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# INADEQUACIES IN TEACHER PSYCHOSOCIAL SUPPORT DURING THE COVID-19 DISRUPTION IN KENYA

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#### Abstract:

The COVID-19 pandemic caused unprecedented disruption in the education ecosystem, whose magnitude the country was not prepared for. This was further aggravated by the paradigm shift that required teachers to transition to online teaching, which aroused anxiety and uncertainty, leading to psychological trauma, besides the pressure from other aftermaths of the COVID-19 pandemic. Psychosocial well-being was a critical aspect with regard to the support that was given to teachers during this period. This paper, therefore, documents the inadequacies in teacher psychosocial support during the COVID-19 disruption in Kenya. It is based on the Responses to Educational Disruption Survey (REDS) data from the national centre, school principals' and teachers' questionnaires. This paper was guided by the Psychosocial Theory (PsT) and the Theory of Change (ToC) as they articulated the policy and practice, thus informing teacher psychosocial support. The Psychosocial Theory supported the discourse on teachers' psychological, mental and emotional support. At the same time, the ToC was instrumental in explaining the drastic change from face-to-face to online teaching that had adverse effects on teachers' well-being. The psychosocial support exposes several inadequacies that may have compounded teachers' inability to implement effective transition to online teaching. Globally, governments and relevant stakeholders devised various strategies to support teachers' well-being through relevant plans and policies. The Government of Kenya (GoK) took initiatives to build resilience towards teachers' psychosocial well-being in order to accelerate change to online teaching and learning. Some of these measures, inter alia, included social distancing between adults, smaller class sizes, an increased number of staff, and supplementing face-to-face teaching with online teaching, as per the REDS data. At the school level, psychosocial well-being

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provided was deficient, as most of the services that were required by staff during the COVID-19 disruption were unavailable. In addition, changes were also made to school policies since schools are the institutions where teaching and learning take place. Over 75% of Principals agreed that there were changes in school policies revolving around the mechanism proposed by the Ministry of Health (MOH) on curbing the spread of COVID-19. The psychosocial well-being influences teacher training, without which the government is unlikely to equip teachers adequately to deal with curriculum implementation and especially transition to online teaching. According to the REDS data on teachers' psychosocial well-being, minimal support was also given to teachers in dealing with fatigue, interrupted sleep patterns and a sense of isolation. Teachers lacked support for social events, accommodations for teachers who are primary carers, links to information on mental health services, and access to physical activity resources. The GoK, through the Ministry of Education, needs to deliberately address the inadequacies in teacher psychosocial support as identified in the REDS data.

**Keywords:** teacher well-being, online teaching, curriculum implementation, COVID-19 pandemic, REDS data

## 1. Introduction

The COVID-19 pandemic witnessed unparalleled closure of schools, disrupting learning worldwide (UNESCO, 2021). This disruption brought a drastic change to the social ecosystem in the education sector. Physical interaction, which is a promoter of mental health, was curtailed. The pressure to shift to online teaching was inevitable, and this compounded the mental instability of most teachers (Ravšelj & Tomaževi, 2020). Additionally, the disrupted daily schedule for most teachers had an implication on their mental health. Consequently, different countries put in place varied mechanisms that provided necessary psychosocial support during the pandemic with a view to ensuring that education continued unabated (Ozamiz-Etxebarria et al., 2021). For instance, in Singapore, policies were reformulated that addressed health and well-being for all students to ensure continuity of learning during the pandemic (Tan & Chua, 2022). The Singaporean government provided holistic well-being for the vulnerable groups of students. While in Brazil, the national government seemed to have abdicated its responsibility to Mayoral leadership and civil society, which negatively affected the teachers' psychosocial well-being (Costin & Coutinho, 2022). To promote the psychosocial well-being of the teachers during the COVID-19 Pandemic, Finland embraced teamwork and shared workload by shifting online class responsibilities (Reimers, 2022). In addition, lessons were taught by more than one teacher; they had blended sessions as well as different time engagement sessions, providing both the teachers and learners a stable and interactive environment to work in.

