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EXAMINING THE RELATIONSHIP BETWEEN COMPASSION SATISFACTION, BURNOUT AND WELLBEING AMONG TEACHERS IN THE TEMA METROPOLIS

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DECLARATION

Student's Declaration

I, Harriet Tawiah-Quansah, declare that this thesis, with the exception of quotations and references contained in published works, which have all been identified and duly acknowledged, is entirely my own original work, and it has not been submitted, either in part or whole, for another degree elsewhere.

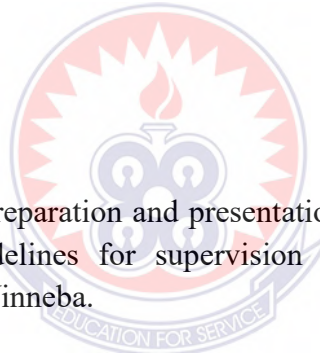Signature: …………………….……………

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Supervisor's Declaration

I hereby declare that the preparation and presentation of this work was supervised in accordance with the guidelines for supervision of thesis as laid down by the University of Education, Winneba.

Hannah E. Acquaye, Ph.D (Supervisor)

Signature: …………………….……………

Date: …………………………………………

DEDICATION

To my lovely family, Linda Kwakyewaa of USA and Mr. Richard Bampoh-Addo of the University of Education, Winneba (UEW). Without their support, I would not have achieved this milestone in life.

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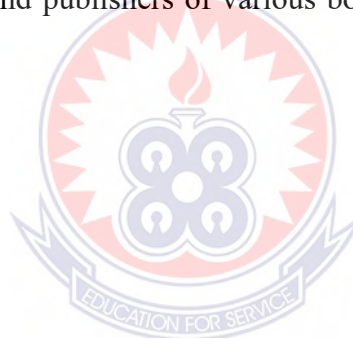
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LIST OF ABBREVIATIONS

M.Q.L.I   Multicultural Quality of Life Index Scale

PROQ0L   Professional Quality of Life Scale

PWB   Psychological Well-Being

SWB   Subjective Well-being

WHO   World Health Organization

ABSTRACT

Effective and efficient delivery of work output by employees is very imperative in every organization. However, this is not too feasible when requirements for the well-being of the employees are not met, and it becomes more problematic when it has adverse effect in their lives. The study, therefore, examined the relationships among compassion satisfaction, burnout, and employee well-being of teachers in the Tema metropolis of Ghana. A sample of 151 teachers were obtained and used for the study. The sample was obtained using the non-probabilistic sampling procedure, "purpose" through a survey questionnaire instrument. Correlational and regression analyses revealed that there was a significant inverse relationship between burnout and employee well-being. There was also a statistically significant positive relationship between compassion satisfaction and employee well-being Moreover, the multiple linear regression employed revealed that compassion satisfaction and burnout significantly influence the well-being of employees. It was therefore recommended that, the well-being must be improved through the adoption of stress coping strategies including engaging in recreational activities, personal relaxation activities, and application of reasoning or common sense in execution of tasks, checking eating habits, regularly visiting the hospital for general check-up, and disengaging in negative thoughts and negative work attitudes, and developing positive mindset at all times.
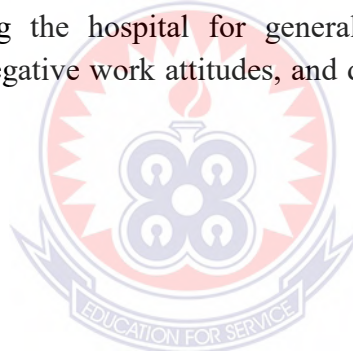
CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

Employees' role in organizational functioning is deeply acknowledged in literature (Ogunjinmi, Ladebo, Onadeko & Oguninmi, 2013). Employees are said to be the sources of organizational innovation, competitiveness, performance and survival. No organization in today's competitive environment can perform effectively and efficiently without employees' commitment to organizational objectives, and by extension, effectively work as teams for organizations' good (Yaser, 2012; Chepkorir, Namusonge, Kanali & Nambuswa, 2014). Consequently, employees' commitment plays a significant role in the effectiveness and stability of organizations, and some scholars suggest that workers' well-being represents an important driver of commitment, and effectiveness for organizations (Miller, 2016; Erdogan, Bauer, Truxillo, & Mansfield, 2012).

Sonnentag (2016) argues that workers with high job satisfaction are more productive, while Hakanen, Perhoniemi and Toppinem-Tanner (2017) report that employees having advanced well-being status and satisfaction take more initiatives in the workplace. Employee well-being has also been considered essential for promoting competitiveness among institutions, especially regarding the positive experiences of the worker since the productivity of the individual depends on his physical and psychological state (Sant'anna, Paschoal, & Gosendo, 2012). Although there are multiple definitions of employee well-being, Paschoal (2008) elucidates that in most research the concept is confused with happiness. Waterman and Conti (2008) and Paschoal de Tamayo (2008), regarded well-being as the prevalence of positive

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emotions at work and the individual's perception that he/she is capable of developing his/ her potential, and to advance in the attainment of life's goals.

According to Accardo (2018), well-being of the worker is a fundamental element that defines peoples' propensity to live well, because, in general, people spend much of their adult lives dedicating themselves to work, with the workplace serving as second home of many people. It is therefore feasible that workplace factors and personal-level factors can influence employee well-being, since these directly influence the humor and the happiness of individuals (Sonnentag, 2016). Workplace characteristics encompass both positive and negative elements which directly or indirectly determine workers' productivity (Dessen & Paz, 2017). Well-being-induced aspects of work are those elements described as positive while the negative characteristics are those events that hinder health and well-being of workers (Carvalho & Magalhaes, 2016).

The concept of employee well-being has evolved over the decades into two distinctive dimensions, including subjective well-being (SWB) and psychological well-being (PWB; Correa, Lopes, Almeida & Camargo, 2019). The difference between these dimensions has to do with the conception of happiness (Paschoal & Tamayo, 2015). SWB is related to philosophical hedonism, which is identical with pleasure-seeking behaviors and happiness-driven lifestyles, consisting of three sub-dimensions - positive affect, negative affect, and satisfaction with life (Ryan & Deci, 2001; Albuquerque & Trócolli, 2004). PWB on the other hand, is supported by eudemonism, which bases the perception of well-being on the realization of personal potentials and capabilities (Ryan & Deci, 2001). Proponents of well-being therefore suggest that while SWB encompasses satisfaction with life under a prism of positive and negative affect that generates happiness, PWB relies on psychological

formulations related to human development and the ability of each individual to face challenges (Siqueira & Padovam, 2008). Correa et al. (2019) argue that analyzing employee well-being based on only one dimension is inadequate since the two dimensions complement each other. Given the general acknowledgement that institutions' competitiveness, productivity, and effectiveness is conditioned on employees' well-being (Miller, 2016; Erdogan et al, 2012), it has been suggested that the integration of both SWB and PWB in exploring employees' well-being represents a mechanism through which the complexities associated with workplace conditions can be appropriately understood (Correa et al., 2019). In view of these, this study conceptualizes employee well-being as the integration of both SWB and PWB.

One of the most cited workplace factors or negative workplace characteristics that interferes with employee well-being is burnout (Carvalho & Magalhaes, 2016; Dalagasperina & Quadros; 2016). The recurrence of high occupational stressful situations leads to the development of more serious physical and mental problems (Benevides-Pereira, 2002). Monteiro, Dalagasperina, and Quadros (2012) affirm that there are, in addition to occupational stress, other occupational diseases caused by the recurrence and permanence of stress, and among them is burnout syndrome. Similarly, Gil-Monte (2015) describes burnout syndrome as a reaction to too much work stress, especially among those workers whose work revolves around interaction with other people.

Gil-Monte divides the burnout process into two levels, suggesting that there is a specific order of occurrence of the symptoms. The first level, known as early symptoms, is linked to cognitive and effective damage which impairs the employee's performance of his or her functions. The second level entails any secondary consequences of the early symptoms stage, such as feelings of guilt about previous

actions. Gil-Monte confirms the existence of burnout only in the manifestation of the second phase, the first phase alone being considered merely occupational stress. We can then see that burnout is the result of work-related stress. According to Benevides-Pereira (2002), the symptoms of burnout can be physical, behavioral, psychic, and defensive. Burnout is a physical, emotional, psychological, and spiritual phenomena characterized by an experience of personal fatigue, alienation, and sense of failure (Alarcon, 2011). Victims of burnout experience progressive loss of idealism, energy, and purpose. Furthermore, manifestations of extreme burnout include distancing oneself from others, regarding one's efforts as failure and deserting work (Carvalho & Magalhaes, 2016).

Maslach, Schaufelli, and Leiter (2016) argue that chronic daily stress on the job, excessive pressure, interpersonal conflicts, and low recognition of symptoms are factors that promote the growth of burnout syndrome. Neves, Oliveira, and Alves (2017) add that burnout originates from the work environment, and not from the individual, and it is always detrimental to the professional and personal life of workers (Benevides-Pereira, 2002). Stress is a state in which the body emits reactions to various environmental, physical, and social situations for the purpose of restoring internal balance (Faro & Pereira, 2015). These reactions are not always harmful to the individual as opposed to burnout (Ferraz, Francisco, & Oliveira, 2014).

The above account suggests a number of inferences, namely, (a) that the major source of burnout is job stress, (b) that burnout is workplace-induced, and (c) it always imposes dangerous effects on its victims - employees. Any workplace condition that invokes stressful situations can indirectly be associated with burnout conditions. For example, Bakker and Demerouti (2015) assert that the non-availability of organizational resources for meeting work requirements is tantamount to the

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emergence of burnout. The implication is that workers' productivity or performance and commitment to organizational aspirations can be seriously affected by the prevalence of burnout among the work force. Burnout has been found to be negatively correlated with a number of important organizational constructs such as turnover intentions, job satisfaction and organizational commitment (Alarcon, 2011). Studies examining the relationship between burnout and employee well-being report that burnout holds destructive impact on well-being (Correa et al., 2019; Rehman, Bhutta & You, 2019; Novess, 2015; Chi-Ming & Bi-Kim, 2019). In view of this, prevention of the burnout condition is important to the quality of employees' working life. Consequently, Maslach (2017) argues that strategies to reduce the occurrence of burnout syndrome should not be targeted at individuals, but rather directly at the workplace, through preventive strategies.

One of the strategies that have been found to be effective in combatting burnout is compassion satisfaction (Hooper, Craig, Janvrin, Wetsel, & Reimels, 2010; Sanchez-Moreno, Rolda, Gallardo-Peralta & Roda, 2014). Compassion satisfaction is an interpersonal transaction of help from a support source to the help receiver; this support source involves material assistance and information and that takes place in a specific family, work, or caregiving context (Ozyer & Polatci, 2017). Compassion satisfaction connotes the support accessible to an individual through social ties with other individuals, groups, and the larger community, and it can be in the form of emotional support (love, care, empathy, trust) and instrumental support such as provision of material things, information exchanges and appraisals (Chi-Ming & Bi-Kim, 2019).

Studies show that compassion satisfaction has potential negative effects on stress and therefore protects against burnout (Awang, Kutty & Ahmad, 2014; Rehman,

Bhutta & You, 2019; Ozyer & Polatci, 2017; Chi-Ming & Bi-Kim, 2019). In the workplace context, interpersonal relationships can become a source of stress, but when there is good interpersonal communication and perceived social support, the negative effects of stress are buffered. On the other hand, if the relationships with users, peers, or colleagues in different positions are tensed, conflictive and prolonged, feelings of burnout increase (Alarcon, 2011). Thus, the compassion satisfaction experienced at the workplace can reduce feelings of burnout, and its absence can be regarded as a work stressor that has important repercussions on the syndrome (Sanchez-Moreno, Rolda, Gallardo-Peralta & Roda, 2014).

Despite the availability of evidence regarding the harmful effects of compassion satisfaction on burnout, and beneficial influence on well-being, prior research failed to incorporate moderation role of compassion satisfaction systems in the relationship between burnout and employee well-being. This study argues that in the context of well-designed compassion satisfaction systems, the destructive effect of burnout on well-being can be minimized. Few studies have been carried out in Africa in the area of compassion satisfaction and teacher's turnout intentions and work satisfaction and certain demographic characteristics (Kabungaidze, Mahlastshana & Mgirande 2013) among Egyptian teachers and job stress, anxiety and depression (Desouly & Allain 2017). Some studies have also been carried out in Ghana. For instance, Somi (1998) made similar disclosure in their studies that Ghanaian teachers were dissatisfied and unmotivated as a result of low earnings, bad teaching environment and working conditions. Some studies have also been conducted in Ghana instance assessment of burnout and employee commitment among teachers of Ghana Education Service in the Tema Metropolis (Afabia, 2016) explaining issues of teacher retention and attrition in Ghana (Effah & Osei-Owusu, 2014). Factors after

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job satisfaction among teachers of selected schools in Tema (Nutsuko,2015). In order to address this gap in the literature, this current research focuses on burnout, compassion satisfaction and teacher wellbeing within Senior High Schools in Tema Metropolis. This study therefore examines the effect of burnout on employee well-being under conditions of workplace compassion satisfaction system among second cycle school teachers within the Tema metropolis of Ghana.

1.2 Problem Statement

There is growing acknowledgement that burnout has implications for employees' productivity, commitment, satisfaction, institutions' competitiveness, and effectiveness (Miller, 2016; Erdogan et al, 2012; Sonnentag, 2016; Hakanen et al, 2017). In view of the growing importance of employee well-being, academic research investigating the effects of burnout on well-being has increased over the last few decades (Correa et al., 2019; Rehman, Bhutta & You, 2019; Novess, 2015; Chi-Ming & Bi-Kim, 2019). What we know from these studies is that burnout contains harmful influence on employees' well-being. But what previous studies fail to let us know relates to how the negative impacts of burnout can be reduced or prevented. Preventing the incidence of job burnout is important for the quality of employees' working life, and by extension for organizational good (Maslach, 2017). Studies (Rehman, Bhutta & You, 2019; Chi-Ming & Bi-Kim, 2019) report of negative relationship between compassion satisfaction and burnout, implying that quality compassion satisfaction reduces the occurrence of job burnout among employees. Also, outcomes from other group of studies (Awang, Kutty & Ahmad, 2014; Ozyer & Polatci, 2017) show that compassion satisfaction improves employee well-being. Notwithstanding these evidence, prior research has not integrated the role of compassion satisfaction in containing the harmful impact of workplace burnout, and

has therefore not proffered a solution for burnout conditions in the workplace. Farah (2019) urged scholars to apply organizational-level intervening constructs that can moderate or mitigate burnout's dangers on well-being as a way of broadening knowledge and create better understanding. In agreement with Farah (2019), this study argues that the presence compassion satisfaction practices in the workplace can offer dwindling buffer for burnout. . Few studies have been carried out in African in the area of compassion satisfaction and teacher's turnout intentions and work satisfaction and certain demographic characteristics (Kabungaidze, Mahlastshana & Mgirande, 2013) among Egyptian teachers and job stress, anxiety and depression (Desouly & Allain 2017).

