Exploring Compassion Fatigue and Trauma in the South African Learning Environment

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Abstract

This study investigated the incidence and nature of traumatic experiences that educators encounter in their work, and examined the effects of these experiences. Traumatic exposure in the classroom is viewed against the backdrop of educators' personal and professional experiences, and the levels of compassion fatigue, compassion satisfaction and burnout were measured. The ways in which schools and educators deal with the effects of trauma were also explored. A sample of 146 educators from around the country completed two questionnaires. One questionnaire posed questions with regard to the incidence, nature and effects of trauma in the learning environment. The other questionnaire was the Compassion Fatigue Self-Test for Helpers (Figley, 1999:18-19). Both quantitative and qualitative analysis were used to make meaning of the data collected. The study revealed that educators are exposed to a high incidence of trauma as a result of violence, death and abuse in the community. The effects are largely negative, but some positive effects were also identified. The Compassion Fatigue questionnaire revealed that almost half the educators experience extremely high levels of Compassion Fatigue. An important finding of this study is that even a short course in dealing with the effects of trauma, significantly increases educators' Compassion Satisfaction. Sadly, approximately a third of the educators feel that their coping strategies are inadequate given the realities of their work lives.

INTRODUCTION

As South African school communities continue a process of transformation and attempt to provide education that liberates children's capacities, it is critical that the impact of trauma is not forgotten. Educators in South Africa are presently faced with a multitude of problems, such as: violence against learners and educators; traumatised learners and colleagues; over-crowded classrooms; depleted and /or inadequate resources; scarcity of social and mental healthcare services; struggles with implementing new education policies; and, working with learners who experience learning difficulties (Lourens, 2004; Van Niekerk, 2002; De Waal, Pinchuck, Xiniwe, Enfield, Southgate & Henderson, 2000; Human Rights Watch, 2001; Steyn & Van Wyk, 1999; Van der Linde, Van der Westhuizen & Wissing 1999; Van Zyl & Pietersen, 1999). The question may be asked, how do these problems affect educators and the process of learning?

EFFECTS OF TRAUMA ON THE PROCESS OF LEARNING

A variety of terms are used interchangeably to describe the disruptive and painful effects of *trauma*. Hoffmann (2002:48) defines a ***traumatic event*** as:

> *any life event where social, technological or natural factors affect a person's emotional and/or physical integrity to such an extent that he/she experiences a significant impairment in social, academic or other important areas of functioning.*

For the purposes of this paper, trauma will be described as the effect of a traumatic event.

Although trauma affects different people in different ways, it often shatters the survivor's fundamental assumptions that the world is benevolent and meaningful, and that the self is worthy (Janoff-Bulman, 1992:6). A shattering of this kind changes the way people engage in higher order thinking and interferes with the ability to learn. A plethora of the effects trauma has on learning have been described in the literature (Lourens, 2004; Hoffmann, 2002; De Waal et al., 2000; Horsman, 1999). Briefly, the main effects are:

- Intrusive thoughts interfere with concentration
- Learning is slower
- Learners become frustrated with their perceived lack of progress and are inclined to give-up
- Learners lack presence, often dissociating, daydreaming and appearing to "switch off"
- Learners lack confidence in themselves and their academic ability
- Learners, living in unstable environments, may provoke crises because this is a familiar social dynamic
- Learners mistrust adults and often misinterpret educators' motives and intentions
- Learners may use learning as an escape and withdraw from useful social interaction.

Although the experience of trauma is personal and individual, the effect of trauma is public and affects society. Weingarten (2003) explains how the effects of trauma ricoche through the community and refers to this lateral transmission of trauma as *"common shock"*. Thus, every time a story of trauma is shared, the listeners are also exposed to the shock of the trauma. Figley (1999:6) states that, "simply learning about the traumatic event/s carries traumatic potential".

Educators are often the first person to hear stories of violence, abuse, illness or death. Indeed, it is becoming increasingly apparent that in some cases, the only adult support system that our children have, are their educators and the school community. Therefore, it needs to be acknowledged that educators are exposed to both direct trauma (in the course of their daily lives), and indirect trauma (through the experiences of others). Furthermore, educators are confronted with the difficult task of working with those who have been traumatised. Educators often assume the role of primary caregivers. Such work requires deep reserves of emotional strength and as a consequence, educators are vulnerable to and can experience *compassion fatigue*.