In South Africa, transition to cyberspace learning brought about anxiety and fear as well as traumatic experiences among learners, especially those from underprivileged

backgrounds; hence, there was a need for psychosocial support for not only students but also teachers (Otu *et al.*, 2023).

Psychosocial well-being was a critical pillar for teachers during the advent of the COVID-19 pandemic. The well-being of individuals was affected by the pandemic globally, as it interfered with their daily routine, leading to a decline in physical and social interaction with others (Ravšelj & Tomaževi, 2020). This decline triggered emotions such as, *inter alia*, frustrations, anxiety, confusion and anger which could ultimately lead to trauma. The sudden changes caused by COVID-19 to social interaction, working environment, new working procedures and expectations subjected teachers to physical, psychological, emotional and sociological distress (Bozkurt *et al.*, 2020). Uncertainties, fears and anxieties became the norm as teachers struggled to shift from face-to-face to remote teaching (Wekullo *et al.*, 2022). Work-related emotions led to exhaustion, reducing teachers' confidence and ability to teach effectively (Ozamiz-Etxebarria *et al.*, 2021).

Teachers had to deal with increased workload in an effort to handle students online with a system that the majority were learning to use; this situation compromised teachers' emotional well-being (Meinck *et al.*, 2022). Remote learning has been found to be less sensitive to the emotional needs of students and teachers (Bozkurt *et al.*, 2020); hence, there was a need to support teachers' psychosocial well-being, especially during the COVID-19 disruption (UNESCO, 2020, 2021b; United Nations, 2020). This was happening at a time when over 800 million people in the world had mental health issues, and worse still, COVID-19 increased the prevalence of mental illness by 25%.

The prolonged school closure due to the COVID-19 pandemic disrupted the provision and access to critical school-based services like guidance and counselling that were necessary for mental health and psychosocial support (Waiti & Zinyuk, 2023). The paradigm shift from face-to-face to remote teaching required teachers to be given psychosocial support. In this context, psychosocial support entailed psychological, sociological and emotional support. Although the Government of Kenya (GoK) put in place strategies to address the psycho-socio well-being of all citizens, including counselling services, sanitizing, cleaning, disinfecting, best classroom protocols on health and hand hygiene, regular updates of COVID-19 status, vaccination, setting up isolation centres and quarantine, among others (UNICEF, 2020). However, there exists minimal documentation on the level of psychosocial support given to teachers. Basing our analysis on REDS data (UNESCO, 2022), this paper documents the inadequacies in teacher psychosocial support.

## 1.1 Central Question

 What were principals' and teachers' perceptions of teacher psychosocial wellbeing for effective remote teaching during the COVID-19 pandemic?

# 2. Theoretical Underpinnings

The paper was informed by two theories, namely Psychosocial Theory (PsT) and the Theory of Change (ToC), as they articulated the policy and practice, thus informing teacher psychosocial support during the COVID-19 pandemic.

# 2.1 Psychosocial Theory

This theory focuses on human relations in a social context and addresses social influences on individual behaviour and how they respond to social change, thus providing new ways of understanding the relationships between individuals and their society (Stephen, 2003). Psychosocial theory will be useful in understanding the psychosocial and psychological support provided to teachers during the COVID-19 disruption in Kenya. The theory articulates the interaction of sociocultural relations among teachers in Kenyan schools to create social regulation. Psychosocial challenges caused by the COVID-19 pandemic crisis were compounded by existing societal processes that account for individual and societal responses. The crisis brought about psychosocial pressure among teachers, leading to anxiety and despondency in the execution of their duties. From the psychological perspective, it is evident that teachers' appropriate relationships with their colleagues, supervisors and the trainees influence their performance in their workplace.