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This study aims at examining the effect of job burnout on employee well-being and the role compassion satisfaction systems play in the relationship between burnout and employee well-being among teachers in second cycle educational institutions in the Tema metropolis.

1.3 Conceptual Framework

This study is pictorially represented by Figure 1. For this study, primary emphasis is laid on the relationship between job burnout and employee wellbeing, illustrated by arrow number one. Following prior research, burnout is expected to have damaging relationship with wellbeing. The arrow number two shows the second path of the relationships being examined. That arrow connects compassion satisfaction to employee wellbeing, and as shown by extant literature, compassion satisfaction is envisaged to contain beneficial influence on employees' wellbeing. The third route of the relationships is shown by the arrow numbered three. This arrow pertains to or describes the moderation role of compassion satisfaction in the relationship between burnout and employee wellbeing. Here, the effect of the interaction term or multiplicative construct for burnout and compassion satisfaction on employee wellbeing is examined. It is expected that compassion satisfaction will reverse the destructive impact of burnout on wellbeing, and so the combined effect of compassion satisfaction and burnout on employee wellbeing is also expected to be positive and significant.

Figure 1: Conceptual framework

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1.4 Purpose of the Study

This study generally seeks to examine the relationship among compassion satisfaction, burnout, and employee wellbeing among teachers. The study further examines the role of compassion satisfaction in the relationship between burnout and wellbeing.

1.5 Research Objectives

The study focuses on the following specific objectives.

1. To examine the relationship among compassion satisfaction, burnout and employee wellbeing.

2. To examine the effect of compassion satisfaction on employee wellbeing.

3. To examine the moderating role of compassion satisfaction in the relationship between burnout and employee wellbeing.

1.6 Hypothesis

The following hypotheses guided the study:

H_01:   There is no statistically significant relationship among compassion.

satisfaction, burnout, and employee wellbeing

H_02:   There is no statistically significant prediction of wellbeing by compassion

satisfaction.

H_03:   There is no statistically significant moderating role of compassion satisfaction

in the relationship between burnout and employee wellbeing.

1.7 Significance of the Study

The justification for conducting this study lies in its relevance for practice, policy making and contribution towards literature. This study's focus on job burnout predicting employee well-being is important as its findings can benefit a number of stakeholders within the educational sector. It is envisaged that the findings of this study will stimulate understanding on how both compassion satisfaction and burnout play a role in employees' wellbeing. This understanding is expected to engineer awareness at the individual level and further generate practical institutional reforms meant to minimize the occurrence of stressful workplace conditions capable of breeding conditions of burnout. In the end, the importance of having sound employees' well-being-induced working conditions in second cycle schools may be acknowledged by school authorities. Similarly, this study's outcomes may rekindle the awareness of school authorities to re-consider the need for advocating the institution of or strengthening psychological counseling units or for the embellishment health posts in schools to see to the health needs of the school community.

Equally important relevance of this study lies in the ability of teachers to develop customized compassion satisfaction systems at the personal level. The study's

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findings on compassion satisfaction's effects on wellbeing is expected to impress upon teachers to see the need for the development of burnout mitigation strategies at the individual level for better wellbeing as they juggle between multiple roles.

Also, the study offers opportunity for both public and private sector non-educational institutions to learn through information and knowledge sharing about compassion satisfaction as antecedent of employee well-being and stability among their workforce. The study foresees that this learning may trigger organizational thinking, planning and policy introduction or review pertaining to institutional support systems in the workplace. The outcomes of this paper may therefore be used to guide institutional strategies to improve workplace well-being. Consequently, the potential benefits to be gained from institutional actions applying the results of this study concerns the development of strategies to reduce the physical and psychological risks of workplace environments while maximizing employee well-being.

The contribution of this study to literature lies in its introduction of compassion satisfaction as a moderation variable in the relationship between job burnout and employee well-being, and the outcomes are expected to fuel understanding among scholars about the indirect positive influence compassion satisfaction practices contain for stabilizing well-being.

1.8 Delimitations

This study conceptually focuses on three constructs. These are burnout, employee well-being and compassion satisfaction. The study, thus, examines the relationship between burnout and well-being, and ascertains how compassion satisfaction moderates this relationship. This study is conducted in the Ghanaian educational sector and draws data from teachers in second cycle schools in the Tema metropolis.

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1.9 Definition of terms

Compassion satisfaction: It is the positive consequence of helping behavior and it involves the pleasure one derives from helping, positive feelings we have for colleagues and a good feeling resulting from the ability to assist others and make a contribution.

Employee wellbeing: It **is** the state of mental and physical health influenced by workplace relationships, resources, and decisions.

Job Burnout: It is a special type of work-related stress — a state of physical or emotional exhaustion that also involves a sense of reduced accomplishment and loss of personal identity.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter is the literature review segment of the study. It provides the theoretical and conceptual frameworks underpinning the study. It also discusses the concepts which form the foundations of the study. The chapter basically presents a review of existing literature with the view of providing information on the theories within which the study is situated and sheds light on what is already known regarding on navigating burnout, compassion satisfaction and wellbeing among female teachers in Ghana.

2.2 Conceptual Review

Under this section, the researcher presents concepts relevant to the study. Concepts of burnout, compassion satisfaction and wellbeing are discussed.

2.2.1 The Concept of Burnout

The concept of burnout was first introduced in the 1970s by Freudenberger (Bakker, Demerouti & Sanz-Vergel, 2014 Dimitrios & Konstantinos, 2014). Freudenberger used this term to describe the gradual emotional depletion and loss of motivation he observed among individuals who had volunteered to work for aid organisations in New York (Bakker et al., 2014). At the beginning the volunteers had worked with great dedication and enthusiasm for many months prior to the onset of the symptoms of burnout (Bakker et al., 2014). On the basis of his observations on the behaviour of those workers, Freudenberger defined burnout as a state of mental and physical exhaustion which he referred to as the extinction of motivation or incentive, where an employee's devotion to his/her work fails to produce good results (Bakker et al., 2014). According to Bakker et al. (2014) individuals who experience burnout

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deplete their energy and lose dedication to their work. In the 1970s research on burnout focused mainly on health workers with investigations initiated by researcher observation that discovered that after prolonged stress, employees' exhibit physical exhaustion, losing motivation and dedication (Dimitrios & Konstantinos, 2014). During this period, researchers determined that burnout among health workers was caused by heavy workloads and negative feedback which health workers received from their clients (Dimitrios & Konstantinos, 2014).

During the 1980s, studies on burnout became more systematic and empirical (Dimitrios & Konstantinos, 2014), with measurement scales developed for assessing the degree of burnout, such as the Maslach Burnout Inventory (Dimitrios & Konstantinos, 2014). The use of these measurement scales helped researchers to discover that work-related stress and burnout are associated with job dissatisfaction, frustrations and work conditions not conducive to general well-being (Bataineh & Alsagheer, 2012; Dimitrios & Konstantinos, 2014). In the 1990s, research on burnout widened its scope to cover other professions such as military commanders, priests and teachers (Dimitrios & Konstantinos, 2014). During this period, measurement tools for measuring burnout were further improved and statistical methods of data analysis were predominantly used to analyse the data of burnout investigations (Dimitrios & Konstantinos, 2014).

In addition, Koruklu, Feyzioğlu, Özenoğlu-Kiremit and Aladağ (2012) define burnout as a function of stress which individuals feel in their social and professional life. It is also defined as a loss of aim, energy and idealism towards the job (Koruklu et al., 2012). According to Utami and Nahartyo (2012) burnout means an inability to function effectively in the work environment as a consequence of prolonged and extensive work-related stress. Burnout is also defined as the response to chronic

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work-related emotional and interpersonal stressors that emerge from long-term exposure to demanding situations (Reddy & Poornima, 2012; Utami & Nahartyo, 2012).

In essence, burnout can be understood as the extreme result of the long-term effects of excessive stress representing a slow process of progressive loss of energy and enthusiasm (Bakker, Demerouti & Sanz-Vergel, 2014; Reddy & Poornima, 2012). Aksu and Temeloglu (2015) observe that burnout is the last point of coping with chronic stress. Victims of burnout syndrome eventually encounter physical and mental problems (Aksu & Temeloglu, 2015). Victims of burnout are dangerous to society because they can reach a point of harming other people (Aksu & Temeloglu, 2015). Burnout is a prolonged process, with its three related symptoms appearing sequentially (Aksu & Temeloglu, 2015; Utami & Nahartyo, 2012). The three dimensions of burnout are emotional exhaustion, depersonalization and reduced personal accomplishment.

Similarly, burnout is a critical issue in the psychological literature and has been found to correlate with a number of important organizational constructs such as turnover intentions, job satisfaction and organizational commitment (Alarcon, 2011). According to Colman (2003) burnout is an acute stress reaction that is characterized by exhaustion, resulting from overwork, with anxiety, fatigue, insomnia, depression, and impairment in work performance. It has also been described as a prolonged exhaustion and lack of interest in the work context (Maslach, Schaufeli & Leiter, 2001). According to Doohan (1982), burnout is a physical, emotional, psychological and spiritual phenomena characterized by an experience of personal fatigue, alienation and failure among others. Victims of burnout according to Doohan (1982) experience progressive loss of idealism, energy and purpose. Manifestation of

extreme burnout are distancing oneself from others, regarding one's efforts as failure and abandoning work. From these conceptualisations the present study considers burnout as exhaustion of physical or emotional strength or motivation usually as a result of prolonged stress or frustration (Maslach et al. , 2001).

Several scales have been developed to measure burnout. However, the most prevalent measure of burnout is the Maslach Burnout Inventory (MBI; Maslach et al., 2001). The MBI comprises three subscales, exhaustion, cynicism, and professional inefficacy or reduced personal accomplishment. Exhaustion consists of a feeling of not being able to give any more emotionally to the job because people have nothing more to give (Maslach & Goldberg, 1999; Maslach et al., 2001). It is considered the core component of burnout and consists of feeling of being overextended and depleted of one's emotional and physical resources (Halbesleben & Demerouti, 2005).

Depersonalization, later reconceptualised as cynicism, is an attempt to distance one's self from the job and clients by ignoring the job and client's unique and engaging qualities. Reduced personal accomplishment (professional inefficacy) is a decrease in one's perceived professional efficacy (Maslach & Leiter, 1997). Burnout has been correlated with increased role ambiguity and workload and decreased hardiness, active coping, social support and age (Duquete et al., 1994). In the present study, the conceptualization of Maslach et al. (2001) of burnout is adopted. It is thus measured with the three subscales of the Maslach Burnout Inventory General Survey (MBI-GS) consisting of exhaustion, cynicism, and professional inefficacy.

2.2.2 Compassion Satisfaction

Caplan (1974) suggests that compassion satisfaction systems consist of "continuing social aggregates that provide individuals with opportunities for feedback about themselves and validations of their expectations of others." Lin, Simeone,

Ensel, and Kuo (1979) identify social support with social networks or social environments. They define compassion satisfaction as compassion accessible to an individual through social ties with other individuals, groups, and the larger community. House (1981) defines compassion satisfaction as an interpersonal transaction involving one or more of the following: (1) emotional concern (liking, love, and empathy), (2) material aid (goods or services), (3) information (about the environment), or (4) appraisal (information relevant to self-evaluation). Summarizing the various definitions of social support, social support is perceived support from one's interpersonal networks in solving one's problems or in improving one's well-being.

It has been hypothesized that compassion has positive functions on stressors and strain. Stressors and strains vary in the types of adaptation demands they make, and the various characteristics of compassion satisfaction differ with respect to the type of adaptation demands they can moderate. That is, definitions of social support have been based on the assumption that social support is effective in minimizing the negative effects of stressors and strains when there is congruence between adaptation demands of stress at work and characteristics of compassion satisfaction (Wilcox & Vernberg, 1985). Thus, determining characteristics of compassion satisfaction which are associated with stress can be a key point in minimizing stress effects on health and productivity at work. Source and function are primary characteristics of social support (House, 1981).

Similarly, compassion satisfaction is an interpersonal transaction of help from a support source to the help receiver that involves emotions, material assistance and information and that takes place in a specific family, work or caregiving context. In general, a multidimensional definition is adopted, and thus Laireiter and Baumann

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(1992) suggest it consists of five components: compassion networks, the quality of the relationships, the compassion provided and received, perceived compassion, and active participation in community life.

Compassion satisfaction has potential positive effects on stress and protects against burnout. In the work context, interpersonal relationships can become a source of stress, but when there is good interpersonal communication and perceived compassion satisfaction the negative effects of stress are buffered. On the other hand, if the relationships with users, peers, or colleagues in different positions are tense, conflictive and prolonged, feelings of burnout increase. Similarly, the lack of support from colleagues and supervisors, or from the management or administration of the organization, can favour the appearance of this syndrome (Gil-Monte & Peiró, 1997). Thus, the compassion satisfaction offered by colleagues and supervisors can reduce feelings of burnout (Collings & Murray, 1996), and its absence can be regarded as a work stressor that has important repercussions on the syndrome. Coady, Kent and Davis (1990) found that there was no significant relationship between scores on emotional exhaustion and a depersonalization subscale and the social workers' perception of team compassion. On the other hand, social workers who perceived the team as being supportive had less risk of burnout and scored higher in the measure of personal accomplishment. Thus, although no correlation was found between compassion satisfaction regarding supervisors' and social workers' scores on emotional exhaustion or personal accomplishment subscales, significant differences were found on the depersonalization subscale, since social workers who perceived more support from their supervisors had less risk of burnout.

