disability and suffering to the ill and to also prevent the recurrence of an illness (Naidoo & Wills, 2000; Mark *et al.*, 2005).

3.6.1.2 Behaviour change approach

The aim of this approach is to influence people to change their behaviours with a view to improving their health. It views health as an individual property which does give people the power to change behaviours in ways that are beneficial to them in the long run. It assumes that human beings are rational decision makers whose cognitions inform their own actions. While this view is popular, it is also important to bear in mind that behaviours could be a result of factors and circumstances beyond an individual control. This approach is synonymous to health education (Naidoo & Wills, 2000:95; Mark *et al.*, 2005).

3.6.1.3 Educational approach

This approach focuses on the development of people's skills through provision of knowledge which enables people to make informed choices, regarding their health behaviours. This approach highlights the relationship between acquisition of knowledge and behaviour change which leads to change in attitude which consequently leads to behaviour change. The educational approach utilizes psychological theories of learning with three aspects alluded to earlier. These are cognitive (information and understanding) affective (attitudes and feelings) and behavioural (skills) (Naidoo & Wills, 2000:97).

3.6.1.4 Social change approach

This is also known as radical health promotion. It draws a direct link between socio economic environment and health. Thus while people can make choices regarding their health, to make this easier involves the creation of a viable socio economic environment in order to realize the goals of health promotion.

3.6.1.5 Settings approach as framework for workplace health promotion

This particular approach is similar to the eco-systemic model which has been used as a conceptual framework for this study. (Kirsten *et al.*, 2009). Miller (2003:3) reviewed literature on ecological approach to school setting. He observed that there are a number of complex sub-systems that interplay between physical, mental, social, and environmental aspects with a view to effect positive change. The study highlighted the development of health promotion movement in the schools from the 1970`s through to the present times. Thus in the 1970`s school health comprised of teachers who provided information to students on behaviours that are risky to health. During the 1980`s the focus was on development of skills and attitudes assisting mainly students to make healthy lifestyle choices. This was the period that saw the Ottawa Declaration for Health by WHO, in 1986. The 1990`s saw the proposal on Global School Health in 1998, by WHO.

The settings approach provides a sustainable framework for addressing work stress emanating from psychological violence (Noblet, 2003:351). According to Miller (2003:13) and Noblet (2003:351-352), this is based on the systems theory which sees school in its totality, understanding of the interdependencies and interrelationships between significant components of the school as an organisation. Setting is described by Nutbeam (*in* Miller 2003:14) as a place or school context in which people engage in daily activities in which environmental, organizational and personal factors interact to affect health and wellbeing. In this way schools are seen as open systems with each school being open to change and innovation as well as being vulnerable to both conflict and tension. This particular framework advocates the view of a school as part of the community in which it is based instead of seeing a school as a separate entity based within the community.

According to this approach the sub-systems within which people exist include family, peer groups, organizations, community, and culture, physical and social environment, economic and political. These can either damage or enhance life. Since this is based on social ecological theory, it is important to provide an outline of the core principles of ecological theory which lays the foundation for understanding systems theory. According to Miller (2003:14-18) and Stokols *et al.* (in Miller, 2003:15) the following are the core principles of ecological theory;

- **Multidimensional analysis:**

This entails ecological analysis from various perspectives which are relevant to health and well being for example social cohesion, emotional well being development, maturation and physical health status.

- **Differential dynamic interplays:**

It has to do with interrelationships between situational and personal factors, for instance environmental factors may affect people differently depending on factors such as, personality, health practices and perceptions

- **Relevance of systems theory**

This involves the dynamic interaction between people thus the application of the principles of systems theory.

- **Interdependence of environmental conditions**

This involves the acknowledgement of the importance of the interconnections between multiple settings and life domains and the close interlinkages between the social and physical facets of those settings.

- **Inherent interdisciplinary**

It involves the integration of multiple levels of analysis for example, at macro level it will be preventive strategies of public health, and at micro level it is preventive strategies from medicine

3.6.2 Workplace health promotion initiatives

There are two basic dichotomies that define and influence workplace health promotion initiatives. These are socio environmental change versus individual change. Socio economic interpretation targets the system instead of blaming the victim. It thus acknowledges the impact of structural factors on ill health. On the contrary the individualistic interpretation emphasizes the individual responsibility for one's health. It postulates that health compromising behaviour by individuals is the major cause of ill health. It further argues that people adopt these behaviours due to lack of skills and information or it could also be due to negative attitudes. As a result programmes here would target individuals and ignore structural factors. The following are the work health promotion strategies in the school.

3.6.2.1 Health Promoting School (HPS)

The school as an organization both directly and indirectly takes care of the health issues of its members. These include teachers who are thus contributing immensely to the economic development of their countries through preparing the future workforce of their countries. It therefore becomes crucial that the concept of a health promoting school is discussed.

According to Meyer (2000:4) Health Promoting School (HPS) originated in the WHO Ottawa Charter for health promotion and the healthy communities movement in the early 1990's. This is linked to healthy hospitals and healthy workplaces agencies among other movements.

Beattie (*in* Scriven & Orme, 1996:129), Cullen *et al.*(1999:376) and Moon *et al.* (1999) posit that Health Promoting School (HPS) concerns school as a total environment whose focus goes beyond the teaching and learning of and about health matters. It focuses on the achievement of healthy lifestyles for everyone in the school. The latter is achieved through the creation of supportive environments that are conducive to the promotion of health. Vergnani *et al.* (1996:5-6) further define a health promoting school as a school in which the principles and strategies of health promotion are applied. They outline this as the educational, political, economic, environmental and medical strategies which are designed and aimed at the reduction of diseases and promotion of health in the school.

3.6.2.1.1 Criteria for a health promoting school

According to Beattie (*in* Scriven & Orme, 1996:13), Ronson (2003:1) and Viig and Wold (2005: 84). In order for a school to be health promoting it has to meet the following criteria:

- The active promotion of the self esteem of all pupils by demonstrating that everyone can make a contribution to the life of a school;
- The development of good relations between staff and pupils and between pupils in the daily life of the school;
- The clarification for staff and pupils of the social aims of the school;
- The provision of the stimulating challenges for all pupils through a wide range of activities;
- Using every day opportunity to enhance the physical environment of the school.
- The development of good links between associated primary and secondary schools to plan a coherent health education programme;
- The active promotion of the health and well being of school staff;
- The consideration of the role of staff exemplars in health related issues.
- The consideration of the complementary role of school meals (if provided) to the health education curriculum;
- The employment of specialist services in the community for advice and support in health matters;
- The development of the education potential of the school health services beyond routine screening towards active support for the health education curriculum.

The health of staff is a very critical aspect of a health promoting school because the staffs play an important role in influencing all the activities and initiatives aimed at building a successful health promoting school.

3.6.2.2 Investors in people scheme (management system)

According to Noble (1996:18), Webb (2000) and Grugulis and Bevitts (2002) this system is very active in the UK. It works according to the following criterion of the complementary aspects of school organization.

- Firstly, the aims of the school and the effective communication of those aims to the staff are very important;
- Secondly, there follows the reviewing, planning and setting of targets relating to staff development to deliver the aims;
- Thirdly, the implementation of the plans through staff development should follow;
- Finally, the evaluation of the investment in training and development is critical to the success of the whole process.

Investors in people answer the question of whether people are fit for purpose. Evidently teachers must be fit for the job and this can be achieved through addressing psychological violence.

3.6.2.3 Employee Assistance Programmes(EAP)

Employee assistance programmes can either be internal or external. According to Quick *et al.* (1992:40) the scope and content of psychological health programmes whether provided within an EAP context or not should be adjusted to accommodate such local factors as the nature of the work performed and special needs of the workforce such as teachers in the context of this study.

An employee assistance programme is defined as a work focused programme which assists in identifying and resolving of employee concerns which do affect or are likely to affect their performance. The concerns can be mainly personal which includes health, relationship, family, financial, emotional, legal, anxiety, alcohol, drugs and related issues. They can also be work-related directly, which could be work demands, fairness at work, working relationships, harassment, and bullying, personal and interpersonal skills, work life balance, stress and other related issues. It includes a mechanism for providing counselling and other forms of assistance, advice, and information to employees on a systematic and uniform basis and to recognized standards. Furthermore, it is aimed at early identification and resolution of both work and personal

problems that may negatively impact on the employee's performance. EAP also provide specialized support for managers on people management, team motivation and motivation within ones` human resource policy, coaching for preparation of, and rehearsal for, handling challenging situations, referral service for members of staff for home and /or work-related problems and support and advice on own professional and personal effectiveness. Provision of support to employees through coaches and mentors as well as professional networks such as unions have also been mentioned (Meyers, 1994:2; Reddy, 1994, Joja, 2004; Goetz, 2008).

3.6.2.4 Total Quality Management (TQM)

TQM in the school is a new management approach which aims to produce quality organizations. From this emanates Total Quality Education (TQE) which is fundamentally the application of TQM in the school. According to this approach the school is viewed as an organization like any other and it becomes so on the basis of having the following characteristics, the people, financial administration, recruitment and personnel management. TQE contains all the elements of TQM which are dignity, respect and value of all human potential which would not enable psychological violence to thrive (Van der Linde, 2000). According to Nobel (1996:18), Grugulis and Bevitt (2002) and Webb (2000) TQE is utilized to deal with workplace stress through the following strategies:

- Problem solving method by providing solutions to problems to avoid time wastage. Learning the correct attitude which, therefore, means that mediocrity is not accepted. Instead there is emphasis on quality which would presumably translate to less stress and greater work satisfaction.
- Identifying who is the client for instance, in a school setting the client is the society through the students.
- Compulsory in-service training for all those who are involved in education with a view that this helps to eradicate uncertainty which is unhealthy and can encourage psychological violence. The reduction of anxiety is another advantage because anxiety obstructs efficiency causing resistance to change and inhibiting communication. Total quality management encourages the principal to motivate members to try out new ideas (Van der Linde, 2000; Appleyby & Jackson, 2000; Rampa, 2005).

While health promotion interventions provide a coordinated structure to the whole process, it is still very critical to understand how and why health promotion can succeed or fail in the workplace. Therefore the next section presents features of a successful health promotion programmes in the workplace.

3.7 Features of an effective workplace health promotion initiative in a school

Sanders (*in Sanders and Crowe, 1996: 208*) contends that effective programmes involve personal, face to face and individual health promotion activities rather than general educational programmes. Such programmes have a coordinated and planned approach as outlined:

- Involvement of staff at all levels of the organization, such as management, employees and unions who have to be involved in planning implementing and evaluating programmes;
- The programme should have backing from senior management and be seen to be taken seriously by an organization;
- Programmes should be directly related to the expressed and measured needs of the workforce;
- A range of health promotion interventions should be offered because the effects of health promotion campaigns over a long period are important particularly in addressing issues such as stress precipitated by psychological violence;
- It is most effective to target high risk groups than to offer general health promotion programmes.

3.8 Presumed Benefits of Health Promotion

The benefits of workplace health promotion have been highlighted in the research. For instance, National Wellness Survey Reports in Canada emerged with a different side to the situation whereby 64% of the workplaces are offering wellness programmes. They do so because they acknowledge that healthy employees are valuable. In addition absenteeism is greatly reduced and there is also considerable cost containment. Another study in the USA undertaken in 2000, revealed that 84% of the respondents felt that they keep employees healthy, 75% stated that they reduce medical costs and 64% stated that they improve productivity. There was also an emphasis that for health

promotion to succeed it has to contribute to the mission, long-term goals and short term priorities of the organization it serves. It further has to have the interest of those who approve the budget (Greef & Van den Broek, 2004).

Donaldson (*in* Murphy, 1995:75) summarized the benefits of a successful health promotion endeavour as follows

- reduction in costs due to absenteeism
- reduction in costs due to reduced tardiness
- reductions in costs due to reduced voluntary turnover
- reduced medical costs
- reduced use of medical facilities
- reductions in disability and workmen's compensation
- reduced insurance premiums
- improved employee holistic health
- increased employee performance
- lower levels of work related stress
- increased employee job satisfaction
- increased organizational commitment and loyalty
- improved employee self image and greater employee creativity
- reductions in employee strikes and grievances
- improved corporate image
- improved labour relations
- improved recruiting
- improved work environment

While these benefits are remarkable to observe, some researchers question studies which yielded these results in terms of the inherent methodological flaws. Thus there has been an evaluation of successful workplace health promotion programmes and the methodological dilemmas identified are for example, cause and effect issues where it is stated that, for example, it is not always possible to draw a direct link between the absence of illness of a staff member and work related stress from psychological violence. Furthermore, it does not automatically follow that those present at work are 100% productive all the time. Again there is a problem of choice of variables to include

in these studies. Time frame analysis is also a critical issue because there is no uniformity regarding the time frame appropriate for analysis of the benefits of a workplace health promotion programme. Finally, quantifying health benefits is a challenging task which raises questions of validity and reliability (Greef & Van den Broek, 2004:28)

3.9 Barriers to workplace health promotion

According to Noblet (2003: 357) and Greef and Van Den Broek (2004) there are various factors that undermine the implementation of workplace health promotion. According to a survey undertaken in Europe the following results emerged; 55% of the barriers are attributable to the size of the workplace, 11% relates to people declaring that they are too busy, and 9% finding health promotion activities unnecessary and not worth it. Other factors identified are lack of information on the relationship between work characteristics and employee health and lack of confidence and knowledge to identify and address organizational level issues.

3.10 Health promotion within the Lesotho education system

Health promotion in Lesotho is still at an infancy stage except for health and physical education which is offered in the primary schools in Lesotho. Health promotion in Lesotho is underpinned by School Health Policy, (Draft Document) (cf. Lesotho, 2005) which among others advocates the multisectoral approach to school health. It acknowledges the importance of both the learners' and employees' health.

The emphasis is on integration of health issues into the curriculum. It would seem that the policy still sees health as a medical issue for example *promotion and prevention of preventive health through screenings in order to make early diagnosis and referral* (Draft, Lesotho School Health Policy, 2005:10). Nevertheless there is some specific mention of promotion of a healthy physical and emotional environment through provision of psychological guidance and counselling. It also seeks to promote behaviours that lead to employee wellness and their health knowledge which therefore highlights the importance of networking among different ministries and departments. Finally, school health instruction is intended to be very comprehensive and content areas highlighted are very critical to the promotion of health.

Health promotion in Lesotho education system emphasizes the following aspects:

The ethos (culture) that has been established by the atmosphere of the school including:

- the school's code of discipline
- the prevailing standards of behaviour
- the attitudes adopted by staff towards pupils
- the values implicitly asserted by its mode of operation

It seems that the focus on health promotion in Lesotho is divorced from the concept of holistic view of health as discussed and conceptualized in this chapter. Rather the focus is on health education exclusively except for a general mention of wellness and provision of guidance and counseling services for other problems.

3.11 Summary

The impact of psychological violence in the workplace on the health of victims is apparent in all areas of their existence. These effects lead to trauma on the victims. This therefore implies the need for health promotion to buffer the effects of psychological violence.

A combination of strategies is ideal to do so because the focus would be on both the individual and environment. This means that the interventions are targeted at changing interpersonal, organizational, community and public policy factors which support and maintain healthy behaviours. The assumption being that changes in the socio environment will produce individual changes. Additionally, in order to implement environmental changes there is evidently a need of support from individuals.

The presentation of psychological violence in chapter 2 and the discussion of the impact of psychological violence and description of health promotion in chapter 3 have provided the background that guided the empirical part of this study. The next chapter reports on the research process undertaken in this study.

CHAPTER FOUR

RESEARCH DESIGN AND RESEARCH METHODS

4.1 Introduction and orientation

This chapter discusses all the research design and methods that were utilized to collect and analyze data in this study. The study intended to establish the prevalence, severity, source and impact of psychological violence experienced by teachers in the secondary and high schools in Lesotho. The mixed method research design was utilized in this study. This involved the use of research methods from both quantitative and qualitative research approaches. The two research approaches will be discussed separately for clarity and rigour.

4.2 The research design

A research design provides a framework which is used to collect and analyze data while the research methods refer to the specific techniques used to collect and analyze data (Bryman, 2001:29; Mouton, 2001:55-57; McMillan & Schumacher, 2006:27). In order to answer the research questions in this study, the mixed method research design was utilized as described hence forth.

4.2.1 Mixed method approach

Various authors define mixed method research design in varying ways which ranges from utilization of different methods at various stages of the research, using one method to inform the other, analyzing data collected with one method with techniques from another method (De vos, Strydom, Fouche & Delport, 2005:360-362; Breakwell, Hammond & Smith, 2006:21-22; Creswell & Plano Clark, 2007). However, the central idea is the utilization of both quantitative and qualitative research methods in a single study. The definition is put succinctly by Johnson and Onwegbuzie (*in* Bryman 2006:36) that mixed method research is the kind of research approach which combines quantitative and qualitative research techniques, methods, approaches, concepts or language into a single study.

Breakwell, *et al.*(2006:22-23 and McMillan and Schumacher, (2006: 28) posit that the rationale for using the mixed method design is that:

- The complementary nature of such methods and their relevance in answering the research questions in this study makes it appropriate. Therefore the combination of the two methods helped to answer the research questions in this study.
- It provides divergent evidence and brings clarity to the research questions, which would not be achieved through the use of only one method.
- Mixed method research design strengthens the comprehensiveness of the study.
- It adds to the researcher's depth and breadth of understanding of the phenomena that is being studied; and its pluralistic and inclusive nature makes it the most appropriate design in this study.

Creswell and Plano Clark (2007) proposed four basic types of mixed method designs, namely, the triangulation design, the embedded design, explanatory design and exploratory design. These designs have several variants in them. However, Hanson *et al.* (2005: 228) stated that there are six primary types of mixed method designs. These are sequential research designs which are classified into three types, namely, sequential explanatory, sequential exploratory and sequential transformative designs and there are concurrent research designs which are classified into three types, namely, concurrent nested design, concurrent transformative design and concurrent triangulation design. Although there is a difference in terms of how Hanson *et al.* (2005) and Creswell and Plano Clark (2007) classified the different designs, it seems appropriate to present the various designs and to finally arrive at the description of the design underlying this study. The various designs are described in the next sections.

4.2.1.1 Sequential designs

Sequential designs involve the collection of data using both qualitative and quantitative methods within the same time frame in the research process. There are three types of sequential designs in the mixed method approach described as follows:

4.2.1.1.1 Sequential exploratory design

This design does not have an explicit theoretical lens with which it addresses the research problem. In this design qualitative data is collected first followed by the quan-

titative data. The focus here is to use the quantitative data to enhance qualitative data. The priority is given to qualitative data. Data analysis is connected and integrated at interpretation and discussion level. (Hanson *et al*, 2005; Creswell & Plano Clark, 2007:80-84; Bryman, 2006).

4.2.1.1.2 Sequential explanatory design

This design does not use an explicit theoretical lens of looking at the research problem. This is a two phase design in which quantitative data is collected and analyzed following the qualitative data collection and analysis. Priority is usually unequal with quantitative data being given a priority. The qualitative data is used to augment the quantitative data. Data analysis is connected and both quantitative and qualitative data are integrated during data interpretation and analysis. (Hanson *et al.*, 2005:229; Creswell & Plano Clark, 2007:72)

4.2.1.1.3 Sequential transformative design

According to Hanson *et al.* (2005), Creswell and Plano Clark, 2007:80-84 and Bryman, (2006) this particular design, unlike the ones described in the preceding sections, uses an explicit theoretical lens which is observed in the planning and implementation of the research. An example of such lens is the use of critical theory in addressing a particular research problem. In this design data collection and analysis does not follow any particular pattern, thus either quantitative or qualitative data or analysis can be collected first followed by another. Such decision is based on researcher's personal preference or the research needs. Both qualitative and quantitative research can be given equal weighting or one of them can be given a priority. The connection between the two approaches is made at the interpretation and discussion of the findings level.

4.2.1.2 Concurrent designs

In the concurrent designs both quantitative and qualitative data collection and analysis are undertaken at the same time concurrently. (Creswell & Plano Clark, 2007:67-70). The different types of concurrent designs are described hence forth.

4.2.1.2.1 Concurrent nested/embedded design

In this design both quantitative and qualitative data are collected and analyzed at the same time. However, priority is unequal either qualitative or quantitative approach is

prioritized. The embedded data are given less priority because this is included to assist in answering a completely different set of questions. One set of data is basically used to provide additional information in the study. This type of design is appropriate for studying different groups or level within a single study (Hanson *et al.*, 2005: 229; Creswell & Plano Clark, 2007:67).

4.2.1.2.2 Concurrent transformative design

According to Hanson *et al.* (2005:230), in this design data is collected and analyzed at the same time with unequal priority given to either quantitative or qualitative research. Similar to sequential transformative design, concurrent transformative design gives voice to diverse or alternative perspectives being advocated on behalf of the research participants. It provides a better understanding of the phenomenon under study.

4.2.1.2.3 Concurrent triangulation design

According to Hanson *et al.* (2005: 229) and Creswell, and Plano Clark (2007:64), in this design qualitative and quantitative data sets are collected and analyzed at the same time. Data analysis is done separately. However, unlike in other designs, both data are given equal priority. Integration occurs at interpretation which demonstrates the extent to which both sets of data converge. The concurrent triangulation design is useful for confirming, cross validating and corroborating the research findings.

Concurrent triangulation design was adopted in this study. This involved the concurrent data collection and analysis using both the qualitative and quantitative research methods.

According to Tashakkori and Teddlie (2003:211) in utilizing this design, it is important to observe the following aspects:

- **Timing:** it is important to note implementation and sequence is very critical. Thus for instance data analysis is done once data collection is complete.
- **Weighting:** Both quantitative and qualitative data collection and analysis have equal weighting in this design.
- **Mixing:** Data merging for both quantitative and qualitative data is mandatory in order to cross validate, corroborate and confirm the findings.

Hanson *et al.* (2005) argues that there are strengths and challenges for using this type of design and they are described as follows:

- **Strengths:** This design makes intuitive sense; it is also efficient and rigorous given both sets of data are thoroughly analyzed separately.
- **Challenges:** It requires effort and expertise and it becomes a problem when the results from both sets of data are not corroborative or do not converge.

According to Hanson *et al.* (2005), Creswell and Plano Clark (2007) and Bryman (2006) various models in the concurrent triangulation design have been advanced in the literature, namely,

- **Data transformation model:** In this model, quantitative and qualitative data are collected and analyzed separately. However, after the initial analysis the researcher uses research procedures to transform one data type into another form.
- **Validating quantitative data model:** This model involves validating and expanding quantitative data by including a few open ended qualitative questions.
- **Multilevel model:** In this model the different methods are utilized to address different levels within a system as it is deemed appropriate. For example findings from one level are merged into over all interpretation
- **Convergence model:** In this model, data from both quantitative and qualitative methods are collected within the same time frame and analyzed separately and then both sets of data are then merged in the interpretation phase of the study. (Creswell & Plano Clark, 2007:64). The merging of both quantitative and qualitative sets of data yields authentic and validated findings about the phenomenon under study. The convergence model was adopted in this study. The following figure (figure 4.1) illustrates the convergence model of concurrent triangulation design adopted in this study.

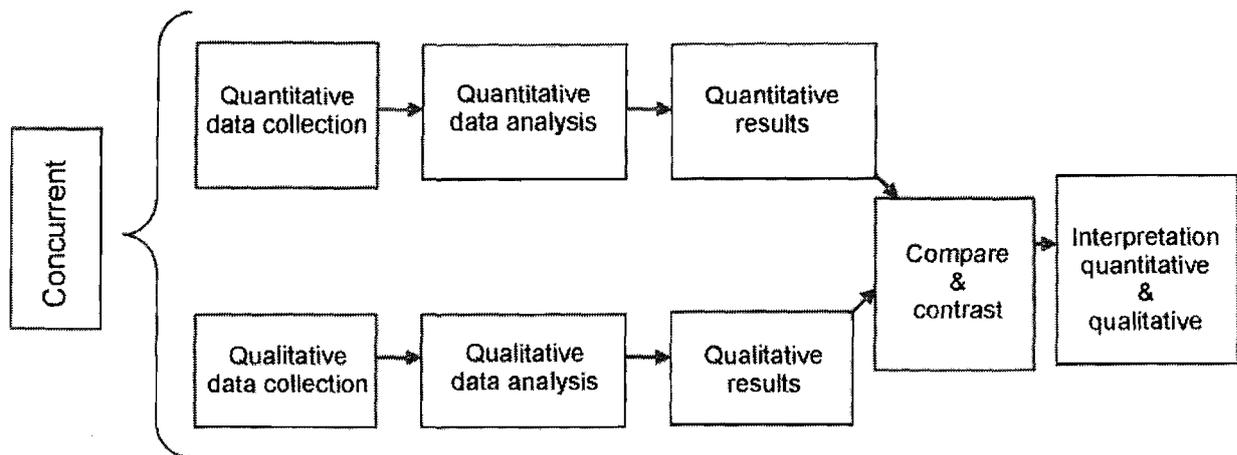


Figure 4.1 Triangulation Design: Convergence model

4.3 Quantitative research methodology

Quantitative research design involves the collection and analysis of data in the form of numbers. These numbers represent values or variables which measure characteristics of subjects, respondents or other cases (Neuman, 1997:295; Sullivan & De Jong *in De vos et al.*, 2005:160). Quantitative research design uses measuring instruments to collect data and these instruments include questionnaires, checklists, indexes and scales (Delpont, 2005 *in de Vos et al.*, 2005:159-160).

It also exhibits a view of the relationship between theory and research as deductive and as having an objective view of social reality. The following are some of the salient attributes of quantitative research as advanced by Bryman (2001: 66-76):

- It allows the researcher to delineate fine differences between people in terms of characteristics ;
- It also gives a consistent device;
- It provides the basis for more precise estimates of the degree of relationship between concepts;
- It is concerned with causality. This means that it goes beyond mere description;
- It is also concerned with generalization of the findings beyond the confines of the context of the study;

- It is concerned with replication, which is the ability of the study to be repeated. This necessitates a clear description of the research process to enable accurate replication by other researchers;
- It also makes it possible to reach a large number of people.

4.3.1 One shot cross sectional survey research method

Cross sectional survey research was used to collect the quantitative data for this study. According to Babbie (1992:99) cross sectional studies are designed to carefully study the phenomenon by taking a cross section of it at one point in time and then analyzing that cross section carefully. According to McMillan and Schumacher (2006:233) a survey involves the selection of a sample from a larger population and administration of the research instruments. Typically, cross sectional surveys describe the incidence, frequency and distribution of the characteristics of an identified population at a given time. This kind of research can be used for purposes of description and also for exploring the relationship between variables in an explanatory way. According to Schutt (*in* Mcmillan and Schumacher, 2006:233) advantages of cross sectional survey research are that,

- It is versatile;
- It is efficient ;
- It is generalizable;
- It also gives access to a larger population.

On the other hand, there are advantages and disadvantages of cross sectional surveys as demonstrated below:

- **Advantages of cross sectional surveys**
 - It provides data on many variables;
 - It makes it possible to collect data from a large number of subjects;
 - It is easier to collect data from dispersed subjects;
 - It answers questions on who, what, when and where;
 - good for exploratory research;
 - generates hypotheses for future research;

- data useful to many different researchers.
- **Disadvantages of cross sectional surveys**
 - increased chances of error;
 - increased cost with more subjects;
 - There is increased cost with each location;
 - cannot establish cause and effect;
 - There is no control of independent variable;
 - It is time bound, therefore it cannot measure change.

4.3.2 Investigation group

The investigation group refers to the specific group that the researcher wants to study (Babbie, 1992:198; Neuman, 1997:203; Breakwell *et al.*, 2006:106). The investigation group in the current study was all male and female teachers in the secondary and high schools in the Maseru district in the Kingdom of Lesotho.

4.3.2.1 Description of the study context

Lesotho is a small country landlocked by South Africa. It has ten districts (cf. Annexure A, for the map of Lesotho). The education system in Lesotho is highly centralized despite the fact that there are district education offices in all ten districts. The School system in Lesotho comprises of four distinct levels. The first level is the primary school which lasts for seven years. The second level is the secondary school which lasts for three years (Form A, Form B and Form C). The third level is high school which lasts for two years, (Form D and Form E). However, schools termed as high schools consists of five grades which are Form A, Form B, Form C, Form D and Form E. Conversely, secondary schools consist of only three grades being Form A to C (Lesotho Ministry of Education List of Schools by District, 2005) as stated; there are 225 registered secondary and high schools in the ten districts of Lesotho as presented in table 4.1.

TABLE 4.1 NO OF SECONDARY & HIGH SCHOOLS PER DISTRICT

DISTRICT	NO OF SCHOOLS
1.MASERU	51
2. MAFETENG	26
3.LERIBE	50
4.BUTHA BUTHE	16
5.BEREA	25
6.MOKHOTLONG	8
7.QUTHING	11
8.MOHALESHOEK	17
9.QACHA`S NEK	8
10.THABA TSEKA	9

The secondary and high schools in Lesotho are scattered all over the country as evidenced from Table 4.1. However the majority of the schools (51) are found in the Maseru district which made it more appropriate for access to more teachers than any other district. While it would have been ideal to study the whole teacher population in the 51 schools in the Maseru district, constraints such as time and finances could not permit such an endeavour.

4.3.3 Quantitative data collection

Data for the quantitative part of the study was collected with the psychological violence scale which was developed by the researcher. The process of developing the scale is described in the next section.

4.3.3.1 Development of the psychological violence scale

The development of the psychological violence scale proceeded through various systematic steps.

- **Firstly the researcher undertook literature review.**

On the basis of an extensive literature review on the phenomenon of psychological violence in the workplace undertaken by the researcher, a pool of relevant items

was compiled. The items were discussed and scrutinized in a study group of three people including the researcher. After several revisions and discussions, an initial psychological violence scale was developed. This was further revised to ensure its applicability, clarity and relevance for the study, a process which took three months.

- **Clarification with experts**

The next step involved clarification with experts in psychology and education. This entailed a constant revision of question items. The next step involved clarification with a panel of experts from the departments of Educational Psychology, Psychology, Education law and Industrial psychology of the North West University (Potchefstroom Campus) psychology and education. In consultation with the researcher the promoter made an arrangement for a presentation by the researcher on the construct of psychological violence in a colloquium in the Faculty of Educational sciences of the North West University (Potchefstroom Campus). In the same colloquium, the experts who attended were provided with the initial psychological violence scale for them to scrutinize it on the basis of the presentation and their expert knowledge and to give feedback on the construct validity and face validity of the developed psychological violence scale. On the basis of their comments and input the scale was further reworked.

- **Statistical consultation**

The reworked psychological violence scale was then discussed with an expert statistician of the Statistical consultation services of the North West University (Potchefstroom campus). On the basis of her comments the scale was reworked again.

4.3.3.2 Pilot study in the quantitative research

After reworking the psychological violence scale, the pilot study was undertaken and the psychological violence scale was finalized after this process. The pilot study was conducted with a view to ensure the feasibility of the study.

The researcher travelled to Lesotho to conduct a pilot study with the psychological violence scale. The pilot study was conducted with 15 high school teachers and two

professional researchers, from the National University of Lesotho. These were done for the purposes of validating the instrument and checking whether both the instructions and the items are clear for the respondents.

The process of piloting the research instruments is described in the subsequent section.

4.3.3.2.1 Rationale for the pilot study

According to Fouche and Delport (*in De vos et al.*, 2005:82) and Neuman (1997:141) the pilot study, serves the following purpose:

- Establish the feasibility as well as the practicability of the study;
- It also helps to test the research instruments so that they can elicit information that is accurate and relevant for a particular study;
- It serves to improve success and effectiveness of the instrument and to offer the opportunity to test the instrument and its strengths and short comings;
- It helps to minimize or eliminate error, for instance some of the questions may not be clear and therefore elicit inappropriate responses;
- It allows for comment from the respondents as they respond to questions on the length and sequencing of the questions;
- It also helps to assess clarity of instructions to the respondents.

Generally the pilot study served to establish whether the psychological violence scale as a whole functions well.

After the pilot study, the items which caused confusion were rewritten and the final instrument was revised and finalized. The final document consisted of 70 close ended items which are statements that the respondents had to respond to within the three sections (cf. Annexure c).

It is important to note that respondents who participated in the pilot study were excluded from the main study

4.3.3.2.2 The final psychological violence scale.

Apart from collecting the quantitative data the psychological violence scale also served an important task of inviting the willing participants for the phenomenological (qualitative) interviews for the study. These are the individuals who have had psychological

violence acts meted out to them in their workplace and were willing to voluntarily take part in the subsequent phenomenological interviews on their specific experiences of psychological violence in the workplace. The final psychological violence consisted of the following parts:

- Section A requested the respondents to provide their biographical and demographic data.
- Section B consisted of statements that measured psychological violence experiences. The respondents were asked to mark these statements according to different parts. The first part measured the prevalence of psychological violence and the respondents had to mark the frequency of experience on a four point Likert scale, 0 to 3. The second part measured the severity level on a five point Likert scale, 0 to 4. In the third part, the respondents were requested to identify the source of the specific acts and eight sources were stated. These were Ministry of Education, school board, superiors at my specific school, colleagues of equal status, subordinates, students, parents and community. Respondents were instructed that where appropriate they could identify more than one source of such acts.
- Section C consisted of statements of seven possible responses to some of the experiences and the respondents were asked to indicate the prevalence level of their experiences by marking appropriate statements, and to indicate the severity level of their responses to their experiences.

The final part of the psychological violence scale consisted of an open question where the respondents were asked to indicate other experiences (if any) that they had that are not included in the questionnaire. The scale also consisted of an open invitation to teachers who have been subjected to psychological violence and would like to be interviewed regarding their experiences. The contact details of the researcher were provided to enable the respondents to contact her if they wished to participate.

4.3.3.3 Sampling in quantitative study

A sample for the study was selected from the population of secondary and high school teachers in the Maseru district. A sample refers to the representative group of the total population for the study. The sample has all the characteristics of the entire population to enable inferences and deeper understanding of the population. Sampling is done

very carefully in order to yield significant, valid and reliable results (Neuman, 1997:201-203; Bryman, 2001:85).

Different sampling techniques were used to select the sample for both quantitative and qualitative parts of the study. The sampling techniques for the quantitative study are described in the following sections.

- **Purposive sampling**

Purposive sampling was used to select the sample for this study. Purposive sampling is defined as a sampling method in which elements are deliberately chosen on the basis of the purpose of the study. Unlike other non-probability sampling methods, purposive sampling does not necessarily strive to produce a sample that is representative of a larger population; instead, it strives to select the sample on the basis of a specific purpose of the study which does not necessarily require generalization of the findings to a larger population (Neuman, 1997:205-206).

Purposive sampling was chosen because it is relevant to the features of this study. Thus the sample was purposively selected on the basis of the following criteria: The Maseru district was purposively selected because it has the largest number of schools in the country (cf. table 4.1). Furthermore unlike other districts, it has schools located in three different geographical locations being the urban, rural and semi-rural. The schools were also purposively selected in terms of accessibility and location. Out of 51 schools, 35 were selected to participate in the study. This constitutes 69 % of the total number of schools in the Maseru district.

The following criteria were used to select the respondents for the study:

- Teachers could be either male or female employed in the secondary or high school in the Maseru district in Lesotho at the time of the study.
- Teachers had to have one year or more work experience.
- Finally teachers had to express their willingness to participate in the study

4.3.3.4 Reliability in quantitative research

Neuman (2006:140) defines reliability as the consistency of results of a research instrument.

The following procedure helped to build reliability into the research Instrument

- **Use of research literature (cf. par. 4.3.3.1)**

Through the review of literature the researcher was able to access literature on the phenomenon and its measurement. She was therefore able to develop the psychological violence scale.

- **Clarification with experts**

The research experts in this case consisted of members of the following faculties and departments from the North West University (Potchefstroom Campus); the departments of Psychology, Educational psychology, law, Education management and Industrial Psychology (cf. par. 4.3.3.1).

- **Pretest/piloting**

The psychological violence scale was pretested to establish its appropriateness (cf. par. 4.3.3.2).

- **Personal administration of the psychological violence scale.**

The questionnaire was personally distributed and collected therefore some measure of control was used.

4.3.3.5 Validity in quantitative research

According to Babbie (1992:132) validity is the extent to which an instrument adequately reflects the real meaning of the concept under consideration. Validity of the research instrument measures the concept being studied and also whether that is done accurately in order to yield appropriate results. There are various types of validity that a quantitative instrument should have. In this study content validity and face validity were built into the psychological violence scale as explained hence forth.

- **Content validity**

This refers to whether the items in the research instrument comprehensively cover the range of meanings for the concept under study (Delpont *in De vos, et al.*, 2005:160).

- **Face validity**

This refers to a face value judgment of the appropriateness of a research instrument (Delpont *in De Vos et al.*, 2005:161)

The process of building both reliability and validity into the research instruments was executed as follows:

- Literature review
- On the basis of an extensive literature review undertaken by the researcher, the researcher developed an initial draft psychological violence scale.
- Clarification with experts was undertaken by the researcher (cf. par. 4.3.3.1).
- A pilot study was conducted as well (cf. par. 4.3.3.2).

4.3.3.6 Quantitative Data analysis

Descriptive statistics were used to analyze data from the psychological violence scale. Descriptive statistics provide a description of the people in the research sample (McLeod, 1995:47).

Both the data capturing and analysis were undertaken by the Statistical Consultancy services of North West University (Potchefstroom Campus) (cf. Annexure D). The SAS programme (SAS Institute Inc., 2003) was used for the descriptive statistical analysis of the data. The second procedure was factor analysis using SPSS statistical package (SPSS Inc., 2006). Statistical data analysis proceeded through the following stages:

- The first stage involved descriptive statistical calculation of frequencies, means ranking and standard deviation scores of the data;
- The second stage involved factor analysis which proceeded in two stages. The first one was principal component factor analysis of the psychological violence scale to extract factors underlying the variables;

- After the factors were extracted then Cronbach's Alpha coefficient of the extracted factors was calculated to determine the reliability of the extracted factors;
- Finally, the descriptive analysis of the extracted factors in terms of prevalence and severity was done.

Finally the calculation of the practical significance (effect sizes) of difference in means of different groups in the study population was completed. This is recommended for those studies that should have implications for practice (Ellis & Steyn, 2003:1-6).

$$d = \frac{|\bar{x}_1 - \bar{x}_2|}{s_{\max}}$$

The following formula was used to calculate the effect size

The formula involved the standardized difference between the means of two applicable groups $|\bar{x}_1 - \bar{x}_2|$ divided by the maximum standard deviation (s_{\max}) of the two groups. The following guidelines for the interpretation of the practical significance of the results(d-value) were used (Cohen,1988:26)

- Small effect : $d \leq 0.2$
- Medium effect: $d = >0.4 - <0.8$
- Large effect: $d \geq 0.8$ (results of $d \geq 0.8$ was considered practically significant).

The next section describes the qualitative research methods pursued in this study.

4.4 Qualitative research methodology

Denzin and Lincoln (2000:3) state that qualitative researchers study things in their natural settings, attempting to make sense of or to interpret phenomena in terms of the meaning people bring to them. Strauss and Corbin (1998:10-11) further expand this definition by stating that in qualitative research, data is normally collected through the use of interviews, and observations including documents or films and videotapes. Leedy and Ormrod (2001:101-102) argue that in qualitative research an attempt is made to build theory through the inductive analysis of the interviews. Since this study is also a situation analysis, descriptive type of study the utilization of qualitative research methods was appropriate.

There are various reasons for the use of qualitative methods to study the phenomenon as expounded by Strauss and Corbin (1998: 11).

- The nature of the research problem and the research questions;
- Exploring substantive areas about which little is known (particularly in Lesotho (as in the context of this study);
- Obtaining the complex details about phenomena for example, feelings, thought processes and emotions which cannot be researched through the quantitative research methods as evidenced in this study;

Rossmann and Rallis (1998:9 *in* Marshall and Rossmann (1999:3) present the following comprehensive characteristics of qualitative research:

- Qualitative research takes place in the natural world;
- It uses multiple methods that are interactive and humanistic;
- It is emergent rather than prefigured;
- It is fundamentally interpretive.

On the other hand the qualitative researcher has the following qualities:

- She views the social phenomenon holistically;
- Systematically reflects on who she is in the inquiry;
- Is sensitive to her personal biography and how it shapes the study;
- Uses complex reasoning that is multifaceted and interactive.

4.4.1 Phenomenological study

The qualitative part of the study adopted a phenomenological design. According to McLeod (1995:89), De Vos *et al.* (2005:270) and Bryman (1988:8) a phenomenological study is relevant for gaining in depth insight into the world of experience of teachers who have experienced psychological violence. A phenomenological study aims at illuminating the totality of how some event or human action can be perceived and described. It employs a strategy named “bracketing” which involves suspending one’s assumption about the phenomenon being studied. This enhances the objectivity of the researcher’s approach.