# 2.2 Theory of Change

The theory helps in articulating how an intervention contributes to continuous results that lead to the intended impacts. It is regarded as a discussion-based analysis and learning process that produces insights to support programme design, strategy, implementation and evaluation (Gangloff, 2007; (Vogel, 2012). This project was based on the premise that teachers needed psychosocial support to cope with the shift to online teaching, coupled with other related psychosocial triggers for continued teaching and learning during the COVID-19 pandemic. Failure to support the teachers' psychosocial well-being would incapacitate them in transitioning and coping with online teaching occasioned by COVID-19. The theory is appropriate since it informs the basis for preparing teacher psychosocial support for the sustainability of online teaching by equipping them with the necessary digital skills, competencies and strategies to handle online classes. It was instrumental in explaining the drastic change from face-to-face to online teaching that had adverse effects on teachers' well-being.

# 3. Methodology

The data utilized in this inquiry were from REDS. It was an observational, non-experimental study that collected cross-sectional data from 11 countries straddling four continents, Africa, Asia, Europe and Latin America. The target population comprised of teachers who taught Grade 8 or equivalent students during the COVID-19 disruption period and were still teaching at the same schools during survey administration. In

addition, principals in the schools where the Grade 8 or equivalent students were found were also targeted.

A two-stage stratified cluster sampling design was adopted, with the first stage sampling schools while the second stage sampled teachers and principals. The samples were drawn from one private and 101 public schools and comprised 785 teachers and 102 principals.

Data was collected using two questionnaires for schools (principals) and teachers. These instruments had items for gathering data on the psychosocial well-being of teachers during the COVID-19 disruption period. The period refers to the first time in a country after the beginning of the pandemic, during which most schools were closed for the majority of students and teaching and learning took place remotely (Meinck *et al.*, 2022). In Kenya, this period was between mid-March 2020 and late October 2020 (Ministry of Health [MoH], 2021). Data was collected in Kenya during the second wave, which was between December 2020 and July 2021 (UNESCO, 2021a).

The collected data were inspected, cleaned, edited, and data files were prepared by the REDS team that gathered it. During preparation of the data files, outliers, implausible (invalid) responses and missing variables were given unique codes (UNESCO, 2021a). These codes were used to filter out such responses during data analysis. The data was analysed with the aid of the International Database (IDB) Analyser. Frequencies and percentages were used to present data. Relationships between teacher characteristics' gender, age, teaching experience and their professional training and psychosocial well-being were explored using the Chi-Square test.

## 4. Results and Discussion

# 4.1 Psychosocial Well-being

The psychosocial well-being of teachers was very critical during the COVID-19 pandemic. The Ministry of Education introduced the plans and policies to be implemented in guiding teaching and learning during and after the pandemic. Some of the measures in the plans and policies that were anchored on the teacher well-being included: social distancing; smaller class sizes; an increased number of staff, and supplementing face-to-face teaching with remote teaching as per the REDS data. This was in line with the guidelines given by the United Nations (2020) and the USA (2021) on the return to school framework. Further, there was a need to prioritize socio-emotional support for teachers since the emergency response to online teaching aroused anxiety and uncertainty, thus increasing teachers' psychological stress (Ngwacho, 2020).

At the school level, changes in policies were made during and following the COVID-19 disruption. These changes were guided by the Ministry of Health (MOH) protocols on curbing the spread of COVID-19. Analysis of data from the principals revealed changes in school policies and procedures made during the pandemic.

The results show that several policies and procedure changes were made by the majority of the schools. These included: increase in hygiene facilities (soap/sanitiser) (96.1%) and cleaning of school premises (95.1%), social distancing between adults (82.4%) and

students (69.6%) and varied break times between classes for different groups of students (53.9%) in the majority of schools. These changes were meant to support the physical health of teachers, hence promoting their stability with regard to their psychosocial wellbeing.