The effect of compassion satisfaction on burnout can vary: it can have a direct effect on perceived stress, and it can act as a mediating factor between perceived

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stress and burnout (Rodriguez, 1995). Koeske and Koeske (1989), in their classic study of social workers, also confirmed the facilitating function of the lack of compassion satisfaction on the effects of job stress on feelings of emotional exhaustion. In general, compassion satisfaction offered by colleagues and supervisors decreases the levels of burnout, whereas its absence can be considered a work stressor that has serious negative effects on job satisfaction. All these studies coincide regarding the value of compassion satisfaction as a resource against burnout. However, the role of compassion satisfaction differs according to each study; compassion satisfaction is seen as an antecedent variable in some studies and as a mediating variable in others. Various models have been proposed: the direct effect model, which suggests that compassion satisfaction has a positive effect on well-being independently of burnout; and the basic buffer effect model, which assumes that compassion satisfaction protects individuals from burnout. Both models have been supported in empirical tests (Power, 1988). The buffer effect model suggests that social support has a stress-alleviation function and reduces the risk of disease (Billings & Moos, 1984; Gore, 1985). Compassion satisfaction is a rather broad term, and in this work, given that we analyse social support in the working context, we will use the term workplace support.

2.2.2.1 Source and Function of Compassion Satisfaction

Source of compassion satisfaction concerns who provides compassion satisfaction. House (1981) indicates that sources of compassion include the major individuals and groups that might provide compassion to the people in need. Supervisor compassion satisfaction and coworker compassion have frequently been measured as sources of compassion satisfaction at work (Israel, House, Schurman, Heaney, & Mero, 1989). House also indicated that supervisors were a more effective

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source of compassion than coworkers in reducing work stress and buffering the impact of work stress on outcomes because cohesive interaction with coworkers was limited. Limited interaction with coworkers is a common feature of many industrial jobs such as assembly-line jobs and service jobs (La Rocco, House, & French, 1980). Coworkers are in similar working conditions to each other and have less power to solve their stressful conditions than supervisors. Therefore, supervisors are more able to supply appropriate compassion at the proper time.

House (1981) discusses that supervisor compassion is affected by what the organization has, especially, management styles, advocate, value, and reward. Sustained changes in supervisory or managerial behavior, including increased emphasis on compassion satisfaction, are likely to occur only in the context of broad organizational participation in compassion. Hutchison and Garstika (1996) also mention that employees view actions taken by agents or supervisors of an organization as representative of actions of the organization itself. They describe this process as personification of the organization. That is, workers' satisfaction with work support affects employees' general feeling of how much their organization takes care of them. The structures of the organization and the jobs within it also have a strong influence on coworker support. In a study of factory workers, coworker compassion had little influence on stress and health because of the highly individuated structure of work in that factory (House & Wills, 1978). Factory workers who work independently of others tend to report lower coworker compassion than other workers. Thus, levels of coworker compassion are also limited by the type of work in addition to the values and climates of the organization (Armeli, Eisenberger, Fasolo, & Lynch, 1998; Eisenberger, Cummings, Armeli, & Lynch, 1997; Hutchison, 1997).

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A function of compassion satisfaction is one of the most frequently measured characteristics of social support (Cohen & Wills, 1985). Function of compassion satisfaction means the kinds of compassion satisfaction that people receive. House (1981) suggested that the main functions of compassion satisfaction were emotional compassion, material compassion, informational compassion, and appraisal compassion. He assumed that all four functions of compassion should be considered as potential forms of compassion, and their different impacts on stress and stress outcomes should be studied more.

Emotional compassion involves providing empathy, caring, love, and trust. The impacts of emotional compassion on stress and health are relatively clearer than those of other functions of compassion (Cohen & Hoberman, 1983; Schaefer, Coyne, & Lazarus, 1981; Stansfeld, Bosma, Hemingway, & Marmot, 1998). Gottlieb (1978) found that individuals thought mainly of emotional compassion when they thought of people being 'supportive' toward them and felt thankful for emotional compassion without feeling burdened by the need to do something for the support that they received. Material compassion consists of aid in money, labor, and time. Material support is more clearly distinguished from emotional support than from other functions of compassion because instrumental helping behaviors directly support something the person needs (House, 1981). However, material support also has fundamental psychological consequences. For example, giving a person money can be a sign of caring or a source of feedback. Informational compassion means providing a person with information that the person can use in coping with personal and environmental problems. It is difficult to clearly differentiate between appraisal support and informational support because appraisal support and informational compassion involve only transmission of information rather than affection involved in

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emotional compassion or the practical aid involved in material compassion (Wilcox & Vernberg, 1985).

2.2.3 Employee Well-being

Findings have indicated that organizational change is negatively related to job, organizational attitudes and employee health and well-being (de Cuyper, Oettel, Berntson, Witte & Alarco, 2008). The literature on organizational change and health indicate that any restructuring has a negative effect on health and increases risk factors that lead to poor health (Westgaard & Winkel, 2011). Previous studies have found restructuring related to increased sick leave and self-rated health (Kivimäki, Vahtera, Pentti, Thomson & Cox, 2001); psychological distress (Kivimäki, Vahtera, Elovainio, Pentti& Virtanen, 2003) and increased drug prescription (Kivimäki, Honkonen, Wahlbeck, Elovainio, Pentti, Klaukka, Vietanen & Vahtera, 2007). Others found restructuring to be related to poor quality sleep (Campbell-Jamison, Worral & Cooper, 2001) and to cardiovascular mortality (Vahtera, Kivimaki, Pentti, Linna, Virtanen, Virtanen & Ferrie, 2004).

Evidence has also been found that downsizing is related to poor health behaviour, such as increased use of alcohol (Frone, 2008). According to Ayinde, Ajila and Akanni (2012), the health-care costs of downsizing to organizations have risen dramatically during the past decade. Thus, employers have to pay attention to the collective health of their employees. The simple fact is that physically healthy workers are more productive and resilient, and do not incur the myriad costs associated with physically unhealthy workers. In view of this, some employers have seen the need to implement wellness programmes in order to boost the general well-being of its workers. The body of knowledge regarding wellness is evolving into a broader concept that includes but goes beyond simple physical health, to treating the

whole individual. This integrated "well-being" approach typically includes several components; physical health (enhancing one's physical fitness); mental/emotional health (resources to balance oneself, situations and others); financial health (tools to attain financial freedom and success); and spiritual health (defined as one's strong sense of self or purpose through beliefs, principles, values and ethical judgments).

The conceptualization of well-being in this study shall adopt the World Health Organization's (WHO) Mental Health concept which defines it as: *"Mental health is not just the absence of mental disorder, but rather a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community"* (WHO, 2011). The change in Ghana education service has not been in existence long enough to impact on employee well-being; hence the interest is in perceived well-being. That is, how employees perceive that they are in optimal psychological health. For this reason, well-being dimensions related to the work known as work-related well-being or workplace well-being (work ability, stress, emotional exhaustion, cynicism, but also the positive side: satisfaction, dedication/engagement) and more general well-being (sickness absence, self-rated health and mental health) are investigated. Additionally, human behaviour is complex and brought about by not only one or two factors but multiple interrelated factors; hence other factors may have an influence on the degree of this relationship by either moderating or mediating the relationship.

2.2.4 Compassion Satisfaction and Employees Well-Being

Compassion satisfaction is frequently used in much socio-psychological and socio-educational research that emphasizes the importance of social relationship among community members (Peters, 2010; Topping & Foggie, 2010; Yaeda, 2010,

Demaray, Malecki, Davidson, Hodgson, & Rebus, 2010, Awang, 2012). It includes inter-personal and inter-group interactions. Compassion satisfaction is one of the focuses in transitional studies in these days. Jindal-Snape (2010) highlights the importance of social support in educational transition for promoting wellbeing and a smooth transition among students across ages, cultural identities, and educational levels. Demaray (2005) conceptualizes 'compassion satisfaction' as "transpiring from multiple sources (parents, teachers, close friends, classmates, school and employees) and consisting of multiple types (emotional, informational, appraisal, and instrumental), which may serve to improve a student's adjustment and outcomes)". However, the concept of compassion satisfaction is considerably vague and requires further investigation. It can be divided into three categories namely perceived social support, enacted compassion satisfaction and social integration. Perceived compassion satisfaction refers to subjective judgment of the assistance quality provided by family members and close friends as well as colleagues; perceived compassion satisfaction stresses on a person's action; while enacted compassion stresses specific supportive actions. Although there is a close link among all three types of compassion satisfaction, the compassionate orientations are different. On the other hand, social integration is more likely to focus on social relations and kinship instead of social action and social interactions. By taking these elements into consideration, the current study uses the term of supportive compassion satisfaction that refers to assistance provided by society, community, peers and family members.

Extensive past studies suggest that there is a strong association between perceived compassion satisfaction and employees well-being. For instance, Asante (2011) found that compassion satisfaction reduces stress level and depressions among youth with challenging behaviour. Past empirical comparative research on compassion

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satisfaction for student wellbeing in Europe (Burholt et al., 2003) revealed that there are differences and similarities in compassion satisfaction between the United Kingdom, Italy, Sweden, Netherlands, Luxembourg and Austria. It was found that age impacts on satisfaction with socio-relationship and gender was a strong indicator of social resources in those countries.

Ethnicity, living arrangements, working status, educational level and household incomes were found to be significant factors for promoting student wellbeing. This indicates that a contextual-based investigation on compassion satisfaction and student wellbeing is vital. Indeed, there has been an accumulation of evidence to suggest a strong association between social life and human wellbeing (Demaray et al., 2005).

Layth et al., (2017) expressed compassion satisfaction as the physical and emotional comfort given to an individual by his/her family, co-workers and others times of need. Among the organizational variables perceived organizational compassion is associated with are job satisfaction, intention to quit, organizational citizenship behavior, motivation, organizational commitment, and performance (Polatcı, 2015). Some personal variables perceived organizational compassion is associated with are job satisfaction, burnout, depression, and psychological well-being (Kılıç & Şahan-Yılmaz, 2015; Panzarella, Alloy, & Whitehouse, 2006). Employees' well-being has diverse dimensions including academic attainment, happiness and enjoyment, ability to adapt with the campus life, and social life in- and out- of university compound (Awang, 2014).

2.3 Theoretical Review

Different scholars have designed several theories to explain of burnout, compassion satisfaction and wellbeing in female teachers. This section discusses the

theory of work design, Adam's equity theory and transactional model of stress and burnout as well as transactional model of stress as the basis for explaining and predicting the on the navigating burnout, compassion satisfaction and wellbeing among female teachers.

2.3.1 Theory of Work Design

Karasek (1979) developed the theory of work design. This was later modified by Karasek and Theorel (1990) (Dewe, O'Driscoll & Cooper, 2012). The theory identified job demand and job control as the two significant factors that affect work the environment. Karasack (1979) stipulates that job demand acts as the psychological stressor which includes finishing the work load, unforeseen tasks and stressors of the job-related personal encounter which have influence on the stress level of employees. Job control on the other hand refers to the employees' ability to have control over their tasks and their demeanor as they embark on their duties (Landy & Conte, 2010; Zirwatul & Ibrahim, 2013). Again, the model posits that the requirements by the employees on themselves are not highly significant factors of stress. But rather the level of stress experienced depends on the level of control they have on the demands of the work.

This interaction was explained as Demand X Control (in terms of discretion or will) on the level of stress (Karasek, 1979). It could also be said that the level of control regulates the effects of demand's pressure on stress (Lund & Conte, 2010). The JDC model postulates that the most hostile effects of emotional drain were indicated to be more significant among people working in high level demand jobs and having less control which results in high job strain (Zirwatul & Ibrahim, 2013). However, the theory also argues that the passiveness or activeness of a job can affect the growth or learning process of an employee. When an employee finds himself in a

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high demand job and also has control over the job, it affords the employee the opportunity to learn new skills and increase productivity (Dewe et. al. 2012). Passive job employees on the hand work in low demand jobs and have less job control. When tasked with difficult jobs, they are not inspired to partake wholeheartedly and attain novel skills out of them (Rodrigues *et al.*, 2001).

2.3.2 Adams' Equity Theory (1965)

Adams (1965, cited by Wang, 2006) proposed an equity theory which stated that pay satisfaction is determined by an employee"s perceived input-outcome balance. Employees feel satisfied when payment is equitable and feel dissatisfied if an inequity exists. In other words, pay satisfaction is determined by the perceived ratio of what employees receive from the job compared to how much they put into the job. In 1968, Locke presented a discrepancy theory to explain satisfaction. According to Locke's theory, satisfaction is determined by the difference between what the person desires and what is actually received (as cited in Lawler, 1971).

Lawler (1971) built the model of the determinants of pay satisfaction. This model emphasized the importance of social comparisons and proposed that pay satisfaction is basically determined by the difference between perceived pay and the person's belief about what his pay should be. Lawler (1981; cited by Wang, 2006) identified two factors: *(a)* perceived amount that should be received, and *(b)* perceived amount received. When $a = b$, the employee feels satisfaction. When $a>b$, or $a<b$, the employee feels dissatisfaction. The perceived amount that should be received *(a)* consists of the following factors; perceived personal job input, which includes skill, experience, training, effort, age, seniority, education, company loyalty, past performance, and present performance; perceived input and outcome of referent others; and perceived job characteristics, which include level, difficulty, timespan,

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and amount of responsibility. The perceived amount received *(b)* consists of the following factors; perceived pay of referent others; and actual pay received.

In addition, based on equity theory (Adams 1963; Walster et al. 1978) and the notion of reciprocity norms (Gouldner 1960). This framework highlights the role of social norms as a mechanism underlying the way by which supportive exchange patterns affect the well-being of individuals. From an equity perspective social reciprocity reflects the idea that the amount of effort exerted on another's behalf should generally be proportionate to the expected return from that investment. According to Gouldner (1960), meta-norms of reciprocity govern social exchanges, with individuals generally feeling an obligation to reciprocate for the receipt of benefits. Accordingly, it has been well established that perceiving the exchange of support as under-reciprocating tends to evoke feelings of unfairness, exploitation, resentment, and burden Rook (1987) while perceiving the exchange as over-reciprocating tends to generate feelings of indebtedness, guilt, and shame (Bowling, Terry, Adam, Norbert, Elizabeth, & Heather, 2004). From this point of view, individuals who perceive their supportive relationships as being reciprocal are likely to have a greater sense of well-being than those perceiving their relationships as either under- or over-reciprocating (Antonucci, Fuhrer & Jackson 1990). Based on this model, the researcher proposes that pay satisfaction will moderate the relationship between social support and employee well-being so that higher perceived pay satisfaction reduces the detrimental effects of poorly perceived social support on perceived well-being.