Phenomenological study progressed through the following systematic stages:

- Systematic gathering of a full set of descriptions from people who have experienced psychological violence in their workplaces;
- Analysis of the descriptions with a view to grasping common elements that make the experience what it is;
- Describing clearly, accurately and articulately the account of the phenomenon so that others can understand it.

In this study the data from an open ended question in the psychological violence scale was used. Phenomenological semi structured individual interviews were conducted together with the symptoms checklist, with the victims of psychological violence.

4.4.2 Exploratory research

According to Babbie (1992:90) and Neuman (1997:19) this is the kind of research in which the phenomenon under study is new or unstudied and therefore there is very little known about it. This helps to establish whether a particular phenomenon exists or not. Exploratory studies also help to provide new insights into the research study. These kinds of studies are characterized by flexibility, open mindedness and creativity. The phenomenon under study is psychological violence as workplace trauma and its impact on the health of teachers in Lesotho. The researcher explores the phenomenon through phenomenological interviews and a symptoms checklist as well as an open ended question from the psychological violence scale. This helps to bring to the fore the fundamental nature of the phenomenon under study.

4.4.3 Descriptive research

These are the kind of studies that describe a specific phenomenon in a way that clearly sets it apart from any other (Babbie, 1992:91; Neuman, 1997:329). Ritchie and Lewis (2003:214) state that with the new information acquired through the phenomenological interviews, description takes place in the following specific contexts. Firstly, the actual words used by the participants are accurately because those clearly mirror how the phenomenon is perceived and understood by them. Furthermore, the substantive

content of the participants' accounts in terms of both its descriptive coverage and assigned meanings is very critical to this kind of research (Ritchie & Lewis, 2003: 214).

4.4.4 Contextual research

This research is contextual in the sense that it is carried out within the context of teachers who have been subjected to psychological violence in their workplace. In this sense contextual events are described and understood within the concrete natural setting in which they occur (Ritchie & Lewis 2003:27-28; Babbie & Mouton, 2004:272).

The qualitative part of the study involved the use of semi structured phenomenological individual interviews to delve deeply into the experiences of the respondents who have experienced psychological violence in their workplace (cf. Annexure G, Interview schedule). The rationale for the use of qualitative methods in this study revolves around the nature of the research problem. Thus the specific experiences of psychological violence and their traumatic impact on the participants lend itself to the use of interviews in order to find out from the participants exactly what happened and the impact thereof. It also further helped to describe the participants' real life experiences from their own perspective which could not be attained through the psychological violence scale.

4.4.5 Pilot study in qualitative research

The process of piloting the research instruments for the qualitative part of the study is described in this section.

- **Piloting the interview schedule and the symptoms checklist**

The interview schedule and the symptoms checklist were piloted with a group of five teachers. They were asked to give their opinion of the interview schedule and the symptoms checklist in terms of clarity of questions and the level of difficulty. They were also asked to comment on the arrangement of questions and the sensitivity of such questions given that these are the individuals who are already victims of workplace psychological violence.

It was during this stage that it became evident to the researcher that the focus group interviews were not feasible due to the sensitivity of personal issues that the participants intended to disclose and they expressed their discomfort with focus

group interviews. The researcher then decided that the same interview schedule would be used with individual interviews. The researcher went further to pilot the same schedule with three individuals through phenomenological semi structured individual interviews and it was found to be appropriate and no amendments were made to the schedule (cf. Annexure G, the interview schedule).

Another problem that arose was the language issue. Thus it became apparent to the researcher that an exclusive use of English language which is the participants' second language, made it difficult for the participants to express themselves well and in detail. The researcher then decided to use the local language, which is Sesotho, in order to encourage an open participation.

Immediately after interviewing them in the same setting the participants were also asked to read through the symptoms checklist and fill it in the presence of the researcher and were given an opportunity to ask questions and seek clarity as necessary. However some participants preferred to fill it on their own, and they were also granted freedom to contact the researcher if they needed clarity or explanation. This was completed successfully and all the symptom checklists were returned to the researcher.

The pilot study helped the researcher to do the following:

- Revise the interview method, thus deciding to use phenomenological semi structured individual interviews instead of focus group interviews;
- Get comments on the items' length, clarity and sensitivity;
- Estimation of the amount of time it could take to interview one individual;
- Clarify some issues and concerns that participants had regarding the research.

The participants who took part in the pilot study were excluded from the main study.

4.4.6 Sampling in qualitative research

- **Target group**

The target group for the qualitative part of this study comprised of 21 teachers who had personally experienced psychological violence in the workplace.

- **Criteria for inclusion in the study**

In order to participate in the study the following criteria for inclusion was utilized:

- He/she had to be a teacher by profession and be employed as a teacher at the time of research;
- He/she had to be teaching in the secondary or high school in the Maseru district in Lesotho;
- He/she should have identified him/her as having had unpleasant experiences in the workplace;
- He/she should have expressed willingness to be interviewed by the researcher.

4.4.7 Qualitative data collection

In this part of the study data was collected through an open ended question in the psychological violence scale, semi structured phenomenological individual interviews and the symptoms checklist. The participants were interviewed about their experiences of psychological violence and the duration and the impact their experiences had on their health.

4.4.7.1 The role of the researcher as a research instrument

According to Strauss and Corbin (1998:42-44) qualitative researchers should have clarity on their role in the research process. The persona of the qualitative researcher is inextricably intertwined with the research process itself. Therefore, it is important for the researcher to observe the following predispositions that they carry with them to the field:

(a) Use of self

In qualitative research, the researcher gets personally engaged in the research setting. Therefore the validity of the findings of a study depends largely on the rigour, skill, experience and competence of the researcher. Thus these are demonstrated by, firstly, how the researcher interviews, observes and analyses qualitative data. Secondly the interpersonal skills of the researcher are also very critical in entering the natural settings, collecting data and actively participating in the data interpretation (Burns & Grove *in* Modise: 2003:30).

Communication techniques of the researcher

Legard *et al.* (in Ritchie (2003: 142-144) contends that good communication skills of the researcher are central to the potential success of the research process. These enable him/her to do the following:

- Formulate clear and neutral questions for the teachers;
- Avoiding to impose own views, instead remaining open to their understanding and interpretation of their own experiences of psychological violence;
- Probing appropriately when necessary, particularly where the responses may seem incomplete;
- Seeking clarification where the teachers' responses are either unclear or seem contradictory or even confusing.

(b) An appropriate setting for the interview

Bailey (2007:2) postulates that an interview setting is a very important aspect for the participants. Therefore, it was crucial for the researcher to create a safe and relaxed atmosphere for the participants. This was so particularly given the fact that they had already experienced negative acts in their workplace. The researcher had to allow some time to build rapport and create a relaxed atmosphere with each participant before commencing with the interview. Additionally each participant was interviewed at a time and place of his/her preference.

Field notes

Field notes play a very important role in creating a comprehensive view of the entire interview process. Field notes allow the researcher to record what they see and hear, their thoughts about the dynamics at play in their encounter. These include some ideas that could be considered relevant for the analytic stage of the study which further adds to the credibility of the research results (Arthur & Nazroo in Ritchie & Lewis, 2003:132-133; Bailey, 2007:113-122). Nevertheless, writing field notes during the interview can distract the researcher as well as the participant therefore it is important to make a mental note of important occurrences and observations and then to write the field notes as soon as possible after the interview while the picture is still very vivid.

The following are the categories of field notes as expounded by Lincoln and Guba (1985:183-185), Bryman, (2001:304-305), Charmaz, (2006:22) and Bailey (2007:115).

(i) Observation notes

These refer to the researcher's experiences in the field, what was seen and heard during the interview.

(ii) Theoretical notes which specifically focus on extracting meaning from the text.

(iii) Methodological notes which relate to how the researcher operates in the field, thus, time schedules the setting of the interview and comments on the tactics and relevant methods that can be employed.

(iv) Personal notes, which refer to the researcher's own feelings, reactions and assumptions in the interviewing process.

4.4.7.2 Open ended question

An open ended question was included in the psychological violence scale where teachers were asked to state if there are any other experiences they have had which were not included in the psychological violence scale.

4.4.7.3 Phenomenological interview

The phenomenological semi-structured individual interviews were conducted. This kind of interview was semi-structured because it had an interview schedule which contains a list of questions which are used to guide the interview and if there is need for further clarification and probing this is allowed in this kind of interaction (Greef *in* De Vos *et al.*, 2005:292). It generates in-depth personal accounts and understanding of personal context. It further helps to understand complex processes and issues such as impacts (as is the case in this study). It is also appropriate for sensitive issues that people may find difficult or inappropriate to discuss in a group. The interview schedule consisted of three questions (cf. Annexure G).

- The first question was what happened?

This particular question required the participants to narrate their experience of psychological violence.

- The second one was how often did you experience it?
The participants were expected to indicate the period that their experiences took.
- The final question was what impact did this have on your health? This is where the participants had to state the effects that their experiences had on their health. In this case health was understood in the holistic sense. Hence the experiences were not restricted to physical symptoms alone.

During this phase the researcher conducted semi-structured phenomenological individual interviews with the participants who had agreed to participate. Initially fifty four participants had expressed interest in being interviewed. However, the researcher was able to reach thirty of them. Five had participated in the initial pilot study and were therefore excluded and a further three participants who had been part of the pilot study for phenomenological were also excluded from the main study. This left the number of participants at twenty two. However one participant withdrew from the study and there remained a total number of twenty one participants. The process was executed as follows:

- Appointments were made with participants to interview them at a time and place suitable for them. An effort was made to ensure that they feel safe and free to talk and the purpose of the research was explained to them prior to interviewing them. This allowed them to withdraw from the study if they so wished.
- Anonymity and confidentiality agreement was presented and explained to the participants. The researcher and the individual participants read it together and the researcher signed it as a binding agreement to both parties that the researcher shall only utilize the information gathered for research purposes alone and also that such information shall remain anonymous (cf. Annexure H, for the confidentiality agreement).
- Permission was sought from them to tape record the interviews for purposes of research and all the participants agreed.
- During data collection the researcher also kept a reflective journal in which important and significant occurrences were noted immediately after the interview.

- The participants were given freedom to respond freely to the posed questions and they were probed for clarification and provision of further information as it was deemed appropriate. They were allowed to ask questions as they deemed necessary.

The interviews were transcribed word for word in the Sesotho language. Then the same interviews were back translated to English by a language specialist. The researcher then requested two other language specialists to check the translation quality and appropriateness of five of the translated transcripts a procedure expounded by Phafoli (2006). These translations were found to be appropriate and therefore the researcher proceeded with data analysis.

4.4.7.4 The symptoms checklist

The symptoms checklist which was adapted from Kirsten (2007) who had compiled it from the results of a study by Namie and Namie (2003) was administered immediately after the phenomenological interviews in the same setting. The symptoms checklist consisted of a list of possible symptoms that could emanate from the traumatic experience of psychological violence (cf. Annexure I, for the complete symptoms checklist). The participants had to state whether as a result of the experienced psychological violence, the symptom was new, whether it got worse or whether the symptom was always there but never got worse. The symptoms checklist included a question where the participants were asked to state if there are other symptoms they experienced other than those listed and to further classify them in a similar manner. Thus they had to state whether the symptom/s were new, whether it was always there but got worse and finally whether the symptom was always there but never got worse.

The participants who preferred to take the symptoms checklist with them to fill it in their own time were allowed to do so. The researcher collected the symptoms checklists personally from the participants. All the twenty one symptoms checklists were received.

4.4.8 Reliability in qualitative research

Reliability refers to consistency of a measure of a concept (Bryman, 2001:70). It specifically refers to how consistent the results of a measuring instrument are from one measurement to another. Consistency in qualitative research is achieved through ensuring that the generation of data relates to the research objectives. Furthermore, there has to be a demonstration that the analysis is done thoroughly, carefully, honestly and accurately. The researcher has to demonstrate to others that data and the findings are not misrepresented and invented.

In this study the researcher has attempted to adhere to this principle by a thorough discussion of the research methods. She further utilized triangulation to verify the findings, the process referred to as mutual confirmation. This helps to establish a highest level of accuracy and objectivity. She utilized different sources of information being data from the open ended question, the phenomenological interviews and the symptoms checklist to gather information from the participants (Ritchie & Lewis, 2003:271-273; Bailey, 2007:179-180).

Finally, code checking also serves to enhance reliability of qualitative findings. This is defined by Krefting (1991:216) as the technique in which more than one researcher codes the available data and when there is agreement on the findings between the two researchers then reliability is high.

In this study an independent researcher was asked to do a counter check, verification and corroboration of the findings. The researcher also went back to cross check her findings with some of the participants.

4.4.9 Validity in qualitative research

According to MCleod, (1995:97-101) validity refers to whether the research is plausible, credible, trustworthy, and, therefore, defensible. Validity was build into the qualitative part of this study. Firstly, internal validity, also known as credibility refers to the extent to which the findings of a study and the variables that are investigated relate to each other. Altheide and Johnson (*in* Modise, 2003:38) argue that interpretive validity is critical in qualitative studies. Interpretive validity of a research study refers to usefulness which is

whether the report enlightens those who read it and to contextual completeness which refers to the provision of the comprehensive view of the situation.

This is achieved by giving information on the history of the phenomenon, the physical setting, activities, schedules and routines of the participants as well as the individual meanings and perceptions they attach to their experiences. Report positioning, which is the researcher's awareness of influences in the form of biases, values and beliefs, is also crucial and these, the researcher has to bracket, which means setting aside what one already knows about the phenomenon so that it does not influence the study results. This is done as the study progresses (Denzin & Lincoln, 2005:497). Finally, reporting style, which is another validity procedure uses the lens of the researcher but is clearly positioned within the critical paradigm where individuals reflect on the social, cultural and historical forces that shape their interpretation (Creswell & Miller *in* Modise, 2003:39).

Descriptive validity was also increased. This involves the use of triangulation to look for data convergence. This study used multiple sources of information for identifying themes and categories from the data. These are data from an open ended question in the psychological violence scale, teachers' interviews, symptoms checklist and observations which are recorded as field notes. Establishment of a chain of evidence among research questions, methodology, raw data and findings is another strategy for enhancing the validity of the study. This was done through a detailed description of the research process which enables the readers to determine whether the conclusions that are drawn from the research are logical or not. Modise (2003:39) articulates that the third appropriate strategy in this process is pattern matching. This is appropriately observed when a qualitative study is aimed at studying the effects of an intervention. Modise further expounds that if such observed behaviours of patterns of benefits match those that were expected in a particular case as observed in the research literature or theoretical construct then the validity of a study is further increased.

4.4.10 Qualitative data analysis

Maxwell (*in* Kirsten 2001:230) asserts that, data analysis is presumably the aspect that clearly distinguishes qualitative research from both the experimental and survey research. Three approaches to qualitative data analysis are identified. These vary along a continuum ranging from a low level of interpretation and abstraction that the

researcher engages in, to a high level of interpretation and abstraction required for theory building.

The second level which lies somewhere in the middle of the continuum is where the researcher accurately describes what she understood, reconstructing data into an identifiable reality for the participants. This involves the selection and interpretation of the data in which the skilled researcher weaves descriptions and speakers' words, into a thick and rich descriptive and very credible narrative (Kirsten, 2001:230; Woods, 2006:45).

The phenomenological individual interviews yielded a rich descriptive data and the analysis of this kind of data progresses through five stages (MCleod,1995:90).

The stages are as follows:

- Immersion, whereby the researcher reads and listens to the material and tries to understand both the explicit and implicit meanings in the data;
- Categorization, where the researcher systematically works through the data assigning the coding categories which involves trying to find meaning in the different parts of the text;
- Phenomenological reduction where the meanings and categories that have been developed are interrogated. This involves the effort to try and look at the available data in another way;
- Triangulation within the same data by identifying recurring categories and those categories which are less significant;
- The final stage is making sense of the data from a wider perspective which could involve constructing a model or using an already existing theory to elucidate the findings.

The next section describes the qualities build into the study to ensure its trustworthiness, applicability and consistency .

4.4.10.1 Trustworthiness

According to Guba and Lincoln (1994) and Lincoln and Guba, (*in* Bailey, 2007:181), it is important to ensure that findings in qualitative research are both valid and reliable and this is established through the concept of trustworthiness. The latter necessitates that

the research be undertaken with such rigour that the findings are internally valid and coherent and therefore trustworthy. Related to these features, is the person of the researcher whose social role of being a university lecturer and professional teacher trainer in psychology and counselling has earned her a reputation for honesty, ethical behaviour and professionalism. This being the case, the interviewees regarded the interviewer to be honest.

There are factors which can threaten the trustworthiness of research findings, such as lack of comprehensive data to work from and researcher's and participants' biases. Embedded in the concept of trustworthiness is a set of evaluative criteria or model for qualitative research developed by Guba and described in Krefting (1991:215-222). These are truth value, transferability, dependability and conformability.

- **Truth value**

Truth value which is also termed credibility by Lincoln and Guba in Krefting (1991:215) refers to the truth value as the extent to which the findings are believable, authentic and plausible. Credibility is established through a detailed discussion of all appropriate and rigorous methods used to collect and analyse data. As such a credible account rings true, both to the members in the setting and to the readers (Miles & Huberman *in* Bailey, 2007:182). The following techniques undertaken in this study, enhanced the credibility of research findings.

- (a) Triangulation**

It refers to utilization of various methods and sources to establish the validity and reliability of the findings. It measures the extent to which data converges with the conclusions derived from it. Triangulation through multiple analyses was applied in the data analysis stage where data coding and analysis was undertaken by an independent coder who then compared her findings with those of the researcher to search for convergence and to reach consensus regarding the emerging themes within the data.

- (b) Clarification with experts**

The experts in the context of this study are teachers who have experienced psychological violence in their workplace. This involved returning to some of the

participants to clarify the findings with them in order to ensure that the findings indeed reflect what transpired during the interviews. Furthermore, the guidelines developed for the health promotion of teachers who are subjected to psychological violence are derived from the research findings. These were discussed with the registered psychologist with a view to establish their validity and feasibility.

(c) Peer group evaluation

This involves the contribution of other Educational Psychologists which helps the researcher to reflect objectively on the findings without being influenced by their own feelings and emotions which could undermine the presentation of the research process and findings

(d) Authority of the researcher

The researcher completed the M.Ed (Educational Psychology) at University of The Western Cape. She currently lectures in Educational Psychology and counselling at a University in Lesotho. Her experience as a teacher trainer and a counsellor exposed her to the grim realities of teachers' work in the schools. This and other factors impelled her to undertake this study.

(e) Structural coherence

This was achieved through a concentrated focus on the lived experiences of teachers who have been subjected to psychological violence in their workplace. Moreover the development of guidelines for teacher support for health promotion in chapter six is based on teachers' experiences of psychological violence and the impact it has had on their health.

4.4.10.2 Applicability

Applicability in qualitative research refers to the extent to which the findings of a study can be applied in other contexts and with other populations (Krefting, 1991:216). However, due to the context bound nature of qualitative research, it would be very difficult to control external variables. Therefore, the concept of applicability, (instead of generalization) of the findings is applied. Techniques that are used to build in applicability are sample selection and transferability.

- **Sample selection**

A purposive sample was selected from the target population and each one had to fit the criteria for selection as outlined in paragraph 4.4.6.

- **Transferability**

This refers to the degree to which the findings are transferable to other settings outside the study as opposed generalization in quantitative research(cf par. 4.4.10.3).

4.4.10.3 Consistency

Krefting (1991:216) and Rubin and Rubin (1995:87-89) argue that consistency and coherence of data is very important for credibility of qualitative research. It is important to establish whether the findings would be consistent if the study was replicated with the same respondents or in a similar context.

(a) Dependability

- **Step-by step-replication**

This was achieved through description of the research methodology which gives a step by step replication of the methodology. In this study it involved recruitment of participants through the psychological violence scale (cf. Annexure c) and getting the consent of the participants to be interviewed. The researcher went further to set an appointment with the participants individually, briefing them on the purpose of the research and what is expected of them. As much as possible the researcher used exactly the same words in requesting them to participate in the research. Furthermore exactly the same interview schedule questions were asked.

- **Coding and decoding procedure**

A final control measure undertaken was to apply coding/decoding procedure of the data (Krefting, 1991:216). An expert with an extensive experience in the field of qualitative research was appointed as an independent coder. After the interviews had been transcribed and coded by the researcher a protocol of the data analysis was presented to the independent coder who then

encoded and categorized the data on his own before meeting the researcher to discuss the results and to obtain the greatest possible degree of consensus. This procedure is also described by Modise (2003:47).

- **Neutrality**

This is classified as a fourth criterion for trustworthiness (Krefting, 1991:216). It involves the elimination of researcher bias in the research process and analysis. Thus the findings should be a true reflection of the participants' experiences and the conditions of the research and should not be influenced by the researcher's own values, opinions, prejudices or beliefs Ritchie and Lewis, (2003:144), Krefting, (1991) and Bailey, (2007:184) state that in order to ascertain this, conformability has been identified as the criterion for measuring neutrality.

- **Conformability**

This has to do with verification of the findings. In order to achieve this, two techniques have been used and these are chain of evidence and triangulation. The following records as outlined by Lincoln and Guba (1985:327) were kept as the chain of evidence in this study.

- Raw data in the form of audio tapes, of the interviews, field notes and research results;
- Data reduction and analysis, descriptions of field notes, collective information, quantitative summaries and theoretical notes;
- Reconstruction of data and the summaries such as the structuring of categories, themes, definitions and relationships, findings and conclusions, the final report with the integration of the concepts relationships and interpretations;
- Process notes, which includes notes about the methodology, trustworthiness and the chain of evidence notes;
- Research presentation and notes;
- Pilot study forms and the interview schedule.

- **Triangulation**

Triangulation aids in the control of variability of the research findings (cf par. 4.4.10.1).

4.4.11 Ethical considerations in quantitative and qualitative research

According Neuman (2006:129), ethical considerations are critical in social research. Any research undertaken with human subjects must ensure that the subjects are protected from harm. The ethics should be adhered to regardless of whether the human subjects are aware of their ethical rights or not. Ethical considerations for this research are in accordance with the Rules of Conduct pertaining to the Profession of Psychology (South Africa, 2006) which stipulates that it is important for the researcher to obtain informed consent from the participants and that the participants be informed of the voluntary nature of their participation and to also grant them the opportunity to ask questions. Furthermore, the ethical guidelines stipulate that it is mandatory to maintain confidentiality and not disclose the information that has been given in confidence. The following ethical considerations were undertaken in this research:

- **Informed consent**

As stipulated in the act the informed consent was adhered to in that, the researcher introduced herself to the secondary and high school principals and requested access to the teachers in their schools (cf. Annexure B, Letter of introduction to the principals).

The researcher explained the purpose of the research to the respondents of the quantitative part of the study and the participants of the qualitative part of the study. They all had the opportunity to ask questions. Furthermore the researcher sought permission to tape record the interviews from the participants who were interviewed and they also had to sign a confidentiality agreement giving their consent to be interviewed by the researcher (cf. Annexure H, confidentiality agreement).

- **Voluntary participation**

The participants were informed that their participation was voluntary and that they could withdraw from the research at any time (South Africa, 2006:72). All the participants were not coerced to participate in the study.

- **The right to privacy**

According to Polit and Hungler (1999:139) it is mandatory to maintain the privacy of the participants. The researcher achieved this by keeping the results anonymous with no association of the participants with the information.

- **Confidentiality and anonymity agreement**

In the beginning of the interview teachers were presented with the confidentiality agreement which the researcher read together with the participants and signed. The participants kept the copy of such agreement (cf. Annexure H, confidentiality agreement). The anonymity of the participants was also maintained during the reporting process.

4.5 Summary

This chapter has described the entire research process pursued in this study. This includes the quantitative and qualitative research methods data collection and analysis of data from both approaches. The next chapter (Chapter 5) presents and discusses the findings from the quantitative and qualitative parts of this study.

CHAPTER 5

PRESENTATION, ANALYSIS AND DISCUSSION OF THE FINDINGS

5.1 Introduction

In chapter four the research design and methods that the researcher utilized to gather the information in order to meet the research aims of the study were described in detail. This also included the rationale for the choice of the specific techniques and methods.

This chapter presents the findings of the two parts of the study. These are the qualitative and quantitative empirical research parts of the study. These will be presented separately in this chapter, for purposes of clarity, rigour and readability.

The findings are presented in the following order:

Firstly, the quantitative analysis of data from the psychological violence scale is presented. Secondly, the qualitative data analysis data collected with an open ended question in the psychological violence scale is thirdly, this is followed by the analysis of data collected through phenomenological individual interviews together with the symptoms checklist.

On the basis of the findings from both the quantitative and qualitative data the guidelines for teacher support for health promotion were developed (chap. 6) and the findings conclusions, and recommendations are presented in chapter 7.

The conceptual framework on which this research is based, namely holistic eco-systemic view of the experiences and impact of psychological violence on the health of victims (cf. par. 3.2), will be incorporated in the discussion of the findings. According to this approach, human beings exist in five contexts namely biological, psychological, ecological, metaphysical and spiritual, all of which are intertwined. Therefore, the negative impact of psychological violence should be viewed in terms of the holistic nature of health where the impact occurs in the different contexts of human existence (Kirsten, 2002:33-38; Jordaan & Jordaan, 1989:41; Kirsten, 2004; Kirsten *et al.*, 2007).

5.2 Presentation and interpretation of the quantitative research findings

This part of the chapter deals with the data collected from the target population through the psychological violence scale (cf. Annexure C, psychological violence scale). The target population comprised teachers in the High schools and secondary schools in the Maseru district in Lesotho. 500 questionnaires were delivered to the 35 participating schools. Out of this, 295 (59%) questionnaires were fully completed and returned to the researcher. Because of the high rate of non-respondents who might differ from the respondents, the respondents will be considered as a study population, that is a sub-population of the target population and no inference about the target population will be made. From the data coding and cleaning, it followed that in some questionnaires there were data missing, in instances where respondents did not respond to all questions. Therefore, the frequencies indicated in tables and figures are sometimes less than the total number of respondents. If all respondents answered a question the total is 295.

Two procedures were performed, firstly, descriptive statistical analysis of the data using the SAS programme (SAS Institute Inc., 2003) and the second procedure was factor analysis using SPSS statistical package (SPSS Inc., 2006). Data will be presented in the form of tables and figures followed by analytic interpretation of the presented data. These analyses and procedures provided the basis for the reported findings, conclusions and recommendations based on the research aims.

5.2.1 Descriptive statistical analysis of the findings

5.2.1.1 Presentation of biographical and demographical data of the respondents

Section A of the psychological violence scale was designed to gather biographical and demographical characteristics of the respondents from the 35 participating schools in the Maseru district in Lesotho. Tables of frequencies and percentages were used to present and interpret biographical and demographical data of the respondents.

Table 5.1: Frequencies of the age distribution of the respondents (N=294 responses)

Age cohort	Frequency	Percentage (%)
20-24	27	9.2
25-29	64	21.8
30-34	48	16.3
35-39	61	20.8
40-44	31	10.5
45-49	27	9.2
50-54	16	5.4
55-59	14	4.8
60 or more	6	2.0
TOTAL	294	100.0
missing value	1	

The age distribution of the respondents is presented in table 5.1. The majority 173 (59%), of respondents were between the ages 25 to 39. The second largest age cohort was 20 to 29 with 88 (29.8%) respondents. Only 36 (12.1 %) of the respondents, belonged to the age group of 50+. The mean age of the respondents was 32.6 years, indicating a study population that is younger than 50. Of the total respondents, only one (1) did not indicate the age.

Table 5.2: Frequencies of gender distribution of the respondents (N=286 responses)

Gender	Frequency	Percentage
Male	96	33.6%
Female	190	66.4%
TOTAL	286	100.0
missing values	9	

The gender distribution of the study population is presented in Table 5.2

The majority, 190 (66.4%) of the respondents were females and 96(33.6%) were males. Only nine (9) respondents did not indicate their gender.

Table 5.3: Frequencies of the distribution of marital status of the respondents (N=292 responses)

Marital status	Frequency	Percentage (%)
Single	81	27.7
Married	178	61.0
Divorced/separated	15	5.1
Widowed	16	5.5
Other	2	0.7
TOTAL	292	100.0
Missing values	3	

The marital status distribution of the respondents is presented in Table 5.3. It emerged from the data that the majority 178 (61.0%) of respondents are married while the single respondents constituted the second largest group with 81(27.7%). An insignificant number of respondents belonged to the rest of the groups, with 15 (5.14%) divorced or separated, 16 (5.5 %) widowed and only 2 (0.7%) registering as other. Three (3) respondents did not indicate their marital status.

Table 5.4: Frequencies of position in school (N=287 responses)

Position	Frequency	Percentage (%)
Management	38	13.0
Teaching Staff	249	87.0
TOTAL	287	100.0
Missing values	8	

Table 5.4 depicts the distribution of the respondents in terms of their position in employment. A very large number of respondents, 249 (87.0%) were teaching staff while only 38 (13.0%) were in the management category. There are eight (8) respondents who did not indicate their position in employment in the school.

Table 5.5: Frequencies of work experience of the respondents in years (N=290 responses)

Experience in years	Frequency	Percentage (%)
1	50	17.2
2-5	58	21.4
6-10	62	21.3
11-15	52	17.9
16-20	37	12.8
More than 20	31	10.7
TOTAL	290	100.0
missing values	5	

The teaching experience of the respondents is depicted in Table 5.5. There were 222 (76.4%) respondents who had between 1 and 15 years of teaching experience. Only 68 (23.5%) had more than 16 years of experience. Five (5) respondents did not indicate their work experience.

Table 5.6: Frequencies of the employer of the respondents (N=292 responses)

Employer	Frequency	Percentage (%)
Ministry of Education	244	83.6
School Board	48	16.4
TOTAL	292	100.0
missing values	3	

Table 5.6 presents the distribution of respondents' employer. It emerged from the data that a very large majority of respondents 244(83.6%) are employed by the Ministry of Education (MOE). Only 48 (16.4%) are employed by the school board. Three (3) respondents did not indicate their employer.

Table 5.7: Frequencies of location of schools (N=288)

Location of school	Frequency	Percentage (%)
Urban	157	54.5
Rural	30	10.4
Semi-rural	101	35.1
TOTAL	288	100.0
missing values	7	

According to Table 5.7 most respondents 157 (54.5%) worked in the urban schools while 101 (35.1%) work in the semi-rural schools. A small percentage 30 (10.4%) work in the rural schools. Seven (7) respondents did not indicate the location of the school where they work.

The following section provides data on the prevalence, severity and source of psychological violence as gathered through the psychological violence scale.

5.2.1.2 Prevalence, severity and source of psychological violence as work trauma

The first section of the psychological violence scale focused on teachers' experiences in the workplace and the respondents had to indicate the prevalence, severity, and source of psychological violence experiences stated in the scale. They had to specifically respond to the following question: *To what extent have you been exposed to the following?* This was then followed by the statements which they had to rate accordingly.

In order to facilitate the discussion, the findings in the next section will be presented in three sections, being firstly, prevalence, secondly, severity and finally the source of psychological violence experiences.

5.2.1.2.1 Prevalence level of psychological violence

The prevalence was measured on a four-point Likert scale ranging from 0 to 3 and the mean and standard deviation were calculated (cf. Annexure E for detailed descriptive statistics results). The interpretation of the findings was done at two levels which enabled the discussion of high and low values. A mean of 1.0 (seldom on the Likert scale) and above was interpreted as occurring to some extent and a mean of less than

1.0 was interpreted as of very low occurrence. The same procedure was followed for the analysis and interpretation of the findings on severity. However a different approach was adopted in the analyses of data for *source* because the respondents could actually mark more than one source for a particular psychological violence experience. Therefore, the data from *source* was presented, analysed and interpreted in relation to the five most (significant) prevalent experiences of psychological violence.

- **The most prevalent psychological violence experiences**

The results are presented in the rank order of the mean calculated for each item, in table 5.8 on the next page.

Table 5.8: The most prevalent psychological violence experiences

Rank	Item no.	Question	Mean	SD	Responses									
					Never		Seldom		Often		Very often		Total	
					F	%	F	%	f	%	f	%	N	%
1	1	Excessive pressure to produce work	1.52	1.0	57	19.8	80	27.8	94	32.6	57	19.8	288(100.0)	
2	48	Complaints fall on deaf ears	1.32	1.0	81	28.8	78	27.8	73	26.0	49	17.4	281(100.0)	
3	22	Not given due credit/acknowledgement for your work	1.27	1.11	98	33.8	69	23.8	70	24.1	56	18.3	293(100.0)	
4	12	Continuously demoralized	1.17	1.16	109	40.2	59	21.8	50	18.5	53	19.6	271(100.0)	
5	29	Rumours and malicious gossip spread about you	1.12	1.05	102	36.0	81	28.6	63	22.3	37	13.1	283(100.0)	

The negative experiences that had the highest means on prevalence are recorded in table 5.8. The mean range of these responses varies from 1.12 (occurring on average seldom on the likert scale) to 1.52 (occurring on average between seldom and often). The results reflect that the negative experience that ranged highest is *excessive pressure to produce more work* (Item1) with a mean of 1.52 (on average between seldom and often). Furthermore only 57(19.8%) indicated that they have never experienced this act in their workplace. This therefore implies that a very large majority 231(80.2%) of the respondents had experienced *excessive pressure to produce more work* at varying degrees.

The statement *complaints fall on deaf ears* (Item 48) ranked the second highest with a mean of 1.32 (on average between seldom and often) with only 81(28.8%) of the respondents stating that they have never experienced such an act and therefore it means that 200(71.2%) of the respondents who marked this statement had indeed experienced it. The relatively high prevalence indicated for these negative experiences reflect that power imbalances, whether formal or informal, in an organisation perpetuate psychological violence for the less powerful members of organisations (Rayner & Keashley, 2005:277)).

Evidence in the research literature also reflects that being put under pressure and being overloaded is a common negative experience in the workplace for instance, Rick, *et al.* (1998:42) indicates that of all the unpleasant experiences in the workplace, being put under a lot of pressure in various ways was one of the mostly reported experiences.

The act which ranked third is *not given due credit /acknowledgement for your work* (Item 22) with a mean of 1.27(on average between seldom and often). Only 98(33.8%) of the respondents had not experienced this while 195(66.2%) had experienced it.

The findings from these items reflect that psychological violence in the form of this act can be a subjective construction by the victim and it is clearly observable by the one experiencing it while it might not necessarily be obvious to the next person (Rayner *et al.*, 2002:276; Einarsen *et al.*, 2003:11-12; cf. par. 2.3.2).

The experience that ranked fourth in the rank order is *continuously demoralized* (Item12) which has the mean of 1.17 (on average between seldom and often). For

this item, 109 (40.2%) of the respondents had not experienced it and 162 (59.8%) had the experience. This signifies the distinguishing feature of psychological violence which is persistence and long term duration of negative experiences as implied in this particular item (Graves, 2006:6; cf. par. 2.3.2).

The last item recorded in the order of highest prevalence is *rumours and malicious gossip spread about you* (Item 29) with a mean of 1.12 (on average between seldom and often) 102 (36.0%) respondents indicated that they have never experienced this. This means that 181 (64.0%) of the respondents experienced this particular act. Systematic destruction of the persona of the victims through the spread of *rumours and malicious gossip* is apparent in the findings of this study as corroborated by the research literature on the mistreatment of teachers (Blasé & Blasé, 2003, Hall, 2005:47). Other findings from different work settings attest to the same findings (Lutgen-sandvik *et al.*, 2006; cf. par. 2.3.2).

The findings of this study regarding the most prevalent acts of psychological violence in the workplace also corroborates findings by Hoel & Cooper (2000:18), Mikkelsen and Einarsen *et al.* (2003:401) and Beswick *et al.* (2006:14) who found that the most reported acts of psychological violence are, excessive work pressure and workload, complaints being ignored, not being given due credit for one's work, being demoralised and having rumours and malicious gossip spread about one.

- **The least prevalent psychological violence experiences**

The results are presented in the rank order of the mean scores calculated for each item, starting with an item which recorded the lowest mean.

Table 5.9: The least prevalent psychological violence experiences

Rank	Item no.	Question	Mean	SD	Responses								Total	
					Never		Seldom		Often		Very often			
					F	%	f	%	f	%	f	%	N	%
1	38	I am cursed & sworn at	0.21	0.60	251	85.8	27	9.7	6	2.1	7	2.4	291(100.0)	
2	39	I am threatened with physical harm	0.23	0.62	240	82.8	21	7.2	14	4.8	15	5.2	280(100.0)	
3	7	Excluded from staff social occasions	0.27	0.62	212	81.2	32	12.3	13	5.0	4	1.5	261(100.0)	
4	36	Personal property vandalized e.g. cars	0.27	0.73	245	85.7	19	6.6	9	3.1	13	4.6	286(100.0)	
5	62	Humiliated in front of the public	0.29	0.66	225	80.6	30	10.8	20	7.2	4	1.4	279(100.0)	

The negative experiences that had the lowest means are recorded in table 5.9. The mean range of the responses varies from 0.20 to 0.29. Although the negative experiences in table 5.9 received the lowest rating, they are still considered significant in terms of the range of experiences identified. It further could somewhat indicate that the magnitude of the problem is more than what this study unravelled.

The experience that ranked the lowest is *I am cursed and sworn at* (Item 38) with the mean of 0.21. A few respondents 40(13.7%) indicated having had the experience and this translates to only 40 respondents of which 6(2.1%) indicated having had the experience often and 7(2.4%) had experienced it very often. On the contrary, a significantly large majority, 251 (85.8%) of the respondents never had the experience. This means that *being cursed and sworn at* had a very low prevalence in the study population and it can be concluded that it almost never occurred.

The second lowest act identified is *I am threatened with physical harm* (Item, 39) with a mean of 0.23. Only 40 (17.2%) of the respondents indicated having experienced this act, with 14 (4.8%) respondents having experienced it often and 15(5.2%) had experienced very often. Conversely, 240 (82.8%) of the respondents never had the experience. The report of European findings on the improvement of working conditions, (2003:1-3) point out that even though there is an overlap as well as interaction between physical violence and psychological violence, the key findings in the European countries provide evidence that physical violence was lower compared to other forms of psychological violence. This therefore corroborates the findings of this study.

The third lowest experience identified is *excluded from staff social occasions* (Item7) with a mean of 0.27. For this particular negative experience, only 49(18.8%) had the experience of which 13(5.0%) indicated often and 4(1.5%) very often while on the other hand 212(81.2%) never had this experience. While the majority of respondents in this study never experienced this particular act, it emerged from the study by Einarsen *et al.* (1994) that among other negative experiences experienced, social isolation and exclusion was commonly reported by the 137 victims of workplace bullying.

The fourth least statement is *personal property vandalized e.g. cars* (Item 36) registering a mean of 0.27. Most respondents never had this particular experience. This is 245 (85.7%) of the respondents. Only a few respondents had the experience and this is 50 (14.3%) respondents of which 9(3.1%) indicated often and 13(4.6%) experienced it very often. This particular act relates to physical violence, which further demonstrates that acts of physical violence as workplace threats are not as high as other forms of psychological violence.

The fifth lowest experience in this category is *humiliated in front of the public* (Item 62). For this particular act, 54 (19.3%) respondents had the experience while 225(80.7%) of the respondents never had the experience of which 24 indicated often or very often. The nature of a teaching job does not expose teachers to frequent interaction with the public therefore this could explain the low prevalence of this particular negative act. Nevertheless, Blasé and Blasé (2003:16) found public humiliation to be one of the second level types of unpleasant experience, direct escalating forms of aggression by the principal against teachers in their own study. However it seems that a slightly different picture emerged in the current study which could be attributable to methodological differences in the study of this phenomenon (cf. par.2.7).

The next section discusses the findings on severity of the experiences of psychological violence by the respondents.

5.2.1.2.2 The severity level of the psychological violence experiences

The severity level was measured on a five point-scale ranging from 0 to 4 and the same procedure as for prevalence was followed.

- **The most severe psychological violence experiences**

The results are presented in the rank order of the mean scores calculated for each item. Furthermore, it is important to note that the respondents who state that they never had any severity related to the items are actually the same respondents who never had the experience of that particular act at all. Therefore the significance of the findings reported here should be understood and interpreted in that light.

The negative experiences that had the highest means on prevalence are recorded in table 5.10. The mean range of these responses varies from 1.43 to 1.70 (occurring on average between not severe and severe).