The reopening of schools was a global concern that attracted a policy framework by the United Nations (2020). The framework stressed on the resumption of learning and promotion of the well-being of all stakeholders. As articulated in the framework, the reopening of schools required changes in hygiene facilities, cleaning of school premises and social distancing among school communities. Although schools were expected to embrace attendance in shifts or break classes to promote smaller class sizes (Guthrie *et al.*, 2020; Sharp *et al.*, 2020), this did not happen in most schools. The failure could have been due to limitations in infrastructure and an inadequate number of teachers. Very few schools also supplemented face-to-face with remote teaching. This could be attributed to a lack of teachers' skills to teach online, the unavailability of digital devices to most learners and the cost of data bundles, which were out of reach for the majority of both teachers and learners (Reimers *et al.*, 2020; Schleicher, 2020; Tafazoli, 2021). The teacher's lack of digital skills and lack of access to digital devices and data bundles hindered their effective transition to online teaching, which posed a challenge to their psychosocial stability.

# 4.2 Teacher Psychosocial Support for Effective Remote Teaching

The advent of the COVID-19 pandemic brought a departure from the usual social interaction in the education ecosystem. Psychosocial support was critical in enabling teachers to transition to the new paradigm shift. Teachers were expected to adjust to teaching in a virtual environment and working from home. This shift brought a lot of anxiety, depression and emotional distress among the teachers. As a result, schools provided them with psychosocial support during the COVID-19 disruption.

Based on the principals' responses, schools were unable to provide support to teachers on different aspects that were likely to affect their psychosocial and emotional well-being. For instance, those who did not receive any support on informal/social events such as book club, accommodations for teachers who are primary carers and have children at home, professional association links and information such as mental health services, as well as access to physical activity resources were 91.1%, 89.2%, 82% and 81% respectively. Lack of support was also recorded in line with training in the support of social and emotional health of others, access to nutritional information and support and online well-being management programs and support at 75.2%, 74.3% and 73.3%, respectively. Additionally, although peer support systems and formal support networks were critical during the pandemic period, 65.3% and 62.4% of the school principals, respectively, did not provide this support to teachers. The low support could be explained by the fact that during the COVID-19 disruptions, in-person social events were not possible. Support towards professional association links and information, such as mental health services, was minimal as such organisations were few before COVID-19 disruptions and could not meet the demands of schools across the country (USA, 2021).

From the findings, it was evident that the psychosocial support services provided by schools were lacking. Therefore, most schools lacked a well-structured psychosocial support system.

Teachers' well-being could not be ignored during the COVID-19 disruption, given that they were working in an unfamiliar environment, learning new ways of teaching and pressure from other quotas that were not work-related. The teachers' responses when asked about the extent to which they agreed with statements about their well-being during the pandemic were presented.

Teachers' feelings and concerns about their well-being were varied. Nearly all (96%) of the teachers had concerns about contracting COVID-19 at work. These observations resonate with the findings of Wolf *et al.* (2021) which noted that teachers were concerned about their health and safety, and this had an effect on their well-being. A considerable percentage felt satisfied with the infection protocols implemented by their schools (72%), while 74% felt they knew where they could obtain assistance to support their well-being. There were those who felt that they were in control of their psychosocial health. They included 76% who felt they were able to cope with changes in teaching and learning methods, 89% felt able to use their own methods like meditation to cope with stress, 65% felt able to maintain their normal exercise and health routines, 57% felt able to balance the needs of their work and personal responsibilities while 60% felt in control of their working environment when they worked from home. Although a good proportion of teachers felt that they were in control of their psychosocial health, it would be necessary to track whether this was actually implemented in practice during the COVID-19 pandemic period.

The teachers also expressed concerns about their well-being in the way they responded to some items. A total of 93% felt they needed assistance to support their well-being; 60% felt fatigued most of the time, 67% had their sleep patterns interrupted, 71% felt isolated whilst working at home. Additionally, 53% of the teachers felt unable to meet all the requirements of their job, while 60% lacked time to interact socially with their colleagues. These items presented clear indicators of psychosocial distress that most of the teachers were going through during the COVID-19 disruption. These results are pointers to teacher psychosocial impediments in realising their role as facilitators of online teaching. Additionally, it should be noted that a distressed mind may be a precursor to disorderly teaching sessions. Hence, there is a need to put up a mechanism for proper psychosocial support to ensure teachers' emotional stability for effective remote teaching and in readiness for future uncertainties.