2.3.3 The Transactional Model of Stress and Burnout

The transactional model of stress and burnout is a suitable framework for conducting research on work stress and burnout. This model explains that a stressful

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transaction or contact between a teacher and his/her work environment results in teacher burnout (Kusi, Mensah & Gyaki, 2014). According to the transactional model of stress and burnout, stress and burnout are the products of the transaction or contact between an individual and his/her environment (Anazodo, Onyeizugbe, & Agbionu, 2012; Dewe, JO'Driscoll, & Cooper, 2012 in Gatchel & Schultz). That is, interaction causing demands in an individual's environment creates stress for that individual (Mackey, 2014). The transactional model of stress and burnout asserts stress as a process which involves a complex transaction between individual and environment (Abbas, Farah & Apkinar-Sposito, 2013). Stress consists of three processes, namely, primary appraisal which entails perceiving a threat, secondary appraisal which involves potential response to a threat and coping that entails executing a response (Abbas et al., 2013). According to the transactional model of stress and burnout, there should be a match or fit between individuals' abilities and their environmental demands (Abbas et al., 2013), because lack of fit between the demands placed on workers and their abilities to meet those demands can result in stress (Kusi et al., 2014). Abbas et al. (2013) argue that in a threatening situation, if the individual lacks the ability to cope, he/she will experience strain.

According to the transactional model of stress and burnout, stress and burnout among teachers is caused by their perception of the imbalance between their classroom demands (challenges) and the resources needed to face those challenges such as support in the form of availability of educational facilities and supervisors' support (Lambert, McCarthy, Fitchett, Lineback & Reiser, 2015). That is, a situation in which teachers perceive that their classroom demands exceeds their resources leads to stress and burnout (Lambert et al., 2015:3). The proponents of the transactional model of stress and burnout make a proposition that teachers' perceptions of

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classroom demand concerning perceived classroom resources result in teacher stress (Lambert et al., 2015). Therefore, according to the transactional model of stress and burnout, teachers who perceive classroom demands as greater than the resources (the demands group) are at high risk of stress and burnout (Lambert et al., 2015). The transactional approach theorists assert that teachers who perceive the highest levels of demands with regard to insufficient classroom resources are likely to experience behaviour related to complaints about undesirable learner behaviour, work dissatisfaction and little occupational commitment (Lambert et al., 2015).

The transactional model of stress and burnout hypothesises that when a teacher encounters life's challenges, there is always a subjective transaction in which the teacher weighs perceived demands of the event against perceived coping abilities (Ifeagwazi, Chukwuorji & Ugwu, 2013). It then follows that if the demands of the situation outweigh available resources to meet the challenges, stress and other psychopathological symptoms such as depression occur (Ifeagwazi et al., 2013). The transactional model of stress and burnout upholds a view that the transaction between the teacher and his/her environment determines whether the teacher may encounter stress or burnout (Ifeagwazi et al., 2013). There is disequilibrium when the teachers' work demands exceed available resources (Ifeagwazi et al., 2013). Ifeagwazi et al. (2013) postulate that the dynamics of a school entails that there could be excessive demands beyond the resources available to the teacher (Ifeagwazi et al., 2013). For example, Ifeagwazi et al. (2013) note that the current teaching realities might be inconsistent with teacher training and resources available at school, which might result in teacher stress and burnout (Ifeagwazi et al., 2013).

2.3.4 Transactional Model of Stress

The model was propounded by Lazarus and Folkman (1984). The model sieved as a coping framework for situations such as stressful events. It is beneficial in many instances such as educating people on health and preventing diseases (Glanz *et al., 2008).* Nurses mostly encounter situations where patients demand care. They are also faced with the trauma that surrounds deaths of patients as well as working for long hours (Sexton et al. 2009). According to Lazarus and Cohen (1977), stress is caused by demands that are made within environments that are both internal and external to the victim. This is detrimental to both the wellbeing of the individual in both physical and the psychological sense. The authors therefore proposed a model of stress by considering it to be a transactional problem. Thus, an appraisal of the stressful situation is done first by the victim of stress to understand its meaning. Then the resources at the disposal of the individual are considered to manage the situation. The appraisal can either be a positive or a negative one. Positively, it is interpreted as something that is necessary. In the negative sense, it can be interpreted to mean a dangerous occurrence or one that has potential threats. Cohen (1984) groups these appraisal forms into primary and secondary appraisals. Primary appraisal describes the individual's judgment about the significance of the situation as one that has stress, whether in its positive or negative sense. The secondary appraisal on the other hand assesses the individual's ability to cope with the situation by evaluating the mechanisms available. The theory therefore seeks to uncover issues that border on the burnout, social support as well as their coping mechanisms of wellbeing of employees.

2.4 Empirical Review

A couple of studies have been performed to address how burnout and well-being are inter-related, and it is important that outcomes from past studies are discussed. This section presents a review of prior work pertaining to the consequences of burnout on well-being. Sanchez-Moreno, Rolda, Gallardo-Peralta and Roda (2014) examined burnout, informal compassion satisfaction and psychological distress among social workers in Spain with a sample size of 189 employees. The study adopted a cross-sectional design. The study employed 7-point Likert scale with questionnaire while descriptive statistics such as mean and standard deviation was applied. Correlation regression was used to measure the relationship between burnout, informal social support and psychological distress. The results from the study show a high incidence of psychological distress and burnout, as well as emotional exhaustion. The results of the study further confirmed the importance of informal compassion satisfaction as a variable negatively related to distress, even in the presence of burnout.

Asonaba (2015) investigated how female teachers manage stress and teacher burnout in Ghana, using a sample size of 25 female teachers. The study adopted a quantitative approach and employed descriptive cross-sectional design. Descriptive statistics include frequency table, percentage, chart, mean and standard deviation were used. The study utilized a 5-point Likert scale with questionnaire. The findings from the study revealed that the stress level of the female teachers was high. Work over-load and interpersonal relationship were the main causes of stress of the female teachers. Majority of the female teachers strongly agreed that stress made them perform below standard.

Ferguson, Mang and Frost, L. (2017) studied teacher stress and social support usage in Canada with a sample size of 264 respondents. Variables used included stress factors, job satisfaction, career intent, career commitment, and the perception of a stigma attached to teacher stress. The study used a 5-point Likert scale with questionnaire. The study employed Principal Components Analysis (PCA) and ordinal logistic coefficient correlation regression for data estimation. Findings from the study revealed that teachers seldom spoke to their health care providers about stress and instead utilized family, friends, fellow teachers, and sometimes their principals. The result of the study further indicated that the frequency of which teachers accessed different social support networks did vary depending on stressor (workload, student behaviour, professional relationships, societal attitudes, and employment conditions). Again, teachers who frequently talked to their friends about stress had a lower sense of career intent and career commitment. Finally, the result of the study revealed that males were less likely to talk to their various social supports about stress.

Agyemeng (2017) examined emotional labour and psychological health on media practitioners in Ghana, using a sample size of 336 participants. The study adopted a mixed method approach. Pearson's product moment correlation, Hayes process moderation analysis and standard multiple regression were used for data estimation. Findings from the study revealed that surface acting significantly related to general wellbeing and emotional exhaustion but not psychological distress. Additionally, the results from the study revealed that media practitioners who engage in surface acting experience emotional exhaustion indirectly through psychological effort. Religiosity significantly moderated the relationship between surface acting and emotional exhaustion as well as psychological distress. The result of the study further revealed depressive symptoms, stress, emotional dissonance, suicidal ideations,

nightmares and associated insomnia, work-life balance challenges, turnover intentions, and superior-subordinate bullying, as key explorations of media practitioners' psychological health states. Feedback from the public, fellow employees, friends and family emerged as predisposing factors of emotional labour experiences. Even though some media practitioners resort to poor coping strategies such as abuse of alcohol, smoking, and intemperance in social activities, majority recourse to personal, religious and social resources as effective coping strategies to deal with emotional labour demands.

Caterina, Ottavia, Piera and Alessandro (2016) explored the relationships among teachers' emotional competence, burnout as a mediator, and social support in Italy, using structural equation modelling. The study used a sample size of 149 teachers. The findings from the study indicated that teacher burnout partially mediated the relationship between emotional intensity and satisfaction with social support received. The results of the study also showed that teachers were at risk of highly intense unpleasant emotions in relation to their burnout syndrome. Moreover, teachers' satisfaction/dissatisfaction with compassion satisfaction received was pred by burnout symptoms.

Muasya (2015) investigated the relationship between stressors, work-family conflict, and burnout among female teachers in Kenya with a sample size of 375 female teachers. The study used descriptive statistics such as mean and standard deviation while content analysis and coefficient correlation regression was used for data estimation. The study applied 5-point likert scale with questionnaire. Findings from the study revealed that teachers clearly identified and described stressors that led to work-family conflict: inability to get reliable compassion from domestic workers, a sick child, and high expectations of a wife at home, high workloads at school and

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home, low schedule flexibility, and number of days teachers spend at school beyond normal working hours.

Work-family conflict experienced was cyclical in nature. Stressors influenced work-family conflict, which led to adverse outcomes. The result of the study established that culture of the school and school's resources influenced the level of support that teachers received. The level of work-family conflict support that teachers received depended on the goodwill of supervisors and colleagues. The result of the study also revealed that work-family conflict contributed to emotional exhaustion, cynicism, and professional efficacy. Time and emotional investment in students' parents was related to emotional exhaustion; time and emotional investment in students' behavior, the number of years teaching experience, and number of children was related to professional efficacy. Compassion from teachers' spouses enabled teachers to cope with cynicism.

Rehman, Bhutta, and You (2019) studied linking burnout to psychological well-being of the mediating role of social support and learning motivation in China with a sample size of 486 participants. Pearson correlation regression was used for data estimation. Findings from the study revealed that social support plays a significant role in the link between burnout and subjective well-being. Indeed, the chain mediation model of compassion satisfaction and learning motivation significantly indicated the link between burnout and psychological wellbeing. The findings from the study show that an increase in compassion satisfaction at an educational institute reduces the effects of burnout and enhances psychological well-being. Subsequently, the result of the study indicated that a sound interpretation of psychological well-being and reducing the level of burnout. Finally, the result of the study indicated that compassion satisfaction and learning motivation could be an

essential variable in calculating the educational success and learning motivation of the students.

Makhetha (2019) examined stress coping strategies to prevent burnout amongst 600 primary school teachers in Lesotho. The study adopted mixed-methods research approach. Descriptive statistics such as frequency table, charts, mean and standard deviation was used. The study employed correlation coefficient regression and Analysis of Variance (ANOVA) for data estimation. The findings of the study revealed that variables such as work overload, organisational climate and role conflict are predictors of burnout among teachers. Other variables predicting teacher burnout pertain to learner indiscipline, teacher personality and insufficient teacher remuneration and burnout attacks career motivation. The results from the study also show that they causes aggressive and violent behaviour among teachers. Teachers buffer stress and prevent burnout by employing constructive, less constructive and neutral stress coping strategies. The result of the study indicated that to alleviate stress and prevent burnout among teachers , it is by clarifying their job descriptions, instituting formal induction programmes for new teachers and ensuring that teacher salaries are on par with equivalent professional careers.

Ampofo, Nasse, and Akouwerabou (2020) studied the effects of stress on performance of workers in Ghana, using a sample size of 50 respondents. The study adopted descriptive survey research design. Descriptive statistics like frequency table, percentage and chart. The study applied a 5-point Likert scale with questionnaire while employed correlation regression for data estimation. The results from the study revealed that there were many stress factors that the respondents endured, and the enquiry proved that stress has an effect on performance. In addition, majority of the respondents reported to work under pressure and that they feel uncared

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for by the organization. The result of the study also indicated that majority of respondents thought of leaving their job and felt that the organization did not care about them was a reflection of huge dissatisfaction that undoubtedly lowered performance.

Novess (2015) examined the influence of burnout symptoms on the relationship between work-life balance and self-rated health in Canada with a sample size of 220 managers. The study adopted cross-sectional research design. The study used a 4-point Likert scale with questionnaire. Variables used were burnout, stress, sleep troubles, cognitive, and somatic symptoms. One-way analysis of variance (ANOVA) was conducted to determine the relationship between work-life balance and self-rated health. The findings from the study revealed that there were no significant differences in self-rated health based on a respondent's gender or age, indicating that no interaction of gender and age would be required. Additionally, respondents with low self-rated health reported significantly higher burnout and work-life imbalance compared to those with high self-rated health. Findings from the study established that the magnitude in which burnout mediates the relationship between work-life balance and self-rated health. Again, the result of the study revealed that associate high levels of work-life imbalance or burnout with poor self-rated health or health outcomes. Therefore, the shared variance between work-life balance and burnout also supports recent efforts to redefine the context and causes of burnout to include non-work factors. The findings from the indicated that the potential exists for the development of workplace health promotion strategies that address maintaining a balance between work and home as they may improve employee health and reduce burnout.

Odonkor and Frimpong (2020) studied burnout among healthcare professionals in Ghana, using a sample size of 365 respondents. The study adopted cross-sectional research design and employed a 7-point likert scale with questionnaire. Descriptive statistics include frequencies, means, and standard deviations were used to describe the variables. A chi-squared test was utilized to measure the association between burnout and related characteristics while logistic regression model was employed for data estimated.

The results from the study revealed that among the occupations in health institutions, nurses had the highest vulnerability in experiencing burnouts. Again, findings indicated that females also dominate the nursing occupation so there is higher number of females in the nursing fields as compared with males coupled with a higher burnout than males.

Karaa, Uysalb, Sirgyc and Leed (2013) investigated the effects of leadership style on employee well-being in hospitality in Turkey. The study used a sample size of 443 employees and employed 5-point Likert scale with questionnaire. Variables used for fostering employee well-being include enhancing quality of work life and life satisfaction as well as increasing organizational commitment and decreasing employee burnout. Descriptive statistics include frequencies, means, and standard deviations were used while correlation regression was employed for data estimation. The results from the study revealed that provide compassionate for the positive effect of transformational leadership in the hospitality industry, which implies that hospitality managers should be trained to use a transformational leadership style to enhance employee well-being. The result of the study established that understanding how leadership style influences quality of work life, burnout, organizational commitment, and employees' satisfaction with life in the hospitality industry should

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empower hospitality leaders to create the best working environment that would mitigate the negative effects of the workplace while improving the well-being of employees.