Table 5.10: The most severe psychological violence experiences

Rank	Item no.	Question	Mean	SD	Responses											
					Never		Not severe		Severe		Very severe		Extremely severe		Total	
					F	%	F	%	f	%	f	%	f	%	N	%
1	1	Excessive pressure to produce more work	1.70	1.20	48	18.4	74	28.4	69	26.4	49	18.8	21	8.0	261(100.0)	
2	48	Complaints fall on deaf ears	1.57	1.35	75	29.5	52	20.5	63	24.8	34	13.3	30	11.8	254(100.0)	
3	22	Not given due credit/acknowledgement for your work	1.54	1.42	86	32.7	63	24.0	35	13.3	45	17.1	34	12.9	263(0.00)	
4	29	Rumours and malicious gossip spread about you	1.45	1.37	89	34.5	55	21.3	54	20.9	30	11.6	30	11.6	258 (100.0)	
5	10	Goals to be achieved at work changed without being told	1.43	1.46	103	39.2	52	19.8	33	12.5	41	15.6	34	12.9	263 (100.0)	

The experience with the highest mean is the statement *excessive pressure to produce more work* (Item 1) with a mean of 1.70 (on average, relatively severe). For this particular experience 48 (18.4%) stated that they never experienced any severity as a result of the act. Seventy-four (74) (28.4%) of the respondents indicated that they found the experience not severe. Most respondents (184) 70% found this experience severe at varying levels. *Complaints fall on deaf ears* (Item 48) 127 (65.2%) was indicated by the respondents as the second experience in the rank order of severity of experiences. It has a mean of 1.57 (on average between not severe and severe). Of the 254 respondents who marked this item, 75(29.5%) never experienced it, while 52 (20.4%) stated that they did find the experience severe. 127(50%) of the respondents found the experience to be severe across the continuum of severity.

The third in the rank order of severity is the statement *not given due credit/ acknowledgement for your work* (Item 22) with a mean of 1.54 (on average between not severe and severe). 86 (32.7%) of the respondents never experienced any severity in relation to this item. 63 (24.0 %) did not find their experience severe at all. One hundred and fourteen 114 (43.3%) found the experience severe. Although the experience seems to have a rather low severity level on average, a closer look at results on the scale of severity shows that this item records highly on the extremely severe level together with almost all the items except for item 10 *goals to be achieved at work changed without being told*.

The fourth experience that recorded high on severity level is *rumours and malicious gossip spread about you* (Item 29) with a calculated mean of 1.45 (on average between not severe and severe). Eighty nine (89) (34.5%) of the respondents never experienced any severity related to this item. However, 55 (21.3%) did not find their experience to be severe at all. 104(40.3%) of the respondents, found their experience to be severe. Again although this item seems to be somewhat low on the basis of the calculated percentages, it however records second on the level of extremely severe with 30 (11.6%) of the respondents finding their experience extremely severe in comparison with the other items in this category. In the research literature, Einarsen, et al. (1998) found that the spread of rumours and malicious gossip about an employee by others in his or her workplace erodes the victim's self esteem.

The last negative experience in this category is *goals to be achieved at work changed without being told* (Item10) with a calculated mean of 1.43 (on average between not severe and severe). 10 (39, 2 %) of the respondents did not find any severity related to the item at all. 52 (19.8 %) did not find their experience severe, while 108 (41.0%) found their experience severe. Even though there seems to be a lower percentage of the respondents experiencing severity in this item however compared to other items, it has a largest number of respondents recording on extremely severe (34) which is 12.9%.

The most severely experienced negative actions presented in the foregoing paragraphs are work related and the literature points to the fact that work related negative experiences such as these are experienced by the workforce in different settings (Poilpot-Rocaboy, 2006:10).

The next subsection reports on the psychological violence experiences that were found to be the least severe.

- **The least severe experiences of psychological violence**

The results are presented in table 5.11 in the rank order of the mean scores calculated for each item, starting with the item with the lowest mean.

Table 5.11: The least severe experiences of psychological violence

Rank	Item no.	Question	Mean	SD	Responses										Total	
					Never experienced		Not severe		Slightly Severe		Severe		Extremely severe			
					f	%	f	%	f	%	f	%	f	%		N
1	37	Threatened through the use of electronic media e.g. Cell phones/internet	0.27	0.69	207	83.5	25	10.1	8	3.2	7	2.8	1	0.4	248	100.0
2	38	I am cursed & sworn at	0.35	0.85	202	81.1	26	10.5	8	3.2	8	3.2	5	2.0	249	100.0
3	36	Personal property vandalized e.g. cars	0.36	0.93	198	83.2	17	7.1	7	2.9	9	3.8	7	2.9	238	100.0
4	7	Excluded from staff social occasions	0.44	0.93	171	75.7	32	14.1	7	3.10	11	4.9	5	2.2	226	100
5	54	Undesirable work assigned as 'punishment'	0.44	0.99	172	79.3	15	6.9	16	7.4	7	3.2	7	3.2	217	100.0

The item that had the lowest severity level is *threatened through the use of electronic media e.g. cell phones/internet* with a low mean of 0.27 (on average almost never). Most of the respondents, 207 (83.5%) of the respondents did not experience any severity related to this item. While 25 (10.1%) stated that their experience was not severe. This therefore means that only 16 (6.4%) found the experience severe. The use of technology in the form of computers in the schools and homes is still very low to warrant its use in psychological violence in Lesotho therefore this could explain low prevalence and severity for this item.

The second lowest negative experience is *I am cursed and sworn at* (Item 38) with a low mean of 0.35 (on average almost never). Out of 249 respondents, 202 (81.1%) did not have any severity related to this item at all. 26 (10.5%) did not find their experience severe and only 21 (8.4%) found their experience severe.

The third lowest severity level experience is *personal property vandalized e.g. cars* (Item 36) which has a mean of 0.36 (on average almost never). 198 (83.2%) never had any severity related to this item at all. 17 (7.1%) found their experience not severe while only 22 (9.2%) found their experience severe.

The fourth item is *excluded from staff social occasions* and it has the mean of 0.44 (on average between never and not severe). Most respondents, 171 (75.7%) had no experience of severity related to this item at all. The findings further indicate that 32 (14.1%) of the respondents found their experience not severe, while few respondents, 21 (9.2%) found their experience severe.

The last experience in this category is *undesirable work assigned as 'punishment'* (Item 54) with a mean of 0.44 (on average between never and not severe). 172 (79.3%) reported not having any experience of severity related to the statement. (6.9%) found their experience not severe and few, 14 (6.4%) stated that their experience was severe.

The next section presents the findings on the source of psychological violence experiences for the respondents

5.2.1.3 Sources of psychological violence

In this section the source of psychological violence experiences will be presented, analysed and discussed in relation to the most prevalent experiences because this is significant in terms of understanding the source for the most prevalent experiences of psychological violence against the respondents. Since the respondents could mark more than one source for a single experience, the frequencies depicted do not necessarily add up to the total number (N=295) of respondents in the study. Therefore the results in this sub section should be interpreted in that light (cf. table 5.12)

Table 5.12: Sources of psychological violence

Rank	Item	Question	Source							
			MOE	Board	Superiors at my school	Colleagues	Subordinates	Students	Parents	Community
			f %	f %	f %	f %	f %	f %	f %	f %
1	1	Excessive pressure to produce work	55 18.6	30 10.1	149 50.5	82 17.6	13 4.4	46 15.5	23 7.7	14 4.7
2	48	Complaints fall on deaf ears	32 10.8	45 15.5	138 46.7	36 12.2	10 3.3	18 6.1	13 4.1	3 1.0
3	22	Not given due credit/acknowledgement for your work	36 12.2	43 14.5	149 50.1	54 18.3	12 4.0	23 7.7	27 9.1	22 7.4
4	12	Continuously demoralized	15 5.0	26 8.8	101 34.2	47 15.9	11 3.7	32 10.8	12 4.0	6 2.0
5	29	Rumours & malicious gossip spread about you	3 1.0	14 4.7	61 20.6	121 41.0	36 12.2	42 14.2	22 7.4	14 4.7

- **Excessive pressure to produce work (Item 1)**

In relation to this particular act, most respondents, 149 (50.5%) identified the superiors in their specific schools as the source of their negative experiences. The second largest source identified being colleagues which was identified by 82(17.6%). 55(18.6%) identified MOE as the source of their negative experiences. 46(15.5%) marked students as the source; while parents were stated by 23(7.7%). The lowest source identified was the community, which accounted for only 14(4.7%) of the responses.

- **Given unreasonable deadlines (Item 48)**

In this particular act, the majority of respondents, 138(46.7%) identified superiors at their schools as the main source of their negative experiences. The second largest source was the board, which was marked by 45(15.5%) of the respondents. 36 (12.2%) pointed to colleagues as the source, while 18(4.1%) identified students as the source. Only 13(4.1%) respondents pointed to the parents as the source. The sources that ranked the lowest on this particular experience were subordinates with only 10(3.3%) responses and the community with only 3(1.0%) of responses.

- **Not given due credit /acknowledgement for your work (Item 22)**

This particular experience was marked by 149(50.1%) of the respondents. Colleagues as the source followed at 54(18.3%). The board was identified by 43(14.5%). MOE was marked by 36(12.2%) respondents and the parents were identified by 27(9.1%) of the respondents. Very few responses pointed to students as the source and this accounted for only 23(7.7%) of the responses. The lowest sources were community with 22(7.4%) responses and subordinates with 12(4.0%).

- **Continuously demoralized(Item 12)**

In this particular experience the source that had the highest rating is superiors at ones particular school. It had 101 (34.2%) responses. The second largest being the colleagues 47(15.9%) responses. Students followed with 32(10.8%) responses. The board was marked by 26(8.8%) respondents. The MOE was identified by

15(5.0%) respondents. Parents had 12(4.0%) responses. The lowest rated sources were subordinates with 11(3.7%) responses and community with 6 (2.0%) responses

- **Rumours and malicious gossip spread about you (Item 29)**

From the analysis of responses to this item on the source of the psychological violence experiences the following picture emerged. Colleagues were identified as the highest rated source on this act because 121(41.0%) pointed to colleagues. The second highest source was superiors at my school with 61(20.6%) responses. Responses pointing to students were 42 (14.2%). Subordinates were identified by 36 (12.2%) of the respondents. Parents had 22(7.4%) responses and the two lowest responses were the board and the community both with 14 (4.7%).

The results depicted in Table 5.12 show that, *superiors in my school*, seems to be the source for the four of the most prevalent negative experiences, namely *excessive pressure to produce work* (Item1), *given unreasonable deadlines* (Item 48) and *not given due credit/acknowledgement for your work* (Item 22). Superiors in the school and other work settings have been identified as the source of negative experiences. The fact that superiors in the school setting hold formal power over the respondents could explain this situation. This point relates to how formal power can be abused in the workplace (Rayner & Keashly, 2005:277; cf. par. 2.3.2). Thus, in this case the formal power is held by the superiors because of their hierarchical position in an organisation. According to Quine (1999) in a study involving 1110 nurses, 59% of them identified the senior manager as the source of negative experience. A point further shown in other research studies, for instance Hoel and Cooper,(2000:14), in a study of different organisations in UK, found that the organisation level of perpetrators per sector (citing only two sectors)was as follows, in higher education the supervisor/manager was 62.% followed by colleagues at 51.4%. In teaching the supervisor/manager stood at 86.4% followed also by colleagues at 21.2%.

Colleagues ranked the highest on *rumours and malicious gossip spread about you* (Item 29) and also the second highest source in most items (cf. Table, 5.14) This is corroborated by study undertaken by Hoel & Cooper(2000) which identified colleagues as the second largest source of negative experiences. This has also been labelled as a

mobbing situation where a group of colleagues gang up against another colleague (Di Martino, 2003:2).

It seems that superiors in the school and the colleagues of the respondents are the sources the most identified sources of negative experiences in the workplace.

5.2.1.4 The reaction to the experiences of psychological violence

This section answers the question: to what extent did you engage in the following acts?

The presentation and analysis of the reaction to some of the experiences are based on the rank order of mean scores calculated for each item

5.2.1.4.1 Prevalence of the reactions to the psychological violence experiences

Data on the prevalence of the reactions to the experience of psychological violence is presented in table 5.13 on the next page.

Table 5.13: Prevalence of the reactions to the experiences of psychological violence

(Rank	Item no.	Question	Mean	SD	Responses									
					Never		seldom		often		Very often		Total	
					F	%	f	%	f	%	f	%	N	%
1	68	I experience job dissatisfaction caused by negative circumstances at work	1.10	1.15	107	37.2	77	26.7	57	19.8	47	16.3	288(100.0)	
2	70	I have feelings of resentment and bitterness due to negative experiences at work	1.09	1.01	126	43.3	81	27.8	39	13.4	45	15.5	291(100.0)	
3	67	I experience reduced motivation due to negative circumstances at work	1.06	1.19	91	32.9	86	31.0	57	20.6	43	15.5	277(100.00)	
4	69	I experience an increase in physical ailments due to circumstances at work	1.04	0.80	157	55.1	60	21.0	37	12.9	31	10.9	285(100.0)	
5	66	I am occupied with/rethinking the details of negative events at work	1.01	0.91	130	46.0	77	27.0	48	17.0	28	10.0	283(100.0)	

The most prevalent experience with a mean of 1.10 (on average seldom) is *I experience job dissatisfaction caused by negative circumstances at work* (Item 68). One hundred and seven (107) which is 37.2% of the respondents, stated that they never engaged in this act but the majority 181(62.4%) stated that they engaged in it.

The second most prevalent experience with a mean of 1.09(on average seldom) is *I have feelings of resentment and bitterness due to negative experiences at work* (Item 70). 126(43.3%) of the respondents never experienced it while 165(56.7%) (On average seldom) experienced it.

The third most prevalent with the mean of 1.06 (on average seldom) was *I experience reduced motivation due to negative circumstances at work* (Item 67), 91(32.8%) never had the experience while 186 (67.2%) at the varying levels have engaged in this act.

The fourth experience in the rank order is *I experience an increase in physical ailments due to circumstances at work* (Item 69) with a mean of 0.80 (on average seldom).One hundred and fifty seven 157 (55.1%) respondents never experienced this, however, 130 (45.9%) did experience it.

Finally, the statement *I am occupied with/rethinking the details of negative events at work* (Item 66) ranked fifth with a mean of 1.01(on average seldom). It emerged from the results that 130(46.0%) of the respondents never engaged in this act at varying the degrees while 153(64.0%) did engage in it.

Research evidence points that as a result of unpleasant experiences in the workplace, workers engage in the aforementioned behaviours. For instance, a Belgian study by Notelaers *et al.* (2006:288-301), with 6175 respondents from various organisations, the respondents rated highly negative on items which related to pressure at work which included items similar to the ones presented in Table 5.12. This point is further emphasized by Namie and Namie (2003:2-3) and evidenced from the research on teachers by Blasé and Blasé, (2003:411).

The next sub section presents the findings on the severity of reaction to the experiences of psychological violence.

5.2.1.4.2 Severity of the reactions to the experiences of psychological violence

The presentation and analysis of the severity of the acts that the respondents engaged in as a result of the negative experiences at work are based on the rank order of mean scores calculated for each item.

Table 5.14: Severity of the reactions to the experiences of psychological violence

Rank	Item no.	Question	Mean	SD	Responses										
					Never experienced		Not severe		Slightly severe		Very severe		Extremely severe		Total
					f	%	f	%	f	%	f	%	f	%	
1	67	I experience reduced motivation due to negative circumstances there	1.53	1.32	69	27.0	75	30.0	43	17.0	39	15.0	27	10.7	253(100.0)
2	68	I experience job dissatisfaction caused by negative circumstances at work	1.51	1.36	78	30.6	62	24.3	52	20.4	32	12.5	31	12.2	255(100.0)
3	70	I have feelings of resentment & bitterness due to negative experiences at work	1.42	1.46	98	37.3	66	25.1	29	11.0	30	11.4	40	15.2	263(100.0)
4	66	I am occupied with/or rethinking the details	1.23	1.30	95	38.5	68	27.5	36	14.6	27	10.9	21	8.5	247(100.0)
5	65	I do not feel like going to work due to negative circumstances at work	1.16	1.35	119	46.1	53	20.5	33	12.8	31	12.0	22	8.5	258(100.0)

As a result of the negative experiences in the workplace the respondents reported that they engaged in the acts presented in Table 5.14. The severity level of the acts has been investigated with a five point likert scale, as indicated in the previous sections (cf. Par. 5.2.3). The severity of the behaviours that respondents engaged in as a result of their experiences varies considerably.

The experience that ranked highest with a mean of 1.53 (on average between not severe and severe) is *I experience reduced motivation due to negative circumstances there* (Item67). Only 69(27.0) stated that they never had any severity related to this act. 75(30.0%) of the respondents claimed that they did not find their engagement with this act severe. Nevertheless 109 (43.0%) and stated that they engaged in this act and out of these 43(17.0%) found it slightly severe and very closely were 39 (15.0%) respondents who found their experience very severe.

The second experience in the rank order with a mean of 1.51 (on average between not severe and severe) is *I experience job dissatisfaction caused by negative circumstances at work* (Item68). 78(30.6) respondents never experienced any severity related to this item. 62(24.3%) did not find their experience severe, while 115 (45.1%) regarded their engagement with the act to be severe across the continuum. A small majority of the respondents, 32(12.5%) found the experience very severe and 31(12.2%) found it extremely severe. Finally, 27(11.0% of the respondents found their experience extremely severe.

The third experience in the category is *I have feelings of resentment and bitterness due to negative experiences at work* (Item 70) with a mean of 1.42 (on average, severe). Of the 263 respondents who marked this item, 98 (never had any severity related to this act, while 66 (25.1%) did not find it severe at all. 99 (37.3%) and out of these, most respondents constituting 40 (15.2%) found their experience extremely severe. *I am occupied with/ or rethinking the details* (Item66) has a mean of 1.23 (on average not severe) and it ranks fourth in this category. Out of 247 respondents who marked this item, 95(38.5%) did not have any severity related to this act. On the other hand, 68(27.5%) found their experience not severe, while 84(34.1%) found it severe. Most respondents, 36(14.6%) found it slightly severe.

The last act in the rank order is *I do not feel like going to work due to negative circumstances at work* (Item 65) with a mean of 1.16 (on average, not severe). 119 (46.1%) respondents had no severity related to the item. 53 (20.5%) did not find their experience

severe.86 (33.3%) of the respondents found their experience severe. Out of these 33(12.8%) found the experience slightly severe.

In the research literature the severity of these behaviours can be understood in relation to the effects of psychological violence as affecting individuals at different work contexts being, physical and psychological impact they have on the victims. The severity is observed in the escalation of sick absence, effect on the thinking processes, shame and the general feeling of biological, social and psychological malfunction which are collective effects of the severity of the psychological violence experiences (Rayner & Keashly, 2005:275; Lewis, 2004:295; Einarsen *et al.*, 1998).

5.2.1.5 Conclusions from the descriptive data analysis

The descriptive data analysis of the psychological violence scale revealed the following:

Although severity and prevalence were measured at different scales, it has been interesting to note that four similar acts registered highly in both prevalence and severity as can be seen (cf. numbers I to IV on the most prevalent acts of psychological violence and 1 to V on the most severe acts of psychological violence). Three acts registered low on both prevalence and severity and these are: *being cursed and sworn at, personal property vandalized e.g. cars and being excluded from staff social occasions.*

- **Prevalence**

- The most prevalent acts of psychological violence are:

- i) Excessive work pressure and workload
- ii) Having complaints and concerns falling on deaf years
- iii) Not being given due credit or acknowledgement for work done
- iv) Being continuously demoralized
- v) Having rumours and malicious gossip spread about one

- The least prevalent acts of psychological violence are:

- i) Being cursed and sworn at
- ii) Threat of physical harm
- iii) Personal property vandalized

- iv) Being excluded from staff social occasions
- v) Humiliation in public

- **Severity**

- The most severe reported acts of psychological violence are:
 - i) Excessive work pressure and workload
 - ii) Having complaints and concerns falling on deaf ears
 - iii) Not being given due credit or acknowledgement for work done
 - iv) Rumours and malicious gossip spread about one
 - v) Goals to be achieved at work shift without being told
- The least severe reported acts of psychological violence
 - i) Threatened with the use of electronic media
 - ii) Being cursed and sworn at
 - iii) Personal property vandalised
 - iv) Being excluded from staff social occasions
 - v) Undesirable work assigned as punishment

- The sources of psychological violence experiences

The findings also revealed that superiors in the schools are the source for the four most prevalent acts of psychological violence. The second largest source identified is colleagues, while MOE ranks the third. Other sources of psychological violence such as students, subordinates, community and parents ranked extremely low.

- **The reactions to some of the psychological violence experiences**

- The most prevalent reactions to some of the psychological violence experiences
 - i) I experience job dissatisfaction caused by negative circumstances at work
 - ii) I have feelings of resentment and bitterness due to negative experiences at work

- iii) I experience reduced motivation due to negative circumstances at work
- iv) I experience an increase in physical ailments due to circumstances at work
- v) I am occupied with/rethinking the details of negative events at work
- The most severe reactions to some of the psychological violence experiences are as follows:
 - i) I experience reduced motivation due to negative circumstances there
 - ii) I experience job dissatisfaction caused by negative circumstances at work
 - iii) I have feelings of resentment and bitterness due to negative experiences at work
 - iv) I am occupied with/ rethinking the details at work
 - v) I do not feel like going to work because of the circumstances there

The next section presents the findings from factor analysis on the prevalence and severity of psychological violence experiences.

5.2.2 Factor analysis

Factor analysis, using SPSS statistical package (SPSS Inc., 2006), was performed on the variables in the psychological violence scale. It is the procedure that explains the maximum variance of the data by a few extracted underlying factors which explains the correlation among the variables, providing both the pattern and the structure of the original variables (Tabachnik & Fidel, 2001:582-583). Principal component factor analysis with an oblique rotation was selected in this study since the variables were supposedly all correlated.

The factor analysis (Tabachnik & Fidel, 2001:600) was performed and 12 factors were extracted for both prevalence and severity of psychological violence experiences. The presentation, analysis and discussion of the findings in this section will unfold in the following order. Firstly, the factor analysis for prevalence will be presented together with their Alpha reliability coefficients. Secondly, factor analysis of factors extracted on severity and their Alpha reliability coefficients will be presented. Lastly, factor analysis

on the reaction to the experiences of psychological violence (NB: the last question on the psychological violence scale) will be presented. The latter specifically relates to the question: *to what extent did you engage in any of the following?*

5.2.2.1 Adequacy of variables on psychological violence scale.

The first stage in the factor analysis involved the test of sampling adequacy which is reported in table 5.15.

Table 5.15: KMO and Bartlett's Test of sampling adequacy

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		927
Bartlett's Test of Sphericity	Approx. Chi-Square	9105.901
	Df	1953.000
	Sig.	.000

Kaiser-Meyer-Olkin (KMO) test of sampling adequacy was performed and the results indicated a high adequacy of .93 seen in Table 5.15. KMO that is above 0.9 is excellent (Field, 2005). Therefore in this case the KMO test indicated that factor analysis is appropriate. Furthermore, the Bartlett's test of sphericity also indicated that correlations between items are large enough for factors to form.

5.2.2.2 Communalities for the extracted factors on prevalence of psychological violence

Communalities for the extracted factors are presented and interpreted in table 5.16

Table 5.16: Communalities for the extracted factors on prevalence

Tem	Initial	Extraction	Item	Initial	Extraction	Item	Initial	Extraction	Item	Initial	Extraction
BA 1	1.000	.640	BA17	1.000	.615	BA33	1.000	.591	BA49	1.000	.638
BA2	1.000	.600	BA18	1.000	.627	BA35	1.000	.692	BA50	1.000	.637
BA3	1.000	.619	BA19	1.000	.626	BA36	1.000	.598	BA51	1.000	.702
BA4	1.000	.608	BA20	1.000	.574	BA37	1.000	.660	BA52	1.000	.669
BA5	1.000	.527	BA21	1.000	.664	BA38	1.000	.712	BA53	1.000	.690
BA6	1.000	.611	BA22	1.000	.585	BA39	1.000	.704	BA54	1.000	.640
BA7	1.000	.586	BA23	1.000	.643	BA40	1.000	.649	BA55	1.000	.684
BA8	1.000	.627	BA34	1.000	.526	BA41	1.000	.768	BA56	1.000	.665
BA9	1.000	.642	BA24	1.000	.651	BA42	1.000	.622	BA57	1.000	.632
BA10	1.000	.599	BA25	1.000	.612	BA43	1.000	.676	BA58	1.000	.614
BA11	1.000	.743	BA26	1.000	.656	BA44	1.000	.594	BA59	1.000	.702
BA12	1.000	.681	BA27	1.000	.660	BA45	1.000	.669	BA60	1.000	.641
BA13	1.000	.631	BA28	1.000	.657	BA46	1.000	.673	BA61	1.000	.721
BA14	1.000	.637	BA29	1.000	.638	BA47	1.000	.572	BA62	1.000	.747
BA15	1.000	.697	BA30	1.000	.665	BA48	1.000	.656	BA63	1.000	.625
BA16	1.000	.734	BA31	1.000	.711	BA33	1.000	.591		1.000	.690

Extraction Method: Principal Component Analysis

Table 5.16 depicts the communalities for the extracted factors. Communality explains the percentage of variance in a particular variable that is explained by the extracted factors. Communalities for all the variables were more than .50 which indicates a statistically high and significant value. The communalities ranged from .52 to .76. High communalities provide evidence that the factors extracted explained a high proportion of the variance of each item (Tabachnik & Fidel, 2001:596).

5.2.2.3 Extracted factors and the pattern matrix of the factors from the psychological violence scale

Twelve factors were extracted explaining 64.8% of the variance in the data. After the twelve factors were extracted, the researcher evaluated the extracted factors in relation to the available literature in order to ascertain that the extracted variables are interpretable in terms of literature on psychological violence in the workplace. In the case of variables which loaded on more than one factor; the items were placed in factors where they have the most interpretable value. After this process was completed for all the factors, each factor was then labelled accordingly as presented in Table 5.17.

Table 5.17: Pattern matrix for the extracted factors

Factors		Items	Factor loadings														
			F1	F2	F3	F4	F5	F6	F7	F8	F9	F10	F11	F12			
1	Attacks on professional status	14	.646														
		21	.545														
		19	.509														
		20	.462								.426						.311
		18	.452														.331
		53	.349														
2	Attacks on personal standing	37		.774													
		39		.746													
		38		.694													
		36		.572							.366						
		41		.540								.321					
		43		.488													
		33		.339													
3	Non verbal and verbal abuse	31			.570												
		30			.560												
		26			.536												
		25			.468												
		29			.440												
		24			.339												
4	Excessive pressure & workload	1				.784											
		4				.669											
		3				.634											
		2				.623											

5	Exclusion & barring	7					.624						
		6					.581						
		9					.481						
		5					.458						
		10					.439						
6	Hostility, punishment & sabotage	61						.701					
		60						.676					
		46						.506					
		54						.388					
		56						348					
		50						.304					
7	Work excessively monitored	17					304	.683					
8	Undermining & unfair criticism	11								.645			
		40								.627			
		12								.605			
		22								.547			
		15								.452			
		16								.413			
		45								.340			
9	Persistently teased & made fun of in front of students or colleagues	28									.691		
10	Humiliation	62										.655	
		34										.475	
		8										.464	
		23										.311	

11	Ignored/negative reaction	48											.610		
		52												.581	
		49												.561	
		51												.529	
		57												.451	
		55												.390	
		13												.351	
		47												.29	
12	Destabilization	44													
		59													
		58													
		27													
		63													
		32													
		42													
35															

5.2.2.4 Discussion of the factors on prevalence of psychological violence and presentation of their Alpha reliability coefficients

The extracted factors are discussed in this section. They all have a high reliability coefficient of .7 and above. Cronbach's Alpha for each factor has been calculated and presented in the tables alongside the factors. In the case of factors consisting of single items, reliability coefficient is not calculated because all information of the item is retained in the factor.

FACTOR 1: ATTACKS ON PROFESSIONAL STATUS

Table 5.18: Factor 1: Attacks on professional status Attacks on professional status

Items: Attacks on professional status		Cronbach`s Alpha
14	Exposed to hints that you must quit your job	.827
21	Repeatedly reminded of your mistakes and errors	
19	Threatened with the use of discipline and competence procedure	
20	Ordered to do work that is below your level of competence	
18	Humiliated in front of colleagues	
53	Campaigns launched against you	

It comprises of variables with salient loadings between .35 and .65. All the variables in this factor are related to attacks to professional status. Djurkovic *et al.* (2005:74) contents that in the English language literature on psychological violence, threat to one's professionalism has been identified as a category. For instance, *exposure to hints that you must quit your job* loaded highly on this particular factor with a loading of .646. The lowest variable loading was *campaigns launched against you* with a factor loading of .349. This factor has an Alpha reliability coefficient of .827.

FACTOR 2: ATTACKS ON PERSONAL STANDING

Table 5.19: Factor 2: Attacks on personal standing

Items: attacks on personal standing		Cronbach`s Alpha
37	Threatened through the use of electronic media e.g. cell phones /internet	.838
39	I am threatened with physical harm	
38	I am cursed and sworn at	
36	Personal property vandalized	
41	Humiliated in front of colleagues	
43	Exposed to unfair verbal threats and intimidation	
33	Faced with threatening behaviour e.g. Finger pointing, invasion personal space, shoving, blocking the way	

Seven items loaded significantly on this factor, it has a factor loading range between .33 and .77. This factor corresponds to a group of interrelated variables that all seem to be related to attacks on personal standing. The factor was labelled as such because the items in this factor relate specifically to personal attacks that are not necessarily work related and yet the respondents experience them at work, a point made by Djurkovic *et al.* (2005:74). For instance *threatened through the use of electronic media e.g. cell phones/internet* (Item 37) which has the highest factor loading of .774. Although item 33 had the lowest loading on this factor it is related to the other items in this factor. Cronbach`s Alpha coefficient for this factor is .838.

FACTOR 3: NON VERBAL & VERBAL ABUSE

Table 5.20: Factor 3: Non verbal and verbal abuse

Items: verbal and non verbal abuse		Cronbach's Alpha
31	Faced with unfriendliness/hostility when approaching others	.834
30	Ignored when approaching others	
26	Non verbal abuse within and outside school	
25	Verbal abuse within and outside school	
29	Rumours and malicious gossip spread about you	
24	Intentional destructive criticism	

The third factor extracted was labelled verbal and nonverbal abuse and has a Cronbach's Alpha coefficient of .834. Six items loaded significantly on this factor. This has a factor loadings ranging from -.570 (item 31) which is *faced with unfriendliness /hostility when approaching other'* and *intentional destructive criticism* -.339 (item 24). Items in this factor all relate to verbal and non verbal abuse. In the research literature, non verbal and verbal abuse has been identified as a form of abuse in the workplace (Keashly, 2001:212).

FACTOR 4: EXCESSIVE PRESSURE AND WORKLOAD

Table 5.21: Factor 4: Excessive pressure and workload

Items: Excessive pressure and workload		Cronbach's Alpha
1	Excessive pressure to produce more work	.725
4	More tasks assigned to you as opposed to colleagues at the similar post level	
3	Exposed to unmanageable workload	
2	Given unreasonable deadlines	

The fourth factor extracted is *excessive pressure and workload* with a factor loading range of .623 to .784 and Cronbach's Alpha coefficient of .725. The items in this factor were concerned with incidents of pressurising and overworking. Hence it was labelled

as such. The variables in this factor have a very high loading considering that the lowest item loading is .623. This demonstrates that the variables are very closely correlated and measure the same thing. This factor is one of the negative experiences of psychological violence particularly where issues power imbalance between the victim and the perpetrator arise (cf.par.2.3.2).

FACTOR 5: EXCLUSION AND BARRING

The fourth factor that was extracted was labelled exclusion and barring.

Table 5.22: Factor 5: Exclusion and barring

Items: Exclusion and barring		Cronbach's Alpha
7	Excluded from staff occasions	.783
6	Ignored or excluded from conversations	
9	Your opinion intentionally ignored	
5	Necessary information/equipment/documents intentionally hidden	
10	Goals to be achieved at work changed without being informed	

The factor labelled exclusion and barring, with Cronbach's Alpha coefficient .783, and significant factor load varying from .624(item 7) to .439(item10) consists of variables that refer directly to being excluded and ignored and also being treated in a way that does not accommodate one in the workplace. For instance *excluded from staff social occasions* had the highest loading and all the other correlated variables refer directly to this factor. The negative experiences of exclusion and barring have been identified in the literature as constituting psychological violence (cf. par. 2.3.2).

FACTOR 6: HOSTILITY AND PUNISHMENT

Table 5.23: Factor 6: Hostility and punishment

Items: Hostility, punishment and Sabotage		Cronbach`s Alpha
61	Deliberate attempts to set you up for failure	.787
60	Deliberate non performance by others to impact negatively on your work	
46	Experiencing others teaming up against you	
54	Undesirable work assigned as punishment	
56	Abuse of the evaluation process through misinformation about your performance	

Six items loaded on this factor, they ranged from factor loading of .701 for the first highest variable, (item, 61), which is *deliberate attempts to set you up for failure* to .348 (item 56) namely, *abuse of the evaluation process through misinformation about your performance*. All the items in this factor are interrelated and they refer to acts that are interpreted as hostile, punishing and sabotaging (cf. par. 2.3.2). The factor has Cronbach`s Alpha coefficient .787.

FACTOR 7: YOUR WORK EXCESSIVELY MONITORED

Table 5.24: Factor 7: your work excessively monitored

Items:		Cronbach`s Alpha
17	Your work excessively monitored	Not calculated

Only one item loaded on this factor 7 with a factor loading of .683. Although two or more variables are supposed to load on a factor, in order to be authentic and valid (Warner, 2007) this was not discarded because in the research literature this is a salient act of psychological violence (cf. par. 2.3.2).

FACTOR 8: UNDERMINING AND UNFAIR CRITICISM

Table 5.25: Factor 8: Undermining and unfair criticism

Items: Undermining and unfair criticism		Cronbach's Alpha
40	Attempts to undermine your authority	.858
12	Continuously demoralized	
22	Not given due credit / acknowledgement for your work	
15	Persistent attempts to belittle or undermine your work	
16	Unjustifiably criticised	
45	Blamed unfairly when things go wrong	

Seven variables loaded highly on this particular factor and it has Cronbach's Alpha coefficient .858. The highest loading can be seen for the first variable, *attempts to undermine your authority* (Item 40) with a factor loading of (.645) and the lowest loading is observable for the last variable, (item 45) with a factor loading of .340. All the variables in this factor relate to acts of undermining and unfair treatment hence the factor was labelled *undermining and unfair criticism* (Quine, 2001:74).

FACTOR 9: PERSISTENTLY TEASED AND MADE FUN OF IN FRONT OF STUDENTS AND COLLEAGUES

Table 5.26: Factor 9: persistently teased and made fun of in front of students and Colleagues

Item: Persistently teased and made fun of in front of students and colleagues		Cronbach's Alpha
28		Not calculated

Similar to factor 7 only one variable loaded, item 28 *persistently teased and made fun of in front of students and colleagues* on this particular factor. The same argument applies, in terms of the salient factor loading and supported by literature, on the relevance of this particular act in what constitutes psychological violence (Thomas, 2005:279).

FACTOR 10: HUMILIATION

Table 5.27: Factor 10: Humiliation

Items: Humiliation		Cronbach's Alpha
62	Humiliated in front of the public	.743
34	Shouted at	
8	intentionally refused that which one is entitled to	
23	Your personal integrity undermined	

Four variables loaded significantly on this factor. It has factor loading between -.655 and -.310. The minus sign (-) does not imply that the loading is lower; it only identifies the direction in which variables correlate. The items in this factor all relate to actions of humiliation. For instance, *humiliated in front of the public* and *your personal integrity undermined* are acts of humiliation (cf.par.2.3.2). The calculated Cronbach's Alpha coefficient is .743.

FACTOR 11: IGNORED/ NEGATIVE REACTION

Table 5.28: Factor 11: Ignored/ negative reaction

Items: ignored/negative reaction		Cronbach's Alpha
48	Complaints fall on deaf ears	.858
52	Intentionally separated from others	
49	Complaints are met with retaliation or punishment	
51	Exposed to silent treatment	
57	Inputs in meetings discounted by remarks e.g. that's silly	
55	Work output disregarded despite evidence of hard work	
13	Your responsibilities removed without being told	
47	Having decisions that affect your work taken without prior consultation	

Eight variables loaded on this particular factor with Cronbach's alpha coefficient of .858. The highest loading can be observed for the first variable (item48), *complaints fall on deaf ears*. It has high loading of .609. The lowest is item 47, with a factor loading of .351

having decisions that affect your work taken without prior consultation. All the variables in this factor point to negative reaction and being ignored which are forms of psychological violence identified in the literature (cf. par. 2.3.2).

FACTOR 12: DESTABILIZATION

Table 5.29: Factor 12: Destabilization

Items: Destabilization		Cronbach`s Alpha
44	Coerced into doing something that you feel uncomfortable about	.868
59	Credit for work being stolen by others	
58	Singled out to perform unreasonable tasks	
27	Inappropriate jokes made about you	
63	Exposed to stress inducing behaviours from others at work	
32	Insulted by offensive remarks	
42	Exposed to dominating behaviour from others at work	
35	Insulting remarks on your work and background	

Eight variables loaded on this factor with factor loading range of .306 to .565. The variables in this factor are interrelated and they refer to acts of destabilization, for instance *coerced into doing something that you feel uncomfortable about*, (Item 44) is a destabilizing act as is the case in all the items in this factor (Quine, 2001:74). The calculated Cronbach`s Alpha coefficient is .868

5.2.2.5 Presentation, analysis and discussion of the findings from factor analysis of items on severity and presentation of their reliability coefficient

Explanatory factor analysis was done on severity and 12 factors explaining 68.9% of variance were extracted. The KMO measure of sampling adequacy was .86 and Bartlett`s test of sphericity also indicated that a correlation between items is large enough for factors to form.

5.2.2.5.1 Communalities for extraction of factors on severity of psychological violence

Communalities for the items ranged between .57 and .77 and the factors extracted were similar to those extracted for prevalence. The details of the factors and their calculated Cronbach's Alpha are presented in Table 5.30 (cf. annexure C for the detailed pattern matrix on severity).

RELIABILITY OF FACTORS ON SEVERITY

Table 5.30: Reliability of factors on severity of psychological violence

Factors		Cronbach's Alpha
1	Destabilization	.866
2	Humiliation and threats	.885
3	Hostility and verbal abuse	.825
4	Attacks on professional status	.907
5.	Ignored and dehumanized	.886
6	Excessive pressure and workload	.778
7	Intentional sabotage	.698
8	Shouted at	–
9	Exclusion and barring	.851
10	Non verbal abuse	.587
11	Discrediting	.848
12	Undermining	.796

5.2.2.6 Factor analysis: Health impact

PREVALENCE ON FACTOR: HEALTH IMPACT

Only one factor was extracted from the items in this section. It explained 71.8% of variance. It consists of interrelated items that seem to relate to impact on health in the holistic sense. Therefore the factor was named health impact accordingly. The items have a correlation value between .781 (Item 65) and .603 (item 64).

Table 5.31: Prevalence on factor: Health impact

Factor	Cronbach's Alpha	Items		Item correlation
Health impact		64	I avoid the workplace due to negative circumstances there	.776
		65	I do not feel like going to work due to negative circumstances there	.850
		66	I am occupied with/rethinking the detail of negative events at work	.845
		67	I experience reduced motivation due to negative circumstances at work	.868
		68	I experience job dissatisfaction caused by negative circumstances at work	.884
		69	I experience an increase in physical ailments due to circumstances at work	.814
		70	I have feelings of resentment and bitterness due to negative experiences at work	.891

SEVERITY ON HEALTH IMPACT

A similar procedure was followed for severity. It explained 74.8% of the variance. It has a calculated Cronbach's Alpha .944. The same factor (health impact) similar to prevalence was extracted for this section.

5.2.2.6.1 Descriptive statistics from factor analysis

The descriptive statistics in this section is discussed in relation to both prevalence and severity

- **Prevalence level of psychological violence from factor analysis**

The interpretation of the findings was done at two levels which enabled the discussion of high and low means. A mean of 1.0 (seldom on the Likert scale) and above was interpreted as occurring to some extent and a mean of less than 1.0 was interpreted as of very low occurrence.

The same procedure for interpretation was followed for factor analysis on section B and also Section C of the psychological violence scale.