Nearly all the teachers expressed their concern about contracting COVID-19 at work. This could have affected their psychological, emotional and social well-being. Subsequently, additional analysis was conducted to establish whether the teachers' concerns were related to their demographic characteristics. The relationship was explored using a chi-square test. The test results revealed that the percentage of teachers aged below 25 years (100.0%) and 60 years and above (100.0%) who were concerned about catching COVID-19 was higher compared to those aged 25 to 29 (87.5%), 30 to 39 (96.0%), 40 to 49 (95.9%) and 50 to 59 (97.8%). It means the young and the old teachers were more

concerned about contracting COVID-19. The results also revealed that the relationship between age and concern with catching COVID-19 was statistically significant  $\chi 2$  (15, N = 692) = 15.342,  $\varrho <$  .05. This significant relationship could be attributed to the fact that the young and the aged are more vulnerable to COVID-19 (MoH, 2021). Consequently, the same age sets are more prone to mental and emotional instabilities, hence the need to be provided with more psychosocial support.

The amount of time one spends engaging in activities has an implication on their well-being. Teachers responded to the changes in the time they spent per week on work-related activities during the COVID-19 disruption in comparison with before the pandemic. On involvement in communicating with parents, 30.2% of the teachers reported an increase in time spent, 6.7% reported no change, while 63.1% reported a decrease in time spent. Communication between teachers and parents is a pointer to a good psychosocial activity since it gives them the opportunity to know how the parents and learners are faring. This promotes their personal satisfaction and consequently psychosocial stability.

Regarding attendance at staff meetings, the findings revealed that a decline in time spent by 69.7% of the teachers while 54.9% reported a decline in providing support to other teachers. This decline in teacher peer support during the COVID-19 pandemic may be attributed to the restrictions put in place to minimise social interaction and the inability to interact or support each other remotely due to the inadequacies in utilizing the digital space.

Teachers' positive perceptions of support given to them by various stakeholders made them feel cared for, boosting their morale and sense of belonging. This gratification ultimately led to their ability to effectively perform their duties. The perceptions of the teachers of the support given by various stakeholders were analysed. The majority of the teachers felt supported by school leadership (70%), colleagues (76%), MoE (71%), school (51%), social network outside of school (82%) and local community (62%). The majority also felt that they needed to ask for professional support outside their schools (71%). This is an indication that teachers had positive perceptions of the support given. Based on gender, the support by the different stakeholders was not significantly different. However, for the need to ask for professional support outside of one's school, over 50% of the male teachers did not see the need for it compared to 33% of their female counterparts. Further, it was also noted that a slightly higher proportion of female teachers felt that the set of support mechanisms provided by their schools was insufficient compared to that of male teachers. These findings demonstrate that attempts were made by the stakeholders to support teachers to enhance their physical, mental and emotional health. However, not all teachers felt supported towards promoting their overall well-being.

#### 5. Conclusions

Inadequacies evidenced in the psychosocial support included minimal support given to teachers in dealing with fatigue, interrupted sleep patterns and a sense of isolation.

Additionally, from the school principal's perspective, teachers were not supported in informal or social events, accommodations for teachers who are primary carers, provision of professional association links and information on mental health services, and access to physical activity resources.

Further, all teachers, regardless of their age, were concerned about contracting COVID-19 at their place of work despite the Government putting in place mechanisms of minimizing the spread of the disease and allowing teachers above the age of 58 to work from home. The inadequacies of psychosocial support experienced in Kenya are similar to those of most countries where efforts were made to train teachers in readiness for online teaching (USA, 2021).

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### **Conflict of Interest Statement**

The authors declare no conflicts of interest.

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