Quaicoe (2018) examined job related stress among mental health nurses in Ghana with a sample size of 215 nurses. The main purpose of the study was to assess the effects of job-related stress on mental healthcare delivery and explored coping strategies among mental health nurses. The study adopted a mixed method approach. The study utilized 5-point Likert scale with questionnaire. Bivariate descriptive statistics include cross-tabulations and chi-square, binomial logistic regression, multiple regression, t-test and factor analysis were used to establish relationships between the dependent variable and the independent variables. The results from the study revealed that age, rank, ward, and shift are background characteristics that influence stress. Aggressive patients, inadequate logistics and low nurse to patient ratio were the major causes of stress. The finding of the study also revealed that stress has an effect on the delivery of health services by mental health nurses. Again, the result of the show that stress was also found to negatively affect the physical health and psychological health of nurses. The result of the study established that nurses call on their colleagues for assistance in handling stressful situations.

Obeng (2016) investigated impact of stress on the occurrence of accidents on construction sites in Ghana, using a sample size of 204 respondents. The study adopted a deductive approach research design. The study used a 5-point Likert scale with questionnaire. Structural Equation Model (SEM) and correlation coefficients regression was for data estimation. The results from the study revealed that on the job related stressors showed ambitious deadlines, low salary and working in dangerous environment to be the stressors causing the most stress on construction workers in

Ghana. Results from the study showed that workload to be the stressor impacting the most on accidents occurring on construction sites.

Abasimi (2015) examined the relationships among psychosocial work environment, job stress recovery experiences, psychological capital and occupational wellbeing in Ghana. The study used a sample size of 322 nurses and teachers. Descriptive statistics include frequencies, means, and standard deviation was utilized. Factor analysis and principal components analysis (PCA), correlation coefficient regression and one – way ANOVA were employed for data estimation. The results from the study showed that the psychosocial work environment factors of psychological job demand, emotional job demands, workplace spirituality and predictability at work were associated with the occupational wellbeing indicators of burnout, work engagement and career commitment such that emotional job demands generally affected employee wellbeing and they are associated with burnout. Further, job resources such as workplace spirituality improved wellbeing due to its association to work engagement.

Moreover, findings from the study revealed that emotional job demands predicted some recovery experiences such as personal spirituality, while workplace spirituality positively predicted the recovery experiences of personal spirituality, mastery, control and relaxation. Again, psychosocial work environment factors such as emotional demands and workplace spirituality predicted psychological capital. Recovery experiences of personal spirituality, mastery and control each had a positive effect on work engagement. Finally, the result of the study revealed that nurses reported higher levels of exhaustion, cynicism and professional inefficacy (burnout) than teachers. Therefore, females reported higher cynicism and professional inefficacy than males.

Yeboah, Ansong, Antwi and Yiranbon (2014) studied determinants of workplace stress among 453 healthcare professionals in Ghana. The study applied 5-point likert scale with questionnaire. The study employed factor analysis, ANOVA and linear regression model for data estimation. The results from the study revealed that demand factors, control factors, compassion factors, relationships factors, change factors and role factors that have been analysed have significant impact on employees stress though. Therefore, the variables do not impact on employees in the same measure. Findings from the study further shows that specialist physicians, general practitioners/family physicians, and registered nurses (excluding supervisors and head nurses) had a statistically elevated likelihood of work stress relative to other health care providers. The result of the study indicated that frontline health care providers such as doctors and nurses are far more likely than other employed people in the hospital to feel that their jobs are highly stressful.

Chi-Ming and Bi-Kim (2019) investigated how the role of workplace compassion satisfaction and gender affect the relationship between work stress and the physical and mental health of 398 military personnel in Taiwan. The study adopted closed- questionnaire design with 5-point likert scale while structural equation modelling was employed for data estimation. The results from the study revealed that military personnel expressed significantly high perceptions of work-related stress. In addition, finding of the study show that compassion satisfaction from supervisors and colleagues is a crucial factor in buffering the effect of work-related stress on perceived health, and increasing the physical and mental health among military personnel. Finding of the study shows that male personnel who perceived higher stress and gained more social support from supervisors and colleagues than female personnel were less likely to have physical and mental issues than female personnel.

Louise and Antigonos (2019) investigated the moderating effects of social support on the link between workplace bullying and burnout United Kingdom, using a sample size of 222 employees. The study used 5-point likert scale with questionnaire. Pearson correlation regression was employed for data estimation. Findings from the study revealed that colleague and supervisor support moderated the relationship between both work and person-related bullying with burnout while family and senior management support moderated the links between burnout and person-related and physically intimidating bullying respectively. Again, high levels of emotional support were associated with greater emotional exhaustion in work-related and overall bullying. Finally, the results of the study indicated that different forms of social support moderated the links between different forms of workplace bullying and different components of burnout.

Awang, Kutty and Ahmad (2014) studied perceived social support and well being of first-year student experience in University in Malaysia. The study used a sample size of 16 first year undergraduate students. The study utilized individual semi-structured interview protocols to gather narrative data. Variables used for the study were social support from university community, peers and family members. The result of the study revealed that academic adjustments, social adjustment and emotional among new students are dependent on their abilities in receiving socio-educational support from friends (supportive friendship) and families. The results of the study also revealed the powerful influence of parents and the importance of socio-relationship for student wellbeing. Findings of the study further indicated that the importance of student community, senior students and family-networks in adapting to a new learning environment.

Mensah (2013) investigated the mediating effects of pay satisfaction and employability on the relationship between perceived change management and employee wellbeing among some 274 employees of Ghana Revenue Authority (GRA). The study adopted cross-sectional survey research design. Descriptive statistics include frequencies, means, and standard deviation was utilized while correlation coefficient regression for data estimation. The study used variables such as received change management, perceived pay satisfaction, perceived employability, and perceived employee well-being. The results of the study indicated that employees who perceived change management to be positive had better wellbeing than those who perceived it to be negative with pay satisfaction mediating. This implied that the effect of perceived change management on employee wellbeing is significantly dependent on the level of satisfaction employees have with their current pay. The mediating role of perceived employability was not significant.

Özyer, K & Polatci, S. (2017) investigated the effects of organizational and social support on employees' psychological well-being in Turkey with a sample size of 145 employees. The study employed a 5-point Likert response scale with questionnaire. Descriptive statistics like frequency table, percentage, and chart. Correlation coefficient regression was to determine which type of perceived compassion organizational or social makes employees experience greater well-being. Social support may be derived from family, friends, peers, and other personal networks. It differs from organizational support, which involves bosses, managers, co-workers, and trainers or formal mentors. The results from the study revealed that social support is more effective in increasing the psychological well-being of employees. The results of the study also show that organizational support and

compassion satisfaction have no significant effects on employees' psychological well-being.

2.5 Chapter Summary

This chapter highlights the literature based upon which the study is founded. The chapter is made up of four sections beginning with conceptual literature where basic concepts relating to the topic are described. In the second section, the theoretical literature is discussed. Review of past studies is carried out in the empirical literature section. The last section dwells on conceptual framework which pictorially shows the variable constructs around the study revolves. The empirical review shows plethora of studies on burnout, social support and well being among female teachers but studies in Ghana are very limited, making it difficult to know which navigating burnout, social support and wellbeing among female teachers drive choice in educational sector.
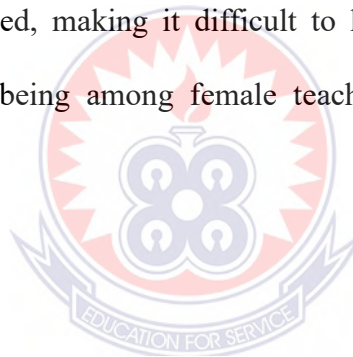
CHAPTER THREE

METHODOLOGY

3.1 Introduction

This chapter deals with the methodology adopted for this study. It describes the methods pertaining to the conduct of the study in terms of research approach, philosophy and design. It also treats the sampling methods, data collection strategy and describes the tools used for collecting the data. The statistical tools applied for data analysis are also presented. A section is also created for ethical consideration.

3.2 Research Philosophy

Research philosophies refer to the conventions underpinning social science research. Babbie (2005) describes them as the central conceptualizations that are applied in organizing empirical enquiries. The practice of research is influenced by various philosophical ideas, and so must be recognized in helping the explanation of why a particular approach is used. Bryman and Bell (2007) observe that the philosophy determines the approach adopted, while the study's problem along with data assembling procedures contribute to settling on the approach one can adopt. Similarly, Johnson and Clark (2006) observe that a study's strategy is reinforced by the philosophy behind that particular study, as well as the methodological procedures selected for a particular strategy. Saunders, Lewis and Thornhill (2009) assert that the extent to which the selected philosophy is deemed suitable can be determined by the underlying questions the study intends to address, adding that two paradigms are available for the conceptualization of research philosophy. These are the ontology framework and the epistemology framework. Ontology is made up of two aspects, objectivity and subjectivity. Epistemology on the other hand consists of the paradigms of positivism, interpretivism, and constructivism (Creswell, 2009; Saunders et al.,

2009). Objectivism holds the view that in real situations social events and social operators prevail independently of each other (Crotty, 1998). Objectivism posits that factual aspects are not driven by individual views and social norms, but on objectivity driven by scientific procedures (Babbie, 2005).

3.2.1 Philosophy Underpinning this Study

This study adopts the positivism stance as the philosophical foundation. Positivism borrows assumptions of the natural sciences that say that only observable events can result in credible data, which can then facilitate investigations of causal relationships about the data. This data can be used to produce law-like generalizations (Gill & Johnson, 2010). A strategy for data collection is required in order that a hypothesis can be developed and tested using already existing theory (Saunders et al., 2009). An equally significant aspect of positivism relates to the assumption that the entire research enterprise is performed devoid of the perception and value judgment of the researcher. Accordingly, the researcher assumes a neutral position, or becomes external to the activities and processes that culminate in the outcomes of the study, including data collection. That is to say that the object of study (subject matter) is independent of the subject (the researcher) undertaking the study. The positivists belief is that the researcher has limited ability to manipulate the subjects under study, and the data collection itself. Gill and Johnson (2010) argue that positivist investigators adopt highly structured methodologies that emphasize quantifiable observations which lend themselves to statistical analysis, just as is done in the natural sciences (Creswell, 2012).

3.2.2 Justification for the choice of research philosophy for this study

This study is quantitative in nature, and so adopts positivism as the philosophical paradigm. This paradigm utilizes numeric data obtained through

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experimental settings or surveys (Creswell, 2012). Based on the views espoused by Saunders et al (2009) that the fitness of a philosophy is determined by the research question (s) that a particular study aims at finding answers. The study therefore sees positivist philosophy as the right paradigm to help address the research questions. Given that this study is based on the descriptive survey and correlational designs, and assembles data using self-design, structured questionnaire, a form of survey data collection method, the choice of the positivist paradigm is appropriate. Further justification for the appropriateness of the positivism philosophy is that data analysis methods being implemented is quantitative bias, making use of descriptive and inferential statistical tools. Applying these quantitative methods of analysis makes the study's overall approach less dependent on researcher's perception and personal bias, but rather on objective processes. Applying quantitative methods of analyzing the data also makes the procedures less dependent on the influence of the researcher, and thus ensuring objectivity.

In sum, the reasons for the choice of the positivist philosophy for this study focus on the research questions being investigated, the research design adopted and the research approach being implemented. Other reasons concern data collection method (using survey questionnaire administration) and quantitative data analysis methods, pursing descriptive statistics and inferential statistical analytics.

3.3 Research Approach

This study adopts quantitative research approach. This is the approach that is based on usage and analysis of numerical data (Saunders, Lewis & Thornhill, 2012; Leedy & Ormrod, 2005). Following quantitative approach is appropriate for this study as the data required to execute the analysis can easily be organized using numerically measured questionnaire instrument which can be subjected to statistical

analysis. Also, the research questions under investigation can easily be answered with the analysis of numerical data. This means that situating the study on quantitative structure is not problematic. Thus, developing this study on quantitative numbers easily helps determine the influence of the independent variable constructs (burnout) on the dependent variable (employee wellbeing), as opposed to implementing qualitative strategy.

Studies that use quantitative research usually have a large sample size which concentrates on a number of responses and insights from respondents (Leedy & Ormrod, 2005). Thus, equally important justification for adopting quantitative approach is that the population from which the sample for this study is taken is large enough to guarantee quantitative analysis. The format for quantitative research is that the design requires each respondent to answer the same questions so that bias is prevented, and also a fair way of analysis of data can be achieved (Klassen, Creswell, Clark & Smith, 2012). Employing numerically scaled questionnaire, in the form of Likert-type-scales for data collection fulfils this assertion because this study distributes paper questionnaires containing the same set of question items to the target respondents.

Advantages of quantitative research, according to Saunders et al (2012), are that accurate and precise findings can be obtained due to the assurance of objectivity and certainty. Again, such studies are easy to plan and execute, and data collection activities are less cumbersome which can be accomplished within a limited space of time. Data analysis is quite straightforward (Klassen et al, 2012).

3.4 Research Design

This study adopts descriptive cross-sectional survey and correlational designs as the fundamental structure for integrating all activities and aspects of the work into

one coherent whole. The justification for adopting cross-sectional survey design is that a large amount of data can be collected within a limited space of time, or at a specific time, from different sample of respondents. This is contrasted with longitudinal survey that requires that data is collected from the same group of sample respondents or from a single sample of respondents over an extended period of time. Cross-section survey permits data collection over a short period of time. Given that this study is time-bound and must be completed within a limited time period, adopting cross-sectional survey is deemed appropriate.

Also, the justification for depending on correlational design is contingent on the objectives of the study which seeks to establish the relationships among the variable constructs. Scholars (Abba & Usman, 2016; Oberirri, 2017; Leedy & Omrod, 2010) affirm that correlational design is effective in testing statistical relationships and at the same time facilitates the determination of the impact of one variable on the other. According to Saunders, Lewis and Thornhill (2012), the intention to apply correlational form of design is to provide confirmation or validation about the relationships among phenomena which has been established by prior research so as to draw conclusions that add to theory building and development.