- **The most prevalent factors of psychological violence**

The results are presented in the rank order of the mean calculated for each factor

Table 5.32: The most prevalent factors of psychological violence

	Factor	Rank order	Mean	SD
4	Excessive pressure and workload	1	1.13	.78
7	Work excessively monitored	2	1.10	1.0
8	Undermining and unfair criticism	3	1.02	.79

The three factors which recorded the highest prevalence are presented in Table 5.32. The mean range of these responses is 1.02 to 1.13 (occurring on average between seldom and often on the Likert scale).

The factor which had the highest mean is *excessive pressure and workload* (Factor 4) with a mean of 1.13 (occurring on average between seldom and often). The second highest factor on prevalence is *work excessively monitored* (factor 2) with a mean of 1.10 (occurring on average between seldom and often) and the third highest prevalence factor is *undermining and unfair criticism* (factor 8) with a mean of 1.02 (occurring on average, seldom).

- **The least prevalence factors of psychological violence**

The results are presented in the rank order of the mean scores calculated for each item.

Table 5.33: The least prevalent psychological violence factors

	Factors	Rank order	Mean	SD
2	Attacks on personal status	1	.31	.51
9	Persistently teased & made fun of in front of students or colleagues	2	.39	.72
6	Hostility, punishment & sabotage	3	.52	.66
1	Attacks on professional status	4	.58	.52
10	Humiliation	5	.52	.61
12	Destabilization	6	.68	.64
3	Non verbal and verbal abuse	7	.74	.69
5	Exclusion & barring	8	.75	.71
11	Ignored/negative reaction	9	.76	.73

Nine factors recorded low on prevalence with a mean range of .31 to .76 (on average between never and seldom). The lowest mean was calculated for *attacks on personal status* (factor 2) with a mean of .31 (on average almost never). The second lowest mean was recorded for *persistently teased and made fun of in front of students and colleagues* (factor 9) with a mean of .39 (on average between seldom and never). The next factor that recorded low on prevalence is *hostility, punishment and sabotage* (factor 6) with a mean of .52 (on average between never and seldom). *Attacks on professional status* (factor 1) recorded a mean of .58 (on average between never and seldom) while *humiliation* recorded a low mean of .61 (on average between never and seldom). *Destabilisation* (factor 12) has a calculated low mean of .68 (on average between never and seldom). *Non verbal and verbal abuse* (factor 3) with a mean of .74 (on average approximately seldom) tends to be higher on prevalence. *Exclusion and barring* (factor 5) with a mean of .75 (on average approximately seldom) and *.76 ignored/negative reaction* (factor 11) (on average approximating seldom) were also found to become higher on the basis of recorded means.

- **Severity level of psychological violence from factor analysis**

The severity of psychological violence experiences was measured on a five point scale and a similar procedure for interpretation was followed similar to prevalence. The results from factor analysis are presented in the rank order of means calculated for each factor.

- **The most severe psychological violence factors**

The mean range of factors with the highest severity is 1.0 to 1.36 (occurring on average between not severe and slightly severe). The results are presented in the rank order of the mean calculated for each factor.

Table 5.34: The most severe psychological violence factors

Factors		Rank order	Mean	SD
6	Excessive pressure and workload	1	1.36	.91
11	Discrediting	2	1.34	1.02
4	Attacks on professional status	3	1.05	1.03
9	Exclusion and barring	4	1.02	.94
3	Hostility and verbal abuse	5	1.00	.90

Table 5.34 presents the most severe psychological violence factors. The factor with the highest mean is *excessive pressure and workload* (factor 6) with a mean of 1.36 (occurring on average between not severe and slightly severe). The next factor is *discrediting* (factor 11) with a mean of 1.34 (occurring on average between not severe and slightly severe). Other factors which recorded higher means are *attacks on professionalism* (factor 4) with a mean of 1.05 (occurring on average not severe) and *exclusion and barring* (factor 9) with a mean of 1.02 (occurring on average never). The last factor recorded in this category is *hostility and verbal abuse* (factor 3) with a mean of 1.00 (also occurring on average never).

- **The least severe psychological violence factors**

Table 5.35: The least severe psychological violence factors

	Factors	Rank order	Mean	SD
2	Humiliation and threats	1	.59	.83
10	Non verbal abuse	2	.62	.90
7	Intentional sabotage	3	.76	1.06
8	Shouted at	4	.85	1.13
12	Undermining	5	.88	.96
5	Ignored and dehumanized	6	.94	.96
1	Destabilisation	7	.91	.98

Table 5.35 depicts the lowest means recorded for the factors on severity of psychological violence. The range of the recorded means is .59 to .91 (all of them occurring on average not severe). Seven factors recorded the lowest means on severity. The first factor is *humiliation and threat* (factor 2) with a mean of .59. The second one is *non verbal abuse* (factor 10) with a mean of .62. The third factor with a low mean of .76 is *intentional sabotage* with a low mean of .76. Other factors recorded in this category are *shouted at* (factor 8) with a mean of .85 and *undermining* (factor 5) with a mean of .88. *Ignored and dehumanised* (factor 6) and *destabilisation* (factor 1) with a mean of .94 and .91 respectively also recorded low severity.

5.2.2.6.3 Prevalence and severity of the factor: Health impact

Table 5.36: Prevalence of factor; health impact

Factor	Mean	SD
Health impact	.92	.88

The *health impact* factor recorded a mean of .92 (occurring on average as not severe).

Table 5.37: Severity of factor: health impact

Factor	Mean	SD
Health impact	1.29	1.14

The *health impact* factor recorded a mean of 1.29 (occurring on average between not severe and slightly severe).

5.2.2.7 Conclusions from factor analysis

The following conclusions were drawn from the findings in this section.

- **The most prevalent factors of psychological violence:**
 - Excessive pressure and workload
 - Work excessively monitored
 - Undermining and unfair criticism

- **The least prevalent psychological violence factors:**
 - Attacks on personal status
 - Persistently teased and made fun of in front of students or colleagues
 - Hostility, punishment and sabotage
 - Attacks on professional status
 - Humiliation
 - Destabilization
 - Non verbal and verbal abuse
 - Exclusion and barring
 - Ignored/negative reaction

- **The most severe psychological violence factors**
 - Excessive pressure and workload
 - Discrediting
 - Attacks on professional status
 - Exclusion and barring
 - Hostility and verbal abuse

- **The least severe psychological violence factors**

- Humiliation and threats
- Non verbal abuse
- Intentional sabotage
- Shouted at
- Undermining
- Ignored and dehumanised
- Destabilisation

The next section discusses the significant practical differences on the extracted factors with the groups of, gender, age and experience.

5.2.3 Practical significance differences (effect sizes) in factors with regard to gender, experience and age.

After the analysis was completed, the effect size of the results in terms of the biographic information was determined. It specifically calculated the effect sizes in relation to gender, experience and age. The effect sizes were calculated in relation to prevalence and severity of the respondents' experiences of psychological violence. The aim was to find out if there was, in practice a difference in prevalence and severity of the factors for different biographical groups.

The practical significance (effect size) is calculated between the means of different groups in the study population. The following formula and guidelines by Cohen (*in* Ellis and Steyn, 2003:3) was used to calculate effect sizes (cf. par. 4.3.4.6). The formula is as follows:

$$d = \frac{|\bar{x}_1 - \bar{x}_2|}{s_{\max}}, \text{ where } |\bar{x}_1 - \bar{x}_2| \text{ is the difference between } \bar{x}_1 \text{ and } \bar{x}_2 \text{ without taking the sign}$$

into consideration and s_{\max} = maximum of s_1 and s_2 , the sample SD's.

The guidelines for interpretation are as follows:

(a) Small effect: $d=0.2$ (b) medium effect: $d=0.5$ that is visible to a researcher (c) large effect: $d=0.8$ that can be considered to be important in practice. In this research, effect

sizes of 0.75 and larger will be discussed because of their significance and relevance to this study. The same procedure was followed for effect sizes on gender, experience and age. The medium effect sizes are identified with two asterisks (**) and the large effect sizes which have important significance in practice are identified with three asterisks (***) and this procedure was followed in all the categories.

Tables have been used to present data on the calculated means, and standard deviation as well as the calculated effect sizes for different groups. The focus is on the high effect sizes that would have important significance in practice. For practical purposes, tables of means and standard deviations are presented alongside the effect sizes tables. This is the case in all categories with exception of gender because there are only two groups which made it easier to present the full picture with means, standard deviations and effect sizes in the same table.

5.2.3.1 Practical significance (effect sizes) on gender in relation to prevalence for different groups

Gender was grouped in terms of males (N=96) and females (N=190) to determine if effect size of gender was large enough in relation to prevalence and severity of psychological violence on the basis of the factors extracted during the first factor analysis.

Table 5.38: Effect sizes on gender in relation to prevalence for different groups

	Factors	Males N=96		Females N=190		Effect size
		Mean	SD	Mean	SD	
1	Attacks on professional status	0.62	0.65	0.56	0.68	.09
2	Attacks on personal standing	0.39	0.60	0.24	0.42	.25
3	Non verbal & verbal abuse	0.74	0.67	0.72	0.68	.02
4	Excessive pressure & workload	1.05	0.75	1.17	0.81	.15
5	Exclusion & barring	0.77	0.73	0.73	0.69	.05
6	Hostility, punishment & sabotage	0.59	0.68	0.46	0.63	.20
7	Work excessively monitored	1.19	0.99	1.04	1.06	.14
8	Undermining & unfair criticism	1.03	0.73	1.00	0.82	.03
9	Persistently teased & made fun of in front of students or colleagues	0.43	0.74	0.37	0.72	.08
10	Humiliation	0.59	0.64	0.49	0.58	.16
11	Ignored/negative reaction	0.78	0.76	0.73	0.71	.07
12	Destabilization	0.75	0.65	0.63	0.63	.17

* 0.2 = Small effect **>0.45-<0.8 medium effect *** ≥0.8 large effect

The observation in Table 5.38 indicates that the effect sizes on gender in relation to prevalence are all below 0.5 which means that there is no significant difference on experience of psychological violence in terms of gender in the study population.

5.2.3.2 Practical significance (effect sizes) on gender in relation to severity for different groups

Table 5.39: Means and Standard Deviations for gender in relation to severity

Factors		Males		Females		Effect size
		Mean	SD	Mean	SD	
1	Destabilisation	0.96	0.96	0.87	0.97	.09
2	Humiliation and threats	0.69	0.87	0.51	0.77	.21
3	Hostility and verbal abuse	1.00	0.90	0.97	0.90	.03
4	Attacks on professional status	1.02	0.97	1.05	1.03	.02
5	Ignored and dehumanised	1.06	1.02	0.88	0.94	.18
6	Excessive pressure and workload	1.32	0.88	1.37	0.95	.05
7	Intentional sabotage	0.87	1.12	0.68	1.01	.17
8	Shouted at	0.86	1.09	0.78	1.09	.08
9	Exclusion and barring	1.01	0.91	1.02	0.97	.01
10	Non verbal abuse	0.62	0.83	0.60	0.94	.02
11	Discrediting	1.31	0.95	1.34	1.05	.04
12	Undermining	0.90	0.89	0.87	1.01	.02

* 0.2 = Small effect **>0.45 -<0.8 medium effect *** ≥0.8 large effect

Table 5.39 depicts the effect sizes on gender in relation to severity. The effect sizes here are all below 0.5 which means that there is no significant difference on experience of psychological violence in terms of gender in the study population.

5.2.3.3 Practical significance (effect sizes) on health impact in relation to gender of various groups

Table 5.40: Effect sizes on health impact in relation to gender of various groups

Factor	Males N=96		Females N=190		Effect size
Health impact	Mean	SD	Mean	SD	.01
	.92	.88	.91	.88	

* 0.2 = Small effect **>0.45 -<0.8 medium effect *** ≥0.8 large effect

The effect sizes for both prevalence on *health impact* were less than 0.5 therefore there was no significant effect related to gender in terms of prevalence

5.2.3.4 Practical significance (effect sizes) for severity in relation to gender of different groups

Table 5.41: Means and Standard Deviations for severity in relation to gender of various groups

Factor	Males N=90		Females N=177		Effect size
Health impact	Mean	SD	Mean	SD	.04
	1.27	1.11	1.32	1.18	

*0.2 = Small effect **>0.45 -<0.8 medium effect *** ≥0.8 large effect

The effect sizes for severity on *health impact* were less than 0.5 therefore, there was no significant effect related to gender in terms of severity of the experience health impact in the study population.

5.2.3.5 Practical significance (effect sizes) on prevalence in relation to experience of different groups

Table 5.42: Means and standard deviation for experience in relation to prevalence

	Factors	Experience in years	No of respondents	Mean	SD
1	Attacks on professional status	1Yr	50	0.45	0.61
		2 -5 yrs	58	0.49	0.56
		6-10 yrs	62	0.61	0.73
		11-15 yrs	52	0.74	0.70
		16-20+ yrs	68	0.65	0.73
2	Attacks on personal standing	1Yr	50	0.45	0.61
		2-5 yrs	58	0.28	0.44
		6-10 yrs	62	0.32	0.58
		11-15 yrs	52	0.39	0.59
		16-20+ yrs	68	0.37	0.57
3	Non verbal & verbal abuse	1Yr	50	0.56	0.57
		2-5 yrs	58	0.59	0.56
		6-10 yrs	62	0.74	0.70
		11-15 yrs	51	0.90	0.75
		16-20+ yrs	68	0.92	0.76
4	Excessive pressure & workload	1Yr	50	0.70	0.69
		2-5 yrs	58	0.59	0.56
		6-10 yrs	62	0.74	0.70
		11-15 yrs	51	0.90	0.75
		16-20+ yrs	68	0.92	0.76
5	Exclusion & barring	1Yr	50	0.56	0.59
		2-5 yrs	58	0.54	0.59
		6-10 yrs	62	0.79	0.59
		11-15 yrs	52	0.99	0.84
		16-20+ yrs	66	0.92	0.78

6	Hostility, punishment & sabotage	1Yr	50	0.30	0.52
		2-5 yrs	58	0.39	0.54
		6-10 yrs	62	0.50	0.63
		11-15 yrs	52	0.63	0.74
		16-20+ yrs	68	0.71	0.76
7	Work excessively monitored	1Yr	44	1.15	1.11
		2-5 yrs	54	1.05	0.99
		6-10 yrs	57	1.08	0.91
		11-15 yrs	47	0.97	1.07
		16-20+ yrs	60	1.18	1.08
8	Undermining & unfair criticism	1Yr	50	0.71	0.68
		2-5 yrs	58	0.89	0.77
		6-10 yrs	62	1.08	0.73
		11-15 yrs	52	1.24	0.87
		16-20+ yrs	68	1.1	0.80
9	Persistently teased & made fun of in front of students or colleagues	1Yr	50	0.32	0.41
		2-5 yrs	58	0.42	0.56
		6-10 yrs	62	0.57	0.62
		11-15 yrs	52	0.61	0.63
		16-20+ yrs	68	0.66	0.67
10	Humiliation	1Yr	50	0.32	0.41
		2-5 yrs	58	0.42	0.56
		6-10 yrs	62	0.57	0.62
		11-15 yrs	52	0.61	0.63
		16-20+ yrs	68	0.66	0.67
11	Ignored/negative reaction	1Yr	50	0.45	0.64
		2-5 yrs	58	0.58	0.64
		6-10 yrs	62	0.84	0.68
		11-15 yrs	52	0.95	0.74
		16-20+ yrs	68	0.93	0.82
12	Destabilization	1Yr	50	0.53	0.54
		2-5 yrs	58	0.62	0.66
		6-10 yrs	62	0.73	0.66
		11-15 yrs	52	0.80	0.65
		16-20+ yrs	68	0.68	0.64

Table 5.42 depicts the means and standard deviation for experience related to Prevalence.

Table 5.43: Effect sizes on prevalence in relation to experience of different groups.

Factors		Experience in years									
		1yr with 2-5 yrs	1yrs with 6-10 yrs	1 yr with 11-15 yrs	1yr with 16 – 20+ yrs	2-5 yrs with 6- 10 yrs	2-5 yrs with 11-15 yrs	2-5 yrs with 16 – 20+ yrs	6-10 yrs with 11-15 yrs	6-10 yrs with 20+ yrs	11-15 yrs with 16-20+ yrs
		Effect sizes (<i>d</i>)									
1	Attacks on professional status	.06	.21	.40	.26	.17	.35	.21	.17	.05	.13
2	Attacks on personal standing	.24	.25	.37	.34	.07	.19	.15	.12	.08	.04
3	Non verbal & verbal abuse	.06	.26	.46**	.47**	.21	.42	.43	.22	.23	.02
4	Excessive pressure & workload	.45**	.61**	.81***	.74***	.12	.42	.36	.31	.26	.04
5	Exclusion & barring	.04	.39	.51**	.47**	.42	.53**	.49**	.24	.17	.08
6	Hostility, punishment & sabotage	.15	.30	.43	.53**	.17	.32	.42	.17	.27	.11
7	Work excessively monitored	.09	.06	.16	.02	.03	.07	.12	.10	.09	.19
8	Undermining & unfair criticism	.24	.51**	.61**	.55**	.25	.40	.32	.19	.08	.11
9	Persistently teased & made fun of in front of students & colleagues	.04	.07	.10	.08	.09	.06	.09	.17	.00	.17
10	Humiliation	.18	.40	.46**	.50**	.24	.30	.35	.06	.14	.08

11	Ignored/negative reaction	.21	.57**	.68**	.59**	.38	.50**	.43	.15	.12	.02
12	Destabilization	.14	.30	.40	.23	.17	.26	.08	.09	.08	0.18

* ≤ 0.2 = Small effect ** > 0.45 - < 0.8 medium effect *** ≥ 0.8 large effect

Table 5.43 presents the findings from the calculation of the effect sizes on the prevalence in relation to experience of the respondents.

There was no practical significance in relation to experience for factors *attacks on professional status* (factor 1), *attacks on personal standing* (factor 2), *work excessively monitored* (factor 7), *persistently teased and made fun of in front of students and colleagues* (factor 9) and *destabilisation* (factor 12). The effect sizes for these factors were all below 0.5. The effect sizes which have practical significance in practice are discussed accordingly because of their relevance to this study. The important differences on experience in relation to prevalence of psychological violence for the respondents range between 0.46 and 0.81.

The results for the practical significance on the experience of the teachers show that teachers with less than two years experience have a lower prevalence of psychological violence than teachers in some of the categories with more work experience. They record lower means than the other groups of longer experience. This is the case for all factors where there are important differences. It can be assumed that groups with more than two years work experience group is in the middle of their career development. Therefore they experience more psychological violence because of added responsibility and expectations. Those with less than two years of experience are in the beginning point of their career progression and therefore this could be a learning point for them and others would not put undue pressure and on them probably because the expectations in terms of their contribution in the workplace are low.

The largest practical difference of 0.81 was calculated between a one year experience group and 11 -15 years experience group for *excessive pressure and workload* (factor 4) with effect size 0.81. The prevalence was higher for 11- 15 years group than for one year group. The second largest practical significance of 0.74 was calculated between one year experience group and 16-20+ years experience the same factor *excessive*

pressure and workload. Similarly, the prevalence was also higher for the 16-20 year group than the one year group. There is also a medium significance between one year experience group and 11-15 years group and also between one year group and 16-20+ years group for factor and in both cases the 11-15 years group and 16-20 years respectively had higher prevalence than the one year group. This is also the case for *exclusion and barring* (factor 5). A similar pattern is also observed for *humiliation* (factor 10) and *ignored/negative reaction* (factor 11) where the groups with more than 1 year and more than 2-5 years experience have lower prevalence in comparison to groups with more than six years experience.

Another interesting pattern is depicted for the medium significant difference between 2-5 years group and 11-15 years group for *exclusion and barring* (factor 5) where the 2-5 years group has a lower prevalence than 11-15 years group. There is also a medium significant difference between 2-5 years group and 16-20+ years group for the same factor with prevalence higher for 16-20+ years. Another medium significant difference is between one year group and 16-20+ years group for *hostility punishment and sabotage* (factor 6) with higher prevalence for 16-20+ years group. The one year group and 2-5 years group record lower means than the other groups of longer experience. On the basis of these findings the same reason could also be advanced here, on the fact that with more experience the exposure to and experience of psychological violence rises.

5.2.3.6 Practical significance (effect sizes) on severity related to experience in years of different groups

Table 5.44: Means and standard deviations on severity in relation to experience in years

Factors		Experience in years	N	Mean	SD
1	Destabilization	1Yr	49	0.55	0.66
		2 -5 yrs	57	0.78	0.95
		6-10 yrs	59	0.99	1.08
		11-15 yrs	48	1.26	1.05
		16-20+ yrs	65	0.95	0.96

2	Humiliation & threats	1Yr	46	0.32	0.56
		2-5 yrs	54	0.46	0.67
		6-10 yrs	59	0.64	0.98
		11-15 yrs	46	0.78	0.87
		16-20+ yrs	63	0.71	0.90
3	Hostility & verbal abuse	1Yr	49	0.73	0.73
		2-5 yrs	56	0.78	0.84
		6-10 yrs	58	1.01	0.98
		11-15 yrs	49	1.30	0.94
		16-20+ yrs	62	1.19	0.88
4	Attacks on professional status	1Yr	50	0.76	0.94
		2-5 yrs	56	0.80	0.83
		6-10 yrs	61	1.07	1.13
		11-15 yrs	49	1.39	1.02
		16-20+ yrs	65	1.26	1.07
5	Ignored & dehumanized	1Yr	46	0.55	0.76
		2-5 yrs	56	0.68	0.91
		6-10 yrs	58	1.01	0.97
		11-15 yrs	51	1.33	0.97
		16-20+ yrs	63	1.09	0.99
6	Excessive pressure & workload	1Yr	48	1.04	0.77
		2-5 yrs	58	1.25	0.90
		6-10 yrs	61	1.42	0.80
		11-15 yrs	51	1.58	0.94
		16-20+ yrs	66	1.44	1.04
7	Intentional sabotage	1Yr	45	0.31	0.63
		2-5 yrs	51	0.51	0.87
		6-10 yrs	55	0.83	1.00
		11-15 yrs	39	1.08	1.21
		16-20+ yrs	61	1.01	1.22

8	Shouted at	1Yr	46	0.5	0.88
		2-5 yrs	48	0.60	0.98
		6-10 yrs	56	1.01	1.21
		11-15 yrs	42	1.11	1.27
		16-20+ yrs	54	1.00	1.18
9	Exclusion & barring	1Yr	48	0.66	0.72
		2-5 yrs	56	0.77	0.86
		6-10 yrs	62	1.10	0.94
		11-15 yrs	51	1.40	1.03
		16-20+ yrs	65	1.14	0.98
10	Non verbal abuse	1Yr	49	0.63	0.98
		2-5 yrs	54	0.30	0.60
		6-10 yrs	53	0.66	0.81
		11-15 yrs	43	0.76	1.09
		16-20+ yrs	57	0.78	0.98
11	Discrediting	1Yr	49	0.80	0.87
		2-5 yrs	57	1.17	0.96
		6-10 yrs	62	1.41	0.97
		11-15 yrs	51	1.59	0.99
		16-20+ yrs	63	1.66	1.06
12	Undermining	1Yr	49	0.80	0.97
		2-5 yrs	56	0.75	0.98
		6-10 yrs	60	0.78	0.81
		11-15 yrs	47	1.18	1.12
		16-20+ yrs	63	0.89	0.94

Table 5.44 depicts the Means and standard deviations on severity in relation to experience in years for different groups.

Table 5.45: Effect sizes on severity in relation to experience for different groups

Factors		Experience in years									
		1yr with 2-5 yrs	1yrs with 6-10 yrs	1 yr with 11-15 yrs	1year with 16 – 20+ yrs	2-5 yrs with 6- 10 years	2-5 yrs with 11-15 yrs	2-5 yrs with 16 – 20+ yrs	6-10 yrs with 11-15 yrs	6-10 yrs with 20+ yrs	11-15 yrs with 16-20+ yrs
Effect sizes(<i>d</i>)											
1	Destabilization	.24	.41	.68**	.42	.20	.46**	.18	.25	.04	.30
2	Humiliation & threats	.21	.32	.53**	.43	.17	.36	.28	.15	.08	.08
3	Hostility & verbal abuse	.06	.28	.60**	.51**	.22	.54**	.45**	.29	.18	.06
4	Attacks on professional status	.04	.27	.61**	.46**	.24	.57**	.42	.28	.16	.12
5	Ignored & dehumanized	.14	.47*	.80***	.55**	.34	.66***	.42	.33	.09	.23
6	Excessive pressure & workload	.24	.47**	.57**	.38	.18	.34	.18	.17	.02	.13
7	Intentional sabotage	.24	.53**	.64***	.57**	.32	.47**	.40	.21	.15	.06
8	Shouted at	.11	.43	.49**	.42	.34	.40	.33	.08	.01	.09
9	Exclusion & barring	.12	.46**	.71***	.48**	.35	.61**	.37	.29	.04	.25
10	Non verbal abuse	0.33	.03	.12	.15	.44	.42	.48**	.10	.12	.01
11	Discrediting	.38	.63**	.79***	.81**	.25	.42	.46**	.18	.24	.07
12	Undermining	.05	.03	.34	.09	.03	.38	.14	.36	.12	.26

≤ 0.2 = Small effect >0.45-<0.8medium effect *** ≥0.8 large effect

Table 5.45 depicts the medium significance differences between one year experience and other groups as well as the differences between 2-5 years group with other groups. These ranged between .46 and .81. Large effect sizes that have practical significance in

practice were calculated for several factors. The same pattern as that for prevalence emerged whereby a significant difference was observed for the one year experience group and 11-15 year group and 16-20+ years. Thus for the one year group and 2-5 year group, the severity of experienced acts of psychological violence was lower than for the other groups with longer than five years experience. The means for the one year group and 2-5 years group are lower than those for longer experience groups where significant differences are recorded. This is the pattern for all the factors where significant differences are recorded. The effect sizes that have practical significance in practice are discussed accordingly.

It emerges from the results that the severity is higher for those teachers who have been in the service for longer than one year while it is lower for those teachers with only one year experience. This is the case for all categories and similar findings have been found on the prevalence. These findings could be attributable to the fact that teachers who have served for a long time have faced a lot of challenges and various situations may have presented themselves where they felt severely discredited, ignored, dehumanized, excluded and barred. The level of severity of experiences rises with the length of experience as observed in these findings

The largest significant difference 0.81 was calculated between one year experience group and 16 to 20+ years group for factor 11 with severity higher for the 16-20+ age group. In the same factor another significant difference of 0.79 was calculated for a one year group again with 16-20+ years group, with severity higher for the 16-20+ group.

Other large practical difference 0.80 was calculated for *ignored and dehumanised* (factor 5) between the group with one year experience and 11-15 years group with 11-15 year group experiencing more severity than the one year group. Another significant difference was calculated between the same groups for *exclusion and barring* (factor 9) with an effect size of 0.71 and again the severity was higher for the 11-15 years group than the one year group.

Medium practical significant differences were calculated between one year group and 6-10 years group for *exclusion and barring*, (factors 9) and *discrediting* (factor 11) and the same pattern emerged with the 6-10 year group experiencing higher severity than the one year group.

A somewhat similar picture emerges where there is medium significant differences between one year group and 11-15 years group for several factors, 'destabilisation (factor 1), humiliation and threats , (factor 2), attacks on professional status (factor 4), excessive pressure and workload (factor 6), intentional sabotage (factor 7) and shouted at (factor 8). In this instance the same pattern is observed where the 11-15 years group experienced more severity than the one year group.

There is also an interesting trend here with medium significant differences calculated between 2-5 years group with other groups. This was observed for factors, hostility and verbal abuse (factor 3), attacks on professional status (factor 4), ignored and dehumanised (factor 5), excessive pressure and workload (factor 6) and intentional sabotage (factor 7). Another one was calculated between 2-5 years group and 16-20 years for factor 10. In these factors the severity was still higher for 16-20 year group.

5.2.3.7 Practical significance (effect sizes) on prevalence for the factor, health impact in relation to experience in years for different groups

Table 5.46: Means and standard deviations on health impact in for prevalence in relation to experience for different groups

Factor	Experience in years	N	Mean	SD
Health impact	1Yr	50	0.57	0.72
	2-5 yrs	58	0.92	0.89
	6-10 yrs	62	1.00	0.85
	11-15 yrs	52	1.25	1.04
	16-20+ yrs	68	0.81	0.76

Table 5.46 depicts means and standard deviations on health impact in for prevalence in relation to experience for different groups

Table 5.47: Effect sizes for health impact on prevalence related to experience

Factor	Experience in years									
	1yr with 2-5 yrs	1yr with 6-10 yrs	1 yr with 11-15 yrs	1yr with 16 – 20+ yrs	2-5 yrs with 6- 10 years	2-5 yrs with 11-15 yrs	2-5 yrs with 16 – 20+ yrs	6-10 yrs with 11-15 yrs	6-10 yrs with 20+ yrs	11-15 yrs with 16- 20+ yrs
Health impact	Effect sizes(<i>d</i>)									
	.39	.51**	.65**	.32	.09	.31	.11	.23	.22	.41

* ≤ 0.2 = Small effect ** >0.45 - <0.8 medium effect *** ≥ 0.8 large effect

Table 5.47 shows that there are medium effect practical differences between one year experience group and 6-10 years group and also between one year group and 11-15 years group ranging from 0.51 to 0.65. This means that even on the health impact factor the prevalence is low for the one year group in comparison to other groups. Even though the difference recorded is not high, the difference is still relevant in terms of differentiating between the two groups. The same argument arises here on the relationship between the prevalence of psychological violence and the length of experience on the job. Thus, it seems that the longer one has been in the job the higher the health impact of the experienced psychological violence. This could be explained by the fact that with longer work experience and more exposure to psychological violence, there is more likelihood of higher prevalence of health impact resulting from their experiences.

Only the medium significant differences were calculated therefore the medium significant differences are discussed accordingly. Only two medium significant differences were calculated for one year experience group and 11 to 15 years group with higher prevalence for the 11-15 years group than the one year group. Another medium significant difference was calculated for one year experience group with 6- 10 years group with higher prevalence for 6 -10 years group.

5.2.3.8 Practical significance (effect sizes) for the factor, health impact on severity related to experience in years for different groups

Table 5.48: Health impact related to severity related to experience

Factor	Experience in years	N	Mean	SD
Health impact	1Yr	47	0.82	0.95
	2-5 yrs	55	1.35	1.25
	6-10 yrs	57	1.36	1.09
	11-15 yrs	51	1.64	1.17
	16-20+ yrs	61	1.18	1.05

Table 5.48 depicts the means and standard deviations for severity in relation to experience in years for different groups.

5.2.3.9 Practical significance (effect sizes) for the factor health impact on severity related to experience in years for different groups

Table 5.49: Effect sizes on severity of health impact in relation to gender

Factor	Experience in years									
	1yr with 2-5 yrs	1yr with 6-10 yrs	1 yr with 11-15 yrs	1yr with 16 – 20+ yrs	2-5 yrs with 6- 10 year s	2-5 yrs with 11- 15 yrs	2-5 yrs with 16 – 20+ yrs	6-10 yrs with 1-15 yrs	6-10 yrs with 20+ yrs	11-15 yrs with 16- 20+ yrs
Health impact	Effect sizes (<i>d</i>)									
	.42	.49**	.69**	.33	.01	.23	.14	.24	.16	.39

≤ 0.2 = Small effect * >0.45 - <0.8 medium effect ** ≥0.8 large effect

Table 5.49 shows that there is a medium practical difference between one year experience group and 6-10 years group and also between one year group and 11-15 years group. The same difference was recorded for this factor as it was for prevalence. The medium effect difference has been calculated between one year experience group and 11–15 years experience group with 11-15 year group experiencing a higher severity in this factor than the one year group. The same picture emerged between one year

group and 6-10 year with 6-10 years group experiencing a higher severity. Even in this category the one year group still recorded lower means in comparison to other groups where there are significant differences. This could be explained by the fact that teachers who have one year work experience have not experienced psychological violence to the level of other long serving teachers and therefore the *health impact* for them would presumably be low accordingly.

5.2.3.10 Practical significance (effect sizes) related to age of different groups

Table 5.50: Means and standard deviations on severity in relation to age of different groups

Factors		Age cohort	N	Mean	SD
1	Destabilisation	20-29 yrs	91	0.44	0.58
		30-39yrs	109	0.65	0.66
		40-49yrs	58	0.66	0.79
		50-60+yrs	36	0.61	0.73
2	Humiliation and threats	20-29 yrs	91	0.22	0.37
		30-39yrs	109	0.28	0.50
		40-49yrs	58	0.43	0.67
		50-60+yrs	36	0.40	0.57
3	Hostility and verbal abuse	20-29 yrs	91	0.53	0.56
		30-39yrs	109	0.75	0.63
		40-49yrs	57	0.88	0.80
		50-60+yrs	36	1.01	0.84
4	Attacks on professional status	20-29 yrs	91	0.90	0.72
		30-39yrs	109	1.25	0.73
		40-49yrs	57	1.16	0.82
		50-60+yrs	36	1.32	0.92
5	Ignored and dehumanised	20-29 yrs	91	0.55	0.61
		30-39yrs	109	0.79	0.68
		40-49yrs	57	0.89	0.79
		50-60+yrs	35	0.93	0.78

6	Excessive pressure and workload	20-29 yrs	91	0.32	0.54
		30-39yrs	109	0.52	0.63
		40-49yrs	58	0.70	0.80
		50-60+yrs	36	0.67	0.72
7	Intentional sabotage	20-29 yrs	82	1.19	1.10
		30-39yrs	100	1.07	0.95
		40-49yrs	51	1	1
		50-60+yrs	32	1.12	1.17
8	Shouted at	20-29 yrs	91	0.78	0.72
		30-39yrs	109	1.12	0.78
		40-49yrs	58	1.13	0.86
		50-60+yrs	36	1.15	0.79
9	Exclusion and barring	20-29 yrs	91	0.39	0.71
		30-39yrs	107	0.40	0.77
		40-49yrs	55	0.38	0.68
		50-60+yrs	35	0.4	0.73
10	Non verbal abuse	20-29 yrs	91	0.33	0.48
		30-39yrs	109	0.57	0.61
		40-49yrs	58	0.66	0.70
		50-60+yrs	36	0.63	0.63
11	Discrediting	20-29 yrs	91	0.49	0.64
		30-39yrs	109	0.85	0.67
		40-49yrs	58	0.87	0.80
		50-60+yrs	36	0.95	0.84
12	Undermining	20-29 yrs	109	0.73	0.61
		30-39yrs	91	0.57	0.61
		40-49yrs	58	0.74	0.74
		50-60+yrs	36	0.67	0.63

Table 5.50 depicts means and standard deviations on severity in relation to age for different groups

5.2.3.11 Practical significance (effect sizes) on prevalence in relation to age for different groups

Table 5.51: Effect sizes on prevalence in relation to age for different groups (prevalence)

Factors		Age Cohort					
		20- 29 with 30- 39	20-29 with 40-49	20-29 with 50-60+	30-39 with 40-49	30-39 with 50-60+	40-49 with 50-60+
Effect sizes (d)							
1	Attacks on professional status	.32	.27	.24	.01	.05	.05
2	Attacks on personal standing	.13	.32	.33	.22	.21	.04
3	Non verbal & verbal abuse	.35	.43	**.57	.15	.30	.16
4	Excessive pressure & workload	.48**	.32	.46**	.11	.07	.17
5	Exclusion & barring	.35	.42	.48**	.12	.18	.06
6	Hostility, punishment & sabotage	.31	.47**	.47**	.22	.20	.04
7	Work excessively monitored	.11	.18	.06	.07	.05	.11
8	Undermining & unfair criticism	.44	.41	.46**	.01	.03	.02
9	Persistently teased & made fun of in front of students or colleagues	.01	.02	.01	.03	.00	0.2
10	Humiliation	.39	.48**	.47**	.14	.09	.05
11	Ignored/negative reaction	.53**	.48**	.55**	.03	.13	.10
12	Destabilization	.26	.23	.16	.01	.09	.09

* ≤ 0.2 = Small effect **>0.45-<0.8 medium effect *** ≥0.8 large effect

Table 5.51 presents the medium practical significant differences between 20-29 age group and all the other age groups in factors where there are significant differences. There was no significant effect sizes calculated for factors, *attacks on professional status* (factor 1), *attacks on personal standing* (factor 2) and *destabilisation* (factor 12). Thus the effect sizes for these factors were all below 0.5. This means that there was no difference in the prevalence of these factors related to the age of the respondents. The

medium significant differences ranged between 0.46 and 0.57. The 20- 29 years age group recorded lower means than the older age groups. This is the same pattern for factors where there is significant difference.

The medium practical significant difference was calculated between 20-29 age groups with 30-39 and this was for *excessive pressure and workload* (factor 4) and the prevalence was higher for the 30-39 age group another difference was observed between 20-29 age group with 40-49 age group for factors, *hostility, punishment and sabotage* (factor 6), *humiliation* (factor 10) and *ignored/negative reaction* (factor11). In this instance the prevalence was higher for 40-49 age group

Other medium significant differences were observed between age group 20 to 29 and 50-60+ years groups for factors 3,4,5,6,8,10 and 11. The prevalence was higher for the 50-60+ age group. It seems that the prevalence of these factors is higher for older respondents. This could be explained by the fact that these are the respondents who also have been in the service for a long time and therefore would have experienced these acts over a long period of time.

5.2.3.12 Practical significance (effect sizes) on prevalence for the factor, health impact in relation to age

Table 5.52: Means and standard deviations for prevalence on health impact in relation to age.

Factor	Age cohort	N	Mean	SD
Health impact	20-29	90	0.67	0.84
	30-39	104	0.99	0.97
	40-49	54	1.09	1.091
	50-60+	34	0.91	1.01

Table 5.52 depicts the means and standard deviations for prevalence on *health impact* in relation to age

Table 5.53: Effect sizes for age in relation to the factor, health impact

Factor	Age cohort					
	Health impact	20-29 with 30-39	20-29 with 40-49	20-29 with 50-60+	30-39 with 40-49	30-39 with 50-60+
Effect sizes (<i>d</i>)						
.33		.31	.02	.04	.34	.32

* ≤ 0.2 = Small effect ** >0.45 - <0.8 medium effect * ** ≥0.8 large effect

There is no significant difference in relation to age regarding the factor health impact experienced by the respondents of varying ages. There was no significant difference in the means between all the age groups. All the calculated effect sizes are below 0.5. Thus the severity of health impact on the respondents is more or less the same for both men and women.

5.2.3.13 Practical significance (effect sizes) on severity for the factor, health impact in relation to age for different groups

Table 5.54: Means and SD on age for different groups

Factors		Age cohort	N	Mean	SD
1	Destabilization	20-29	90	0.67	0.84
		30-39	104	0.99	0.97
		40-49	54	1.09	1.09
		50-60+	34	0.91	1.01
2	Humiliation & threats	20-29	84	0.41	0.68
		30-39	102	0.59	0.84
		40-49	51	0.76	0.98
		50-60+	35	0.74	0.78

3	Hostility & verbal abuse	20-29	89	0.73	0.80
		30-39	104	1.04	0.902
		40-49	51	1.23	1.04
		50-60+	34	1.18	0.78
4	Attacks on professional status	20-29	89	0.74	0.85
		30-39	107	1.16	1.06
		40-49	54	1.17	1.10
		50-60+	35	1.26	1.03
5	Attacks on professional status	20-29	85	0.63	0.87
		30-39	105	1.05	0.96
		40-49	53	1.08	0.94
		50-60+	34	1.13	1.08
6	Excessive pressure & workload	20-29	90	1.21	0.87
		30-39	108	1.47	0.85
		40-49	54	1.40	1.00
		50-60+	36	1.31	1.03
7	Intentional sabotage	20-29	80	0.41	0.79
		30-39	95	0.83	1.05
		40-49	47	1.05	1.28
		50-60+	33	0.95	1.09
8	Shouted at	20-29	78	0.53	0.97
		30-39	98	0.88	1.16
		40-49	45	1.35	1.20
		50-60+	28	0.75	1.10
9	Exclusion & barring	20-29	88	0.71	0.79
		30-39	107	1.13	0.95
		40-49	56	1.20	1.05
		50-60+	35	1.15	0.96
10	Non verbal abuse	20-29	85	0.43	0.77
		30-39	98	0.56	0.85
		40-49	48	0.89	1.04
		50-60+	29	0.81	1.01
11	Discrediting	20-29	90	1.00	0.95
		30-39	107	1.44	0.97
		40-49	55	1.53	1.16
		50-60+	34	1.61	0.91

12	Undermining	20-29	88	0.76	0.96
		30-39	106	0.92	0.92
		40-49	52	0.97	1.11
		50-60+	34	0.89	0.88

Table 5.54 depicts the means and standard deviations on age for different groups.