The onset of **C*ompassion Fatigue*** (Figley, 1999:4) or E***mpathic Stress Reaction*** (Weingarten, 2003:99) can be rapid and the symptoms are often the same as those of a person who has been directly traumatised. (Figley, 1999:16) explains that if compassion fatigue is not addressed, it may contribute to **B*urnout*** which occurs over a period of time*.* Schaufeli and Enzmann (1998:36) define burnout as "a persistent, negative, work-related state of mind in 'normal' individuals that is characterised by exhaustion, which is accompanied by distress, a sense of reduced effectiveness, decreased motivation, and the development of dysfuntional attitudes and behaviours at work". According to Maslach and Jackson (1986) burnout leads to deterioration in the quality of care or service of staff and appears to be a factor in job turnover, absenteeism, low morale and job dissatisfaction. However, Figley (1999:4) states that when the caregiver is able to retain a degree of personal satisfaction, s/he is able to avoid the negative effects of Compassion Fatigue. He refers to this personal satisfaction as ***Compassion Satisfaction.*** Clearly, according to the literature, it is prudent to examine ways to diminish or at least ameliorate the negative impact of trauma on learning.

Although much has been written about various interventions to improve South African school environments, less is known about the experiences of educators, and not much has been documented about Compassion Fatigue in educators. The specific objectives of this study were to:
1. determine the incidence, nature and effects of trauma (direct and indirect) on educators
2. measure the extent of compassion fatigue, compassion satisfaction and burnout in educators
3. examine the ways in which schools and educators deal with the effects of trauma

RESEARCH METHOD

Training aimed at developing ways of identifying and dealing with trauma in the classroom was arranged in Cape Town. Attendance was voluntary and a pilot study was conducted. The results of the pilot study revealed sufficiently interesting relationships between educators' exposure to trauma, compassion fatigue and coping style to warrant further investigation. More training sessions of this nature were scheduled in Durban, Vryheid, Cape Town and Johannesburg during which, educators completed two questionnaires. Participation in the training and inclusion of the data in the study was voluntary. Educators who contributed their data did so anonymously. The responses from a total of 146 educators from 105 schools were used in this study. Of these schools, 68 were located within urban areas and 37 within rural areas.

The first questionnaire consisted of questions concerning biographical details; a checklist using a five point scale to determine the frequency of exposure to traumatic incidents; several open ended questions giving access to the effects of trauma on educators and exploring self-care strategies of educators. The second questionnaire, completed and scored by the educators as part of a self-assessment exercise, was the Compassion Fatigue Self-Test for Helpers (Figley, 1999). This self-test is designed for use by a wide range of front-line workers (including educators) who work with survivors of trauma. The scale produces three scores: Compassion Fatigue, Compassion Satisfaction and Burnout. This instrument was selected because it measures variables related to direct and indirect exposure to trauma. The test also displays adequate psychometric properties with Cronbach alpha reliabilities ranging from 0.86 to 0.94 (Hudnall Stamm, 1996: 127-130). Since no South African norms are available for the Compassion Fatigue Self-Test, the available International norms were used.

Analysis of the data was both quantitative and qualitative. Quantitative items examined the frequency and range of traumatic incidents, encountered by educators in their work, and were analysed using SPSS version 10.0. Descriptive statistics including frequency distributions were calculated for all variables. Due to the particular distributions of several variables, non-parametric inferential statistics were used to estimate the strength of relationships between variables. Qualitative items were analysed independently using thematic content analysis. Major themes were extracted from the answers to the open ended questions and are presented, illustrated with verbatim quotes.

FINDINGS OF THE STUDY

Schools represented are from rural, peri-urban and urban communities. The schools (Table 1) are situated in various provinces, draw learners from different socio-economic strata and range in size - average size being 618 learners (standard deviation=295, median=550 learners).