As a quantitative study, cross-sectional and correlational designs are appropriate in aiding the choice of data collection methods as well as data analysis procedures. Thus, the choice of descriptive and inferential statistical tools for treating field data makes it imperative to adopt both sets of designs.

3.5 Study Population

This study is conducted in the Tema Metropolis in Ghana. There are five SHSs in the metropolis. The total number of teachers in these five schools is 418,

comprising 256 males and 162 females. The population for this study comprises all teachers (418) in the five schools.

3.6 Sampling Procedure

A population of 418 is considered quite large to be studied within a short space of time. As a result, there is the need for sampling. This study applies sampling estimation strategy suggested by Miller and Brewer (2003) for determining the appropriate sample size. Equation 1 illustrates the sample size determination process.

$$n = \frac{N}{1+N(\alpha)^2}$$ ………………………….. (1)

where 'N' denotes the sampling frame or the population out of which the sample is taken (in this case, 418); 'n' is the sample size to be determined, and 'α' is confidence interval (calculated at 0.05 significance level). Substituting the value of N into the formula, expanding the bracket and simplifying the entire expression, gives the value of 'n' as 204.4. Taking the nearest whole number for ease and convenience of analysis, gives a sample size of 204 respondents.

This study applies proportional stratified random sampling technique in selecting the sample respondents. Given that the sample is made up of teachers from different schools or units (strata), it is only proper that the final number of respondents is selected from the schools in accordance with each school's proportion in the population. Doing this helps generate sample size that fairly represents the population. After knowing the proportion of each school in the total population, the next action is to do the actual selection of the sample. For example, if school A's teacher population is say 68, this translates into a proportion of 16.3% of 418. This means that out of the 204-sample size, approximately 33 respondents will be selected from school A. The same procedure is applied in all the five schools until a total sample of 204 is obtained. The actual selection of each school's sample proportion is conducted using

simple random sampling, making sure that every teacher in a school has equal chance of being included in the study. The essence of applying simple random sampling is meant to reduce sampling bias and error (Kothari, 2004), and as a quantitative study, it is fitting that a probability sampling procedure is applied (Flick, 2015).

3.7 Research Instrument

To assess the relationship among quality of life, perceived stress, and wellbeing among teachers in the Tema Metropolis, four instruments were used. They were the Professional Quality of Life Scale, Perceived Stress Scale, Multicultural Quality of Life Index, and a demographic questionnaire.

The dependent variable was wellbeing and was measured by the Multicultural Quality of Life Index (MQLI; Mezzich et al., 2010). The independent variables were professional quality of life, measured by the Professional Quality of Life Scale (ProQoL; Stamm, 2005) and perceived stress, measured by the Perceived Stress Scale (PSS; Cohen, 1994).

3.7.1   Multicultural Quality of Life Index (MQLI; Mezzich et al., 2010).

The MQLI is a 10-item instrument measured on a 10-point Likert-type scale ranging from 0 to 10. Statements include physical well-being (feeling energetic, free of pain and of physical problems), psychological/emotional well-being (feeling good, comfortable with yourself) which includes self-care and independent functioning, occupational functioning, interpersonal functioning, social emotional support, community and services support, personal fulfilment, spiritual fulfilment, and the overall quality of life. The ten items were developed based on thematic analysis of identified dimensions in relevant international literature (Mezzich et al., 2020). Mezzich et al., (2010) described MQLIO as a kind of instrument that is short, culturally relevant instrument that appears to be simple to use, dependable, internally

consistent, and valid. Hunt & McEwen (1980) also described the MQLI as the most comprehensive measure in its scope as it includes entries that range from physical well-being spirituality. They further identified five characteristics of instruments designed to assess the quality of life. The first feature has to do with cultural applicability. Thus, to estimate quality of life in a meaningful way, one must be sensitive to ethnic diversity and have the ability to take cultural background into account. Other features that were identified are comprehensiveness, easy to use, self-relatedness and sound psychometric features, including reliability or generalizability as well as validity. The MQLI demonstrate strong test-retest reliability result among two cross-ethnic English samples as 0.87 which have been validated in several languages including Korean, Chinese and Spanish. For instance, the consistency reliability and validity test results across these three languages indicates clearly for English as $\alpha=0.92$, r = 0.87, Spanish as $\alpha=0.88$, r = 0.94 and Chinese $\alpha=0.94$, r = 0.80.

3.7.2 Professional Quality of Life (PRoQoL; Stamm, 2005).

The PRoQoL is composed of three discrete scales which do not yield a composite score. Each scale is psychometrically unique and cannot be combined with the other scores.

Compassion Satisfaction and Compassion Fatigue are two aspects of Professional Quality of Life. They encompass the positive (Compassion Satisfaction) and the negative (Compassion Fatigue) parts of helping others who have experienced suffering. The PRoQoL actually addresses issues with relating to difficulties in in separating burnout and secondary/vicarious trauma and reduces participant burden by shortening the test from 66 to 30 items. The revision is based on over 1000

participants from multiple studies which was developed by maintaining the strongest, most theoretically salient items.

The PRoQoL consists of mainly three subscales: Compassion Satisfaction, Burnout and Compassion Fatigue. It has been identified that these subscales have internal consistencies. Each subscale contains 30 items: 7 items from the previous CSF version and 3 new items designed to strengthen the overall theory of the subscale. The alpha reliabilities for the scales are as follows: Compassion satisfaction alpha = 0.87, Burnout alpha = 0.72 and Compassion Fatigue alpha = 0.80.

The PRoQoL in its general sense has been used in projects for more than 30 countries around the world. It is available in English, French, German and Hebrew. It uses across many different types of profession. For instance, in this study, teachers are the main participants hence teachers were used to replace helpers without any ambiguity.

3.7.3 Perceived Stress Scale (PSS; Cohen, Kamarck, & Mermelstein, 1983).

The PSS is a 10-item instrument scored on a Likert-type scale ranging from never (0) to very often (4). Questions in the scale include "in the last month, how often have you felt confident about your ability to handle your personal problems?" and "in the last month, how often have you felt difficulties were piling up so high that you could not overcome them?"

Permission to use this scale was gained from Mind Garden, Inc (www.mindgarden.com). The PSS is the most widely used psychological instrument to measure a person's perception of stress. It assesses the degree to which a person sees their situation as stressful. The instrument developer designed the item to assess how uncontrollable, overloaded, and unpredictable respondents find their lives. Moreover, the scale includes a few queries about present levels of expressed stress.

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The PSS was originally normed on community samples with at least a junior high school education (n = 2,387) in the United States of America (Cohen & Williamson, 1988).

The scale has demonstrated acceptable coefficient alphas in three university samples (α = .84 to .85; Cohen et al., 1983; Chao, 2012). The PSS has also demonstrated positive correlation with life-event scores, social anxiety, and maladaptive health-related behaviours (Cohen, Sherrod, & Clark, 1986) and associated with individuals' propensity depression related to stressful life events (Kuiper, Olonger, & Lyons, 1986). To provide evidence for validity, high PSS scores were demonstrated to be associated with failure to quit smoking, greater vulnerability to stressful life-event-elicited depressive symptoms, and more colds (Cohen & Williamson, 1988).

3.7.4 Demographic Questionnaire

The demographic questionnaire was designed based on similar studies, and to enhance replication studies. The demographic questionnaire sought to find answers to questions pertaining to participants' rank in teaching, gender, and number of years in teaching. These responses helped to put the study in context by exploring differences among groups of rank and between gender.

3.8 Ethical Considerations

The importance of considering ethical issues in this study are to ensure that the research participants are protected from physical and psychological trauma or harm, and to see to it that their rights are not trampled upon (Mugenda & Mugenda, 2003). Taking ethics into account is equally meant to ensure that the study's results are based on adequate and appropriate methodology (Kothari, 2004).

A few basic ethical practices are observed during the study, especially during the data collection stage. First, the researcher sought official permission and approval from her immediate superior and ethical clearance from the University before using official working hours for executing any activity associated with the study. Upon securing this permission, another authorization was sought from the heads of schools from which data was collected before the data collection activity began. In seeking this authorization, the researcher explained the purpose of the study to the heads and provided assurance that the collection of the data will not unnecessarily interrupt the performance of official duties of teachers in the schools. After the permission was granted, the data collection began immediately.

During data gathering, respondents' free consent was sought. Respondents were not pressured in any way to take part in the study. The rights to confidentiality, privacy and anonymity of respondents was seriously secured throughout the data collection processes. Respondents' identities (names and profiles) was not in any way disclosed and associated with the information they provided. The entire data collection activity was performed in such a way not to cause physical harm or psychological trauma to the respondents.

Again, the data collection program was not made to create inconveniences in terms of time and other resource constraints for the respondents. Being mindful of time limitations for completing the study, extreme flexibility was, however, not allowed to characterize the data collection and engagements with the respondents. Agreement was therefore established with the respondents regarding the time for completing the questionnaires. Apart from data collection activities, the methods this study pursues for attaining the set objectives, including data management and analytic

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procedures, was conducted using appropriately suitable statistical procedures that produced an expected outcomes and findings.

CHAPTER FOUR

LIMITATIONS, RESULTS, AND FINDINGS

4.0 Introduction

The purpose of this study was to examine the relationship among compassion satisfaction, burnout, and employee wellbeing among teachers. The study further examined the role of compassion satisfaction in the relationship between burnout and quality of life. Raw data was imported into SPSS V28.0. Data was screened for missing values (Osborn, 2013). Furthermore, data were inspected to ensure they were consistent with assumptions for conducting Pearson Product-Moment Correlation (Pearson's Correlation) and regression (Field, 2013; Patten & Newhart, 2018).

4.1 Limitations

Several limitations occurred in this study. First, the data collection was scheduled to be done digitally. However, because participants did not complete the survey questions, the researcher had to print the items and distribute them individually. While this process increased response rates, it also meant that participants experienced tester fatigue (Dillman, Smyth, & Christian, 2014). The final sample of respondents from whom data was collected fell short of the sample expected or targeted for the study. The study's results are based on a sample of 151 respondents out of a rough population of 418, and a projected sample of 204. If the sample were larger as anticipated, the results might differ. Therefore, generalization of the reported findings may be problematic. Potential users of the findings of this study are advised to be mindful of this limitation.

4.2 Results of Demographic Information

Demographic variables considered for this study were gender, age, relationship status, family dynamics, and religion, time spent in the Tema metropolis, and teaching rank. In terms of age, the results showed that participants' ages ranged from 23 years old to 60 years old (M = 40.68; sd = 8.64). Median age was 39 years old. One participant did not indicate their age. With regards to time spent in the Tema Metropolis, the data indicated that on average, participants had spent between one year to 36 years (M = 6.56; sd = 6.03; Md = 4.50). The rest of the demographic results are presented in Table 4.1.

Table 4.1: Demographic information of respondents

Variable	Category	Frequency (N = 151)	Percent (100)
Gender	Male	75	49.7
	Female	76	50.3
Relationship status	Single	21	13.9
	In a relationship	15	9.9
	Engaged	4	2.6
	Married	98	64.9
	Divorced	10	6.6
	Widowed	3	2.0
Family dynamics	No kids	17	11.3
	Have biological/adopted kids	83	88.7
Religious affiliation	Buddhist	1	0.7
	Christian	116	76.8
	Muslim	32	21.2

Variable	Category	Frequency (N = 151)	Percent (100)
	Traditional	2	1.3
Teaching rank	Principal Superintendent	64	42.4
	Assistant Director II	55	36.4
	Assistant Director I	27	17.9
	Director II	3	2.0
	Director I	2	1.3

Source: Field survey, 2022

Under gender distribution, the results showed that of the 151 participants, females (n = 76) constituted a slight majority with 50.3% and males (n = 75) were in the minority with 49.7%. Pertaining to relationship status, the majority of the participants indicated they were married (n = 126), while those who were widowed (n = 3) were in the minority. It appears majority of the participants (73%) were in some romantic attachment (i.e., in a relationship, engaged and married). This could provide support towards stress if the romantic attachment is positive. However, if the attachment is negative, it could compound participants' perceived stress and invariably affect the quality of life.

Under family dynamics, the results showed that the majority of the participants (88.7%) indicated they had biological and/or adopted children who were dependent on them. And for religious affiliation, the majority of participants (76.8%) were Christians (n = 116), whereas Muslims were 32 in number (21.2%). This number appears to be a reflection of the national census of Ghana. Interestingly, participants who reported as Traditionalist (n = 2) and Buddhist (n = 1) were quite significant compared to national census of a decade ago. Under teaching rank

categories, the results indicate that majority of the respondents were Principal Superintendent (*n* = 64), followed by the next 55 teachers who were in Assistant Director II position. The next 27 teachers were in Assistant Director I position. It can also be seen from the table that there are few persons who are Directors. This is not surprising because people in this rank were generally placed in administrative positions in the Ghana Education Service.

4.3 Analysis of Instruments

This section presents analyses of the data based on reliability test results, correlation estimates and descriptive statistics for the constructs (compassion satisfaction, burnout, perceived stress and well-being) under investigation.

Each of the instruments used was assessed for its reliability with the current sample under study. The results are shown in Table 4.2. The Multicultural Quality of Life Index (which was used to measure employee well-being) demonstrated high internal consistency (α = .896; Cohen, 1988). The professional quality of life (measured by compassion satisfaction) demonstrated exceptionally high internal consistency as well (α = .959; Cohen, 1988). The Perceived Stress and Burnout scales also demonstrated exceptionally high internal consistency (α = .922; Cohen, 1988). These figures indicated that the instruments were reliable in assessing the unique traits in the study (i.e., compassion satisfaction, burnout, perceived stress, and wellbeing).

Table 4.2: Reliability results

Construct	Number of items	Cronbach alpha value
Employee well-being	10	.896
Compassion satisfaction	30	.959
Perceived stress and burnout	10	.922

Source: Field survey, 2022

4.4   Descriptive Statistics of Study Constructs

The variables within the construct comprised wellbeing, burnout, and compassion satisfaction. The table shows the mean scores and standard deviations, of these variables.