Table 5.55: Effect sizes on severity related to age

Factors		Age cohort					
		20-29 with 30-39	20-29 with 40-49	20-29 with 50-60+	30-39 with 40-49	30-39 with 50-60+	40-49 with 50-60+
		Effect sizes (<i>d</i>)					
1	Destabilization	.33	.39	.24	.09	.08	.16
2	Humiliation & threats	.22	.35	.42	.17	.18	.02
3	Hostility & verbal abuse	.34	.4**	.56**	.18	.15	.04
4	Attacks on professional status	.39	.38	.50**	.01	.09	.09
5	Ignored and dehumanised	.44	.48**	.46**	.03	.07	.04
6	Excessive pressure & workload	.029	.18	.10	.07	.15	.08
7	Intentional sabotage	.40	.50**	.49**	.17	.11	.08
8	Shouted at	.30	.68**	.19	.39	.12	.50
9	Exclusion & barring	.45	.47**	.46**	.07	.02	.05
10	Non verbal abuse	.15	.44	.37	.32	.24	.08
11	Discrediting	.45	.46**	.64**	.08	.17	.07
12	Undermining	.17	.20	.14	.04	.03	.07

* ≤ 0.2 = Small effect ** > 0.45 - < 0.8 medium effect *** ≥ 0.8 large effect

Table 5.55 depicts medium significant differences between 20-29 years group and other groups in factors where there are significant differences. There was no significant difference calculated for factors, *destabilisation* (factor 1), *humiliation and threats* (factor

2), *excessive pressure and workload*, (factor 6), *exclusion and barring* (factor 9) and *undermining* (factor 12). This means that for all age groups, means for severity related to these factors were more or less similar. Furthermore the significant effect sizes in this category ranged between medium effect size 0.46 and 0.68.

There is a medium significant difference between the age group 20 -29 and 40 -49 group for factors, *hostility and verbal abuse* (factor 3), *ignored and dehumanised* (factor 5) *intentional sabotage* (factor 7) *shouted at* (factor 8), *exclusion and barring* (factor 9) and *discrediting* (factor 11). The 40-49 age group experienced higher severity of psychological violence compared to the 20-29 years group. There is also a medium significant difference between 20-29 age group and 50-60+ age group for factors, *hostility and verbal abuse* (factor 3), *attacks on professional status* (factor 4), *ignored and dehumanised* (factor 5), *excessive pressure and workload* (factor 6), *intentional sabotage* (factor 7), *exclusion and barring* (factor 9) and *discrediting* (factor 11) with 50-60+ age group experiencing more severity than the 20-29 years group. An explanation that can be advanced is similar to the one on the differences in prevalence level, in that the younger age group is also the group with less experience and therefore the relationship between that and severity of their experiences could be understood in that light.

5.2.3.14 Practical significance (effect sizes) the factor, health impact in relation to age for different groups

Table 5.56: Means and standard deviations on health impact related to age

Factors	Age cohort	N	Mean	SD
Health Impact	20-29	86	1.08	1.11
	30-39	103	1.43	1.13
	40-49	52	1.49	1.24
	50-60+	34	1.10	1.03

Table 5.56 depicts the means and standard deviations on health impact related to age of different groups

Table 5.57: Effect sizes for age on health impact

Factor	Age cohort					
	20-29with 30-39	20-29 with 40-49	20-29 with 50-60+	30-39 with 40-49	30-39 with 50-60+	40-49 with 50-60+
	Effect sizes (d)					
Health impact	.33	.39	.24	.09	.08	.16

≤ 0.2 = Small effect * >0.45 -<0.8 medium effect ** ≥0.8 large effect

There was no significant difference in relation to age regarding the factor, *health impact*. There were no significant effect sizes calculated in this category. There was no significant difference between the means of various age groups. All the calculated effect sizes were below .45. Therefore this means that severity on the factor, health impact is more or less the same regardless of age.

5.2.3.15 Summary of the findings in respect of group differences

- **Gender:** It has emerged from the findings that gender of the respondents was not a discriminating factor in terms of whether one was subjected to psychological violence or not. The same pattern was found for severity and impact as well. Thus men and women experienced psychological violence and its impact more or less the same way (Cf. Par. 5.2.3; 5.2.3.1; 5.2.3.2; 5.2.3.3; 5.2.3.4)
- **Experience:** The findings reveal that both the prevalence and severity levels of psychological violence are higher for the longest serving teachers than their colleagues with less than two years work experience (cf. Par.5.2.3; 5.2.3.5; 5.2.3.6; 5.2.3.7; 5.2.3.8; 5.2.3.9).
- **Age:** The findings reveal that both the prevalence and severity levels of psychological violence for older teachers (30 -60+ years) are higher than for younger teachers (20-29 years) (cf. Par. 5.2.3; 5.2.3.10; 5.2.3.11; 5.2.3.13; 5.2.3.14).

The next section presents data analysis of the qualitative research part of the study.

5.3 Presentation, analysis and discussion of the findings of the qualitative research data

The method of data analysis was presented in the previous chapter.

The findings of qualitative research will be presented in the following order:

- Presentation and analysis of data from the responses to the open ended question in the psychological violence scale
- Presentation and analysis of data from individual interviews
- Presentation and analysis of data from the symptoms checklist

5.3.1 Qualitative data analysis of response from an open ended question in the psychological violence scale

The respondents were presented with the following question: *Are there any other negative experiences you have had other than those that are mentioned in the questionnaire?* Fifty four respondents wrote such acts which they felt were not included in the questionnaire. Data obtained from the statements was divided into main categories and sub categories. Nevertheless these are not necessarily separate. Therefore a category should not be considered in isolation but it should be seen as part of the greater “Gestalt”. In order to further protect the participants, the verbatim quotations in this section are addressed to the respondents in terms of a symbol assigned to their number, being Participant (1) symbolised as (P1) up to participant (54) symbolised as (P54). All the statements from the psychological violence scale were included in this section.

5.3.1.1 Category 1: Negative acts emanating from the colleagues

Negative acts are defined as those behaviours that are unacceptable and derogatory (cf. par. 2.3.2).

The participants mentioned that negative acts emanating from the colleagues were a problem for them. These included mostly gossiping and sabotage by older staff members. Some expressed that colleagues defamed and spread lies about them.

Table 5.58: Negative acts emanating from colleagues

Main category 1	Sub-categories	N=54
Negative acts emanating from colleagues	Negative attitudes of colleagues	5
	Gossiping about colleagues	3
	Older staff sabotage staff relations	2
	Defamation and lies about colleagues being spread	2

The category “Negative acts emanating from colleagues” and its subcategories are generated from the following direct quotations:

- **Negative attitudes of colleagues**

(P10): Being hated by colleagues for no reason.

(P2): Backbiting.

(P6): Some teachers being the watchdogs of the administration.

(P11): Colleagues not appreciating me.

(P19): Teachers who are desperate for love and money are funny towards me because I am in love and successful

- **Gossiping about other colleagues (cf. par. 2.3.2)**

(P14): Teachers grouping themselves into gossip groups and therefore a teacher, who does not fit in, becomes a loner.

(P20): Teachers gossiping about other teachers with students.

(P17): Teachers gossiping about other teachers with the management.

- **Older colleagues sabotage staff relations (cf. par. 2.3.2)**

(P1): Old teachers with old ideas especially on religious matters think they know more hence they force students who belong to other religions out of their school, by forcing them to do stuff that is against their religious beliefs.

(P4): *Old teachers who have been in the service for too long have lost interest in their job and even pull the active teachers down. Even subject workshops held by the MOE no longer motivate them.*

- **Defamation and lies about colleagues spread (cf. par. 2.3.2)**

(P30): *Having lies told about me e.g. that I was absent from work while I was in fact at work.*

(P30): *Spreading of false information with the aim of defaming me so that everyone can turn against me.*

5.3.1.2 Category 2: Behaviour problems by students

Behaviour problems by students refer specifically to unacceptable acts committed by students, which undermine teachers in the school (cf. par. 1.2). Only five participants expressed this as a problem for them.

Table 5.59: Behaviour problems by students

Main category 2	Sub-categories	N=54
Behaviour problems by students	Discipline problems in students	4
	Students not involved in their school work	1

The category “behaviour problems by students” and its sub categories are formulated from the following direct verbatim quotes:

- **Discipline problems in students (cf. par. 2.3.2)**

(P7): *Failing in whatever I do to bring about change in students` bad behaviour.*

(P15): *Not being able to reprimand and discipline students because corporal punishment is not allowed in schools.*

(P21): *Unpleasant students` behaviour*

(P36): *Being undermined and students not obeying orders in the classroom.*

- **Students not involved in their school work (cf. par. 2.3.3.2)**

(P33) A lot of work is done with little or no output from the student.

5.3.1.3 Lack of parental engagement and community appreciation

Table 5.60: Lack of parental engagement and community appreciation

Main category 3	Sub-categories	N=54
Lack of parental engagement and community appreciation	Community not appreciative of teachers` work	1
	Parents forsake their responsibility	1

In this case the community and the parents disengage themselves from their responsibilities. The category “parental and community disengagement” and its sub-categories have been formulated from the following direct verbatim quotes:

- **Community not appreciative of teachers` work (cf. par. 2.3.3.2)**

(P40): Community is not appreciative of hard work done by teachers.

- **Parents forsake their responsibility (cf. par. 2.3.3.2)**

(P48): Parents refusing to buy books for their children stating that the government will pay, as if these children belong to the government.”

5.3.1.4 Category 4: Negative acts emanating from the management

This refers to unacceptable and derogatory acts that are committed by the management.

Table 5.61: Negative experiences emanating from the management

Main category 4	Sub-categories	N=54
Negative acts emanating from the management	No cooperation with staff from the management side	6
	Financial restraints	3
	Teachers treated disrespectfully by management	3
	Favouritism by management	3
	Unfair responsibility given to teachers by management	3
	Unfairness by management towards staff	2
	Lack of transparency by management	1

The category 'negative acts emanating from the management' and its sub categories have been formulated from the following direct excerpts.

- **No cooperation with the staff from the management side (cf. par. 2.3.1; 2.3.3.1 ;)**

Most participants expressed lack of cooperation from the management, to be a concern for them. This is articulated in the following verbatim statements:

(P27): No cooperation from the principal

(P22): Principal does not cooperate with us.

(P25): The headmaster does not want to cooperate with teachers.

(P42): No cooperation from the principal and the board.

(P29): Students not being provided with rental books instead having such books stacked in the headmaster's office, therefore it makes teaching a nightmare.

(P35): Principal not completing my employment forms for far too long.

The category "negative experiences emanating from the management" and its sub-categories have been generated from the following direct verbatim quotes:

- **Financial restraints**

Issues concerning finances were pointed out by some of the participants. Some of these issues relate to the fact that the subordinates are forced to comply with the rules and demands by their superiors (cf. par. 2.3.3.1)

(P24): Delay in salary payment by Teaching Service Department (TSD).

(P28): Having to use my own personal resources without any refund despite reminders to my superiors.

(P39): Refusal by TSD to pay us for a three year Secondary Teachers` Certificate (STC) which we acquired prior t completing a degree in education (B.Ed or BSc Ed).

- **Teachers treated disrespectfully by management (cf. par. 2.5.3)**

The desire to be treated with respect and the lack of it was raised as follows:

(P26): Teachers` welfare not taken care of e.g. no heaters in the staffroom yet there are such in the headmaster`s office.

(P46): Being hated by the administration because I confront them for their bad behaviour.

- **Favouritism by management (cf. par. 2.5.3)**

Teachers wish to be treated fairly and equally by the management of their schools and yet they have observed favouritism towards other teachers in their school. They stated that:

(P37): Favouritism of other staff members by superiors with information leaking to the superiors which in turn leads to lack of freedom of speech among teachers.

(P16): Favouritism of some teachers by the principal so even if they do not do their work he just pretends he does not see such.

(P45): Headmaster having favourite staff members and making him the boss over other teachers and handing out favours to the same person, e.g. Being given leave anytime of the year causing students to suffer and also being

expected to each classes of such a teacher when he is allowed to go on leave during the school term.

- **Unacceptable responsibility given to teachers by management (cf. par. 2.5.3)**

Teachers felt that some of the responsibilities assigned to them by the management, were undesirable including the manner in which such responsibilities were allocated. This was expressed as follows:

(P50): Being given more workload particularly, when I complain of uneven distribution of work for teachers in my subject area. My teaching periods were increased dramatically.

(P9): Being assigned responsibility for far too long without being substituted, to the extent that it feels like a punishment.

(P51): Being given responsibility without training and then when I fail I am accused of incapacity and negligence .E.g. I was once appointed as the chief invigilator (which I knew nothing about) for external examinations and I made some mistakes.

- **Unfairness by management towards staff (cf. par. 2.5.3)**

Unfairness by the management was put as follows:

(P41): Superiors are not fair and just when making decisions that affect some of us.

(P23): Generalizations by superiors on acts committed by others and not by an individual (e.g. teachers do this and that, instead of specifying a teacher who made a particular mistake).

- **Management not open to communication with staff (cf. par. 2.5.3)**

Lack of open communication from the management was mentioned in the following statements:

(P5): Superiors not listening to teachers` concerns.

(P8): The principal taking our advices for granted.

- **Lack of transparency by management (cf. 2.5.3)**

Teachers felt that the management was not transparent on issues of concern to them.

(P18): Students being dismissed from school for whatever reason without us teachers being told and when we get we find only a few students.

(P43): Lack of transparency and truth by the board and superiors when settling problems that involve teachers.

5.3.1.5 Category 5: Negative acts emanating from the subordinates

A few of the participants who were in the management category raised their concern regarding undermining by the subordinates (cf. par. 2.3.2).

Table 5.62: Negative experiences emanating from the subordinates

Main category 5	Sub-categories	N=
Negative acts emanating from the subordinates	Undermining of superiors by subordinates	8

The main category “Negative experiences emanating from the subordinates” and its sub-category have been formulated from the following direct verbatim quotes:

- **Undermining of superiors by sub-ordinates (cf. 2.3.2)**

(P12): Colleagues of lower status bullying us and not doing their work for the good of the school.

(P32): Lack of cooperation from the teachers who will come to classes late despite repeated reminders that they should be punctual.

(P44): Teachers letting students misbehave to snub me and purposely not meeting the deadlines.

(P52): Orders given to students behind my back/ assistants neglecting their duties e.g. cleaners, subordinates absenting themselves from their duties.

(P13): There are two groups of teachers at school and one group has no support for the administration at all and these people criticize every improvement undertaken at school.

(P53): Having the board in charge of school finances instead of me as the headmaster.”

(P47): At times getting confidential information from the junior staff members which were supposed to be communicated through me.

(P34): My subordinates discussing my private life and making fun of it and passing humiliating remarks about it.

The findings in this section are corroborated by the literature with regard to the acts or experiences that constitute psychological violence in the workplace. These are the experiences that have been identified in the research literature on this phenomenon (cf. par. 2.3.2). Although the respondents felt that these issues were not raised enough in the psychological violence scale, they were raised to a large extent with a difference in specific negative acts that people had experienced.

5.3.2 Summary of the findings from an open ended question from the psychological violence scale

- **Negative acts emanating from the colleagues**
 - Negative attitudes of colleagues
 - Gossiping about other colleagues
 - Older colleagues sabotage staff relations
 - Defamation and lies about colleagues spread

- **Behaviour problems by students**
 - Discipline problems in students
 - Students not involved in their school work

- **Lack of parental engagement and community appreciation**
 - Community not appreciative of teachers' work
 - Parents forsake their responsibility

- **Negative acts emanating from the management**
 - No cooperation with the staff from the management side
 - Financial restraints
 - Teachers treated disrespectfully by management
 - Favouritism by management
 - Unacceptable responsibility given to teachers by management
 - Unfairness by management towards staff
 - Management not open to communication with staff
 - Lack of transparency by management

- **Negative acts emanating from the subordinates**
 - Undermining of superiors by subordinates

5.3.3 Qualitative data analysis of interviews with teachers subjected to psychological violence in their workplaces.

The individual semi structured interviews were conducted with 21 participants. There were sixteen females and five males. The method of data collection and analysis has been detailed in chapter 4. The participants were presented with the following questions:

- What happened?
- How often did it happen?
- What impact did it have on your health?

The analysis will be presented question by question starting with the first question through to the last one. This will be done for purposes of clarity and rigour. In this section the participants are not named, instead the quotes are addressed to the participants in terms of a symbol assigned to the speakers' name/surname/ name and

surname/surname and name. This is to further ensure the anonymity of the participants and to protect their identity thoroughly.

5.3.3.1 Presentation of the findings on the question: What happened?

It emerged from the interviews that the experiences of psychological violence against the respondents emanated from the four sources, being the management, the colleagues, students and parents. It emerged that most experiences emanated from the management of the school.

5.3.3.1.1 Category 1: Negative acts emanating from the management

In the context of this study the management of the school refers to the headmaster/headmistress and heads of departments.

Table 5.63: Negative acts emanating from management

Main category 1	Sub-categories	N=21
Negative acts emanating from the management	Structural violence committed against teachers	15
	Being overworked and overloaded	14
	Experiencing verbal and physical aggression	12
	Not being given support	11
	Being undermined & Coerced to engage in certain actions	11
	Gossip and lies being spread	9
	Being shown cynical behaviour & attitude	8
	Lack of transparency on issues of concern	8
	Being Victimised	7
	Observing favouritism towards other staff member	6
	Being isolated and given silent treatment	6
	The use of divide and rule policy	5

- **Structural violence committed against teachers (cf. par. 2.3.2)**

Psychological violence in the form of structurally related acts was reported by the participants. This refers to those negative acts that are intrinsic to workplaces and are built into the practices and policies (cf.par.2.3.2). Most of the participants mentioned this as a serious concern for them. It transpired from the interviews that these acts are something they cannot sort out themselves. The following examples demonstrate this:

(TT): *She does not allow us to attend conferences and says it is not part of our job. She takes major decisions without involving the teachers simply because she has the executive powers.*

(T): *After completion of my studies my principal did not want to reinstate me back to my old position...only she could facilitate that.*

(TR): *She breaks the regulations and gets away with it because of her position.*

(LO): *She cheats on temporary staff, she underpays them. She also keeps them on the job without them signing any contracts and if they ask about contracts she says she is the contract herself. She also fires teachers as and when she wishes.*

(LE): *I was once forced to teach the class in which the principal had told the students that I am useless. So, I asked her to apologise, she refused and I also refused to teach it. I was taken to the board for disciplinary hearing. I stood my ground.*

(P): *I was refused maternity leave by the principal there was nothing I could do without her signing my leave forms ... so I only took sick leave.*

(SS): *One newly employed teacher refused to teach one class because she was overloaded, the principal kept her on temporary grant and remarked as follows: do you think a thing like you should be given a permanent grant?*

- **Being overworked and overloaded (cf. par. 2.3.2)**

Being overworked is a state in which person is forced to work beyond his or her capacity as a person and a professional as evidenced from some of the statements from the participants:

Participants mentioned being overworked at their workplaces and this was generated from the following quotes:

(SA): *I am overloaded with work and I do not know why.*

(TT): *I had to step in as chief invigilator and yet I still had my other classes to attend to.*

(MM): *I work like a slave, I have simply too many classes to teach and I also have to carry some of the work home even on weekends.*

(LE): *There seems to be no limit to what one is expected to do around here teaching, marking, supervising manual work, extra murals etc.*

- **Experiencing verbal and physical aggression**

Verbal aggression refers to unfair criticisms through yelling and shouting and even insulting (cf. par. 2.3.1). This was reported as rife by the participants. This took various forms including insults hurled at the participants. On the other hand physical aggression manifests in the form of physical harm directed at the victim (cf. Par. 2.3.1).

The following verbatim quotes are providing some of the evidence to that:

(M): *He shouted at me telling me that I have turned the school into a family property with many of my relatives working there. And went further to tell me he was going to fire me ...to which I replied that he has no power to fire me because he is not my employer. As our relationship worsened, he would insult me over the phone.*

(K): *After she had alienated me from one class of students and them (students) did not want me to teach them. She told me, it serves you right.*

(C): *Just this other day after an argument with me in her office she came to the staffroom and announced without shame that she will only work with*

people that she loves. The principal abused me verbally and the board just seemed unable to handle her.

(SS): I was entitled to get the school accommodation, the deputy principal became arrogant and she shouted at me telling me that she does not care about people who do not own houses she has her own house where she stays comfortably.

(B): I was due for maternity leave and went to the office to ask about the procedure for applying and she said: why do you come to me about these issues because you have your mothers here at school who can tell you.

(CM): I was once physically dragged before the class that I had refused to teach because of the way I was asked to do it. The principal brought me before the students and told them this: here she is and if she does not teach you, tell me, I will deal with her.

- **Not being given support (cf. par. 2.5.3)**

The participants pointed to lack of support from the management. Lack of support is observed when those responsible fail to provide assistance in various forms, to enable an employee to carry out his duties efficiently. This was deduced from the following excerpts:

(P): One day in a meeting we were told by the principal that we should not attend to our extended family matters...because I am staying with a sickly nephew and the principal knew this. I was shocked by this insensitivity and lack of support.

(MP): I asked the principal if I could use the school telephone to call some teachers on school related matters during the holidays she refused. I had to use my phone with no refund.

(SS): The schools' secretariat was not willing to listen to my case against the principal and I felt worse.

(LE): The situation between me and the principal became so bad that I had to write to the school board and unfortunately they did not want to help at all.

(N): *I attended leadership skills course and just he wished he just took me off the course and placed somebody else...any way he had made it clear that I could learn all I want from the course but he would never allow me to use those skill in HIS school.*

- **Being undermined and coerced to engage in certain actions**

Undermining in the workplace can occur at both professional and person levels. It refers to situations where a person is made to feel useless (cf. Par. 2.3.2). On the other hand coercion occurs when a person uses some form of power to get the person to do what he or she wants (Kiesker & Marchant, 1999:63-64). The participants felt that they were being undermined and coerced at work and the following are some of the statements to that effect:

(SA): *The school here starts at 8.00am and as teachers we decided that it would be best if students came in at 7.30am and studied for thirty minutes before the school started. The headmistress bought and seemed to love the idea, so we thought there were two students who were habitual late comers and we decided to punish them because it was clear that they were doing it on purpose. The principal stopped us and claimed that we waste students' time and that this was harassment of students and she said this before the students. We abandoned the idea of study time.*

(CM): *In the meetings the principal would talk about issues which transpired in the board meeting which I believed I had the mandate to tell the teachers since I represent them in the board. Unfortunately such meetings were deliberately held during my absence from school.*

(O): *As HOD, I and the teachers decided that for quality assurance it would be best for me to observe teachers during lessons. Teachers loved it. She wrote me a letter asking who I think I am to observe teachers. On some other days the principal does not come to school and does not accept decisions that are taken in her absence.*

(C): *I worked in a church school was told that I had a temporary employment contract with the school and was asked to resign ... this was not true, I had a permanent contract. An argument started and I was told that I have*

no respect for church authorities and was made to feel like I was committing a sin.

(O): The principal wanted me to resign so that she could employ somebody from her church denomination in my place and she promised to get me a job in another district which would be far away from my family. I refused.

(MP): He decided on her own that the subject I teach will no longer be taught at the school. I spent months there, with no lessons to teach until I decided to resign and get a job elsewhere.

(CM): The principal persuaded me to take up the post that I felt I did not qualify for.

- **Gossip and lies being spread (cf. par. 2.3.2)**

This involves talking about the person behind their back also saying things that are not true about them. It emerged from the interviews that gossiping about staff members by the management was a problem. This involved management gossiping about staff members with colleagues, students, parents and others. The following are some of the experiences that were stated by the participants:

(P): I get demoralized because he gossips about teachers with students.

(L): The students told other teachers that the principal gossips about me in class.

(K): I was shocked to learn that the new in coming principal knew everything about me to the extent that she told me that she had been reliably informed that I stay with my in laws and I should just continue staying there.

(B): I Was the acting principal and I went to further my studies ... I learned on coming back that the principal who came after me ... whenever she reprimanded other teachers she would tell them that she was not like me the person no one had respect for.

(O): I was the only science teacher in the school, she started spreading lies about me, that I am not competent to teach maths because I had failed it at university therefore I cannot teach it.

(T): *I decided to mind my own business because after that incident, the situation became worse there were so many lies told about me and other teachers. Even when the case was reported at the police station the principal denied any knowledge of why students became violent. This was a lie.*

(LE): *She lied that I undermine her authority and I am opposed to any improvements that are being implemented in the school ... is there a sane person who can do that?*

(N): *One day the principal said that the students in one class had complained that I miss classes. I went to ask the same students they said she was lying and that she should come to their class to point out those students who said so, she never did.*

- **Being shown cynical behaviour and attitude**

Some participants reported the cynical behaviour and attitude of the management towards them. Cynical behaviour is observed when a person treats others suspiciously overlooking their good intentions and reading it as individual self enhancement (Andersen & Bateman, 1997:450; cf. par.2.6.2). The following are some of the experiences articulated by the participants:

(N): *She has the attitude that if she is not able to attend professional development courses, then nobody should.*

(C): *After I had suggested some improvements on how peer evaluation should be carried out and the teachers liked my idea, she developed a bad attitude and said that I act as if I am the principal at this school and act like I know too much.*

(BM): *He is always uncomfortable that if people further their studies and acquire higher qualifications they will undermine him.*

(P): *The headmistress develops a bad attitude towards members of staff who should get promotion for their hard work. This is because she believes that when people do well they are trying to outsmart her.*

- **Lack of transparency on issues of concern**

Participants reported that lack of transparency and withholding the necessary information was a problem for them. This is one of the features of psychological violence expounded in the literature (cf.par.2.3.2).

The participants felt that it made it difficult for them to plan their work and to also execute their duties appropriately. The following are some of the statements by the participants:

(B): *The headmistress hides information from us. There is no transparency. For instance the reading of the financial statement was kept a secret and only the friends of the management were told so that they could give her support in the parents' meeting.*

(C): *It became very difficult for me to get the equipment I needed for teaching. For instance I teach English and I always needed past examination papers and it was a problem to get them.*

(T): *Something weird, the principal has not shown the teachers the symbols mark sheet for the latest national examination results. She claims she has not received it. Yet as a rule the results are sent to each school together with the mark sheet. I wonder why she would not show us how we have performed in various subjects. May be her friends did not do well.*

(MP): *We have information hidden from us, for instance that on a particular day students would knock off earlier and therefore classes will end early.*

(LE): *As teachers he does not give us information separately from students, we hear stuff for the first time at morning assembly at the same time as students.*

- **Being and victimised**

Victimization is making somebody suffer because you do not like them (Aquino & Bradfield,2000). Some respondents mentioned victimization acts in the hands of the management as it emerged from following statement (cf. Par.2.3.1).

(O): *I have been charged with defamation of character for reporting the principal to the board for abuse of power and maltreatment of us as*

teachers. Sometimes I feel that this will jeopardize my future if I need to get a job somewhere else.

(T): I am still waiting for my court case hearing where the principal will be taking me to court.

(LK): I was taken to the adjudicator in the Ministry of Education because the principal felt that I was in subordinate. This makes people to think that I am troublesome.

(P): because of the hatred she had for this teacher she would not allow me to buy him chicken instead of beef because he is allergic to it... this was for the social function at school.

(SA): She hates me; I know that for sure.

(K): He is jealous, revengeful and cruel towards me and all the teachers she hates.

(N): The principal developed a very bad hatred for me because I would not agree to be his puppet.

(K): One day the headmistress literally threw our allowance money for the school trip at us, as if we are dogs.

(LE): Because of my reaction against the abuse by the management I was no longer allowed to attend training workshops offered by the MOE. I was also relieved of my duties in various committees in the school. For example, I had started the English debate club and she took me out of it and put another teacher in my place.

- **Observing favouritism towards other staff members (cf. par. 2.3.1)**

Favouritism entails preferential treatment afforded some people that one likes and not others in the same setting. The respondents pointed out that favouritism towards other staff members by the management was a problem for them. The following are some of the statements from the participants:

(CM): I was entitled to get accommodation at the school and the principal told me that I was not going to get any house from the school, instead she allocated it to another teacher who was the second on the list after me.

- (LO): *Favouritism is rife here. For instance if I attend workshops and travel with the teacher that she likes she will give him taxi fare and she will not give me. So I no longer attend these workshops because she always refuses to give me the travel money.*
- (P): *If I seek permission to be absent from school to attend to serious family matters she refuses and yet some teachers can afford to be absent from school three times a week irrespective of reasons.*
- (P): *Because of the problem I had with the principal, our case went for adjudication where the adjudicator would not listen to my case instead he blamed me for everything and told me I teach adultery. I teach biology I could not believe what he said.*
- (SA): *If I produce good grades in my subject and as a rule I am supposed to get a present. He will just put it on my desk and not tell me. That is not how it is done to other teachers. So I simply do not take such presents.*
- (B): *My salary was withheld for six months because the principal wanted me to resign wanting to employ her own favourite teacher in my post.*
- (O): *Whenever there is a project at the school, whether building or supply of computers she engages members of her family. She does not advertise such jobs.*

- **Being isolated and given silent treatment (cf.par.2.3.1).**

Some participants expressed that isolation and silent treatment they experienced from the management was of great concern for them. This involved acts of discrimination where a person is treated as an outsider and is not included in conversation or activities taking place in the school. This was evidenced from some of the verbatim statements:

- (BM): *She ignored me and did not even greet me when she met me outside her office. Sometimes I think he takes me like one of the students.*
- (TR): *Do you know how it feels like when someone treats you like you do not exist?*
- (MK): *The only time I would get a greeting is when I am with other teachers.*

(B): *When there is a death in my family the management will act like there is nothing unlike the way it is done for other teachers. I sometimes feel so alone here.*

- **Use of divide and rule (cf. par.2.3.1; 2.3.2)**

The policy of divide and rule is used by the management and the participants mentioned it in the following excerpts:

(C): *The principal has divided the staff, and in meetings we do not see eye to eye ...actually we fight each other*

(O): *She uses divide and rule policy and if any new teacher's loyalty towards her is not clearly observed then such a teacher will suffer.*

TR: *The division of the staff by the headmistress has led to open conflicts among the staff members.*

5.3.3.1.2 Category 2: Negative acts emanating from the colleagues

Some of the participants experienced psychological violence from the colleagues of equal status (cf. par.2.3.2).

Table 5.64: Negative acts emanating form the colleagues of equal status

Main category 2	Sub-categories	N=21
Negative acts emanating from colleagues of equal status	Exposed to personal derogation and disrespect	6
	Being isolated	4
	Having one's professionalism attacked	4
	Older staff sabotage staff relations	3
	Not being accepted	3

Several participants mentioned that colleagues are a source of their problems.

These ranged from personal derogation to lack of acceptance.

- **Exposed to personal derogation and disrespect**

This refers to the negative acts that are aimed at hurting the person and attacking their credibility at personal level (cf. par. 2.3.2).

Personal derogation was experienced by some of the colleagues. These included a range of acts as expressed in the following examples:

(C): *Some colleagues would pass nasty remarks and these this would become such a joke and I will get teased.*

(T): *Some colleagues would remind me all the time that it was my turn to go to class ... and when they leave the staffroom other teachers would pass remarks like, why do they have to treat this poor child like this?*

(O) *Colleagues make nasty comments about my weight, it is just not one but a bunch of them.*

(TT): *My colleagues failed to treat me with respect, just calling me by first name despite the fact that I am married. Culturally this is unacceptable.*

- **Being isolated**

Participants reported feeling lonely and in isolated the workplace. This was deduced from the following quotes:

(K): *The situation got so bad that I no longer went to the staffroom I decided to stay in the department's office alone.*

(P): *Teachers in this school could not accept me as one of their own, I became a loner.*

(O): *I felt like an outcast.*

- **Having one's professionalism attacked**

Participants expressed that some of the actions by colleagues were direct attacks on their professionalism. This involved acts that cast doubt on the victim's sense of professionalism (cf.par.2.3.2). A concern was raised about this problem by some participants. The following examples attest to this:

(K): *As a new teacher I suggested that we should use spatula to measure salt in the home economics class, the colleague said salt is salt whether you use a spatula or not. She would refuse to buy stuff needed for teaching some topics...I would teach some topics to the students and she will go that class and teach them the same thing again. Just because I am her former student she cannot accept that I am professional like her and I happen to know the recent developments in the subject area.*

(P): *During festive activities at school, like maybe cultural day, I would be allocated menial jobs like supervising students who are cooking lunch and I would never be able to participate in more professional and productive activities like, poetry recital etc.*

(SS): *Some colleagues would go to my students and ask them what they think of my teaching.*

- **Older staff sabotage staff relations (cf. par. 2.3.3.5)**

Participants felt that older staff members were destroying the relationships among the staff members. The following statements provide some evidence to this.

(P): *... later on I learned that older staff member had sought an employment for her child, before I was appointed and when I got the job she was angry ... when I came she influenced other staff against me.*

(LK): *Experienced teachers do not provide any professional support for the new members of staff.*

(BM): *Being the youngest staff member they would send me around to get them water and to even make tea for them.*

- **Not being accepted**

Lack of acceptance by colleagues was experienced by some participants as observed from the following excerpts. The victim feels like as outsider among his or her colleagues (cf. par. 2.3.1). The following are some of the experiences that the participants related:

(SS): *She had problems accepting that I am a teacher like her and I have recently qualified and therefore I am bringing new ideas to the subject.*

(TR): *Remarks like: who are you to reprimand students were common from this colleagues.*

(CM): *I was never allowed to handle money or given a responsibility that involved buying stuff for the school.*

5.3.3.1.3 Category 3: Negative acts emanating from subordinates

A few participants experienced psychological violence from the subordinates in their specific school (cf. par. 2.3.2; 2.3.3.7). They expressed that their subordinates act irresponsibly on purpose. They find this behaviour objectionable.

Table 5.65: Negative acts emanating from the subordinates

Main category 3	Sub-categories	N=21
Negative acts emanating from the subordinates	Irresponsible teacher behaviour	2

The category psychological violence acts emanating from the subordinates and its sub-category has been formulated from the following direct quotes:

- **Irresponsible teacher behaviour**

This shows when people fail to perform their duties as expected, instead acting in an unacceptable manner. Some participants mentioned that irresponsible teacher behaviour was a problem for them. For example:

(LF): *Teachers absent themselves from work without any valid reasons.*

(HK): *When their mistakes related to their work are pointed out they get offended and start saying that I have favourite teachers.*

5.3.3.1.4 Category 4: Negative acts emanating from the students

Some other negative behaviour was observed from students which some teachers felt was disturbing for them (cf. par. 2.3.2).

Table 5.66: Negative acts emanating from the students

Main category 4	Sub-categories	N=21
Negative acts emanating from the students	Students behaving badly	4

- **Students behaving badly**

Students` unacceptable behaviour disturbed some of the participants as shown in the following examples:

(B): Some of these students here are old enough to be at university and they have no respect for us because they are adults already and they feel we cannot tell them anything.

(MP): Students in this school do not care about their school work, they come late in the morning ... do not do homework ...

5.3.4 Presentation of the findings from the question: How often did it happen?

The presentation of the findings on this question has been categorised into two clearly identifiable periods. These being incidents that lasted for a few months and those that lasted for year

5.3.4.1 Category 5: Psychological violence that lasted for several months

Some participants disclosed that incidents of psychological violence against them took months of either daily or weekly violence. The literature points to persistence as one significant feature of psychological violence as observed in the persistent nature of the experience of psychological violence by the victims (cf. par. 2.3.2)

Table 5.67: Negative acts that lasted for a few months

Main category 5	N=21
Negative acts that lasted for several months	8

The following statements by some participants are examples of how the participants expressed the duration of their experiences.

(BM): This took about nine months of almost daily stress.

(P): This has gone on for so long...I think it has been five months now. It is a daily struggle to get by in this school.

(LK): *I have had this experience for a month now but it feels like a whole year because several times a week I have to face her ...for different reasons.*

(LO): *It started in May last year and is continuing till today...this is about 8 months to be exact and is continuing.*

5.3.4.2 Category 6: Negative acts that lasted for one year and more

Table 5.68: Negative acts that lasted for one year or more

Main category 6	N=21
Negative acts that lasted for one year or more	12

Some participants mentioned that their experience of psychological violence had lasted for one year and more. Some of the participants stated that:

(N): *I have been experiencing this from 2002 till now in 2008...it does not look like it will end soon.*

(P): *This took three years of daily harassment. Even during the holidays she would write letters and put them in my desk.*

(SS): *From 2001 till 2003 and I took a break from 2004 to 2006 and went to further my studies then came back to the same situation in 2007.*

(SA): *Long painful years of daily struggle...*

5.3.5 Presentation of findings to the question: what impact did this have on your health?

The participants disclosed that their negative experiences in the workplace did have traumatic impact on their health. The effects have been categorised into three categories which have been generated from the direct verbatim quotes by the participants. The categories are:

- Biological health effects
- Psychological health effects
- Spiritual effects
- Social (ecological) effects
- Metaphysical effects

5.3.5.1 Category 7: Biological health effects

Physical health effects refer to the impact that negative experiences have in the body of the victims. These effects present themselves in biological symptoms experienced by the participants (cf. Par. 3.4.1)

Table 5.69: Biological health effects

Main category 7	Sub-categories	N=21
Physical health effects	Getting stress headaches	6
	Developing high blood pressure	4
	Developing heart problems	3
	Had eating problems	3
	Getting ulcers	3
	Losing hair	2
	Experiencing body pains	2

The physical health effects mentioned by the participants varied from serious to extremely serious. The main category “physical health effects” is evidenced from the following statements from some of the participants:

- **Getting stress headaches (cf. par. 3.4.1; 3.4.1.1)**

The participants mentioned experiencing headaches as a result of their experiences. Severity of these experiences is expressed in some of the participants' direct verbatim statements.

(CM): *I would sit and stare into space with this severe headache ...it's something that I cannot emphasize enough...*

(O) *I have developed chronic headaches ... my health is messed up and I find it disgusting that the person responsible does not care to change her behaviour.*

(C): *I went to the Doctor because I had this terrible throbbing pain on the side of my head, he said it was vascular headache because of too much tension ... that day I thought my head was going to explode.*

(LO): *It felt like I had a bus running through my head ... it was impossible for me to go to work ... just thinking of going there made my headache worse.*

- **Developing high blood pressure (cf. par. 3.4.1; 3.4.1.1)**

Some of the participants mentioned that they had high blood pressure problems as a result of their experiences. Some of the examples are quoted below:

(LE): *I had high blood pressure for the first time.*

(N): *My chest felt heavy and I had dull headache and at the hospital they found that my blood pressure was high.*

(B): *My blood pressure was fluctuating. On some days it would be so high that I just stayed at home.*

- **Developing heart problems (cf. par. 3.4.1; 3.4.1.1)**

Some participants mentioned experiencing serious heart problems as a result of their negative experiences in the workplace. They expressed their experiences as follows:

(M): *Since this ... I have a severe pain on the side of my heart ... I had to undergo a heart test where they check how your heart works etc ... they*

said it was not good. I am still so young now with this ... no. My Doctor was concerned I told him that I have work problems.

(MP): *I have serious heart problems ... sometimes I feel like I am going to die ... it makes me feel so ... so bitter ... does anyone have a right to treat people like dirt?*

(LE): *I can't explain it well; it is palpitations that make me feel nauseous and very tired like your heart will stop anytime. My health is bad.*

- **Had eating problems (cf. par. 3.4.1; 3.4.1.1)**

The participants experienced eating problems. These include losing appetite or overeating. The following are examples of the participants' experiences:

(BM): *I started overeating, I was eating every thirty minutes I put on so much weight it was scary.*

(MP): *I was so stressed I could not eat and I lost weight, I was skin and bones ... that are what stress did to me. I went through hell.*

(SS): *It was confusing I would overeat and other times I would feel nauseous and would not eat anything.*

- **Getting ulcers (cf. par. 3.4.1; 3.4.1.1)**

Some participants developed ulcers resulting from their negative circumstances in the workplace.