Table 1: Geographic distribution and social economic catchment of schools

Area	LOWER	MIDDLE	HIGHER	Total
Gauteng	3	14	7	24
Western Cape	15	6	2	23
KwaZulu-Natal	18	14	9	41
Eastern Cape	4	2	0	6
North West Province	2	0	1	3
Northern Cape	2	0	0	2
Limpopo	1	2	0	3
Other Southern African	2	1	0	3
Total	**47**	**39**	**19**	**105**

1.1 INCIDENCE, NATURE AND EFFECTS OF TRAUMA ON EDUCATORS

Table 2 illustrates the nature and incidence of traumatic incidents, which are brought to educators' attention, during the course of their professional work in the learning environment.

Table 2: Frequency of most common forms of trauma

Rank	Type of trauma	% exposed more than once per month
1	Bullying	77
2	Death	52
3	Domestic Violence	43
4	Burglary	42
5	Assault	38
6	Child Abuse	35
7	Gang related violence*	27
8	Motor Vehicle Accident	25
9	Rape	23
10	Hijacking	18
11	Murder	11
12	Natural Disasters	10
13	Suicide	10
14	Political Violence*	9

* It is likely that these types of exposure are inflated by the higher frequency of educators from the Western Cape and KwaZulu-Natal.

1.2 EFFECTS OF TRAUMA ON EDUCATORS – PROFESSIONALLY

One of the educators who participated in this study responded with this thought provoking statement:

> *Can't cope with these matters and teach, but can't teach children who can't learn – What now?*

Both negative and positive effects were revealed in the study. 61% of educators stated that dealing with trauma in the classroom had a negative effect. Themes identified were: educators felt tired and drained; interference with their sleep and work; negative emotions like anxiety, anger, depression; reduced confidence in their ability; a sense of helplessness and hopelessness. The following comments have been quoted in this paper because they give voice to the themes which were consistently repeated throughout the responses to the open ended questions posed to the educators.

> *It takes my whole being out of me*

> *I do not sleep at night. I lose motivation to be creative – survival mode sets in and severe depression*

> *It has a lot of negative effects. It has made me to consider myself as a failure and I have kind of held myself responsible for poor behaviour and performance*

> *I feel helpless and lose meaning in teaching and those who are not interested in learning*

> *I feel helpless and do not know where to refer*

> *It's hectic, stressful because you don't deal with only one person but different people with different stories*

> *It leaves me traumatised*

The most concerning responses to this question are the answers which illustrate that an effect of dealing with trauma is an inability to teach effectively.

> *Educator cannot perform his/her work effectively*

> *No effective teaching*

Regular absence of educators

On the other hand, 29% of educators reported a positive effect and 10% were neutral. A variety of positive effects were reported, such as: increased social awareness and sensitivity to the needs of others; development of new skills; personal and spiritual growth. The following are verbatim quotes:

It has made me more aware of the sad, poor home circumstances. Hopefully more compassionate and understanding

Focused me more on the need for the development of pastoral care structures in schools.

It has allowed me to grow as a person because of the learning one gets from helping others

It's also helped me look creatively at the situation, checking in with the children in the morning, some won't talk so we stop at 12 noon every day and the children pray and that's how I get to hear of trauma experiences they have had that day or earlier

I learnt to listen and try to refer them to counseling or relevant help

1.3 EFFECTS OF TRAUMA ON EDUCATORS - PERSONALLY

On a personal level, 84.7% of educators reported that they had personally experienced trauma. However, it was encouraging to note that 55% of the educators stated that the effect of personal trauma on their work was positive. Some educators reported that they have become more empathetic and understanding as a result of experiencing their own trauma. They felt able to listen more effectively; be there to support and comfort; and, to be more tolerant of behaviour.

On the other hand, 33% of educators expressed that personal trauma had a negative affect on their work The implication of this figure is alarming in that one third of our educators are not working effectively in the classroom due to their own personal traumatic experience. 12% were indifferent.

2 THE EXTENT OF COMPASSION FATIGUE/SATISFACTION AND BURNOUT IN EDUCATORS

The Compassion Fatigue/Satisfaction Self-Test revealed high reliability with this sample (Cronbach Alpha coefficients of 0.79, 0.86, and 0.86 for Compassion Fatigue, Compassion Satisfaction and Burnout respectively).