Table 4.3: Descriptive Statistics

Constructs	N	Mean	Std. Dev.	S. Error	Skew	Kurtosis	Min.	Max.
Employee Well-being	151	77.55	10.697	0.871	-0.59	1.21	38	100
Burnout	151	27.19	4.560	0.37	-0.93	0.43	12	35
Compassion Satisfaction	151	32.74	9.211	0.750	0.128	-1.038	12	50
Total Stress	151	18.94	4.219	0.34	-1.02	2.41	0	29

Source: Field survey, 2022

Total stress and burnout constructs containing 10 items were measured on a scale of 0 to 4 (0 = Never; 1 = Almost never; 2 = Sometimes; 3 = Fairly often and 4 = Very often). Items defining compassion satisfaction were 30 in number and were ranked on a 5-point Likert scale (1 = Never; 2 = Rarely; 3 = Sometimes; 4 = Often and 5 = Very often). Statements describing employee well-being were 10 in all and were put on a 10-point scale ranking from zero (0) for 'poor quality of health and life' to 10 for 'excellent quality of life'. All the items in each group of constructs were mean centered before analysis. In other words, the items were aggregated and the composite mean scores determined. For example, the responses from respondents for each of the items under perceived stress and burnout were summed up to arrive at the aggregate score before the descriptive statistics were processed.

The results show that well-being among the respondents was averagely 'very good' or 'quite high' on a scale of 100 points maximum score that can be obtained by a respondent. The statistical numbers recorded by the employee well-being construct (n = 151; M = 77.55; sd = 10.697) provide support for this assertion as the mean score represents approximately 78 points of the maximum score. The standard deviation is quite low relative to the mean, and that suggests that respondents were very sure of their opinions about the state of their well-being. Similarly, the maximum points that can be scored by a respondent for the burnout construct is 40 (10 items on a 4-point scale). The results indicate that respondents experienced above-average level of burnout *(n =151; M = 27.19; sd = 4.560).* The standard deviation of 4.560 is quite marginal, suggesting minimum dispersion from the mean score, and also, an indication of stability of respondents' opinion. The descriptive statistical results for total stress rather show opposing outcome whereby respondents appear to have encountered relatively reduced stress as compared to burnout *(n= 151; M = 18.94; sd = 4.219).* The results seem to suggest that out of maximum points of 40, the average level of stress exposure is 18.94, less than half of the total points, respondents' stress levels were quite minimal. Furthermore, the results appear to indicate that professional quality of life (measured by compassion satisfaction) of the respondents was very low. This is because the maximum points that can be obtained by a respondent is 150 (given that there were 30 items on a 5-point Likert scale), and with the statistical numbers recorded *(n =151; M = 32.74; sd= 9.211),* it can be concluded that respondents' state of professional quality of life was discouraging. Moreover, the descriptive results obtained on employee well-being, burnout and total stress are negatively skewed which shows that much of the concentration of the data is centered on the right side of the distribution. However, the measure of skewness for

compassion satisfaction indicates that most of the distribution is centered on the left side since it is positively skewed. The measure of the kurtosis for employee well-being, burnout and total stress are respectively 1.21, 0.43 and 2.41. This measure indicates heavy tailed distribution of the data however the values obtained are relatively closer to zero hence suspicions of possible outliers is kept to an absolute minimum. The kurtosis value obtained for the compassion satisfaction variable is negative (-1.038) indicating a light tailed distribution of the responses with no outliers.

4.5   Analysis of Hypotheses

4.5.1   Research Hypothesis One: There is no Statistically Significant Relationship between Burnout and Employee Well-Being.

The first hypothesis of this study relates to the statistical relationship between burnout and employee well-being.

We reject the null hypothesis because there was a statistically significant relationship between burnout and employee wellbeing (r = -0.369; $p \leq .001$). The p value is less than the significance level of 0.05 so we reject the null hypothesis**.** This statistically significant relationship is an inverse relationship, demonstrating a moderate negative relationship whereby as burnout increases, employee wellbeing decreases by approximately 4%.

Table 4.4: Correlation analysis between burnout and employee well-being

Statistic	Variable	Correlation Coefficient(r)	p-value
Pearson	Burnout vs. Employee Well-being	-0.369	$\leq$ .001

Source: Field survey, 2022.

Research Hypothesis Two: We reject the null hypothesis (which states there is no statistically significant of wellbeing by compassion satisfaction). There was a statistically significant relationship, and the relationship was inverse. This means when burnout increased, employee wellbeing decreased by 36.9%.

Table 4.5: Correlation analysis between compassion satisfaction and employee well-being

Statistic	Variable	Correlation Coefficient(r)	P-Value
Pearson	Compassion satisfaction vs. Employee Well-being	0.179	0.028

We fail to reject the null hypothesis because there was a statistically significant positive relationship ($p < .05$; $r = .179$). Thus, when compassion satisfaction increased, employee wellbeing also increased by 17.9%.

Research Hypothesis Three: We failed to reject the hypothesis (which states that the moderation role of compassion satisfaction in the relationship between burnout and employee well-being) because the correlation coefficient between compassion satisfaction and employee well-being is 0.179. This indicates that there is a weak positive correlation between the two variables. In furtherance of the analytical procedures to determine whether the correlation is significant, a test for correlation was used and the probability value (P-Value) obtained is 0.028 which is less than 5% significant level hence the null hypothesis is rejected.

The inability of compassion satisfaction to overcome the negative effect of burnout on employee well-being is therefore evidence of the inadequacy of compassion satisfaction among the respondents of this study. The last hypothesis for this study which states that "There is no statistically significant moderation role of

compassion satisfaction in the relationship between burnout and employee well-being', cannot be rejected.

Which states that "There is no statistically significant moderation role of compassion satisfaction in the relationship between burnout and employee well-being', cannot be rejected.

Table 4.6: OLS results for moderation effect of compassion satisfaction

Construct	Coefficient	S. E	t-stat.	Prob.	95% Confidence interval	
					LLCI	ULCI
Constant	77.6949	.8633	90.0012	.0000	75.9888	79.4009
Burnout	-.8859	.2355	-3.7610	.0002***	-1.3514	-.4204
Compassion satisfaction	.0767	.0938	.8183	.4145	-.1086	.2621
Burnout*Compassion satisfaction	.0109	.0214	.5081	.6122	-.0315	.0533

Source: Field survey, 2022. Notes: *** for p < 0.01; DV = Employee well-being

Key: CI-Confidential Interval, SE-Standard Error of the Coefficient , LL: Lower Limit, UL: Upper Limit, CS-Compassion Satisfaction, STS-Secondary Traumatic Stress

The results show that whereas burnout maintains its strong negative relationship with employee well-being (*Beta = .8859; t = -3.7610; p < .01),* compassion satisfaction's relationship with well-being is positive but non-significant *(Beta = .0767; t = .8183; p > .1).* As before, the meaning of the statistics for burnout is that extreme exposure to conditions of burnout adversely affects employees' well-being. On the other hand, compassion satisfaction's positive coefficient does little to significantly influence well-being.

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The combined effect of burnout and compassion satisfaction on employee well-being is not strong enough to cause significant variations in the well-being variable. This combined effect is used to test the moderation role of compassion satisfaction in the relationship between burnout and employee well-being *(Beta = -.0109; t =. 5081; p > .1)*. The obtained result then suggests that compassion satisfaction is unable to statistically moderate the relationship between burnout and well-being. Stated differently, compassion satisfaction does not play any meaningful moderation role in the nexus between burnout and employee well-being. Thus, compassion satisfaction appears less capable of minimizing the negative influence of burnout on employee well-being.

We observe that the interaction of compassion satisfaction with burnout could not even change the negative sign of burnout's coefficient to a positive one, an indication that the exposure to burnout is quite stronger than experience with compassion satisfaction. This result appears to suggest that the respondents do not enjoy professional quality of life, or the level of compassion among them is weak. This assertion is made because a strong or positive professional quality of life is expected, all else equal, to dampen the consequences of burnout and then significantly improve the well-being of employees.

However, this is not the case. The inability of compassion satisfaction to overcome the negative effect of burnout on employee well-being is therefore evidence of the inadequacy of compassion satisfaction among the respondents of this study. The last hypothesis for this study which states that "There is no statistically significant moderation role of compassion satisfaction in the relationship between burnout and employee well-being', cannot be rejected.

4.6   Discussion of Results

The results of the first hypothesis (no correlation between employee wellbeing and burnout) were rejected. There was a relationship between these two variables, meaning that, as the well-being of the employee increases then burnout, which is associated with feelings of hopelessness and difficulties in dealing with work or in doing your job effectively, also decreases). Therefore, according to the transactional model of stress and burnout, teachers who perceive classroom demands as greater than the resources (the demands group) are at high risk of stress and burnout (Lambert et al., 2015). The transactional approach theorists assert that teachers who perceive the highest levels of demands with regard to insufficient classroom resources are likely to experience behavior related to complaints about undesirable learner behavior, work dissatisfaction and little occupational commitment (Lambert et al., 2015). This finding was also validated by Sanchez-Moreno, Rolda, Gallardo-Peralta and Roda (2014) who examined burnout, informal compassion satisfaction and psychological distress among social workers in Spain with a sample size of 189 employees. The results from the study show a high incidence of psychological distress and burnout, as well as emotional exhaustion. The results of the study further confirmed the importance of informal compassion satisfaction as a variable negatively related to distress, even in the presence of burnout. Also Asonaba (2015) investigated how female teachers manage stress and teacher burnout in Ghana, using a sample size of 25 female teachers and it was revealed that the stress level of the female teachers was high. Work over-load and interpersonal relationship were the main causes of stress of the female teachers. Majority of the female teachers strongly agreed that stress made them perform below standard.

The result of the second hypothesis (There is no Statistically Significant Prediction of Well-being by Compassion Satisfaction) is therefore rejected. There was enhanced professional quality of life that can positively improve employee's well-being. Extensive past studies suggest that there is a strong association between perceived compassion satisfaction and employees well-being. For instance, Asante (2011) found that compassion satisfaction reduces stress level and depressions among youth with challenging behaviour. Past empirical comparative research on compassion satisfaction for student wellbeing in Europe (Burholt et al., 2003) revealed that there are differences and similarities in compassion satisfaction between the United Kingdom, Italy, Sweden, Netherlands, Luxembourg and Austria. It was found that age impacts on satisfaction with socio-relationship and gender was a strong indicator of social resources in those countries. Quaicoe (2018) also examined job related stress among mental health nurses in Ghana with a sample size of 215 nurses and the results from the study revealed that age, rank, ward, and shift are background characteristics that influence stress.

Abasimi (2015) examined the relationships among psychosocial work environment, job stress recovery experiences, psychological capital and occupational wellbeing in Ghana. The study used a sample size of 322 nurses and teachers. The results from the study showed that the psychosocial work environment factors of psychological job demands, emotional job demands, workplace spirituality and predictability at work were associated with the occupational wellbeing indicators of burnout, work engagement and career commitment such that emotional job demands generally affected employee wellbeing and they are associated with burnout.

We failed to reject the hypothesis (which states that there is no moderation role of compassion satisfaction in the relationship between burnout and employee well-

being) because the correlation coefficient between compassion satisfaction and employee well-being is 0.179. This indicates that there is a weak positive correlation between the two variables. In furtherance of the analytical procedures to determine whether the correlation is significant, a test for correlation was used and the probability value (P-Value) obtained is 0.028 which is less than 5% significant level hence the null hypothesis is rejected. The inability of compassion satisfaction to overcome the negative effect of burnout on employee well-being is therefore evidence of the inadequacy of compassion satisfaction among the respondents of this study.

It was therefore supported by the findings in the literature. Jindal-Snape (2010) highlights the importance of social support in educational transition for promoting wellbeing and a smooth transition among students across ages, cultural identities and educational levels. Demaray (2005) conceptualizes 'compassion satisfaction' as "transpiring from multiple sources (parents, teachers, close friends, classmates, school and employees) and consisting of multiple types (emotional, informational, appraisal, and instrumental), which may serve to improve a student's adjustment and outcomes)".

CHAPTER FIVE

SUMMARY OF FINDINGS, CONCLUSION AND RECOMMENDATIONS

5.0 Introduction

This study sought to examine the relationships among compassion satisfaction of life, burnout employee well-being. This chapter presents the key findings obtained from analysis of data. The chapter also concludes the study by explaining the implications of the findings. Recommendations emerging from the findings and conclusions are highlighted. The last section of the chapter presents directions for future research.

5.1 Summary of Findings

This study's purpose was to examine the relationships among compassion satisfaction, burnout and employee well-being of teachers in the Tema metropolis of Ghana. The dependent variable of the study was well-being, measured by the Multicultural Quality of Life Index (MQLI; Mezzich et al, 2010). Perceived stress (measured by Perceived Stress Scale; Cohen et al., xxxx) and burnout (measured by the Professional Quality of Life Scale, PROQoL, Stamm, 2005) were used as the independent variables. The moderating variable was compassion satisfaction (also measured by the Professional Quality of Life Scale, PROQoL, Stamm, 2005).

The study adopted a quantitative approach from a positivist philosophical paradigm. Descriptive cross-sectional survey design was adopted. A sample of 151 teachers was recruited through purposive sampling. Data analysis was conducted using descriptive statistics (mean scores and standard deviations) and inferential statistics in the form of multiple linear regression, estimated through the method of ordinary least squares. The data processing was done using SPSS package version 25.

The study was developed along three hypotheses. The findings relative to the hypotheses are summarized as follows:

1. The first hypothesis "There is no statistically significant relationship between burnout and employee well-Being", sought to examine the relationship between burnout and well-being. The study found that burnout negatively relate to well-being significantly, indicating that as employees get burnt out, their well-being deteriorates. This finding was supported by a related outcome of a negative significant relationship between exposure to stress and well-being. This suggests that the first hypothesis which states cannot be accepted.

2. The second hypothesis of this study examined the statistical relationship between compassion satisfaction (used as a surrogate for professional quality of life) and employee well-being. The finding for this hypothesis was that, as expected, compassion satisfaction has a positive relationship with employee well-being. Upon further statistical analysis, the P-Value obtained (0.028) was less than 0.05, therefore, the second hypothesis that states that "There is no statistically significant prediction of well-being by compassion satisfaction" cannot be accepted hence the null hypothesis at 5% level of significance was rejected. This result suggests that enhanced professional quality of life can positively improve employees' well-being. Moreover, based on the data obtained from the study, we can conclude that the teachers surveyed do enjoy professional quality of life to some extent.

3. The last hypothesis of the study focused on the moderation role of compassion satisfaction in the relationship between burnout and employee well-being. The results showed that the interaction term of compassion satisfaction and burnout was negative and significant, indicating that burnout really affect

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well-being of employees negatively. The study therefore concluded that compassion satisfaction is able to statistically moderate the relationship between burnout and wellbeing.