(MP): *I developed ulcers.*

(N): *I had a very bad heartburn and severe stomach pains and I was diagnosed with ulcers.*

(TT) *I always got pains after eating, and it was ulcers as the doctors told me.*

- **Losing of hair (cf. par. 3.4.1; 3.4.1.1)**

Some participants lost hair due the stress they experienced, for instance the following were some of their statements on this issue:

(LE): *I never believed such can happen...my hair started falling out and I developed bald patches ... I got more frustrated.*

(T): *I suffered hair loss ... I lost confidence ... I almost resigned.*

- **Experiencing body pains (cf. par. 3.4.1; 3.4.1.1)**

Other participants had body pains as they experienced negative acts in their workplace. This is stated as follows:

(B): *I experienced pins and needles... my body was sore.*

(O): *I developed aches and pains due to stress. My left arm was once put in Plaster Of Paris because it was so severely painful yet it had no fracture or sprain of any kind. Doctors in the country could not figure out what the problem was, after some tests and x rays came back negative. I had to go to South Africa and I was diagnosed with severe stress.... On some days I would bath and dress for work and on my way there I would feel so sick with no specific ailment and I would just go to the doctor.*

(CM): *Around the same time my joints became sore and I developed arthritis.*

5.3.5.2 Category 8: Psychological health effects

These refer to the negative effects that present in mental symptoms on the victims (cf. par. 3.4.2).

Table 5.70: Psychological health effects

Main category 8	Sub-categories	N=21
Psychological health effects	Lack of motivation & demoralized	5
	Feeling depressed	4
	Being aggressive	4
	Feeling anxious	3
	Having sleep problems	2
	Feeling paranoid	2

Many participants mentioned that as result of their traumatic experiences they developed serious psychological symptoms. These ranged from demoralization to symptoms that translated to paranoia.

- **Lack of motivation and demoralized (cf. par. 3.4.2; 3.4.2.4)**

As a result of their experiences the participants felt demoralized and unmotivated. They stated that they lost interest in their jobs and related activities For example some participants stated the following:

(BM): I do not have motivation to do anything ... not even preparing for the lessons as I used to.

(LO): I got demoralized; there was no point of trying to do any good.

(T): I refused to participate in any activity in the school. I felt that my job was meaningless and my contribution was useless.

(LE): I no longer cared if anybody thought my job was good or not.

- **Feeling depressed (cf. par. 3.4.2; 3.4.2.4)**

This is the state where a person's mood is disturbed characterised by hopelessness, pervasive, absorbing and chronic feelings of loss of control (Riskind, 1997 in Blasé & Blasé 2003:405).

The participants got depressed as a result of their unpleasant experiences and the severity of their experiences is evident in how they describe their symptoms in these statements.

(LK): I got very sick, I was always tired, and I became depressed. I was hospitalised as a result of this.

(M) I have depression, stress medication including food supplements do not help me anymore. I had to go for acupuncture and that made it better. Whenever I get a call to the office I get very upset wondering what I am wanted for. I sometimes had fainting spells.

- **Being aggressive (cf. par.. 2.3.1; 3.4.2; 3.4.2.4)**

Aggression is one of the symptoms experienced by the participants due to their experiences.

This is deduced from the symptoms they describe in these statements:

(TT): *I get very very aggressive sometimes saying things I should not have said.*

(P): *I honestly found it difficult to concentrate. When people do such things they get to you ... even if you are strong.*

(M): *I was prepared to fight physically ... I felt that would make me feel better.*

- **Feeling anxious**

Blasé and Blasé (2003:405) define anxiety as a kind of mobilization response to a future threat that may be developing or coming and that, one hopes can be avoided (Riskind, 1997 in Blasé & Blasé, 2003:405)". The participants experienced some anxiety as a mentioned in their statements.

(MP): *I found it difficult to relax.*

(P): *I was always anxious and sort of expecting something bad from him.*

(MK): *I always had my heart pounding very badly because I was anxious all the time and I could feel my health going down.*

- **Having sleep problems (cf. par.. 3.4.2; 3.4.2.4)**

Sleep problems refer to a dramatic change in the sleep pattern, with the person either having problems falling asleep or staying awake. The participants mentioned experiencing sleep problems as a result of their experiences. They either sleep too little or too much for example they articulated it as follows:

(P): *I could not sleep due to a lot of worrying about what happens at work.*

(SS): *Sometimes I would just sleep for a long time find it so difficult to wake up...and would actually feel like sleeping more.*

- **Feeling paranoid (cf. par. 3.4.2; 3.4.2.4)**

This is a pervasive and unwarranted tendency to interpret the actions of others as deliberately demeaning and threatening (Andreasen & Black: 1990:338). As a result of their experiences some participants expressed health problems that amount to paranoia. This is expressed as follows:

(TT): *I could not trust people at work; I always felt everyone was out to destroy me.*

(B): *Whenever a colleague says something positive about me I always felt that it a bluff. This was a result of my eroded self esteem.*

5.3.5.3 Category 9: Spiritual health (ecological) health effects

The participants developed symptoms related to their spiritual domain as result of their experiences (cf. par. 3.4.3).

Table 5.71: Spiritual health effects

	Subcategories	N=21
Main category 9	Finding it difficult to stay focused when praying	2
	Questioning the presence of God in bad experiences	2
	Questioning what constitutes fairness	2

The effects on the spiritual health have been expressed by the participants as demonstrated in the following direct quotations:

- **Finding it difficult to stay focused when praying**

(SM): *Working here is hell in its totality. I do not know what to pray about and for anymore.*

- **Questioning the presence of God in bad experiences**

(SS): *Does God really allow these kinds of things to happen to his own people?*

- **Questioning what constitutes fairness**

(MP): *I wonder if I know what goodness of people means anymore.*

5.3.5.4 Category 10: Social health (ecological) effects

The social effects present as those effects of negative experiences that have an impact on ones social life (cf. par. 3.4.4).

Table 5.71: Social health effects

Main category 10	Sub category	N=21
Social effects	Mood affecting interpersonal relations	4
	Feeling lonely and disconnected	3

The social effects of negative experiences in the workplace were expressed by the participants as shown in these examples:

- **Mood affecting interpersonal relations (cf. par. 3.4.4.1; 3.4.4.2)**

This refers to the state where a person's moods swing from happiness to despondency (Andreasen & Black, 1991:191).

(O): *My family members would comment about how I had changed and being moody and antisocial. I did not know myself any longer.*

(B): *I would just get to work and did not feel like talking to anyone except, just to go to class, teach and be on my own. I sometimes felt so scared because I did not like even the students I taught.*

(K): *I get angry very fast, and I am impatient even with my family...sometimes I blame them for lack of support and yet there is nothing they can do.*

- **Feeling lonely and disconnected (cf. par. 3.4.2; 3.4.2.4)**

The participants felt lonely and disconnected emotionally and physically from other people around them. This was expressed by the participants as seen in the following quotes.

(M): *I was all by myself, confused trying to figure out what I did wrong.*

(MK): *I felt so alone in all this.*

(SA): *I felt so lonely and wished that I could go far away from this place.*

5.3.5.5 Main category: 11 Metaphysical effects

Several participants mentioned the effects of psychological violence that are explicable in the metaphysical context (cf. par. 3.4.5).

Table 5.73: Metaphysical health effects

Main category 11	Sub categories	N=21
Metaphysical effects	Disillusionment with the goodness of the world and its people	4
	Developing a deep dislike for church schools and church authorities	3

Several participants mentioned the effects of psychological violence that are explicable in the metaphysical context. The following direct quotes attest to this:

- **Disillusionment with the goodness of the world and its people**

(SM): *I thought people could be good in this world but now I do not know what to believe anymore.*

- **Developing a deep dislike for church schools and church authorities**

(P) *After what the n... did to me I questioned my respect for the ... church and its authorities. The church I was brought up in with its authorities that I looked up to.*

(S) *I never wish to work in a church school ever again...I love my church but my experiences shook my foundations of faith.*

5.4 Summary of the findings from the qualitative interviews

The direct verbatim quotes from the participants reveal that teachers indeed experience various forms of psychological violence in the schools where they work. These findings corroborate the findings from the research literature in terms of what constitutes psychological violence experienced in the workplace.

These acts emanate from various sources. The sources identified are

- Management of schools to a large extent,
- Colleagues to some extent and also from subordinates in cases of individuals who were in the management.
- Only two individuals mentioned acts that specifically relate to students and none were mentioned from MOE, parents or community.

The negative experiences lasted for a long period. This ranged from a month to a few months and one year to a number of years.

The health effects of these experiences as expressed by the participants were very serious. These included psychological health effects such as paranoia and depression. Some of the participants experienced physical ailments such as severe headaches and heart problems. There were metaphysical and spiritual effects as well. Social effects which are basically socially related included mood changes affecting interpersonal relation and loneliness and being violent towards others. The detailed synthesis of the results is presented in par. 5.8.1.

Psychological violence experiences

The psychological violence experiences from the phenomenological interviews are summarised as follows:

- **Negative acts emanating from the management (cf. par. 5.3.3.1.1)**
 - Structural violence committed against teachers
 - Being overworked and overloaded
 - Experiencing verbal and physical aggression
 - Not being given support

- Being undermined and coerced to engage in certain actions
 - Gossip and lies being spread
 - Being shown cynical behaviour and attitude
 - Lack of transparency on issues of concern
 - Being and victimised
 - Observing favouritism towards other staff members
 - Being isolated and given silent treatment
 - Use of divide and rule
- **Negative acts emanating from the colleagues (cf. par. 5.3.3.1.2)**
 - Exposed to personal derogation and disrespect
 - Being isolated
 - Having one's professionalism attacked
 - Older staff sabotage staff relations
 - Not being accepted
- **Negative acts emanating from subordinates (cf. par. 5.3.3.1.3)**
 - Irresponsible teacher behaviour
- **Negative acts emanating from the students (cf. par. 5.3.3.1.4)**
 - Students behaving badly
- **The amount of time that the psychological violence experiences took (cf. par. 5.3.4)**
 - Psychological violence that lasted for several months (cf. par. 5.3.4.1)
 - Psychological violence that lasted for one year and more (cf. par. 5.3.4.2)
- **The impact of psychological violence on the health of victims cf. par. 5.3.5)**
- **Physical/biological health effects (cf. par. 5.3.5.1)**
 - Getting stress headaches
 - Developing high blood pressure
 - Developing heart problems

- Had eating problems
- Getting ulcers
- Losing of hair
- Experiencing body pains

- **Psychological health effects (cf. par. 5.3.5.2)**
 - Lack of motivation and demoralized
 - Feeling depressed
 - Being aggressive
 - Feeling anxious
 - Having sleep problems
 - Feeling paranoid

- **Spiritual health effects (cf. par. 5.3.5.3)**
 - Finding it difficult to stay focused when praying
 - Questioning the presence of God in bad experiences
 - Questioning what constitutes fairness

- **Social health effects (cf. par. 5.3.5.4)**
 - Mood affecting interpersonal relations
 - Feeling lonely and disconnected

- **Metaphysical effects (cf. par. 5.3.5.5)**
 - Disillusionment with the goodness of the world and its people
 - Developing a deep dislike for church schools and church authorities

5.5 Presentations of the findings from the symptoms checklist

The symptom checklist adapted from Workplace Bullying and Trauma Institute (2003) and Kirsten (2006) was completed by the participants who were interviewed for this part of the study. This helped to further triangulate the findings from the interviews.

The results are divided into physical and psychological symptoms in order to avoid data duplication. While an attempt has been made to categorize these findings, it has to be understood that the health effects are interpreted within the framework of holistic health (cf. par. 3.2). The health effects are actually intertwined and it is the same individuals experiencing them at different levels.

Only a few participants indicated having had the symptom but it never got worse (cf. Annexure J for complete symptoms checklist results). Therefore, only the significant results in the two categories 'had symptom before but it got worse' and 'new symptom' are presented for both physical and psychological symptoms. The findings are presented in the rank order, starting with the most frequently identified symptom to the least identified.

5.5.1 Physical symptoms experienced by the participants (cf. par. 3.4.1; 3.4.1.1; 5.3.4.1)

Physical symptoms refer to those symptoms that are observable in the physical sense. The results presented in Table 5.66 depict the physical health symptoms that the participants suffered from as a result of their experiences. The majority of participants' physical symptoms were new and the second largest group had the symptom before but then it became worse as a result of the experience.

Table 5.74: Physical symptoms that participants had before but became worse

Symptoms	Frequency N=21
Exhaustion leading to inability to function	8
Racing heart rate	7
Feeling edgy, irritable, easily startled and constantly on guard	7
Chest pain	5
Body aches-muscles or joints	5
Hair loss	5
Sharp chest pain after activity/exercise	4
ulcers	4
Skin changes, e.g. shingles, rashes, acne	4
Significant weight change	4
Heart arrhythmia	3
High blood pressure/hypertension	3
Fibromylgia-inflamed joints and connective tissue	2
TMJ(Jaw tightening/teeth grinding	2
Chest pain	2
Asthma or allergies	1

Table5.66 depicts the findings in the rank order of symptoms started with the most identified to the least identified. Nevertheless, even the least identified symptoms are not necessarily the least important. But they need to be understood in their impact on the individual who is experiencing them.

In the category, 'symptom became worse' the most identified symptom was 'exhaustion leading to inability to function' with eight participants having had the symptom and the second largest was 'racing heart beat.' identified by seven participants). Racing heart rate was identified by seven participants and feeling edgy, irritable, easily startled and constantly on guard was also marked by seven participants. Other physical symptoms were marked to a lesser extent with the least identified being asthma and allergies which only on person had identified. It is apparent from the findings that the participants experienced a wide range of serious physical symptoms which allude to the traumatic impact of their experiences.

Table 5.75: New physical symptoms that were experienced

Symptoms	Frequency N=21
Ulcers	15
Sharp chest pain after exercise	11
Body aches- muscles or joints	11
Feeling edgy, irritable, easily startled and constantly on guard	11
Chest pain	10
High blood pressure/hypertension	10
Exhaustion leading to inability to function	8
Heart attack	7
Heart arrhythmia	6
Hair loss	6
Irritable bowel syndrome	6
Skin changes/shingles	6
Significant weight change	6
Chest pain	5
Body aches- muscles or joints	5
Asthma or allergies	5
Fibromylgia	3
Racing heart rate	3

A large majority of the participants experiences new symptoms. Fifteen participants developed ulcers for the first time while eleven had *body aches – muscles and joints* and a further (11)eleven *developed a sharp pain after exercise*. Other symptoms that ranked high in this category are, *high blood pressure/hypertension* and chest pains both identified by ten participants each. *Exhaustion leading to inability to function* 'was identified by eight participants. Seven participants identified 'heart attack' as new symptom. Although it did not rank very high on the list, it is however an extremely severe symptom. Although some physical symptom were identified by fewer participants, for example fibromyalgia – inflamed joints and connective tissue with two participants stating that they had the symptom but it got worse and three experiencing it for the first time, this is still significant given that only a few participants were interviewed and yet this still emerged as a symptom experienced.

5.5.2 Psychological symptoms experienced by the participants (cf. par. 3.5.2; 5.3.5.2)

It is depicted in Table 5.76 that the participants suffered from a myriad of psychological symptoms resulting from their negative experiences. Similarly to the physical symptoms, most of the symptoms had either become worse or were experienced for the first time by the participants.

Table 5.76: Psychological symptoms that were there before and got worse

Symptoms	Frequency N=21
Obsession over details at work	8
Disrupted sleep	7
Feeling edgy, irritable, easily startled and constantly on guard	7
Anxiety, stress, excessive worry	6
Feelings of panic	6
Stress headaches	6
Recurrent memories, nightmares and flashbacks	6
Loss of concentration	4
Use of substances to cope: tobacco, alcohol, drugs, food	3
Feeling depressed	1

In the category 'symptom became worse' eight participants had recurrent memories, nightmares and flashbacks and again eight experienced obsession over details at work. This was followed by 'feeling edgy, irritable, 'easily startled and constantly on guard' identified by seven and again seven participants having 'disrupted sleep'.

Table 5.77: New psychological symptoms that were experienced

Symptoms	Frequency N=21
Needing to avoid feelings, thoughts, and situations that remind you of trauma or a general emotional “flatness”	15
Feeling depressed	13
Anxiety, stress, excessive worry	12
Feelings of panic	12
Disrupted sleep	11
Feeling edgy, irritable, easily startled and constantly on guard	11
Thinking about being violent towards others	11
Loss of concentration	10
Recurrent memories, nightmares and flashbacks	10
Obsession over details at work	10
Stress headaches	9
Compulsive behaviours	6
Use of substances to cope: tobacco, alcohol, drugs, food	5
Shame or embarrassment that led to dramatic changes in lifestyle	5
Suicidal thoughts	3

Most of the psychological symptoms experienced were new, for instance, fifteen participants experienced the symptom *needed to avoid feelings, thoughts, and situations that remind you of trauma or a general emotional flatness*. Depression was marked by thirteen participants. Eleven participants marked *disrupted sleep*. *Feeling edgy, irritable, easily startled and constantly on guard* and *thinking about being violent towards others*. Other symptoms identified by ten participants each are, *loss of concentration recurrent memories, nightmares and flashbacks* as well as *obsession over details at work*. *Stress headaches* were noted by nine participants. Other symptoms had lower ratings with the lowest recorded being *feeling suicidal* with three participants indicating having had this symptom. Although this may seem minimal in terms of numbers, it is however a significant indication that teachers are traumatized in their workplaces and this is a very critical symptom.

5.6 Summary of the findings from the symptoms checklist

The findings from the symptoms checklist largely echo what has been found from the interviews with the same participants. It went to further to provide evidence to the traumatic impact of psychological violence on the health of teachers in the study population. The effects were at both physical and psychological levels.

5.7 Observations from the field

Researcher observation serves an important role in the interview process (Bailey, 2007:1995: 171-172). The researcher called the participants who had agreed to participate in the study. She met them individually and explained the purpose of the study and the ethical issues (cf. Par. 4.12). Having agreed to participate, further appointments were for the interviews to be held.

Some of the participants did not want to be interviewed in the school premises because they felt uncomfortable. Therefore, observing their discomfort the researcher gave them the freedom to decide on the best place where they would feel comfortable. Others were interviewed at their own homes after working hours, while some were interviewed at the researcher's own home after working hours as well. Only four participants were interviewed at the school premises. The setting was appropriate for all the interviews and there were no distractions.

Since most of the interviews were conducted after working hours, the participants were relaxed and willingly responded to the questions. In some cases the appointments had to be rescheduled several times because of the participants' work and family commitments.

The research questions aroused strong emotions from the participants which could be seen from their body language accompanying their statements. It transpired from these interviews that research into their experiences of psychological violence is lacking; for example, one participant commented that ... *you are engaged in a very painful research*. On the basis of the experiences he had related, it was understandable.

It also became apparent that upon interviewing them, the participants felt somewhat happy that their stories will be heard. Some even went further to relate other people's experiences, which was interesting to note, although it did not form part of the research objectives

The researcher observed that, delving into peoples personal and painful experiences as was the case in this study is exhausting. Therefore the interviewing process took longer than it was anticipated, allowing the researcher time in between the interviews to interact with the data and to reflect on her experiences in the field.

5.8 Quantitative and qualitative data: synthesis and discussion of the experiences of psychological violence as work trauma and its impact on teachers' health

In order to answer the research questions that the study set out to achieve, it is imperative to synthesize the findings from both qualitative and quantitative data. The study utilized different research designs during the different stages of the research process as discussed in chapter four. This process served as a further triangulation exercise which helped to validate the results of the experiences of psychological violence and its impact on the health of teachers as gathered from various sources.

Data was gathered from the following sources as depicted in table 5.78

Table 5.78: Sets of data from quantitative and qualitative research

QUANTITATIVE DATA	QUALITATIVE DATA
Descriptive statistics (cf. par. 5.21)	Open question in psychological violence scale (cf. par.5.3.1)
Factor analysis (cf. Par. 5.2.2)	Individual phenomenological interviews (cf. par. 5.3.2)
Practical significance (Effect sizes) (cf. Par. 5.2.3)	Symptom checklist data (cf. par. 5.3.3)
Descriptive statistics from factor analysis(cf. par. 5.2.2.6.1)	Observations from the field (cf. par.. 5.7)

5.8.1 Synthesis and contextualisation of quantitative and qualitative data related to the experiences of psychological violence

5.8.1.1 The prevalence, severity and sources of experienced psychological violence as work trauma

The findings from both the quantitative and qualitative data were compared and merged accordingly:

- **Prevalence and severity of psychological violence experiences**

The following psychological violence experiences deduced from both the qualitative and quantitative data were the most prevalent and severe as well.

- **Structural psychological violence**

Organizationally sanctioned violence was noted as a problem for teachers. This is because of its intrinsic nature which makes it difficult to confront. (cf. par. 5.3.1; 5.2.1.3.1)

- **Verbal abuse and verbal aggression**

Being abused verbally was experienced in the form of gossips, lies and rumours that were spread about the teachers. Being shouted at was deduced from both the survey and the phenomenological interviews (cf. par. 5.3.1.4 & 5.3.2)

- **Personal and professional undermining**

Personal and professional undermining included having one's opinion discounted in meetings and being expected to perform duties that undermine one's professionalism and integrity as a person. It was also observed where teachers were not given due credit or acknowledgement for the good work they have done and also where teachers behaved irresponsibly (cf. par.5.3.2.5; 5.3.1.5 & 5.3.3.1.3).

- **Excessive pressure and workload**

Being put under pressure and excessive workload was noted as a problem as well. This was observed in, for example, the allocation of extra duties for teachers (cf. par. 5.3.1.5 & 5.3.3.1).

- **Lack of support**

Lack of support at work was expressed through the indication that teachers' concerns are ignored and also through failure to address their concerns. It was also noted on the discord between old and new staff members (cf. par. 5.3.1.1 & 5.3.2).

- **Lack of transparency**

Failure to provide the necessary and critical work related information was expressed noted in the lack of transparency on issues of concern and taken (cf. par. 5.3.1.4).

- **Unfair treatment**

Being treated unfairly through observed favouritism towards other teachers as well as failure to treat teachers with respect (cf. par. 5.3.1.4).

- **Behaviour problems by students**

Behaviour problems by students were observed in relation to their lack of interest in their school work (cf. par. 5.3.2.1.4)

- **Lack of parental engagement and community appreciation of teachers' work**

Parents disengagement from their children's education and lack of community appreciation of teachers' work was also expressed (cf. par.5.3.1.3).

5.8.1.2 Sources of psychological violence

The experiences of psychological violence that the study population had emanated from various sources, those being the superiors or management of schools to a large extent, colleagues to some extent and parents, community and students were also identified as potential sources of psychological violence (cf. par. 5.2.1.4).

5.8.2 Synthesis and contextualisation of quantitative and qualitative data related to the impact of psychological violence experiences

In this chapter an attempt has been to incorporate a holistic eco-systemic view of the health and wellbeing and wellness of the human being as a conceptual framework to explain the holistic view of the experience, nature, prevalence and impact of psychological violence as work trauma on teachers' health. This section presents a synthesis of the findings from both the quantitative and qualitative research within holistic eco-systemic view as a conceptual frame work. In order to achieve this, the findings are placed within the specific contexts of human existence as expounded in Kirsten (2001:37-39), Kirsten *et al* (2007:10) and Jordaan and Jordaan (1989:41-42) who postulates that human beings exist and function within four contexts and these contexts are in constant intra and interaction. Theoretically these contexts are separable and yet practically they are inextricably intertwined. A human being is a biopsychosocial and spiritual entity. A detailed description of the holistic eco-systemic view has been given in chapter three (cf. par. 3.2). It is important to note that although the findings are placed within a particular context this does not of necessity mean exclusivity. However it has to be understood that since this study is based on the holistic eco-systemic view of health, wellbeing and wellness (as presented in chapter 1 and chapter 3) the interactive and intra-active nature of human existence within these contexts has to be acknowledged and that some experiences and impact might also directly or indirectly apply in another context

5.8.2.1 The Biological context

It emerged from the findings that the impact of psychological violence as workplace trauma was experienced by the participants in the biological processes context (cf. par. 5.5.1; 5.3.5.1)

Teachers experienced stress headaches as a result of their experiences. Some also developed high blood pressure and heart problems. Other effects included ulcers and eating problems which led to dramatic weight changes. Other noted effects included hair loss and other skin problems triggered by the stress at work. Allergies were also mentioned as well as experiencing body pains.

5.8.2.2 The psychological context

The impact of psychological violence in the psychological context was observed in the intra-psychological processes. Several effects were noted in this context (cf. par. 5.3.5.2; 5.5.2). Teachers felt demoralized and demotivated as a result of their experiences. Some were also depressed. It was further noted that others had diminished self confidence resulting in feeling panicky and anxious. Sleep problems were also noted with some sleeping more while others had developed insomnia from excessive worrying about their circumstances. Related to the issue of diminished self confidence some also developed the symptoms of paranoia. The use of substances to try and cope with their situation was also noted. Having recurrent memories and flashbacks was also noted in this context.

5.8.2.3 Spiritual context

The impact of psychological violence in the spiritual context was noted in the existential processes, such as the meaning in life, inner peace and moral values related to own wellbeing as well respect and compassion for others (cf. par 5.3.5.3).

In this context effects which were mentioned included, lack of focus when praying and questioning the existence of God in unpleasant situations and finally having problems in trying to understand what constitutes fairness.

5.8.2.4 The Ecological context

The impact in the ecological context was seen in the physical environment in which the victims exist for instance the effects were observed in the interpersonal and group relationships. In this context the following effects were noted (cf. par. 5.3.5.4), moods that affected interpersonal relations, feeling lonely and disconnected from the people around and also being violent towards others .

5.8.2.5 The metaphysical context

The impact in this context encompasses aspects related to the symbolic environment. Several effects in this regard were observed for instance serious disillusionment in the goodness of the earth and its people, questioning the presence of God in bad experiences and also questioning what constitutes fairness (cf. par. 5.3.4.5).

5.9 Summary

The findings from both quantitative and qualitative research demonstrate that psychological violence against teachers is indeed prevalent at varying degrees in the schools. The severity in relation to this phenomenon and variation in the nature of such experiences as well as traumatic impact on the teachers occurs in the biological, psychological, spiritual, ecological, and metaphysical contexts. Therefore, the support afforded teachers should take cognizance of this fact. Furthermore, most experiences of psychological violence against teachers emanate from the management; the second largest source is the colleagues followed by parents, community and students.

On the basis of findings presented and discussed in this chapter, the next chapter (Chapter six) presents the guidelines developed for teacher support in order to promote their health.

CHAPTER 6

GUIDELINES FOR TEACHER SUPPORT FOR THE PROMOTION OF THEIR HEALTH

6.1 Introduction

The aim of this chapter is to provide the guidelines for teacher support in order to promote their health. These guidelines have been formulated on the basis of the synthesis of the findings from both the quantitative and qualitative study, as presented in the previous chapter (cf. par. 5.8.1). The guidelines are presented in two parts. The first part consists of guidelines that specifically pertain to the experiences of psychological violence. The second part consists of guidelines that address the impact of psychological violence (cf. par. 5.8.2).

6.2 Guidelines for teacher support for health promotion

The two categories of guidelines are presented hence forth.

6.2.1 Guidelines for teacher support to promote their health: experienced psychological violence as work trauma

The guidelines in this part mainly address the experiences of psychological violence that teachers have had. The experiences from both the quantitative and qualitative data were merged and nine (9) categories were created from the data. Most of the psychological violence experiences emanate from the management and colleagues at school level. According to Everard and Morris (1996:7 (1996:7) the management of schools have a big influence on the working life of teachers in their schools. Thus the value system of the school is shaped by both the school management and colleagues (teachers). They further argue that the behaviours and attitudes of the management towards staff members determine the happiness of staff members, a point alluded to by Calabrese (2000:16). Furthermore, the positive relationships between teachers are also deemed very beneficial to the well being of staff members

The guidelines are presented in relation to the identified issues as follows:

6.2.1.1 Structural psychological violence

Structural violence in the schools is observed in the policies (both written and unwritten) that are intrinsic to the schools which determine how teachers are treated, for instance in cases where the management can make decisions that are detrimental to the development of a particular teacher (cf. par. 5.8.1.1.11; 5.2.1.6).

Kirsten, (2007:10) suggests the following strategies which can be employed to curb this problem.

- Mandatory screening of school management before they get appointed to the senior posts should be undertaken in order to ensure that the right people are on the job;
- A process of 360 degree feedback should be instituted in order to monitor the psychosocial climate in the school so that problems can be dealt with early enough;
- There could also be a compulsory in-service training for the management prior to being eligible for promotion;
- Accountability of school management to the Ministry of Education should be enforced ;
- Enacting health protection and psycho-legal action for teacher support as it relates to psychological violence from the management of schools and all the other stakeholders;
- There should also be a clear grievance procedure instituted within the school system;
- Advocacy work on the existence of psychological violence in the schools with a view to root it out should be undertaken by the Ministry of Education, teachers and communities in partnerships with schools;
- Implementation of national policy against psychological violence occurring in the schools. This should be done following from the research on the nature, prevalence, source and impact of psychological violence on teachers.

These strategies are also related to total quality management system described by Van der Linde (2000, cf. par. 3.6.2.4)

Furthermore, structural psychological violence can be addressed through the establishment of human resource systems. According to Fox and Stallworth (2004) the establishment of human resource systems in the workplace is very critical. These can be instituted by the Ministry of Education. They suggest the following systems:

- Internal conflict management system that can effectively prevent incidents and resolve issues in the workplace;
- Counselling services for the staff members;
- Employee assistance programmes which can deal with issues of employees, from work related to personal issues (cf. par. 3.6.2.3);
- Mentoring program which can involve coaching junior staff members by senior staff. The mentor in this case is a source of information, provides emotional support and offers suggestions in handling unpleasant or difficult situations;
- Mediation as a form of conflict resolution can also be put in place. The mediator will assist in that conflicts which arise can be dealt with before they become a major problems.

According to Cathie and So Lin (2009) the following key strategies are recommended and can be employed to deal with structurally sanctioned psychological violence

- **Zero tolerance:** The policy of zero tolerance to psychological violence in the school can be adopted. This can focus on all forms of psychological violence, for example bullying, harassment, intimidation etc.
- **Policies:** These policies should present the set standards for acceptable behaviour and make it clear to individuals what their responsibilities are towards each other
- **Strong leadership:** Actions of leaders and senior managers are crucial. Hence it is important for them to take a leading role in tackling issues of psychological violence. This will be exemplary to the employees.
- **Intervention:** Early and informal action to resolve complaints and conflicts is central to effective intervention. It is always best to deal with an issue earlier for all parties concerned.
- **Training:** It is important to institute awareness raising programmes and training because these are important in achieving a lasting change, but to ensure their success and effectiveness, they need to be mandatory and interactive.

- **Trade Unions and human resource:** Psychological violence at work can also be tackled through a partnership of management, trade unions representatives and human resource practitioners.

6.2.1.2 Guidelines concerning verbal abuse and verbal aggression

Verbal aggression manifests itself in the form of shouting at an individual, gossiping and spreading lies about the person (cf. par. 2.3.1 & cf. par. 5.8.1.1.2).

There are various strategies suggested in the literature that can be utilized in the schools in Lesotho to address this issue. Experts can be invited to train teachers and the management in the use of emotional intelligence. According to Goleman (1995) in Armstrong (2004:74) emotional intelligence is the capacity for recognizing ones' own feelings and those of others, for motivating ourselves, for managing emotions well in ourselves as well as others. Therefore, when people have developed emotional intelligence they are less likely to engage in these destructive behaviours because they will be able to manage their feelings and emotions in such a way that they are expressed appropriately and effectively. This results in people who are able to work together, without major issues or conflicts (Cahill *et al.*, 1995:2, Sheehan, 1999). Armstrong (2004:74) further argues that the person who is emotionally intelligent understands his or her own strengths and weaknesses and knows that it is more productive to manage own emotions instead of being led by them or being let by other people's emotions.

Four components of emotional intelligence by Goleman (*in Armstrong 2004:75-76*) from which teachers and the management can benefit, are as follows:

- **Self management:** This is an ability to control and redirect disruptive impulses and moods and regulate one's own behaviour.
- **Self awareness:** This is the ability to recognize and understand one's moods, emotions and drives as well as their effects on others.
- **Social awareness:** This is the ability to understand the emotional makeup of other people and possessing the skill in treating people according to their emotional reactions.

- **Social skills:** These refers to being proficient in managing relationships and building networks to get the desired result from others and reach personal goals and the ability to find common ground and build rapport.

Cahill *et al.* (1995:2) further suggests the following specific steps for development of emotional intelligence in the workplace.

- increasing your own self awareness, self control and ability to empathize with others;
- delivering praise to employees and colleagues;
- owning ones' mistakes and avoiding blame;
- understanding the importance of being assertive in interactions with employees rather than engaging in passive or passive/aggressive behaviour;
- recognizing signs and symptoms of personal stress in oneself and others;

Armstrong (2004:76-77) suggests the following specific steps that someone in the management can follow to develop their emotional intelligence:

- asses the requirements of jobs in terms of emotional skills;
- assess individuals to identify their level of emotional intelligence, get a 360 degree feedback (getting feedback from colleagues, clients and subordinates as well as one's boss) can be a powerful source of data; A point also made by Peyton (2003:27) and (Kirsten, 2007;10)
- gauge readiness which means ensuring that people are prepared to improve their level of intelligence;
- motivate people to believe that the learning experience will benefit them;
- make change self-directed by encouraging people to prepare a learning experience which fits their interests, resources and goals;
- focus on clear manageable goals – the focus must be on immediate, manageable, steps bearing in mind that cultivating a new skill is gradual;
- with stops and starts; the old ways will reassert themselves from time to time;
- prevent relapse by showing people how they can learn lessons from the inevitable relapses;
- give performance feedback;

- encourage practice; remembering that emotional competence cannot improve overnight;
- provide models for desired behaviours;
- encourage and reinforce emotional intelligence by creating a climate that rewards self-improvement;
- evaluate through the establishment of sound outcome measures and then assess performance against them.

Individual teachers can also employ the following strategies suggested by Armstrong (2004) which are related to emotional intelligence in order to manage verbal aggression by management and colleagues.

- They need to develop their self awareness. This will help them to know their strengths and their weaknesses and to also to recognize the behaviours and attitudes in themselves which are likely to trigger verbal aggression;
- to evaluate and enhance their own communication skills, which will also help them to recognize signs and symptoms of aggression;
- identify behaviour within themselves and others that may contribute to aggression and violence;
- Be willing to learn and practice emotional intelligence.

6.2.1.3 Guidelines concerning personal and professional undermining (cf. par. 5.8.1.1.1)

Peyton (2003:27) argues that *employees need to feel valued, respected and appreciated in terms of appropriate core values*. In cases of personal and professional undermining this does not occur. Additionally, Fullan and Hargreaves (1992:86) assert that the management and employees need each other. Their interaction is critical for success in any workplace. Therefore the management and teachers are encouraged to create an environment which helps them to sustain and motivate each other through out their careers.

This can be realized through fostering interactive professionalism which entails the following:

- *discretionary judgment should be the core of professionalism;*

- encouraging collaborative work cultures, where staff value each others' contribution ;
- norms of continuous improvement where new ideas are sought inside and outside one's setting should be set;
- Reflection in, on and about practice in which individuals and personal development is honored along with collective development and assessment;
- Greater mastery efficacy and satisfaction in the profession of teaching.

In order to achieve interactive professionalism, teachers can be trained or provided with psycho education which helps them to attain the following strategies as indicated by Fullan and Hargreaves (1992:86):

- locate, listen to and articulate your inner voice; This means that teachers should not be complacent about their contribution in the school system;
- practice reflection in action, on action and about action. This cycle should allow for improvement if need be;
- develop risk taking mentality; This involves trying something different and this could also involve changing one's mind set regarding certain issues;
- trust processes and people, this helps one to have respect for other people;
- appreciate the total person in working with others;
- commit to working with colleagues, this helps to affirm them and oneself as well;
- redefine ones' role to extend beyond the classroom;
- balance work and life by identifying factors outside the workplace which aggravate the experienced stress in the workplace;
- staff members should push and support heads and other administration to develop interactive professionalism;
- commit to continuous improvement and perpetual learning;
- monitor and strengthen the connection between one's development and students' development.

In addition to issues raised in the foregoing paragraphs, it is also important for teachers to build resilience against personal and professional undermining in order to prevent destruction at both personal and professional levels.

According to Armstrong, (2004:9-10) individuals deal with the stressors and challenges of their roles in different ways to be able to bounce back. Resilient individuals are able to solve their problems with a calm and a confident, sense of being able to overcome adversity. They need to approach challenges with learning agility. According to Howard and Johnson, 2000 (*in* Martin (2005:118), resilience is the process of or capacity or outcome of successful adaptation irrespective of challenging or threatening circumstances.

The following strategies for building resilience have been suggested and teachers and the management of schools can benefit from them:

- become part of a civic group;
- assisting others in time of need. This helps one to gain the benefit of learning what others need and what they may also need during difficult times;
- it is critical to do a perspective audit. This involves taking a look at the positive elements in a situation and beyond the current challenge;
- focusing on what one can learn is also important. Thus people cannot change what is happening to them, but can change how they respond;
- managing one's goals and Identifying the one thing one can do next to further his/her goals in a situation;
- identify what is holding one back. This may involve removing barriers that create unnecessary stress;
- engage in a supportive, pleasing and nurturing activity;
- meditating and keeping a reflective journal could also help to clarify own feelings and to reflect on what one did in previous situations that are parallel to the current challenge and use lessons learned to overcome the challenge at hand;
- asking others what they did in similar situations. Learn from their trials and challenges.

6.2.1.4 Guidelines concerning experiencing excessive workload and pressure (cf. par. 5.8.1.1.1)

Experiencing excessive pressure and workload such as having to meet impossible deadlines and working long hours is a problem for teachers. According to Naylor, (2001:4) there are many studies which reflect teacher fatigue as a result of high workload and diverse demands on teachers. Therefore, the issue of excessive load and

overwork has to be addressed at both management and collegial levels. Armstrong (2004:178) states that with respect to excessive pressure and workload people differ in terms of how they respond to it. However, this has to be managed in order to maximize productivity of the employees. The following guidelines are suggested:

- Schools should adopt specific processes that address the allocation of duties and workloads for staff members.

Armstrong (2004:179) suggests the following specific strategies which can be adopted in the schools:

- In order to reduce role ambiguity and to give people more autonomy it is important that roles for each staff members are clarified;
- This means that moving beyond what one is expected to do should be a personal choice;
- Reasonable and achievable standards of performance should be set; thus the minimum standards to be achieved by teachers should be indicated in specific terms. This also means that the demands made on teachers should be tailored to their capacities and capabilities;
- If an individual is stressed due to excessive pressure, the management could readjust the demands to a reasonable level by either redesigning the job or assigning the duties to somebody else;
- Dialogue between the management and staff about work and pressures should be encouraged. This can play a preventative role of dealing with concerns before they become problems;
- Developing work-life balance policies which acknowledge other roles that staff members have to play outside the workplace, such as being parents and partners; the schools can achieve this by allowing flexibility in the allocation of duties for teachers without necessarily compromising the standards of achievement but ensuring that teachers' time on task is bringing positive results;
- Individual teachers should be given opportunities for professional individual counselling in order to help them cope.

On the other hand the management and teachers can be trained on time management because managing one's time is critical to completing tasks on time in order to avoid undue pressure to meet deadlines (Covey & Heller, 2001:41).

The following strategies advanced by the same authors on time management can be of benefit to teachers:

- Prioritizing their tasks and setting the deadlines for achievement of specific tasks;
- Critically analyzing how they use their time;
- Organizing themselves by using a diary, and setting the tasks they have to complete in terms of weeks and then breaking them down into manageable daily tasks;
- Sticking to the time table that an individual has set for himself ;
- Managing superiors and colleagues by educating them about avoiding unnecessary interruptions.

It is further important for teachers to realize that without proper time management, they may try to accomplish too many varied tasks haphazardly which defeats their efforts in that they end up with too many incomplete tasks which can aggravate the pressure they feel in the workplace.

Inviting professionals to train teachers on the development of assertiveness is another strategy. According to Schabrag *et al.* (2007:249) assertiveness is defined as behaviour that shows confidence as well as firmness, without being unnecessarily aggressive or confrontational. Assertiveness allows the person to cope with his or her circumstances. Armstrong (2004:29) states that behaving assertively places such a person in a position to be able to influence people properly and to react to others in a positive manner.

Fontana (1994:66) suggests the following actions for building assertiveness:

- One should anticipate occasions when someone is likely to make an unacceptable demand upon him and should therefore be ready;
- One should rehearse answers to oneself and practice them out loud;
- One should not make excuses when he/she says no. One may also choose to give a reason if they want, however, if a person decides to provide a reason, he/she keep it short and to the point.

- When one has said no, it is important to keep to it. This is because once one rescinds his decision people will soon get the idea that they can work him to change his mind;
- When one has said no, it is important not to feel guilty about it. A person is the best judge of what he can and can not be expected to do.