Approximately 48% of educators in the study are at extremely high risk of Compassion Fatigue (see Figure 1). This result has serious implications for mental wellness of our educators if we acknowledge that Compassion Fatigue has been identified as a condition, which may contribute to Burnout (Figley, 1999).

Figure 1: Risk of Compassion Fatigue
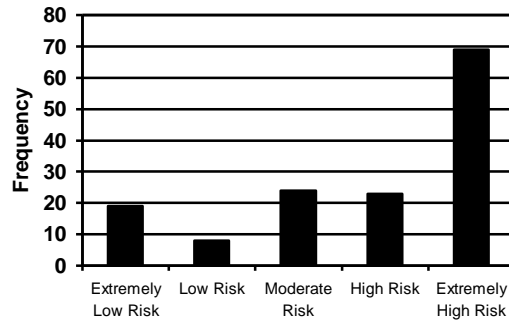
However, as Figure 2 shows, the sample reveals relatively low levels of Burnout. This apparent contradictory finding may be partly explained by the results for Compassion Satisfaction (see Figure 3).

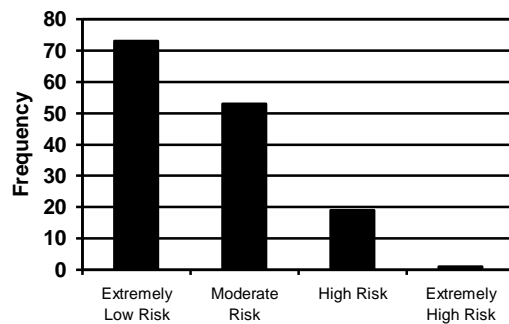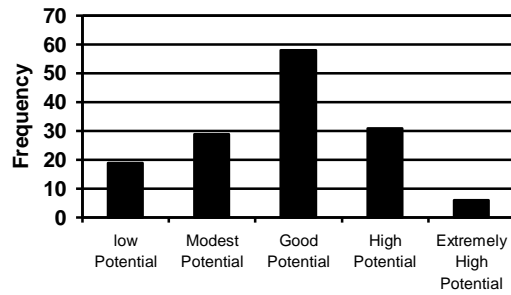**Figure 2: Risk of Burnout**

Figure 3: Potential for Compassion Satisfaction

Thus, although Compassion Fatigue figures are relatively high, these educators have managed to preserve a reasonable level of Compassion Satisfaction, and have managed to avoid Burnout. An analysis of the relationships between these variables shows that Burnout is strongly positively related to Compassion Fatigue ($r=0.726$, $p=0.000$), and is negatively related to Compassion Satisfaction ($r=-0.418$, $p=0.001$). However, this contradiction may be explained by the fact that participation in the workshops, at which data was collected, was voluntary. Therefore, it is unlikely that educators suffering from Burnout would have attended. Furthermore, the participating educators displayed a good potential for Compassion Satisfaction.

3.1 WAYS IN WHICH SCHOOLS AND EDUCATORS DEAL WITH THE EFFECTS OF TRAUMA

70% of the schools represented in this study, do not have a definite policy for dealing with trauma. Of the remaining 30% of schools that do have a clear policy, the following practices were stated:

29% report cases to the principal

27% report cases to police or social services.

27% of these schools do not have an identified person assigned to take care of learners who have experienced trauma.

The effectiveness of these practices can be questioned, considering that police and social services are overburdened and scarce (Ewing, 2004; Van Niekerk, 2002). Furthermore, 56% of the educators stated that they had no training in dealing with the effects of trauma, 37% had attended a short course, and only 7% had formal training. Clearly, it would appear that there is an urgent need for training.

99% of educators who participated in this study believe there is a need for training in dealing with the effects of trauma. One of the educators illustrated this belief by stating:

I feel that there is a need to become equipped to deal with trauma because it is happening more frequently. I feel ill-equipped to deal with it. I need to become more sensitive to these issues

Training has a significant effect on educators' mental health. This study reveals that a short course dealing with the effects of trauma on learners and educators significantly increases Compassion Satisfaction (Mann-Whitney U=253, Z=-2.64, p=0.008) and reduces Burnout. These results are illustrated in Figure 4 below.