5.2 Conclusion

The findings of this study showed deteriorating employee well-being when exposure to stress and burnout increases, and that professional quality of life improves employees' well-being. Also, professional quality of life is able to reverse the negative significant relationship between burnout and well-being. The findings pertaining to the relationship between burnout, perceived stress and employee well-being which corroborate previous studies, emphasize the damaging effects that stress and burnout have for employee well-being. Thus, perceived stress and exposure to burnout situations tend to harmfully affect all components of well-being. These components of wellbeing include physical, spiritual growth and fulfilment, emotional, psychological, self-care, independent and occupational functioning as well as interpersonal and social support endeavors. Overall, the results signify the potential of stress and burnout in rendering personal well-being less functional.

Further, the findings lead one to conclude that the state of quality of life of the teachers surveyed is poor. This assertion is made against the backdrop that, contrary to expectation, professional quality of life has shown its relevance in promoting well-being of the teachers. Again, it has shown its ability to curtail the negative influence of burnout on employee well-being. These are signals suggesting that the teachers who participated in this study do enjoy quality of life professionally. These findings are reflective of the reality that teachers go through in their professional activities and engagements. The level of unhappiness among teachers about the conditions within which they work, issues of low remuneration and inadequate compensation and

pensions systems, housing and health challenges, issues of promotions and professional developments are among some of the numerous discontentment teachers' face in their occupations. These issues can potentially hurt the quality of professional life they should enjoy, and by extension hamper the potency of professional quality of life in promoting employee well-being.

5.3 Recommendations

Given the findings and conclusions of the study, the following recommendations are proposed:

1. First, the study found a negative significant relationship between burnout, perceived stress and employee well-being. To improve well-being, adoption of stress coping strategies is advised. For example, teachers are encouraged to seek social support from their co-workers, and family members so as to minimize workloads and work-related demands and pressures.

2. Also, teachers can adopt a number of strategies towards coping with stress. These include engaging in recreational activities, personal relaxation activities, and application of reasoning or common sense in execution of tasks, checking eating habits, regularly visiting the hospital for general check-up, and disengaging in negative thoughts and negative work attitudes, and developing positive mindset at all times.

3. The study reported that professional quality of life of teachers surveyed has significant relationship with well-being, and that professional quality of life was able to minimize the negative significant effect of burnout on employee well-being. These outcomes suggest that the teachers do have quality professional life. The study recommends that teachers' union leaders should

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continue to engage their employer (the GES) for improved conditions of service so as to step up the professional quality of life of teachers.

5.4 Suggestions for Further Research

The following areas are proposed for further research work.

1. The weak positive relationship between professional quality of life and employee well-being requires further statistical interrogation. Further studies can replicate this aspect of this study among teachers in other regions and districts of Ghana.

2. Similar studies can be conducted focusing on other professionals like the clergy, health professionals, and teachers in higher education. All these people, though not directly dealing with health-related issues that bring on burnout, do listen to people and their woe-related stories. These stories, according to research (Alarcon, 2011; Carvalho & Magalhaes, 2016; Gil-Monte, 2015; Pereira, 2002) has the potential to increase people's tendency to feel overwhelmed and burdened.

3. Studies focusing on occupational stress, social support, work engagement and employee innovative behaviors' can make valuable contributions towards understanding issues pertaining to employee productivity and performance.

5.5 Implications for Counselling

The findings of the study suggest the need for counselling interventions to reduce the deteriorating employee when exposure to stress and burnout increases, and that professional quality of life improves teacher well-being. Effect of the challenges faced by the category of teachers include physical ,spiritual growth, and fulfilment ,emotional ,psychological, self-care, independent and occupational functioning as well as interpersonal and social support endeavors. Hence the following interventions are

proposed to ameliorate the stress of combing work life and the teaching profession. The institution should give special consideration to the female teachers through counselling intervention during orientation service for newly posted teachers. Counselors through the counselling unit and school management should develop strategies for female teachers to help them cope with stress and the effectiveness of compassion satisfaction towards their wellbeing. They should be given stress coping strategies to help them manage stress and adopt stress management skills through workshops and seminars. Female teachers should be given in -service training (counselling programs) on how to modify family life and professional lifestyle to help them learn adjustment principle (Lasode & Awotedu, 2013).

Ethics in Counselling and research refined that we recognize the basic rights of humans'. It is important that we respect teachers' rights to autonomy while activating our own principles of beneficence and justice (Demley&Herlity 2016).
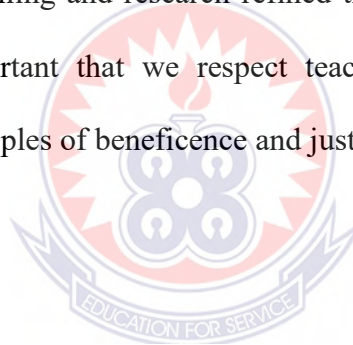
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APPENDICES

Appendix		Description
Appendix A	-	Request for letter from Department
Appendix B	-	Permission Letter from Department
Appendix C	-	Data Collection Package

APPENDIX A

Request for Introductory Letter

Harriet Tawiah-Quansah
P.O. Box C01
Tema

0243813030
harriettawiah300@gmail.com

18th October, 2021

The Head of Department
Department of Counselling Psychology
Faculty of Educational Studies
University of Education, Winneba

Dear Madam,

Application for Introductory Letter for Data Collection
Student #: 202113631

I wish to apply for an introductory letter to start data collection. My supervisor is Hannah E. Acquaye (PhD) and she has agreed that I write to request permission to start data collection.

The purpose of my study is to assess the relationship among professional quality of life, perceived stress, and wellbeing among teachers in the Tema metropolis. It is expected that data will be collected from consenting adults.

Thank you.

Yours sincerely,

Harriet Tawiah-Quansah
(Student #: 202113631)

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APPENDIX B

Introductory Letter from Department

UNIVERSITY OF EDUCATION, WINNEBA
FACULTY OF EDUCATIONAL STUDIES
DEPARTMENT OF COUNSELLING PSYCHOLOGY

P.O. Box 25, Winneba, Ghana   psychedept@uew.edu.gh
030-292-0904

25th October 2021

TO WHOM IT MAY CONCERN

Dear Sir/Madam,

LETTER OF INTRODUCTION

I write to introduce to you, HARRIET TAWIAH-QUANSAH, the bearer of this letter who is a student in the Department of Counselling Psychology of the University of Education, Winneba. She is reading Master of Philosophy in Counselling Psychology with index number 202113631.

She is conducting a research on the topic: ASSESSING THE RELATIONSHIP AMONG PROFESSIONAL QUALITY OF LIFE, PERCEIVED STRESS AND WELLBEING AMONG TEACHERS IN THE TEMA METROPOLIS. This is in partial fulfillment of the requirements for the award of the above mentioned degree.

She is required to administer questionnaire to help her gather data for the said research and she has chosen to do so in your outfit.

I will be grateful if she is given permission to carry out this exercise.

Thank you.

Yours faithfully,

MRS. PATRICIA MAWUSI AMOS, PH.D
AG. HEAD OF DEPARTMENT

APPENDIX C

Data Collection Package

University of Education, Winneba
Faculty of Educational Studies
Department of Counselling Psychology

Assessing the Relationship Among Professional Quality of Life, Perceived Stress, and Wellbeing Among Teachers in the Tema Metropolis

Informed Consent

Principal Investigator: Harriet Tawiah-Quansah
Faculty Supervisor: Hannah E. Acquaye, PhD

You are being invited to participate in a research study. The study is *voluntary* so you can choose to take part or not.

Purpose of the study: The purpose of this study is to is to assess the relationship among professional quality of life, perceived stress, and wellbeing among teachers in the Tema metropolis.

What you will be asked to do in the study: When you take part in this study, you will be asked to complete 3 sets of questionnaires. Please note that the information obtained in this research may be used in future research. You will be asked to complete a set of demographic questions and multiple questionnaires that assess your experience with Professional Quality of Life, Perceived Stress, and Wellbeing. There should be no discomforts with any of these questions.

You will not be given any incentive in taking part of this study.

Time required: We expect that you will do the questionnaire in no more than 30 minutes.

Age requirement: You must be a teacher in the Tema metropolis to take part in this study.

Study contacts for questions about the study or to report a problem: If you have questions, concerns, or complaints, or think the research has impacted you negatively in any way, communicate with: Harriet Tawiah-Quansah or her supervisor, Dr. Acquaye at heacquaye@uew.edu.gh.

Demographic Questionnaire

Gender:
- a. Male [ ]
- b. Female [   ]

How old are you as of today? _____

Relationship Status:

a.   Single   [   ]

b.   In a relationship   [   ]

c.   Engaged   [   ]

d.   Married   [   ]

e.   Divorced   [   ]

f.   Widowed   [   ]

g.   Other, please explain _____

Family life. What does family look like?

a.   I have no kids   [   ]

b.   I have biological /adopted kids   [   ]

c.   Other, please explain _____

_____

How long have you been teaching in the Tema metropolis? _____

What is your Teaching rank?
- a. Principal Superintendent   [   ]
- b. Assistant Director II   [   ]
- c. Assistant Director I   [   ]
- d. Deputy Director   [   ]
- e. Director II   [   ]
- f. Director I   [   ]

What is your religious affiliation?

a. Muslim   [   ]

b. Christian   [   ]

c. Traditionalist   [   ]

d. Other (please explain) _____

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When you teach people, you have direct contact with their lives. As you may have found, your compassion for those you teach can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative as a teacher. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the last 30 days.

1 = Never	2 = Rarely	3=Sometimes	4=Often	5=Very Often

1. I am happy

2. I am preoccupied with more than one person I teach

3. I get satisfaction from being able to teach people

4. I feel connected to others

5. I jump or am startled by unexpected sounds

6. I feel invigorated after working with those I teach

7. I find it difficult to separate my personal life from my life as a teacher

8. I am not as productive at work because I am losing sleep over traumatic experiences of a person I teach

9. I think that I might have been affected by the traumatic stress of those I teach

10. I feel trapped by my job as a teacher

11. Because of my teaching, I have felt "on edge" about various things

12. I like my work as a teacher

13. I feel depressed because of the traumatic experiences of the people I teach

14. I feel as though I am experiencing the trauma of someone I have taught

15. I have beliefs that sustain me

16. I am pleased with how I am able to keep up with teaching techniques and protocols

17. I am the person I always wanted to be

18. My work makes me feel satisfied

19. I feel worn out because of my work as a teacher

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20. I have happy thoughts and feelings about those I help and how I could teach them

21. I feel overwhelmed because my case workload seems endless

22. I believe I can make a difference through my work

23. I avoid certain activities or situations because they remind me of frightening experiences of the people I teach

24. I am proud of what I can do to teach people

25. As a result of my teaching, I have intrusive, frightening thoughts.

26. I feel "bogged down" by the system (set back / stalled / hampered by the system)

27. I have thoughts that I am a "success" as a teacher

28. I can't recall important parts of my work with trauma victims

29. I am a caring person

30. I am happy that I chose to do this work
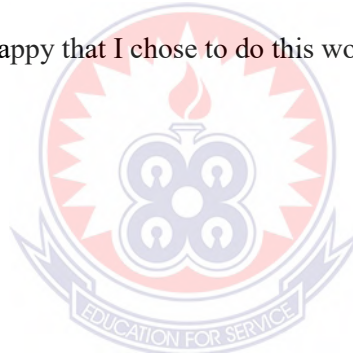
The questions in this scale ask you about your feelings and thoughts **during the last month**. In each case, you will be asked to indicate by circling *how often* you felt or thought a certain way.

0 = Never   1 = Almost Never   2 = Sometimes   3 = Fairly Often 4 = Very Often

1. In the last month, how often have you been upset because of something that happened unexpectedly?	0	1	2	3	4
2. In the last month, how often have you felt that you were unable to control the important things in your life?	0	1	2	3	4
3. In the last month, how often have you felt nervous and "stressed"?	0	1	2	3	4
4. In the last month, how often have you felt confident about your ability to handle your personal problems?	0	1	2	3	4
5. In the last month, how often have you felt that things were going your way?	0	1	2	3	4
6. In the last month, how often have you found that you could not cope with all the things that you had to do?	0	1	2	3	4
7. In the last month, how often have you been able to control irritations in your life?	0	1	2	3	4
8. In the last month, how often have you felt that you were on top of things?	0	1	2	3	4
9. In the last month, how often have you been angered because of things that were outside of your control?	0	1	2	3	4
10. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?	0	1	2	3	4

Instructions: Please indicate the quality of your health and life at present, from "poor" to "excellent", by placing an X on any of the ten points on the line for each of the following items:

1. **Physical Well-being** (feeling energetic, free of pain and physical problems)

Poor   Excellent
1   2   3   4   5   6   7   8   9   10

2. **Psychological/Emotional Well-being** (feeling good, comfortable with yourself)

Poor   Excellent
1   2   3   4   5   6   7   8   9   10

3. **Self-Care and Independent Functioning** (carrying out daily living tasks; making own decisions)

Poor   Excellent
1   2   3   4   5   6   7   8   9   10

4. **Occupational Functioning** (able to carry out work, school and homemaking duties)

Poor   Excellent
1   2   3   4   5   6   7   8   9   10

5. **Interpersonal Functioning** (able to respond and relate well to family, friends, and groups)

Poor   Excellent
1   2   3   4   5   6   7   8   9   10

6. **Social-Emotional Support** (availability of people you can trust and who can offer help and emotional support)

Poor   Excellent
1   2   3   4   5   6   7   8   9   10

7. **Community and Services Support** (pleasant and safe neighborhood, access to financial, informational and other resources)

Poor   Excellent
1   2   3   4   5   6   7   8   9   10

8. **Personal Fulfillment** (experiencing a sense of balance, dignity, and solidarity; enjoying sexuality, the arts, etc.)

Poor   Excellent
1   2   3   4   5   6   7   8   9   10

9. **Spiritual Fulfillment** (experiencing faith, religiousness, and transcendence beyond ordinary material life)

Poor   Excellent
1   2   3   4   5   6   7   8   9   10

10. **Global Perception of Quality of Life** (feeling satisfied and happy with your life in general)

Poor   Excellent
1   2   3   4   5   6   7   8   9   10

Endorsed by:

Hannah E. Acquaye, PhD
Research Supervisor
October 19, 2021