According to Davis, Eshelman & McKay (2000:198), Schlebusch (2000:159), Weiten, Lloyd, Dunn and Hammer (2006:230), Schabracg *et al.* (2007:593), Davis *et al.* (2000:198), Schlebusch (2000:159) and Weiten *et al.* (2006:230) it is important for the person to develop personal assertiveness and Schabracg *et al.* (2007:593) quotes the following goals of a personal assertive training:

- saying no to clients, superiors or colleagues and not agreeing to engage in activities or projects that may seem exciting and yet no time is available to undertake such;
- sticking to one's priorities and limits;
- counteracting task disturbances;
- explanation of one's dilemmas and impossibilities;
- dealing with stereotyping;
- dealing better with one's anger and avoiding unnecessary conflicts.

Armstrong (2004) quotes the following as characteristics of assertive statements:

- are brief and to the point;
- one should indicate clearly that one is not hiding behind something or someone, and that one is speaking for her/himself, using words like ... I think that ... I believe that ...;
- they are not overweight with advice;
- use questions to find out the views of others and to test their reactions to their behaviour;
- distinguish between fact and fiction;
- are expressed positively and not dogmatically;
- they indicate that one is aware that people have different points of view;

- express if necessary, negative feelings about the effects of other people's behaviours on one pointing out in dispassionate and factual terms the feelings aroused in him by such behaviour and suggesting the behaviour you would prefer;
- point out politely to people but firmly the consequences of their behaviours.

It is important to note that development of assertiveness should not necessarily border on insubordination or irresponsibility by teachers but it should be able to strengthen their resolve and assist them to execute their duties effectively. Hence it is important to consider how Sutherland and Cooper (1990:232) termed the development of assertiveness as claiming one's rights expressed as follows:

- right to make mistakes;
- right to set own priorities ;
- right to have one's needs considered equally important as other people's needs;
- right to refuse requests without guilt ;
- right to express oneself without violating other's rights;
- right to judge one's behaviour, thoughts and emotions and to be responsible for the consequences.

Sutherland and Cooper (1990:233-234) formulated the following five stage approach to assertiveness training:

- Identify one's level of assertiveness, for example how comfortable are you in asking for favours from people or refusing requests?
- Establishing a hierarchy of difficulty, this involves writing a list of problems and identifying problem areas on the basis of the level of difficulty in handling them. After this process then the long term and short term goals can be set.
- Introduction of systematic assertiveness training, involving teaching the following skills
 - **Broken record:** This is a calm repetition of what one wants to do, over and over. It teaches the person to be persistent, to also ignore verbal manipulation and irrelevant logic.

- **Fogging:** Receiving criticism in a comfortable manner without any anxiety or defense. Thus acknowledging that your critic may have a point but that you are the best judge of what you do.
- **Negative assertion:** This is accepting mistakes without apologizing. This enables you not to feel defensive and anxious about your mistakes or to deny them.
- **Workable compromise:** It involves offering compromise to the other person if your self respect is not affected as a result.
- **Non verbal communication:** This is achieved through good eye contact, standing or sitting comfortably, talking in a strong and steady voice neither mumbling nor shouting.
- Rehearsing appropriate behaviours with help from friends or colleagues and setting realistic goals for oneself
- Transferring learned behaviour back into the workplace and keeping a daily record of events and how you responded on the basis of this. Then one can evaluate his/her progress and areas of importance

6.2.1.5 Guidelines concerning lack of support (cf. par. 5.8.1.1)

Schabracg *et al.* (2007:249) argues that when people perceive that they have social support in their workplaces, it helps to enhance and reinforce their personal resources for dealing with stressful situations. Furthermore, it helps to counteract the effects of unpleasant experiences they face (cf.par.3.2). Support in the schools is valuable for both newly employed teachers and teachers who have been in the service longer. This support needs to come from the colleagues and the management of schools. The following guidelines are suggested:

Providing support and building team work has been identified in dealing with this particular issue. According to Cahill *et al.* (1995) the key components to social support in the workplace are supervisory support and coworker support. This assertion has also been made by Cassidy (1999:70) and Kaplan (1996:164). Following from this, the following strategies for provision of support are suggested:

- Training in proactive supervision. This supervisory approach emphasizes positive feedback, employee growth and development, open lines of communication, and strong levels of support.

- Training in conflict resolution and team building. This helps to foster belonging and empathy. When people have a sense of belonging they are unlikely to engage in destructive relationships.
- Appropriate use of teachers' retreats can enable teachers and the management to share issues of concern.

Garner (in Steyn & Van Niekerk, 2005:115) articulates the following actions of providing support and building teamwork:

- Developing clear elevating goals;
- Having a results-driven structure;
- Competent team member;
- Unified commitment;
- Establishing standards of excellence;
- Provision of external support and recognition;
- Principled leadership.

Dunham (*in Steyn & Van Niekerk, 2005:115*) and Staat (2004:133) alluded to the same guidelines as follows:

- provision of mutual support;
- working together to get the job well done;
- creating a relaxed atmosphere – creative, friendly, trusting and humorous;
- evidence of achievement and celebration of success.

In order to make the new teacher feel valued and helping them to understand what is expected of them and how to fit in the new job setting induction is one of the most valuable investments. This requires planning in advance by both the management and senior staff members of the school. A number of strategies have been suggested from the research literature.

Brock and Grady (*in Steyn and Van Niekerk, 2002:236*) who formulated the following actions for providing support for employees:

- introduce the new teacher to his/her new colleagues;

- take him/her on tour of the school;
- explain his/her duties;
- tell him/her about the school policy and other information;
- give him background information about the community;
- explain the school rules and procedures;
- provide information on record keeping, location of resources and school activities;
- Introduce the new teacher to mentors and attend to their immediate concerns.

Finally, Lucas (2005) presents the following framework which describes the broad principles underlying teacher support, which is applicable to both beginning teachers and long serving teachers. Within this particular this framework effective teacher support embraces the following ideals:

- provides continuity between pre-service training, induction and continued professional growth for teachers;
- is recognized as a shared responsibility by all staff members;
- provides school based support as a primary focus;
- is firmly embedded in workplace culture. However this can be revised as need arises given that the workplace culture could be a source of problems;
- is highly supportive of beginning teachers and negotiated on the basis of individual needs and goals;
- has a positive influence on school culture by promoting an ethos of inquiry and professional learning;
- provides benefits for mentoring and supervising teachers;
- must link into professional pathways plans for the beginning teachers, mentors and supervisors.

Individual teachers also need to develop their own support systems and Dolan (2007:146-147) indicates the following approach to building personal support:

- Finding people that one can trust and who care about him;
- The best time to develop a support system is before one has a problem and needs support;
- Support system is best developed by providing support to others;

- It is very important to disclose only that which one is comfortable about. Sometimes venting the feelings triggered by an experience is more important than the details of the story;
- It is important to turn to people that one feels comfortable with;
- When seeking support judge oneself as weak or losing control because this happens to people at some point in their lives.

6.2.1.6 Guidelines concerning lack of transparency (cf. par. 5.8.1.1.1)

In order to address the issue of transparency, various strategies that have been presented can actually work:

- On providing support and building team work (cf. par. 6.2.1.5);
- Another guideline to consider is fostering of professional interactive professionalism (cf. par. 6.2.1.3).

This concern can also be addressed through working in partnerships as advocated by Cathie and So Lin (2009). This involves the representation of the unions, human resource specialists and the management on decision making forums which will enable the flow of communication from and to employees about issues that concern them.

6.2.1.7 Guidelines concerning unfair treatment (cf. par. 5.8.1.1.1)

Being treated unfairly through observed favouritism, towards other teachers and failure to treat teachers with respect, being victimised and isolated have been identified (cf. par. 6.2.1.2.5). Another relevant guideline relates to the development of emotional intelligence and strengthening ones assertiveness (cf. par. 6.2.1.2).

6.2.1.8 Guidelines concerning behaviour problems by the students (cf. par. 5.8.1.1.1)

Behaviour problems by students have been identified as a problem for teachers. In order to address this concern it is suggested that implementing effective classroom management can benefit the students and teachers and consequently create a healthy environment in the school.

According to Zuckerman (2007:4) classroom discipline is a problem for teachers in the schools. Therefore the ability to prevent and manage behaviour problems by students is of prime importance. The following strategies have been articulated by Payne (2008:48-52):

- Build relationships of respect which involves open communication on issues of concern and demonstrating acceptable behaviour towards each other;
- Make beginning learning relational ;
- Teach students to speak in formal language;
- Assess each student's resources;
- Teach the hidden rules of the school;
- Monitor progress and plan interventions;
- Translate the concrete into abstract ;
- Teach students how to ask questions;
- Forge relationships with parents ;

6.2.1.9 Guidelines concerning lack of parental engagement and community appreciation of teachers' work (cf. par.5.8.1.1.1)

In order to address this issue it is important to encourage the community and the parents to take interest and participate in the activities of the school According to Riccio (1999:1 *in* Modise (2003:215), it is important for the school to play a pivotal role in ensuring that parents support their children. The following strategies were mentioned:

- inviting parents to the parents' meetings at school;
- encouraging such parents to serve in the school governing body;
- if the parents are unemployed, advising them to do voluntary work at school;
- encouraging such parents to attend school events such as fundraising functions, school sports and athletic meetings ;
- encouraging parents to acknowledge and praise their children achievements and efforts ;
- keeping the parents informed about the progress of their children and encouraging a system of home visits.

Berthelsen and Walker (2008:35) state that when parents are invited to partake in their children's education it conveys to them that they are welcome and valued.

On the other hand community involvement in the development of the schools in their communities is very critical. They can also be invited to the school to make a meaningful contribution in some of the activities mentioned above:

- Being invited to attend school events such as fundraising functions, school sports and athletic meetings;
- Being invited to attend and partake in cultural day celebrations held by the schools in their specific areas;
- Encouraging community members to do voluntary work at school

6.2.2 Guidelines for teacher to promote their health: impact of psychological violence as work trauma on teachers' health

6.2.2.1 Guidelines concerning biological/physical health impact (cf. par. 5.8.3.1)

Due to the interaction of the five contexts of human existence, addressing issues in one context has the potential to alleviate the problems experienced in another context. Therefore in order to avoid unnecessary repetitions the related guidelines mentioned in another context will be referred to accordingly

In addressing this concern it is crucial to deal with the stressors in the workplace, medical check up to alleviate the symptoms is another strategy. Schools can also do the following to ameliorate the physical health impact of Psychological violence:

- Needs assessment in the schools to establish the extent of the physical health effects that teachers are experiencing as a result of psychological violence
- On the basis of the gathered information plan stress management workshops by the health personnel where teachers will have an opportunity to learn about their various illnesses and how they can help themselves deal with them in addition to getting medical help.
- Workshops on healthy living can be held for teachers.

The guidelines in this section are developed in relation to the effects on health of the participants. The guidelines are developed in relation to psychological, ecological, biological, metaphysical and spiritual as health effects.

6.2.2.2 Guidelines for addressing psychological health impact (cf. par. 5.8.3.2)

Various effects on the psychological context have been synthesized from the findings (cf. par. 5.8.3.2).

6.2.2.2.1 Guidelines concerning lack of motivation and demoralization

Motivation of staff in the workplace is very important if goals have to be successfully achieved (this motivation which has been eroded by psychological violence experiences) (Armstrong, 2004:204). This refers to both intrinsic motivation which is internally generated and extrinsic motivation which is influenced by external circumstances. In addressing this concern there are various strategies for motivating staff members in the school.

Mills (*in* Steyn and Van Niekerk, 2002:162-163) outlines the following guidelines for managers to motivate teachers at work:

- Beware of the basic human needs and motivation practices.
- This calls for striving to understand that human behaviour is driven by needs. Therefore it is critical to have insight into work-related needs and knowledge of the factors that influence motivation such as issues of psychological violence as experienced by teachers in the school.
- Put the motivation in the context of the education.

This calls for understanding that motivation is also affected by one's post level and the climate in an organization. Therefore building a culture of respect is very crucial for keeping teachers motivated.

- It is important for the managers to remember that individuals differ and therefore their needs structures may differ as well. This means that there is a need to determine the motivational level of each teacher and match the motivational tools to the level of individual teachers.

- Knowing ones' staff. This calls for creation of opportunities to know the members' needs aspirations and frustrations. This will prevent demotivation.
- Watch out for factors that threaten existing needs satisfaction.
- Initiating changes that will further the satisfaction of human needs.
- Managers should first earn respect and credibility before developing the motivation process.
- Managers should also develop a culture that upholds the human rights as enshrined in the constitution of the country.

6.2.2.2.2 Guidelines concerning feeling depressed and paranoid

Feeling depressed and paranoid can defeat the purpose for which teachers are at work in their specific schools. Therefore it is important to manage this problem. The following Strategies are suggested:

Lardner (*in* Jonker, 2005:117-118) indicates the following principles addressing issues that lead to depression and paranoia:

- **Identifying an issue of concern**

It is critical for the teacher to identify the root cause of his/her problem. Taking the time to identify the serious stressors at work will help one to come up with a strategy for managing them.

- **Recognizing what one can change**

People find comfort in patterns, even if those patterns are stressful. It may be necessary to change those patterns.

- **Reducing the intensity of one's reactions**

It is important to put things into perspective. Teachers can be encouraged to take a break; walk out of the room; accepting that no one's perfect, coworkers, teachers, oneself. Step back and ask oneself if what's bothering one deserves all the attention and energy. Then work on the application of rational principles which stipulate that no one is perfect including us and that the world is also not perfect either.

- **Re-examine one's attitudes and obligations**

It is critical to stop and examine one's priorities in life and not to forget to name oneself as one of those priorities.

Teachers should also ask themselves what they would expect from other people, and expect the same from oneself. They should learn to forgive themselves and others when, on occasion, it is important to acknowledge that one can not meet those standards because he/she is human. They should also learn to accept help. Hand over responsibilities to others and letting them handle them their way, not 'your' way, this is important for building trust and making other people feel an important part of the process.

- **Organizing oneself**

They should manage their time well and allow time to rest. If a person works better in the morning it is best to plan big tasks for morning or evening if a teacher prefers that.

- **Developing emotional supports and using them**

Seek assistance from professionals (health care, counsellors, and religious advisors) who are experienced and comfortable in giving support. Most of all it is important to be one's best friend accepting failure as an important part of learning.

- **Expressing one's feelings**

Sometimes it is necessary to let out one's emotions in own privacy.

Programmes in cognitive behavioural psycho education can be developed for teachers. This may help them to rethink their beliefs and attitudes and perceptions of rationality.

6.2.2.2.3 Guidelines concerning being aggressive

In order to deal with this concern (cf. par. 6.2.1.2) See developing assertiveness and training in the development of emotional intelligence.

6.2.2.2.4 Guidelines concerning feeling anxious

Jonker (2005:117) states that worrying and anxiety must be changed into problem solving and one of the first important steps is to take one step at a time and to learn how to relax. The following strategies have been suggested:

- Meditation: It relaxes the mind and the body.
- Therapeutic deep breathing: Practicing slow, deep breathing techniques can help promote a sense of well being.
- Physical relaxation: This involves increasing one's awareness of being in his/her body rather than focusing on the external distractions in ones' life. Through heightened body awareness, a person can gain a sense of relaxation.
- Guided imagery: Certain images stimulate the parasympathetic nervous system to experience feelings of calm and wellbeing.

According to Dolan (2007:132) relaxation techniques are very popular in dealing with psychological effects of stress such as tension and related symptoms.

Various techniques have been found to help relieve tension and help one to relax, which is a major problem for people who are anxious: In addition to meditation, he adds yoga which, is assumed to comprise the following:

- Concentration techniques
- Breathing exercises
- Dietary guidelines
- Several stationary or moving poses

The following are indicated benefits of yoga and other relaxation techniques which teachers can learn as outlined by Dolan (2007:134).

- Improves flexibility and muscle joint mobility;
- Strengthens and tones muscles;
- Increases stamina;
- Relieves back pain;
- Increases vitality and improves brain function;
- Improves digestion and elimination;

- Decreases cholesterol and blood sugar levels;
- Increases circulation;
- Boost immune response.

6.2.2.2.5 Guidelines concerning having sleep problems

It is important for teachers to learn to rest and de-stress (cf. par. 6.2.2.5). The following are suggested guidelines by Teacher support network (2000a) as a way in which teachers can deal with the effects of their negative experiences in the workplace and to regain control of their life.

- Recognizing the problem. The most important step is to recognize that the problem exists. This requires taking a step back from one's life and to think about how you are feeling. If a person does not have the time to assess the impact of negative experiences on himself, it means such a person is stressed.
- Take a few moments to calm down. This helps one to take stock of the underlying causes of one's stress and how to deal with it.
- Identify and deal with the causes sometimes one will know intuitively what's making him stressed; other times it may seem like everything is going wrong and one are unable to identify the cause of your stress.
- This involves a change to one's lifestyle which will assist him/her to assert control over one's life and adjust the way one thinks about one's situation. Small shifts can quickly free up creative energy and increase a person's options and stay proactive.

This could entail the following practical strategies:

- List everything that is bothering one and then work out which things one can control and which one cannot. Ignoring those that one cannot influence and work on practical solutions to the others.
- Taking up a physical activity and will give one a valuable breathing space;
- Muscular tension often parallels and exacerbates mental stress. Relaxing physically at the end of the day is important.
- It is important to avoid increasing consumption of alcohol or caffeine.
- Doing something that forces one to think actively about something else.
- Getting a good night's sleep. Relaxing before going to bed in order to avoid lying awake and worrying.

Teacher Support Line (2000b) offers some basic strategies on managing stress. Here are their guidelines:

Teachers should recognize the stress within them and should not wait until they are in crisis.

- Identify what stresses them. Change what they can and work realistically with what they cannot.
- Identify achievable goals and then take 'small steps' approach to achieve them.
- Teachers tend to say 'yes'; and it is critical not to say 'yes' if what they actually mean is 'no'.
- Teaching demands a lot from teachers. Every now and then teachers should put themselves first.
- Healthy environments are important. Teachers should take active responsibility for their school.
- They should protect their own time. Relaxation and leisure time are not treats but they are essential ingredients in a healthy lifestyle.
- Teachers should keep things in perspective. They should also remember their achievements and the positive impact they have in their school

6.2.2.3 6.2.2.3 Guidelines concerning spiritual health impact (cf. par. 5.8.3.3)

Spiritual health involves a state where one's spirituality has positive impact on one's life. An individual's spirituality can have either positive or negative impacts on their lives.

According to Schlebusch (2000) the following are some of the indicators of spiritual wellness:

- feeling alive and aware of the moment, and engaging fully with living one's life which gives a sense of being *switched on*;
- being content with what one is currently doing, and where it may lead to;
- being aware of having finished a task well, a sense of completeness with matters;
- having a sense of purpose and energy;
- ability to take the time to reflect and think things over, not feeling that some problems are best avoided and should not be spoken about;
- a sense of balance and control in one's life;
- being able to take 'time out' without feeling guilty;

- a sense of peace and wellbeing.

The following guidelines for spiritual well being are advanced by Schlebusch, (2000:137):

- Engaging in prayer could help to change negative perceptions and beliefs and turn them into positive ones.
- Relaxation exercises such as yoga and meditation can also help when one's spiritual and metaphysical well being are compromised.
- Emotional catharsis which involves an explosive release of troubled and deep rooted states of suffering deep within us. Emotional catharsis can be in the form of crying, for example.
- Mobilizing of the unknown energies and higher power.
- Imagery and visualization can also be used to address the concerns in the spiritual context. Imagery and visualization are developed from the discovery that a person's imagination affects his inner state of being. As such there are images that stimulate the parasympathetic nervous system to induce the feelings of calm and well being.

6.2.2.4 Guidelines concerning (ecological) social health impact

The effects of psychological violence in the social context for example, loneliness and feeling disconnected from the people around you, moods affecting interpersonal relationships, being violent around others (cf. par. 5.8.3.4). In order to address this issue,

- See training in the development of assertiveness(cf. par. 6.2.1.2).
- See training in the development of emotional intelligence. (cf. par. 6.2.1.2).

Furthermore this concern can be addressed through assisting teachers to develop human relationship skills. This can be done by psychologists and counsellors.

Teachers can be trained in issues of social cohesion which is defined by Wilkinson and Marmot (2003:22) as the quality of social relationships and the existence of trust, mutual obligations and respect in society. This can help to protect people and their health. It can also help teachers to deal with issues that affect their social health.

Another guideline could be the development of constructive communication skills. Covey and Heller (2001) recommend the following essential communication skills. Teachers can use them to alleviate and deal with effects in the social context of their existence:

- ability to put oneself in the other person's shoes;
- the ability to communicate one's understanding of the opposing view;
- the ability to listen empathetically which includes showing personal integrity;
- the ability to interpret the meaning of body language and facial language;
- apologizing if necessary.

6.2.2.5 Guidelines concerning metaphysical health impact (cf par. 5.8.3.5)

The impact in the metaphysical context centre around issues related to religious, cultural philosophical and ideological orientation in which people make meanings of their reality and what lies beyond their existence (cf. par. 6.2.2.3). These are described by Jordaan and Jordaan (1998:809) as unformalised constructions that emanate from people's disjointed, contradictory and simplistic longings and statements about life. In the context of this study these emanate from teachers' experiences of psychological violence.

It is therefore important for teachers to do the following:

- Reexamining their attitude to life;
- Consider the fact that their individual experiences should not necessarily distort their metaphysical existence;
- Re examining their belief system and accept that they may have been wrong in their perceptions and expectations of how people should behave towards each other.

6.3 The implementation of teachers' health promotion model

Various health promotion models have been advanced in the literature. The Indian health Service Vision for comprehensive school health is recommended for adoption and adaptation for use in Lesotho secondary and high schools because it is very comprehensive and includes the important aspects of health and well being in the schools.

The comprehensive school health promotion has the following programmes:

- School health education/instruction
- School health services
- School health environment
- Physical education
- School food and nutrition services
- Guidance and counselling
- Staff wellness
- Family, school, community partnerships

- **Health Education/Instruction**

Teachers should offer holistic health education to students through the relevant curriculum. This should provide students with the skills and knowledge which will assist them to make decisions that are best for them. This has an indirect positive impact on teachers' health in that with, students making the right decisions and their holistic health improved, teachers will work in a healthy environment that does not put undue pressure on their own health.

- **School Health Services**

This should include provision of school health services for teachers and students which would include mental health services, treatment of health problems and prevention and control of diseases. This service can be delivered by personnel such as school nurses, school psychologists, community and public health nurses.

- **School Health Environment**

The formulation and adoption of psychological violence policy by the Ministry of Health and Social Welfare at all school levels. This would focus on the importance of providing a safe, social and physical environment. A safe school in this context is a school that promotes healthy personal growth, and healthy interpersonal relationships which ensure freedom from abuse and violence. This calls for a healthy collaboration between community, parents, business and the school to ensure health promotion in the schools. Teachers working in this kind of

environment are less likely to experience serious health impact because everyone would be working towards a common goal of maintaining a healthy work environment.

- **Physical Education**

The mind and body integration is acknowledged in this model. The development of lifelong fitness habits should be fostered. This helps to enhance confidence and skills. Provision of outlets from stress, development of goals and decision making skills and emphasizing self confidence and personal discipline enables people to gain a positive sense of self worth. This will lead to a healthy behaviour from the students which will further reduce stress on teachers. Teachers involved in physical education should have a relevant qualification.

- **School food and nutrition services**

This focuses on the provision of positive nutrition education for teachers. This can be provided by the qualified personnel from the Ministry of Health and Social Welfare. Furthermore, the school feeding system can be run in such a manner that it upholds the principles of a healthy diet utilizing the services of government employed dieticians. When their nutritional needs are taken care of, students are less likely to be disruptive and truant therefore teachers working with these students will be happy and healthy due to the fact that there will be less stress emanating from the students

- **Guidance and counselling**

A school counselling program provides prevention and intervention programs, career awareness and skill building tools for success in work, relationships and life. Professional staff within the school counselling program should provide early detection of potential problems and provide life skills training for teachers and students.

- **Staff Wellness programmes**

The comprehensive school health model promotes the involvement of school staff in their own personal wellness. Teachers are encouraged to participate in activities such as stress management, smoking cessation, nutrition classes, exercise and

positive support programs. Examples of "worksite" wellness for the staff include providing healthy food choices for teachers, providing an environment free of alcohol and other drugs, providing a smoke free environment, sponsoring weight control classes, and offering self-improvement classes. These include the provision of stress management activities in the school, such as stress audit exercises and how to deal with unpleasant experiences in the school.

- **Family, School, Community Partnerships**

In a community where schools are situated everyone would be encouraged to work together in harmony and to maintain balance and assure general good health for everyone.

6.4 Summary

The guidelines presented in this chapter have focused on the individual and organisational strategies that can be used to promote the health of teachers. These guidelines have addressed teacher support for health promotion issues by focusing on the experienced psychological violence as evidenced from both the qualitative and quantitative findings from the study. The second part of guidelines has addressed teacher support for health promotion on the basis of impact that psychological violence has had on the health of teachers. Although the literature on which the guidelines are derived, is mainly from the first world countries the researcher attempted to generate guidelines that can be application to the situation in Lesotho. Therefore the presented guidelines are relevant and can be used. Finally, the adapted model of health promotion fits well with the Lesotho education system and may be used successfully as well.

The next chapter presents summary, limitations, conclusions and recommendations of the study

CHAPTER 7

SUMMARY, LIMITATIONS, CONCLUSIONS AND RECOMMENDATIONS OF THE STUDY

7.1 Introduction

The aim of this chapter is to provide summary, limitations, conclusions and recommendations of the study. The summary of the research is provided in section 7.2 while the limitations of the study are discussed in section 7.3. In 7.4 the conclusions are provided and in section 7.5 the recommendations are presented and finally, the concluding remarks are made in section 7.6.

Although research on psychological violence against teachers in Lesotho is lacking, the research literature attest to the crisis teachers face globally. Teachers are exposed to different types of abuse and intimidation in the workplaces. As a result of their experiences they are unhappy and stressed. This has an impact on the execution of their duties because these experiences cause serious injury to their health. They suffer from physical and psychologically related symptoms due to the negative experiences they are subjected to. Furthermore, this has impact on their interpersonal relationships as well. Therefore, this results in an unhappy workforce of teachers, that is demotivated and is likely to quit the profession and to seek better working conditions elsewhere.

This calls for the creation of awareness through relevant research, of the prevalence and extent of the problem of traumatic impact of psychological violence on the workers' health. This will eventually aid in the creation of a non-toxic work environment leading to the realisation of health promotion of teachers.

Based on the foregoing argument it became imperative that the situation analysis be undertaken by investigating the prevalence, nature, sources and experience of psychological violence and impact of psychological violence on the health of teachers in Lesotho and to also provide guidelines for health promotion of teachers. In order to achieve the stated objectives the course of this study unfolded as follows:

Chapter one: This chapter presented the orientation and background to the study which includes statement of the problems and the aim of the study.

Chapter two: This chapter focused on the exposition of psychological violence and other core concepts of this phenomenon. Furthermore, the concept of trauma and work trauma specifically was described.

Chapter three: In this chapter, a holistic eco-systemic view of health, wellbeing and wellness as a conceptual framework for understanding the experiences and the impact or effects of psychological violence on the health of teachers is described. This is because of the focus on all contexts of human existence adopted in this study, namely that human beings exist within five contexts all of which are in constant interplay (biological, psychological, spiritual, ecological, and metaphysical) and the impact of psychological violence is experienced in all the contexts .

The chapter also focused on the exposition of the concept of health promotion which includes the approaches, principles and models of health promotion. It also explores workplace health promotion, different approaches and some interventions.

Chapter four: It presented a detailed description of the entire empirical research process. It described both the quantitative and qualitative research methods which were utilized in this study. This included the description of the study population and the method of data collection and data analysis for the experience nature prevalence and impact of psychological violence as work trauma and its impact on the health of teachers in Lesotho.

Chapter five: This chapter presented the data analysis, interpretation and the contextualization of the findings of the quantitative and qualitative data. A synthesis of quantitative and qualitative data on the experiences of psychological violence and on the impact of psychological violence has been discussed. Another approach to synthesis of the findings involved the contextualization of the findings on the impact of psychological violence on the health of teachers within the conceptual framework of holistic eco-systemic approach to health well being and wellness. The findings from this process indicate that teachers experience the impact of psychological violence within the five the contexts of their existence.

Chapter six: This chapter presented the guidelines for teacher support for their health promotion. Two categories of themes were merged from both the qualitative and quan-

titative research findings, being the experiences of psychological violence and the and impact of psychological violence on the health of the victims. The two categories of guidelines that were developed are, firstly, guidelines for teacher support concerning teachers' experiences of psychological violence and secondly, guidelines for teacher support concerning the impact of psychological violence on the health of victims.

7.2 Limitations of study

During the research process the researcher experienced the following limitations:

- 7.2.1** The research was conducted during the last quarter of the year therefore access to some of the schools was not possible for conducting the quantitative research.
- 7.2.2** Due to the length of the questionnaire, which was ten pages long it was not possible for the researcher to sit and wait while the respondents completed it, yet if that was done it would have guaranteed a higher return rate than what was finally received.
- 7.2.3** It would have been ideal to conduct the study in the very rural areas of the country and then compare the results with those of the urban areas however, financial and time constraints would not allow for such an endeavour.
- 7.2.4** The participants for the phenomenological individual interviews were mostly females and it would have been interesting to have an equal number of males and to find out if similar experiences and effects of psychological violence arise.
- 7.2.5** The response from the school principals was very low because most of them were very busy with other administration duties apart from their teaching responsibilities.
- 7.2.6** Literature on psychological violence against teachers in the school is lacking in Lesotho therefore, the literature guiding this study emanated mostly from the first world countries.
- 7.2.7** Due to the fact that this was the first study of its kind in Lesotho, there was no benchmark for comparison with other studies.

7.3 Findings of the study

The findings with regard to the aims of the study are as follows:

7.3.1 Sub-Hypothesis 1

Psychological violence in the workplace leads to work trauma

The nature of psychological violence occurring in the workplace is characterized by negative acts that are meted out to the victims by others in their workplaces. They are also persistent and the victims are often helpless to stop them. These negative acts also persist over a long period of time. Furthermore, they are characterized by the power imbalance between the victim and the perpetrator and the intentionality of the perpetrator as well. The victim does have a subjective perception of being abused in his or her workplace (cf. par. 2.3). With this kind of exposure, the victims of psychological violence are affected in the manner that they are not able to carry out their normal healthy functions (cf. par. 2.10.2; 2.10.4). Sub-Hypothesis 1 is therefore accepted for this study.

7.3.2 Sub-Hypothesis 2

Psychological violence as work trauma has severe impact on the health of the victims

The experience of psychological violence has a negative impact on the health of victims.

This is evident in the impact identified in the five contexts of human existence, firstly, in the biological context the impact shows in the physical ailments that are reported by the victims (cf. par. 3.4.1). Secondly, the impact in the psychological context is seen in the psychological ailments that are presented by victims of psychological violence (cf. par. 3.4.2). The spiritual health impact is also observed when the victims are disturbed in certain areas of their life such as, meaning in life, inner peace and moral values related to their wellbeing and respect as well as compassion for others (cf. par. 3.4.3). The impact in the ecological context is observable in the way interpersonal and social relationships are affected as a result of an individual's experience of psychological violence (cf. par. 3.4.4). Finally, in the metaphysical context the impact is seen in the problems that victims experience in the religious, cultural philosophical and ideological

ways in they make meaning of their reality and what lies beyond their existence (cf. par. 3.4.5). Sub-Hypothesis 2 is therefore accepted in this study.

7.3.3 Sub-Hypothesis 3

Teachers in the secondary and high schools in Lesotho experience psychological violence as work trauma in their workplace

The findings in this study attest to the fact that teachers in the secondary and high school in Lesotho experienced psychological violence in their workplace. This is a result of findings from both the quantitative and qualitative data analysis. The expressed and identified a range of negative experiences such as excessive pressure and workload, verbal abuse and verbal aggression and many others (cf. par. 5.2.1.2; 5.2.1.2.1; 5.2.1.3; 5.2.2.6.1; 5.3.3; 5.7).

Sub-Hypothesis 3 for this study is therefore accepted.

7.3.4 Sub-Hypothesis 4

The sources of psychological violence as work trauma are the management/ superiors in the schools, colleagues of equal status, students, parents and the community.

Through the analysis of the open ended question and the individual phenomenological interviews the following categories of the experiences of negative acts of psychological violence with their related categories were identified:

- Negative acts emanating from colleagues (cf. par. 5.2.1.4; 5.3.3.1.1)
- Negative acts emanating from the Management (cf. par. 5.2.1.4, 5.3.3.1.2)
- Negative acts emanating from the subordinates (cf. par.5.3.1.5, 5.3.3.1.3)
- Negative acts emanating from the students (cf. par. 5.2.2.1.4, 5.3.3.1.4).
- Negative acts emanating from the parents and the community (cf. par. 5.3.1.3).

Sub-Hypothesis 4 for this study is therefore accepted.

7.3.5 Sub-Hypothesis 5

Psychological violence as work trauma has severe impact on the health of teachers in Lesotho

The findings of the study revealed that the respondents experienced serious impact on their health as a result of psychological violence. The effects of psychological violence were experienced with the five contexts of human existence and they experienced intense physical illnesses. The following effects were deduced from the phenomenological interviews to a large extent and some from the data collected through the psychological violence scale (cf. par. 5.3.5).

- The impact in the biological context were many and varied. For instance, stress, headache, heart problems and body pains (cf. par. 5.2.2.6; 5.8.2.1; 5.5.1; 5.5.2; 5.8.5.1).
- The impact on the psychological context involved the experience of various serious psychological problems such as depression, paranoia and anxiety (cf. par. 5.2.1.5; 5.3.5.2; 5.8.2.2).
- In the spiritual context several effects were also identified which included finding it difficult to focus on prayer (cf. par. 5.3.5.3; 5.8.2.3).
- In the social/ecological context the impact on the interpersonal relationships among other effects. (cf. par. 5.3.5.4; 5.8.2.4).
- There were effects experienced in the metaphysical context as well which included serious disillusionment in the goodness of the earth and its people, questioning the presence of God in bad experiences and also questioning what constitutes fairness (cf. par. 5.3.5.5; 5.8.2.5).

Sub-Hypothesis 5 for this study is therefore accepted.

7.3.6 Sub Hypothesis 6

Guidelines can be developed to address the experiences and the impact of psychological violence against teachers

Two sets of categories of data were synthesized from the findings of the quantitative and qualitative findings. These are the experiences of psychological violence and the

second one is the impact of psychological violence on the health of victims (cf. par. 6.2). Therefore the guidelines were developed on the basis of these two categories of data.

- **Guidelines for teacher support to promote their health: experienced psychological violence (cf. par. 6.2.1)**

The guidelines were developed concerning the following experiences of psychological violence:

- Structural psychological violence (cf. par. 6.2.1.2.1)
- Verbal abuse and verbal aggression (cf. par. 6.2.1.2.2)
- Personal and professional undermining (cf. par. 6.2.1.2.3)
- Excessive workload and pressure (cf. par. 6.2.1.2.4)
- Lack of support (cf. par. 6.2.1.2.5)
- Lack of transparency (cf. par. 6.2.1.2.6)
- Unfair treatment of teachers (cf. par. 6.2.1.2.7)
- lack of parental engagement and community appreciation of teachers' work (cf. par. 6.2.1.2.8)

- **Guidelines for teacher support for health promotion of teachers: impact on health (cf. par. 6.3)**

In the context of impact on health the guidelines were developed to address the following concerns:

- Guidelines for addressing psychological health impact (cf. par. 6.3.1)
- Guidelines concerning lack of motivation and demoralization (cf. par. 6.3.1.1)
- Guidelines concerning feeling depressed and paranoid (cf. par 6.3.1.2)
- Guidelines concerning being aggressive (cf. par. 6.3.1.3)
- Guidelines concerning feeling anxious (cf. par. 6.3.1.4)
- Guidelines concerning having sleep problems (cf. par. 6.3.1.5)
- Guidelines concerning the physical/ biological health impact of psychological violence against teachers (cf. par. 6.3.2.1)
- Guidelines concerning (ecological) social health impact (cf. par. 6.3.3)
- Guidelines concerning spiritual and metaphysical health impact (cf. par. 6.3.4)

Sub-Hypothesis 6 for this study is therefore accepted

7.3.7 Main Hypothesis

Psychological violence as work trauma has severe impact on the health of teachers in Lesotho

The experienced psychological violence by teachers in the secondary and high schools in Lesotho who participated in this study has proven to impact negatively on their health (cf. par. 5.8.1; 5.8.2).

The main sub hypothesis was therefore accepted for this study.

7.4 Recommendations

The following recommendations are based on the research findings and the literature control:

7.4.1 General recommendations

- 7.4.1.1** There is need for teacher support through programmes that are aimed at empowering them and taking care of their needs particularly related to the impact of psychological violence. This includes a provision of counselling and other psychological service as need arises.
- 7.4.1.2** The management of schools needs to work with staff members to establish a clear vision and mission and to plan their activities and allocation of duties in school so that all teachers feel equally responsible for what goes on in their workplace.
- 7.4.1.3** The management of schools should be encouraged to be more open to all teachers in their schools particularly on matters of mutual interest.
- 7.4.1.4** The management should be encouraged to set up a training plan for staff members and the modus operandi for such training opportunities which will allow all teachers to benefit.
- 7.4.1.5** Schools should encourage more involvement of the parents and the community in the activities of the school and to also provide information on the teaching and learning in the schools in their respective communities.

- 7.4.1.6** A consultant on holistic health promotion can be engaged through the Ministry of Education to provide cognitive behavioral psycho-education for teachers in the schools. This could also include educating teachers on emotional intelligence.
- 7.4.1.7** Holistic health promotion as a field of study could be made compulsory as part of the teacher training programmes at tertiary level in the country.
- 7.4.1.8** Resident workplace health promotion specialist can be employed in the Ministry of Education to help assist in the development of a national policy on holistic health promotion which would be infused in the human resource management department and enforced in all the ministries.
- 7.4.1.9** Free counselling services could be provided for individuals who are already damaged by their experiences of psychological violence in the workplace.
- 7.4.1.10** Legal machineries that include grievance procedures could also be put in place in order to address issues of human rights abuses in the form of psychological violence in the workplace.

7.4.2 Recommendations for future research/areas for further research

- 7.4.2.1** similar research can be undertaken in the higher education institutions in Lesotho to investigate the experiences and impact of psychological violence on the university lecturers and college tutors.
- 7.4.2.2** This similar research could also be undertaken in both the preschool and primary schools in the country.
- 7.4.2.3** A comparative study could also be undertaken to compare the results between the urban districts and rural districts to see if there are any differences in terms of their experiences and the impact of psychological violence.
- 7.4.2.4** A research study focusing on the implementation and evaluation of the suggested guidelines can be undertaken.

7.5 Conclusion

Psychological violence as work trauma was experienced by teachers and the severe impact was felt in all the contexts within which they exist, namely the biological, psychological, spiritual, ecological and metaphysical contexts. From the findings the main source of psychological violence experiences was the management of the specific schools in which the teachers worked. The second largest source identified was the colleagues. The other categories, namely the parents, teachers and the community were identified to a lesser extent. The study also revealed that both men and women are victims and perpetrators of psychological violence therefore gender was not found to be a determining factor for psychological violence. Finally older teachers who have also been in the teaching service for a long time experience more psychological violence than their younger counterparts who have been in the service for a shorter period. On the basis of the findings the guidelines aimed at supporting teachers for promotion of their health were formulated. Nevertheless the implementation and evaluation of these guidelines is beyond the scope of this study.

It is envisaged that this investigation including the recommendations made will be of great value to the Ministry of Education, parents' interest groups, health officers, doctors, psychologists, counsellors, non governmental organisations and teachers to play a preventative and curative role to sustain the holistic health of teachers in Lesotho.

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**ANNEXURE B: LETTER OF INTRODUCTION TO THE PRINCIPALS OF
SECONDARY AND HIGH SCHOOLS IN MASERU**



NORTH-WEST UNIVERSITY
YUNIBESITHI YA BOKONE-BOPHIRIMA
HOORDHRES-UNIVERSITEIT
POTCHEFSTROOM CAMPUS

Private Bag X06, Noordbrug
South Africa 2522

Tel: (018) 299-2000
Fax: (018) 299-2999
Web: <http://www.nwu.ac.za>

Faculty of Educational Sciences
Tel: (018) 299 1863
Fax: (018) 299 1909
E-Mail: dean@feds@nwu.ac.za@nwu.ac.za

The Principals
Secondary and High Schools
Lesotho

Dear Sir/ Madam

6 November 2007

LETTER OF INTRODUCTION: MS A.M. MATSELA

I am the promoter of ms Matsela. She has registered in 2006 for a full time Ph.D in Educational Psychology with this University. The title of her study is:

Psychological violence as workplace trauma impacting on teachers' health in Lesotho: guidelines for teachers support for health promotion.