Figure 4: Relationship between educators' mental health and training in trauma
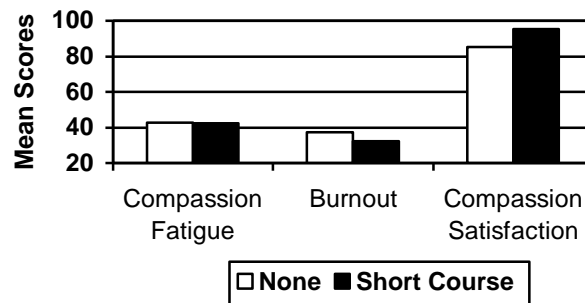
3.2 SELF-CARE OF THE EDUCATOR

As a response to the challenges issued by Munroe (1999:226), educators were asked how they take care of themselves when dealing with those who have experienced trauma. This question alerted some of the educators to the fact that they did not consciously use any self-care strategies. This comment clearly illustrates this sentiment.

I don't, and this [question] *makes me aware of the fact*

Educators who felt their self-care strategies were useful, listed a variety of strategies which were holistic in approach. The most popular self-care strategies reported were: relaxing activities (like reading, music and hobbies); peer support; faith and prayer; counselling and supervision. Interesting responses to the question were:

Quiet time, daily prayer, relaxation, reading, music, hobbies, talking to a friend, rest and sleep

I have sought professional help and still do if I feel I need advice. It is very effective. It gives me an unbiased view of the situation and allows me to be confident in handling it

DISCUSSION

The specific objectives of this study were to determine the incidence, nature and effects of trauma on educators; to measure the extent of compassion fatigue, compassion satisfaction and burnout in educators; and to examine the ways in which schools and educators deal with the effects of trauma. The findings of this study will be discussed against a backdrop of relevant literature.

The effects of violence, death and abuse are the main types of trauma which are brought to the educators' attention. The nature of the traumatic incidents which are revealed in this study (Table 2) correspond with the findings of Hoffmann (2002: 51) who identified the most frequent traumatic incident reported by tertiary students in his study, as the death of a loved one.

Trauma affects both learner and educator, and therefore the process of learning is jeopardised. The results of this study reveal that although there were both negative and positive effects, the majority (61% of educators) stated that dealing with trauma in the classroom had a negative effect. Furthermore, one third of the educators experienced negative effects from their own personal trauma.

48% of educators who participated in this study, are at extremely high risk for Compassion Fatigue, which literature has shown often leads to burnout. According to Maslach and Jackson (1986) burnout is followed by deterioration in the quality of care or service of staff and appears to be a factor in job turnover, absenteeism, low morale and job dissatisfaction. This study has also shown that the sense of fulfillment that educators derive from helping learners (Compassion Satisfaction) serves as an important buffer against Burnout, and that Compassion Satisfaction is significantly increased by even a short training course in dealing with the effects of trauma. It is imperative that educators who suffer from Compassion Fatigue are bolstered by a support system, otherwise they will possibly be unable to provide adequate support to learners. Argument can be made that it is imperative for communities of care and support to be established within the learning environment in order for effective learning to take place so that society can survive and thrive. Therefore, it would be wise to look for ways to eliminate compassionate fatigue in educators. Support from professional peer groups could be very valuable in counteracting the effects of Compassion Fatigue and is emphasised in the literature. (Lourens, 2004; Schaufeli, 2003; Weingarten, 2003; Rosenbloom, et al., 1999; Catherall, 1999; Williams & Sommer, 1999).

Govender and Killian (2001:1-10) have investigated the psychological effects of chronic violence on children living in South African townships. They have identified that a support network bolsters resilience

in children. They have also identified that the home and family do not necessarily form the major support mechanism. Thus, it would appear that the educators and the school community are left to provide this support mechanism. However, many educators do not know how to deal with the effects of trauma. It is disturbing that over 50% of the educators in this study have had no training in dealing with the effects of trauma especially when considered against the backdrop of literature which clearly advocates the need for such training.

However, Higson-Smith (2002:104) cautions that training educators in this kind of work can be extremely sensitive for two reasons. Firstly, it is difficult for educators to offer any kind of support within the school if they are not respected within the community. Therefore, this respect needs to be recaptured, which raises an important question. How can respect be gained? Secondly, the educator's own personal psychological and emotional problems need to be addressed and resolved before they are able to effectively assist others. Munroe (1999:211) stresses the ethical need to take care of and train the caregiver and warns that impaired caregivers are potentially dangerous. Weingarten (2003:116) refers to this danger as "double jeopardy" and states that:

> *Wounded helpers can still be competent ones. Acknowledging their needs can ensure continued effectiveness. As a society we must insist on no less; the price of doing otherwise is one we do not want to pay.*

The lack of knowledge about the importance of self-care revealed in this study, is a serious concern in light of the discussion in literature about the importance of self-care of the caregiver (Catherall, 1999; Figley, 1999; Higson-Smith, 2002; Munroe, 1999; Rosenbloom, et al., 1999; Weingarten, 2003; Williams & Sommer, 1999). Educators should be aware of the impact of this kind of work, so that they are able to take steps to lessen their own vulnerability. Educators need to feel and be competent in the approach they take to deal with their own pain and trauma.

When examined qualitatively, it is interesting to note how the comments which the educators make, endorse what has been documented about the effects of trauma being multifaceted, affecting *body*, *mind*, *emotions* and *spirit* (Weingarten, 2003; Horsman, 1999; Herman, 1992; Figley, 1999; Bloom, 1999, Rosenbloom et al., 1999). Educators who participated in this study stated that the self-care strategies they used were regarded as useful when they were holistic in approach. It makes sense that if trauma impacts on the whole person (body, mind, emotions and spirit) then the healing of trauma should be undertaken in a holistic way.

If the negative impact of these problems on learning is not acknowledged, it will not be addressed. Then, not only will learners and their educators continue to suffer, learning will also be compromised. Thus, the

damage will be not only to the learners and their educators, but to the entire school community and society as a whole.

Yet, faced with this grave reality, many schools represented in this study (70%) do not have a policy with regard to dealing with the effects of trauma. This result is alarming in light of the fact that the National Department of Education has issued several documents in the past with regard to providing safety for learners in schools. Clearly, the implementation and application of these policies has been inadequate. Despite the overwhelming need, it would appear that South African schools are not yet able to provide active support to those who have been affected by trauma.

RECOMMENDATIONS

The following recommendations are made with the intention of starting further conversation. They are not stated as absolute and should not be regarded as complete.

♦ If the impact of trauma on the learners, educators and the learning environment is recognized, then the shift in the role of the educator as caregiver will be acknowledged. Policies and support structures should be implemented to assist all concerned. Educators may benefit if they are provided with sustained personal and professional support.

♦ Suitable educators, who have the respect of the community and who have addressed the effects of their own experiences of trauma, can be identified and trained in dealing with the effects of trauma. Crisis management plans and policies can be developed and implemented. A referral network can be established and utilized if further professional assistance is required.

♦ Educators should be alerted to their own vulnerability to the effects of secondary traumatic stress and assisted with knowledge of holistic self-care strategies which can be identified and implemented.

♦ Given that it is difficult for effective learning to take place in the wake of trauma, the role of the psychologist in schools should focus more on establishing support and emotional stability in both educators and learners as fundamental.

♦ It would appear that even a short course in dealing with the effects of trauma raises the potential for Compassion Satisfaction. If this is so, then courses can be arranged and further ways can be explored to maximise the educators' capacity for Compassion Satisfaction.

FINAL THOUGHTS

It is important to acknowledge that the sample used in this study is too small to generalise to the experiences of all educators in South Africa. However, this paper was written in the belief that it will contribute to some understanding of educators' experiences of trauma in the learning environment, as well as the impact of dealing with trauma on learning.   Hopefully, more attention will be paid to exploring

effective ways of dealing with the effects of trauma on both learners and educators, and to developing learning environments in which learners and educators feel safe.

Given that the school environment has become an important place, which provides care and support to those who have experienced trauma, and given that educators interact for several hours, many days of the year with learners, imagine the possibilities for healing, if learners and educators are acknowledged and respected with dignity within a safe and supportive learning environment.

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