Ms Matsela has already presented a paper at the BOLESWANA Conference held in July in Lesotho on her research. She has since participated in a research group in the design and processes involved in developing a scientific instrument in order to collect the data related to her study. She is currently in the process of doing field work in Lesotho in order to collect her data with this instrument. I am most satisfied with her progress and I hope that you will enable her to conduct research in your institution of learning.

You are most welcome to contact me if you have the need to do so.

Yours sincerely

A handwritten signature in black ink, appearing to read 'G.J.C. Kirsten'.

Dr. G.J.C. Kirsten
Senior Lecturer & Educational Psychologist



ANNEXURE C: PSYCHOLOGICAL VIOLENCE SCALE

Teachers` questionnaire Questionnaire number

Dear Sir/Madam

This anonymous questionnaire is intended to find out about your work experiences in the school. The information you provide will be treated with strict confidentiality with absolutely no personal reference to you whatsoever. It will be used solely for purposes of researcher's academic work and will not in anyway prejudice you. You are therefore kindly requested to take a few minutes to complete it. Please mark the applicable columns with an **X**.

SECTION A: PERSONAL BIOGRAPHIC INFORMATION

1. AGE COHORT

20 – 24	1
25 – 29	2
30 – 34	3
35 – 39	4
40 – 44	5
45 – 49	6
50 – 54	7
55 – 59	8
60+	9

2. GENDER

MALE	1
FEMALE	2

3. MARITAL STATUS

SINGLE	1
MARRIED	2
DIVORCED/SEPARATED	3
WIDOWED	4
OTHER	5

4. POSITION IN SCHOOL/INSTITUTION

MANAGEMENT	1
TEACHING STAFF	2

5 WORK EXPERIENCE

1 year	1
2 – 5 years	2
6 – 10 years	3
11 – 15 years	4
16 – 20 years	5
More than 20 years	6

6. EMPLOYED BY

Ministry of Education	1
School Board	2

7. LOCATION OF SCHOOL

URBAN	1
RURAL	2
SEMI RURAL	3

SECTION B: EXPERIENCES FROM THE WORKPLACE

The next page shows a list of experiences emanating from the workplace and the following parts:

PREVALENCE: For each of the statements, please indicate to what extent you have been exposed to an experience, by marking the applicable column with an **X** on a scale from 0 to 3.

Never

Seldom

Often

Very often

SEVERITY: Indicate, in your opinion, the severity of your experience on a scale from 0 to 4 as follows:

Not experienced

1. *Not severe*

2. *Slightly severe*

3. *Severe*

4. *Extremely severe*

SOURCE/PERSON/PERSONS RESPONSIBLE: Identify in this column the source or responsible for your experiences. You may mark **more than one source**. Person/s responsible are numbered from 1 to 8 as follows:

1. *Ministry of Education*

2. *School Board*

3. *Superiors at my specific school*

4. *Colleagues of equal status*

5. *Subordinates*

6. *Students*

7. *Parents*

8. *Community*

To what extent have you been exposed to the following ?	A. PREVALENCE <i>Indicate if experienced and frequency of experience on a scale from 0 to 3 with an X</i>				B. SEVERITY <i>Indicate severity on scale from 0 to 4 by marking applicable column with an X</i>				C. SOURCE/PERSON/S RESPONSIBLE <i>Indicate source: You may mark more than one source with an X</i>								
	Never	Seldom	Often	Very often	Not experienced	Not severe	Slightly severe	Severe	Extremely severe	Ministry of Education	School Board	Superiors at my school	Colleagues of equal status	Subordinates	Students	Parents	Community
1. Excessive pressure to produce more work	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
2. Given unreasonable deadlines	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
3. Exposed to unmanageable workload	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
4. More tasks/work assigned to you as opposed to other staff at similar post level	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
5. Necessary Information/equipment/ documents intentionally hidden	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
6. Ignored or excluded from conversations	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
7. Excluded from staff social occasions	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
8. Intentionally refused what one is entitled to e.g. sick or study leave, time-off, or training	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
9. Your opinion intentionally ignored	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
10. Goals to be achieved at work changed without being informed	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8

To what extent have you been exposed to the following?	A. PREVALENCE Experience & Frequency 0 to 3				B. SEVERITY Indicate severity on scale from 0 to 4				C. SOURCE/(PERSON/S RESPONSIBLE) Indicate source: You may mark more than one source with an x								
	Never	Seldom	Often	Very often	Not experienced	Not severe	Slightly severe	Severe	Extremely severe	Ministry of Education	School Board	Superiors at my school	Colleagues of equal status	Subordinates	Students	Parents	Community
11. Your efforts persistently undervalued	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
12. Continuously demoralized	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
13. Your responsibilities removed without being told or consulted	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
14. Exposed to hints that you must quit your job.	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
15. Persistent attempts to belittle and undermine your work	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
16. Unjustifiably criticized	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
17. Work excessively monitored	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
18. Humiliated in front of colleagues	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
19. Threatened with the use of discipline or competence procedures	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
20. Ordered to do work that is below your level of competence	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
21. Repeatedly reminded of your mistakes and errors	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
22. Not given due credit/ acknowledgement for your work	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8

To what extent have been exposed to the following?	A. PREVALENCE Experienced & Frequency 0 to 3				B. SEVERITY Indicate severity on scale from 0 to 4				C. SOURCE/(PERSON/S RESPONSIBLE) Indicate source: You may mark more than one source with an x								
	Never	Seldom	Often	Very often	Not experienced	Not severe	Slightly severe	Severe	Extremely severe	Ministry of Education	School Board	Superiors at my school	Colleagues of equal status	Subordinates	Students	Parents	Community
23. Your personal integrity undermined	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
24. Intentional destructive sarcasm used against you	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
25. Verbal abuse within and outside school/institution	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
26. Non-verbal abuse within and outside school	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
27. Inappropriate jokes made about you	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
28. Persistently teased and made fun of in front of students or colleagues	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
29. Rumors and malicious gossip spread about you	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
30. Ignored when approaching others	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
31. Faced with unfriendliness/ hostility when approaching others	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
32. Insulted by offensive remarks	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
33. Faced with threatening behavior e.g. finger pointing, invasion of personal space, showing, blocking the way	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
34. Shouted at	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8

To what extent have you been exposed to the following?	A. PREVALENCE Experienced & Frequency				B. SEVERITY Indicate severity on scale from 0 to 4				C. SOURCE/(PERSON/S RESPONSIBLE) Indicate source: You may mark more than one								
	Never	Seldom	Often	Very often	NOT experienced	Not severe	Slightly severe	Severe	Extremely severe	Ministry of Education	School Board	Superiors at my school	Colleagues of Equal status	Subordinates	Students	Parents	Community
35. Insulting remarks on your work and background	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
36. Personal property vandalized e.g. cars	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
37. Threatened through the use of electronic media e.g. cell phones/Internet	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
38. I am cursed and sworn at	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
39. I am threatened with physical harm	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
40. Attempts to undermine your authority	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
41. Humiliated in front of learners or students	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
42. Exposed to dominating behavior from others at work	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
43. Exposed to unfair verbal threats and intimidation	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
44. Coerced into doing things that you feel uncomfortable about	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
45. Blamed unfairly when things go wrong	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
46. Experienced others 'teaming up' against you	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8

To what extent have been exposed to the following?	A. PREVALENCE Experienced & Frequency				B. SEVERITY Indicate severity on scale from 0 to 4				C. SOURCE/(PERSON/S RESPONSIBLE) Indicate source: You may mark more than one source								
	Never	Seldom	Often	Very often	Not experienced	Not severe	Slightly severe	Severe	Extremely severe	Ministry of Education	School Board	Superiors at my school	Colleagues of Equal status	Subordinates	Students/Learners	Parents	Community
47. Having decisions that affect your work directly taken without prior consultation	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
48. Complaints fall on deaf ears	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
49. Complaints are met with retaliation or 'punishment'	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
50. Falsely blamed for errors or mistakes	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
51. Exposed to the 'silent treatment'	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
52. Intentionally separated from others	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
53. Campaigns launched against you	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
54. Undesirable work assigned as 'punishment'	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
55. Work output disregarded despite evidence of quality and high standards	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
56. Abuse of the evaluation process through misinformation about your performance	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
57. Inputs in meetings being discounted by remarks (for example: 'that's silly')	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8

To what extent have you been exposed to the following?	A. PREVALENCE Experienced & Frequency 0 to 3				B. SEVERITY Indicate severity on scale from 0 to 4				C. SOURCE/(PERSON/S RESPONSIBLE) Indicate source: You may mark more than one source with an x								
	Never	Seldom	Often	Very often	Not experienced	Not severe	Slightly severe	Severe	Extremely severe	Ministry of Education	School board /Council	Superiors at my specific school	Colleagues of Equal stat	Subordinates	Students	Parents	Community
58. Singled out to perform unreasonable tasks	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
59. Credit for work being stolen by others	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
60. Deliberate non- performance by others to impact negatively on your work.	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
61. Deliberate attempts to set you up for failure	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
62. Humiliated in front of the public	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
63. Exposed to stress-inducing behavior from others at work	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8

SECTION C: RESPONSE TO SOME OF THE EXPERIENCES

On the following Section follows a list of experiences that **you might engage in**. Please indicate in the applicable columns to what extent you engage in an experience as well as the severity of the experience by marking the applicable columns with an **X**.

To what extent do you engage in the following?	A. PREVALENCE <i>Experienced & Frequency</i> 0 to 3				B. SEVERITY <i>Indicate severity on scale from 0 to 4</i>				
	Never	Seldom	Often	Very often	Not experienced	Not severe	Slightly severe	Severe	Extremely severe
64. I avoid the workplace due to negative circumstances there	0	1	2	3	0	1	2	3	4
65. I do not feel like going to work due to negative circumstances there	0	1	2	3	0	1	2	3	4
66. I am occupied with/or rethinking the detail of negative events at work	0	1	2	3	0	1	2	3	4
67. I experience reduced motivation due to negative circumstances at work	0	1	2	3	0	1	2	3	4
68. I experience job dissatisfaction caused by negative circumstances at work	0	1	2	3	0	1	2	3	4
69. I experience an increase in physical ailments due to circumstances at work	0	1	2	3	0	1	2	3	4
70. I have feelings of resentment and bitterness due to negative acts at work.	0	1	2	3	0	1	2	3	4

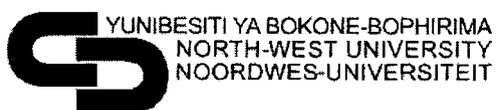
Please state any other unpleasant acts that you have experienced at work apart from those stated in the questionnaire:

I would like to invite anyone who has had unpleasant experiences in the workplace and would like to share those experiences with me in confidentiality to contact me on the following telephone/Cell number **Malineo Matsela: 58975628.** **NB** You can just send me an sms and I will call you back. Alternatively you can write your contact details on the spaces provided below and I will get back to you. Please note that you do not have to give your name unless you want to. This is part of my academic research work on the wellness of teachers in the workplace. I would like to once again assure you that all the information requested will remain anonymous and will be treated with respect and strict confidentiality. I appreciate your contribution to this study.

Your Telephone/cell numbers _____

Thank you very much for your precious time

ANNEXURE D: STATISTICAL CONSULTATION SERVICES LETTER



Privatebag X6001 Potchefstroom 2520
Tel (018) 299 1111 Fax (018) 299 2799
<http://www.puk.ac.za>

Statistical Consultation Service

Tel: (018) 299 2550

Fax: (018) 299 2557

3 November 2008

To whom it may concern

Re: Thesis Ms. A.M. Matsela, student number 20457952

We hereby confirm that the Statistical Consultation Service of the North-West University has analysed the data and assisted with the interpretation of the results.

Kind regards



DR. S M ELLIS (Pr. Sci. Nat)

Head Subject Specialist

ANNEXURE E: DESCRIPTIVE STATISTICS RESULTS

Teachers` questionnaire Questionnaire number

Dear Sir/Madam

This anonymous questionnaire is intended to find out about your work experiences in the school. The information you provide will be treated with strict confidentiality with absolutely no personal reference to you whatsoever. It will be used solely for purposes of researcher's academic work and will not in anyway prejudice you. You are therefore kindly requested to take a few minutes to complete it. Please mark the applicable columns with an **X**.

SECTION A: PERSONAL BIOGRAPHIC INFORMATION

1. AGE COHORT

Age Cohort	Percentage (%)
20 – 24	9.2
25 – 29	21.8
30 – 34	16.3
35 – 39	20.8
40 – 44	10.5
45 – 49	9.2
50 – 54	5.4
55 – 59	4.8
60+	2.0
Missing value	1

2. GENDER

Gender	Percentage (%)
MALE	33.6
FEMALE	66.4
Missing values	9

3. MARITAL STATUS

Marital status	Percentage (5)
SINGLE	27.7
MARRIED	61.0
DIVORCED/SEPARATED	5.1
WIDOWED	5.5
OTHER	0.7
Missing values	3

4. POSITION IN SCHOOL/INSTITUTION

Position in school/institution	Percentage (%)
MANAGEMENT	13.0
TEACHING STAFF	87.0
Missing values	8

5. WORK EXPERIENCE

Work experience in years	Percentage (%)
1 year	17.2
2 – 5 years	21.4
6 – 10 years	21.3
11 – 15 years	17.4
16 – 20 years	21.3
More than 20 years	10.7
Missing values	5

6. EMPLOYED BY

Employer	Percentage (%)
Ministry of Education	83.6
School Board	16.4
Missing values	3

7. LOCATION OF SCHOOL

Location of school	Percentage (%)
Urban	54.5
Rural	10.4
Semi rural	35.1
Missing values	7

SECTION B: EXPERIENCES FROM THE WORKPLACE

The next page shows a list of experiences emanating from the workplace and the following parts:

PREVALENCE: For each of the statements, please indicate to what extent you have been exposed to an experience, by marking the applicable column with an X on a scale from 0 to 3.

Never

Seldom

Often

Very often

SEVERITY: Indicate, in your opinion, the **severity** of your experience on a scale from 0 to 4 as follows:

Not experienced

1 *Not severe*

2. *Slightly severe*

3. *Severe*

4. *Extremely severe*

SOURCE/PERSON/PERSONS RESPONSIBLE: Identify in this column the **source or responsible** for your experiences. You may mark **more than one source.** Person/s responsible are numbered from 1 to 8 as follows:

1. ***Ministry of Education***
2. ***School Board***
3. ***Superiors at my specific school***
4. ***Colleagues of equal status***
5. ***Subordinates***
6. ***Students***
7. ***Parents***
8. ***Community***

To what extent have you been exposed to the following ?	A. PREVALENCE <i>Indicate if <u>experienced</u> and <u>frequency of experience</u> on a scale from 0 to 3 with an X</i>				B. SEVERITY <i>Indicate severity on scale from 0 to 4 by marking applicable column with an X</i>					C. SOURCE/PERSON/S RESPONSIBLE <i>Indicate source: You may mark more than one source with an X</i>							
	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
1. Excessive pressure to produce more work	19.8	27.8	32.6	19.8	18.4	25.3	26.4	18.8	8.1	18.6	10.1	50.5	17.6	4.4	15.5	7.7	4.7
2. Given unreasonable deadlines	39.0	32.0	16.0	13.0	36.9	27.9	16.0	14.7	4.5	10.11	7.1	3.7	4.7	7.1	6.4	1.6	6.7
3. Exposed to unmanageable workload	38.0	31.2	17.9	13.0	34.9	22.4	20.3	13.8	8.6	50.5	46.1	40.6	41.0	1.3	16.9	12.5	3.1
4. More tasks/work assigned to you as opposed to other staff at similar post level	48.2	22.9	18.7	10.2	43.3	22.2	19.2	11.5	3.8	17.6	7.1	6.7	8.1	20.0	23.7	12.2	3.3
5. Necessary information/equipment/documents intentionally hidden	57.9	22.1	12.0	8.0	53.5	18.3	12.9	9.4	5.9	17.6	1.7	1.3	1.3	2.7	3.7	2.7	0.3
6. Ignored or excluded from conversations	53.2	26.2	12.6	8.0	51.4	23.5	13.5	7.6	4.0	15.5	4.7	5.7	3.7	2.0	2.7	1.0	1.0
7. Excluded from staff social occasions	81.2	12.3	5.0	1.5	75.7	14.1	3.1	4.9	2.2	8.10	4.7	2.0	1.0	1.0	2.0	0.3	0.3
8. Intentionally refused what one is entitled to e.g. sick or study leave, time-off, or training	70.1	15.5	9.3	5.2	65.1	10.8	10.4	8.4	5.1	5.0	0.0	1.0	1.0	0.3	1.0	0.0	0.0
9. Your opinion intentionally ignored	43.8	32.4	13.1	10.7	41.8	27.2	11.5	12.3	7.3	4.7	4.7	39.6	18.9	3.0	0.3	1.6	1.0
10. Goals to be achieved at work changed without being informed	41.2	24.7	20.3	13.8	39.2	19.8	12.5	15.6	12.9	3.3	10.5	48.8	11.8	1.6	3.0	0.0	1.3

To what extent have you been exposed to the following?	A. PREVALENCE <i>Experience & Frequency 0 to 3</i>				B. SEVERITY <i>Indicate severity on scale from 0 to 4</i>					C. SOURCE/(PERSON/S RESPONSIBLE) <i>Indicate source: You may mark more than one source with an x</i>							
	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
11. Your efforts persistently undervalued	36.8	29.2	22.7	11.3	34.0	24.8	17.5	15.3	8.4	10.1	12.2	43.0	20.6	4.7	12.5	7.11	2.10
12. Continuously demoralized	40.2	21.8	18.4	19.6	38.1	22.9	15.7	14.4	9.0	5.0	8.8	34.2	15.9	3.7	10.8	4.0	2.0
13. Your responsibilities removed without being told or consulted	59.0	19.3	11.7	10.0	57.0	14.5	11.3	11.3	5.9	2.3	5.7	38.6	6.1	2.0	2.3	1.0	0.3
14. Exposed to hints that you must quit your job.	71.8	13.8	7.2	7.2	65.4	12.4	7.0	8.2	7.0	4.7	6.4	24.0	8.8	2.7	3.7	0.3	2.0
15. Persistent attempts to belittle and undermine your work	43.7	28.7	17.7	9.9	41.0	25.0	12.5	12.9	8.6	4.7	7.1	31.1	25.4	5.0	8.1	3.3	4.7
16. Unjustifiably criticized	42.9	29.6	15.8	12.7	38.8	24.0	16.0	10.0	11.0	3.3	4.0	33.8	22.3	3.7	6.4	5.7	4.4
17. Work excessively monitored	34.2	35.3	16.2	14.3	31.2	29.1	20.9	13.2	5.6	3.7	3.7	45.7	10.8	1.3	1.3	1.3	0.3
18. Humiliated in front of colleagues	59.7	24.3	6.8	9.1	56.0	16.0	13.0	9.0	6.0	2.3	3.7	30.1	12.5	2.0	1.0	0.6	0.3
19. Threatened with the use of discipline or competence procedures	67.7	17.2	8.4	6.7	62.0	15.0	12.0	8.0	3.0	4.7	9.4	29.8	4.7	1.3	2.0	1.3	1.0
20. Ordered to do work that is below your level of competence	64.7	21.9	9.2	4.2	62.1	14.8	11.7	8.2	3.1	3.7	5.7	30.1	7.7	0.3	1.3	1.3	0.3
21. Repeatedly reminded of your mistakes and errors	52.1	24.0	17.0	7.0	50.0	17.2	14.5	11.3	7.0	1.6	5.0	1.6	5.0	37.6	15.2	1.0	0.6
22. Not given due credit/ acknowledgement for your work	33.8	23.8	24.1	18.3	32.7	24.0	13.3	17.1	12.9	12.2	14.5	50.1	18.3	4.0	7.7	9.1	7.4

To what extent have been exposed to the following?	A. PREVALENCE <i>Experienced & Frequency 0 to 3</i>				B. SEVERITY <i>Indicate severity on scale from 0 to 4</i>					C. SOURCE/(PERSON/S RESPONSIBLE) <i>Indicate source: You may mark more than one source with an x</i>							
	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
23. Your personal integrity undermined	52.5	28.7	12.0	6.8	47.7	25.0	14.6	6.9	5.8	6.1	8.1	3 0.5	25.0	5.4	8.4	4.4	2.7
24. Intentional destructive sarcasm used against you	56.7	22.0	14.1	7.2	51.6	20.1	12.6	11.8	3.9	3.0	4.7	22.3	25.0	5.7	7.4	3.3	2.3
25. Verbal abuse within and outside school/institution	54.5	27.6	12.4	5.5	48.0	25.6	12.4	10.4	3.6	2.0	3.0	19.3	24.0	3.3	10.1	7.1	7.7
26. Non-verbal abuse within and outside school	61.1	23.7	100	5.2	57.7	19.6	12.0	7.7	3.0	2.7	4.4	18.3	18.6	6.7	9.8	6.7	7.1
27. Inappropriate jokes made about you	41.7	33.4	16.6	8.3	39.0	31.0	11.0	12.0	7.0	1.0	4.0	17.2	36.9	5.7	13.3	3.0	2.7
28. Persistently teased and made fun of in front of students or colleagues	73.0	16.6	8.3	2.1	68.2	14.7	9.5	4.4	3.2	2.3	2.0	15.9	18.6	3.7	4.7	1.6	1.6
29. Rumours and malicious gossip spread about you	36.0	28.6	22.3	13.1	34.0	21.0	21.0	12.0	12.0	1.0	4.7	20.6	41.0	12.2	14.2	7.4	4.7
30. Ignored when approaching others	58.8	25.0	11.6	4.6	55.4	24.1	12.9	4.8	2.8	1.6	1.6	14.9	28.4	6.4	5.4	1.3	1.3
31. Faced with unfriendliness/ hostility when approaching others	53.7	32.0	9.4	4.9	51.0	27.0	12.0	8.0	2.0	2.0	3.7	15.9	30.1	8.1	5.0	2.7	2.0
32. Insulted by offensive remarks	68.3	17.6	11.3	2.8	65.8	15.2	9.5	7.0	2.5	2.0	2.7	13.8	15.2	5.7	7.1	4.7	2.3
33. Faced with threatening behavior e.g. finger pointing, invasion of personal space, shoving, blocking the way	79.4	12.7	6.2	1.7	75.0	12.9	5.1	4.7	2.3	1.3	4.4	12.5	12.8	4.4	1.7	3.7	3.3
34. Shouted at	58.1	28.5	10.0	3.4	53.6	23.2	11.6	7.6	4.0	2.0	4.0	26.7	21.0	6.10	3.7	1.3	1.3

To what extent have you been exposed to the following?	A. PREVALENCE <i>Experienced & Frequency</i>				B. SEVERITY <i>Indicate severity on scale from 0 to 4</i>					C. SOURCE/(PERSON/S RESPONSIBLE) <i>Indicate source: You may mark more than one source</i>							
	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
35. Insulting remarks on your work and background	68.3	17.5	9.0	5.2	63.3	16.7	6.8	8.0	5.2	2.3	3.7	17.6	17.9	5.0	8.8	4.4	3.7
36. Personal property vandalized e.g. cars	85.7	6.6	3.1	4.6	83.0	7.0	3.0	4.0	3.0	1.3	1.3	7.7	5.0	2.7	5.7	1.3	4.7
37. Threatened through the use of electronic media e.g. cell phones/Internet	87.2	7.3	3.8	1.7	83.0	10.1	3.2	2.8	0.4	2.0	2.3	9.1	6.4	3.7	5.0	3.3	4.7
38. I am cursed and sworn at	85.8	9.7	2.1	2.4	81.1	10.5	3.2	3.2	2.0	1.3	3.7	9.4	8.1	2.7	5.4	3.7	1.3
39. I am threatened with physical harm	82.8	7.2	4.8	5.2	82.2	7.0	5.6	3.5	1.7	1.3	3.0	7.7	8.4	3.7	6.4	4.4	4.0
40. Attempts to undermine your authority	48.9	32.4	13.2	5.5	42.9	30.7	13.0	7.4	6.1	1.6	3.0	13.5	20.6	9.1	18.3	3.7	1.6
41. Humiliated in front of learners or students	71.3	17.7	8.1	2.9	64.1	16.7	8.6	7.3	3.4	1.3	2.7	16.2	12.2	3.3	5.4	2.3	0.6
42. Exposed to dominating behavior from others at work	58.9	19.2	13.9	8.0	54.0	18.0	11.0	11.0	6.0	1.6	5.0	21.3	22.7	4.7	1.6	0.6	0.0
43. Exposed to unfair verbal threats and intimidation	69.1	15.3	11.4	4.2	63.7	14.3	12.6	5.7	3.7	1.6	6.1	20.0	13.5	4.0	2.7	3.3	1.6
44. Coerced into doing things that you feel uncomfortable about	54.0	28.4	13.8	3.8	47.2	23.8	16.1	9.7	3.2	3.0	5.4	33.8	15.2	5.0	1.6	1.0	0.6
45. Blamed unfairly when things go wrong	41.6	27.1	22.5	8.8	37.8	26.0	16.7	12.2	7.3	3.0	5.7	32.8	22.7	6.1	8.4	12.6	4.0
46. Experienced others 'teaming up' against you	60.5	23.8	7.7	8.0	56.0	20.0	9.0	8.0	7.0	0.6	2.7	13.2	0.3	8.1	0.3	0.3	1.3

To what extent have been exposed to the following?	A. PREVALENCE <i>Experienced & Frequency</i>				B. SEVERITY <i>Indicate severity on scale from 0 to 4</i>					C. SOURCE/(PERSON/S RESPONSIBLE) <i>Indicate source: You may mark more than one source</i>							
	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
47.Having decisions that affect your work directly taken without prior consultation	43.0	32.3	17.2	7.5	39.4	26.4	16.5	11.8	5.9	7.4	11.5	43.3	13.8	4.4	2.0	0.6	0.0
48.Complaints fall on deaf ears	28.8	27.8	26.0	17.4	29.5	20.5	24.8	13.4	11.8	10.8	15.5	46.7	12.2	3.3	6.1	4.1	1.0
49.Complaints are met with retaliation or 'punishment'	67.7	13.5	10.6	8.2	63.0	13.0	13.0	6.0	5.0	2.0	6.4	24.7	9.4	2.7	4.0	2.3	1.3
50.Falsely blamed for errors or mistakes	52.1	21.6	18.1	8.2	47.1	17.9	12.6	11.0	11.4	3.0	7.4	30.8	15.5	4.0	5.7	4.4	2.0
51.Exposed to the 'silent treatment'	52.5	21.0	13.3	12.2	49.8	17.7	15.2	7.6	9.7	1.6	8.1	30.5	15.9	6.1	4.4	1.3	0.3
52.Intentionally separated from others	74.3	9.5	9.5	6.7	71.9	10.1	9.2	4.2	4.6	1.3	4.4	16.9	8.1	4.0	1.6	0.3	0.3
53.Campaigns launched against you	72.5	13.0	9.4	5.1	67.4	13.1	8.5	5.1	5.9	1.6	5.4	14.2	14.5	4.4	3.3	1.0	0.6
54.Undesirable work assigned as 'punishment'	81.4	9.1	4.9	4.6	79.3	6.9	7.4	3.2	3.2	1.3	4.0	13.5	4.4	2.0	1.0	0.3	1.0
55.Work output disregarded despite evidence of quality and high standards	50.2	19.3	17.5	13.0	45.8	22.1	12.1	11.2	8.8	8.8	10.5	33.2	15.2	3.7	2.7	2.0	3.7
56.Abuse of the evaluation process through misinformation about your performance	70.7	14.8	11.4	3.1	66.0	15.0	11.0	4.0	4.0	2.7	2.0	3.7	9.8	3.0	0.3	1.0	1.0
57.Inputs in meetings being discounted by remarks (for example: 'that's silly')	74.7	13.9	8.3	3.1	70.5	13.1	8.0	5.2	3.2	1.0	5.0	20.0	13.2	3.0	0.3	1.0	0.3

To what extent have you been exposed to the following ?	A. PREVALENCE <i>Experienced & Frequency 0 to 3</i>				B. SEVERITY <i>Indicate severity on scale from 0 to 4</i>					C. SOURCE/(PERSON/S RESPONSIBLE) <i>Indicate source: You may mark more than one source with an x</i>							
	0	1	2	3	0	1	2	3	4	1	2	3	4	5	6	7	8
58.Singled out to perform unreasonable tasks	66.9	18.3	11.4	3.4	64.0	15.2	9.2	8.0	3.6	3.0	6.4	27.7	8.1	2.0	1.6	0.6	0.6
59.Credit for work being stolen by others	72.7	11.9	9.8	5.6	68.9	11.7	7.3	5.2	6.9	1.0	3.3	17.2	16.6	4.4	1.0	1.0	0.6
60. Deliberate non- performance by others to impact negatively on your work.	62.4	20.6	11.8	5.2	59.1	18.6	11.7	5.7	4.9	1.0	3.0	11.5	23.0	9.4	2.7	0.6	0.3
61.Deliberate attempts to set you up for failure	66.7	18.5	10.0	4.8	64.0	17.0	9.0	5.0	5.0	0.6	3.0	13.8	17.9	5.4	3.7	2.7	2.7
62.Humiliated in front of the public	80.6	10.8	7.2	1.4	77.3	8.1	4.3	5.6	4.7	1.6	3.0	12.8	7.1	3.3	3.7	2.7	2.7
63.Exposed to stress-inducing behavior from others at work	49.0	22.4	15.5	13.1	45.0	19.0	15.4	9.5	11.1	3.3	7.1	28.1	29.8	10.8	11.1	6.7	2.0

SECTION C:RESPONSE TO SOME OF THE EXPERIENCES

On the following Section follows a list of experiences that **you might engage in**. Please indicate in the applicable columns to what extent you engage in an experience as well as the severity of the experience by marking the applicable columns with an **X**.

To what extent do you engage in the following?	A. PREVALENCE <i>Experienced & Frequency</i> 0 to 3				B. SEVERITY <i>Indicate severity on scale from 0 to 4</i>				
	0	1	2	3	0	1	2	3	4
64.I avoid the workplace due to negative circumstances there	64.9	18.4	10.2	6.5	56.0	19.0	10.0	11.0	4.0
65.I do not feel like going to work due to negative circumstances there	55.0	22.5	11.6	10.9	46.0	20.0	13.0	12.0	9.0
66.I am occupied with/ or rethinking the detail of negative events at work	46.0	27.0	17.0	10.0	38.0	28.0	15.0	11.0	8.0
67.I experience reduced motivation due to negative circumstances at work	32.9	31.0	20.6	15.5	27.0	30.0	17.0	15.0	11.0
68.I experience job dissatisfaction caused by negative circumstances at work	37.2	26.7	19.8	16.3	30.6	24.3	20.4	12.5	12.2
69.I experience an increase in physical ailments due to circumstances at work	55.1	21.1	12.9	10.9	50.0	17.0	14.0	9.0	10.0
70. I have feelings of resentment and bitterness due to negative acts at work.	43.3	27.8	13.4	15.5	37.2	25.1	11.0	11.4	15.2

Please state any other unpleasant acts that you have experienced at work apart from those stated in the questionnaire:

I would like to invite anyone who has had unpleasant experiences in the workplace and would like to share those experiences with me in confidentiality to contact me on the following telephone/Cell number **Malineo Matsela : 58975628.** NB You can just send me an sms and I will call you back. Alternatively you can write your contact details on the spaces provided below and I will get back to you. Please note that you do not have to give your name unless you want to. This is part of my academic research work on the wellness of teachers in the workplace. I would like to once again assure you that all the information requested will remain anonymous and will be treated with respect and strict confidentiality. I appreciate your contribution to this study.

Your Telephone/cell numbers _____

Thank you very much for your precious time.

**ANNEXURE F: PATTERN MATRIX FOR SEVERITY OF PSYCHOLOGICAL
VIOLENCE EXPERIENCES FROM FACTOR ANALYSIS**

	Component											
	1	2	3	4	5	6	7	8	9	10	11	12
BB53	.525				.327							
BB50	.487				.316							
BB59	.451		-.327				-.341					
BB32	.347							.315				
BB63	.346											
BB38		.827										
BB37		.806										
BB39		.694										
BB36		.667						-.377				
BB41		.641										
BB43		.513										
BB62	-.307	.433						.310				
BB42		.386										
BB31			.672									
BB30			.587									
BB46			.457									
BB29			.410									
BB25			.380							.379		
BB24	.307		.377									
BB55	.323		-.336		.325							
BB18				.767								
BB14				.642								
BB21				.612								
BB19				.597								
BB16				.562								
BB15				.437								
BB23				.345								
BB52					.795							
BB49					.684							

BB54				.595								
BB56				.540								
BB48				.539							.301	
BB51	.330			.489								
BB57				.472					.354			
BB1					.729							
BB4					.664							
BB3					.615							
BB2					.602							
BB17			.347		.473							
BB60												
BB61												
BB58	.319											
BB34												
BB6												
BB9												
BB7												
BB10												
BB13												
BB5				.374								
BB8												
BB47												
BB26												
BB33		.317										
BB12			.356									
BB11												
BB45												
BB22												
BB40												
BB28												
BB27												
BB44	.337											
BB20												
BB35												

Extraction Method: Principal
Component Analysis.
Rotation Method: Oblimin with
Kaiser Normalization.

a. Rotation converged in 54
iterations.

ANNEXURE G: INTERVIEW SCHEDULE

1. What happened?
2. How often did it happen?
3. What impact did it have on your health?

ANNEXURE H: CONFIDENTIALITY AGREEMENT

Title of study: Psychological violence as workplace trauma impacting on teachers' health in Lesotho: Guidelines for teacher support for health promotion.

I as the researcher hereby undertake that all the information which appears in this form, which will be given with the accompanying symptom checklist as well as the issues raised in the individual interviews will be handled with the strictest confidentiality. No information may/shall be used against a person to harm him/her in any way either physically, emotionally, socially or psychologically.

.....
.....

A.M. Matsela..... Date

I as the participant teacher in Lesotho am conversant with the aim of the research as well as what is expected of me during the individual interviews. I undertake to handle all matters that might arise during the interview as highly confidential. I further undertake not to use the information given during the research against any person to harm him/her in any way either physically, psychologically, emotionally and socially.

Signature (teacher) Date

ANNEXURE I: SYMPTOMS CHECKLIST RESULTS

Symptom checklist

Please score the following symptoms as follows (only mark one with an “x”).

Score 1: If you **had the symptom before** the experience of psychological violence and it had not worsened since the experience.

Score 2: If the above **symptom has worsened** since your experience of psychological violence.

Score 3: If the **symptom is new** since the experience of psychological violence.

The Numbers in brackets () indicate the number of participants who checked a particular response.

List of symptoms		N=21 (Frequency)		
		Had symptom but not worse	Symptom became worse	New symptom
		1	2	3
1.	Anxiety, stress, excessive worry	(2)	(6)	(12)
2.	Heart attack			(7)
3.	Feelings of panic	(2)	(6)	(12)
4.	Loss of concentration	(1)	(4)	(10)
5.	Heart arrhythmia		(3)	(6)
6.	Hair loss	(1)	(5)	(6)
7.	Sharp chest pain after activity/exercise	(1)	(4)	(11)
8.	Disrupted sleep	(1)	(7)	(11)
9.	Chest pain		(2)	(10)
10.	Ulcers		(4)	(15)
11.	Feeling edgy, irritable, easily startled and constantly on guard	(1)	(7)	(11)
12.	High blood pressure/hypertension		(3)	(10)
13.	Stress headaches		(6)	(9)

14.	Fibromyalgia – inflamed joints and connective tissue		(2)	(3)
15.	Recurrent memories, nightmares and flashbacks		(8)	(10)
16.	Obsession over details at work		(8)	(10)
17.	Irritable bowel syndrome (colitis)			(6)
18.	Racing heart rate		(7)	(3)
19.	Chest pain		(5)	(5)
20.	Suicidal thoughts			(3)
21.	Needing to avoid feelings, thoughts, and situations that remind you of trauma or a general emotional “flatness”			(15)
22.	Body aches – muscles or joints	(1)	(5)	(11)
23.	Thinking about being violent towards others			(11)
24.	Exhaustion, leading to an inability to function		(8)	(8)
25.	Asthma or allergies		(1)	(5)
26.	Compulsive behaviours			(6)
27.	Feeling depressed		(1)	(13)
28.	Use of substances to cope: tobacco, alcohol, drugs, food	(1)	(3)	(5)
29.	Shame or embarrassment that led to dramatic changes in lifestyle			(5)
30.	Skin changes, e.g., shingles, rashes, acne	(1)	(4)	(6)
31.	Significant weight change	(1)	(4)	(6)
32.	TMJ (Jaw tightening/teeth grinding)		(2)	(5)
33.	Feeling chronically fatigued/tired			(8)

Other symptoms mentioned by the participants

		Had symptom but not worse	Symptom became worse	New symptom
1	Loss of appetite			(1)
2	Being violent at home			(1)

ANNEXURE J: SYMPTOMS CHECKLIST

Symptom checklist

Please score the following symptoms as follows (only mark one with an “x”).

Score 1: If you **had the symptom before** the experience of psychological violence and it had not worsened since the experience.

Score 2: If the above **symptom has worsened** since your experience of psychological violence.

Score 3: If the **symptom is new** since the experience of psychological violence.

The Numbers in brackets () indicate the number of participants who checked a particular response.

List of symptoms		N=21 (Frequency)		
		Had symptom but not worse	Symptom became worse	New symptom
		1	2	3
1.	Anxiety, stress, excessive worry			
2.	Heart attack			
3.	Feelings of panic			
4.	Loss of concentration			
5.	Heart arrhythmia			
6.	Hair loss			
7.	Sharp chest pain after activity/exercise			
8.	Disrupted sleep			
9.	Chest pain			
10.	Ulcers			
11.	Feeling edgy, irritable, easily startled and constantly on guard			

12.	High blood pressure/hypertension			
13.	Stress headaches			
14.	Fibromyalgia – inflamed joints and connective tissue			
15.	Recurrent memories, nightmares and flashbacks			
16.	Obsession over details at work			
17.	Irritable bowel syndrome (colitis)			
18.	Racing heart rate			
19.	Chest pain			
20.	Suicidal thoughts			
21.	Needing to avoid feelings, thoughts, and situations that remind you of trauma or a general emotional “flatness”			
22.	Body aches – muscles or joints			
23.	Thinking about being violent towards others			
24.	Exhaustion, leading to an inability to function			
25.	Asthma or allergies			
26.	Compulsive behaviours			
27.	Feeling depressed			
28.	Use of substances to cope: tobacco, alcohol, drugs, food			
29.	Shame or embarrassment that led to dramatic changes in lifestyle			
30.	Skin changes, e.g., shingles, rashes, acne			
31.	Significant weight change			
32.	TMJ (Jaw tightening/teeth grinding)			
33.	Feeling chronically fatigued/tired			

Other symptoms mentioned by the participants

		Had symptom but not worse	Symptom became worse	New symptom
1	Loss of appetite			(1)
2	Being violent at home			(1)

ANNEXURE K

LANGUAGE EDITOR'S LETTER

INSTITUTE OF SOUTHERN AFRICAN STUDIES

THE NATIONAL UNIVERSITY OF LESOTHO

Tel.: (+266) 340601
(+266) 340247
Telex: 4303 LO
Fax: (+266) 340004
E-mail: isas@nul.ls



P.O. Roma 180
Lesotho
Southern Africa

2009 May 13

North West University
Potchefstroom Campus
Private Bag X6001
POTCHEFSTROOM
2520

TO WHOM IT MAY CONCERN

I have read and copy-edited Mrs M. Matsela's PhD thesis entitled *Psychological Violence as Work Trauma Impacting on Teacher's Health in Lesotho: Guidelines for Teacher Support for Health Promotion*.

The thesis is interesting since it touches on a grey area that is taken for granted, therefore, it is a ground breaking study as far as Lesotho is concerned. The study had a few errors and mistakes which when corrected it should pass. I commend the researcher for being able to carry out such a massive study which had a lot of data and be able to weave together the qualitative and quantitative data so well.

However, this does not absolve her from the errors that may be found in her work.

Yours truly

Tankie Khafanyane (Mr)
Publications Officer, ISAS