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## A Grounded Theory of ECD Principals' Self-Care and Workplace Wellness-Promotion Practices

### Abstract

The purpose of this grounded theory study is to discover the self-care actions, habits and attitudes, which contribute to occupational wellbeing of ECD crèche principals in a disadvantaged community. Failure to take care of one's own wellness and self-care jeopardises occupational functioning and the business. I explore the participants' self-care practices along different dimensions of living, to establish how they take care of themselves personally as well as in the workplace.

Keywords: health, wellbeing, job satisfaction, early childhood principals

### Introduction

The notions, wellness and self-care, are ubiquitous in the popular media and in the workplace, it presents as wellness programmes. A deficit in universally accepted definitions (Sieberhagen et al., 2011) necessitates clarification of relevant concepts in the context of this study focusing on the actions, habits and attitudes of the Early Childhood Development (ECD) owner-principals to support self-care and to improve workplace wellness.

*Wellness* builds on the World Health Organization's definition of health: 'a state of complete physical, mental, and social wellbeing and not merely the absence of disease and infirmity' (WHO, 1998, par. 1). It is seen as a subjective evaluation of life satisfaction and emotional reactions (Fisher & Boer, 2011) and a conscious process of being continually exploring, choosing and questioning along multiple dimensions of living (Sieberhagen et al., 2011). Wellness contributes to reaching maximum but realistically feasible potential. This requires self-development, personal improvement and growth (Sieberhagen et al., 2011).

The term *employee wellness* (EW) used in literature is associated with EW programmes promoting health and life skills, preventing illness and injuries and managing diseases (Sieberhagen et al., 2011). However, I prefer the term *workplace wellness* (WW) as the participants in this study are both principals and crèche owners, posing different challenges to their self-care and wellness approach. *Self-care* as an objective of companies' EW programmes, is based on a utilitarian premise that improved health and wellness leads to decreasing costs for the company (Sieberhagen et al., 2011). Besides mental and physical self-care, WW strategies include self-reflection, active networking and setting boundaries to improve job engagement, efficacy, resilience and satisfaction (Sanchez-Reilly et al., 2013). Typically however, self-care is described as a holistic approach for a healthy lifestyle (Sanchez-Reilly et al., 2013).

The purpose of this grounded theory (GT) study is to uncover the lived experiences of ECD principals' actions and attitudes contributing to occupational wellbeing by developing a GT about self-care to support physical, mental and emotional health; prevent burnout and compassion fatigue; manage stress and promote job satisfaction and good quality of life. GT is useful in social settings to develop theory rooted in observation, experience and 'real world' expressions (Willig, 2011).

## Method

I purposefully selected four female ECD crèche owner-principals from disadvantaged areas in the Western Cape. They had been identified by an NPO which trains and mentors ECDs from marginalised communities. Pseudonyms were used throughout. I drew on Glaser's Classic GT (Kenny & Fourie, 2015), and generated data through unstructured interviews; field notes; and memo writing (Willig, 2013). Following the inductive approach of GT, concepts were not pre-defined, and the literature served as another data source reviewed only after data saturation had been reached and themes developed (Ramalhoet et al., 2015). After acquiring informed consent, interviews commenced with one broad question: *Which actions, habits and attitudes do you use every day to take care of yourself and that make it possible for you to do your work?* Discussions became progressively probing. The abbreviated GT coding procedure followed, using only the original data set (Willig, 2013) and data collection and analysis happens continuously and simultaneously (Kelly, 2006). Theory is constructed through an iterative process of constantly comparing data while identifying and integrating categories as the GT emerges (Gabriel, 2013). Analysis followed a two-stage open-coding process, first sifting through the data to identify core categories, related concepts and emerging themes followed by theoretical coding, moving away from description towards conceptualisation, abstraction and integration and a substantive theory (Kelly, 2006; Willig, 2013).

## Discussion

When identifying emerging themes, I considered WW as a conscious, deliberate and active process of being, along multiple dimensions of living while relating self-care to the physical, mental, emotional, spiritual, social, occupational and environmental wellness (Sieberhagen et al., 2011). Specific themes emerged as actions, habits and attitudes participants employed to care for themselves and to improve workplace wellness: making work meaningful; investing in self-development; actively building relationships and keeping the faith.

These themes differ greatly from the popular depiction of self-care and wellness as feel-good, inward-looking and self-indulging behaviour encouraging retreating from this world and resulting in 'every social problem collapsed into the quest for a good life' (Penny, 2016, par. 3). Self-care rather resembles the radical understanding of the 1970s feminist movement and Lorde's (1988, p. 130) declaration: 'Caring for myself is not self-indulgence, it is self-preservation, and that is an act of political warfare'. Self-care is thus associated with determination, empowerment, resilience and self-worth (Ahmed, 2014). It is the struggle for survival and self-preservation to

take control, being resourceful and discovering what you can do for your own wellbeing (Evans et al., 2017). Sometimes it is simply coping, getting by and making do (Ahmed, 2014). It is about actions rather than feelings; hardiness rather than hiding.

The emerging themes show similarities with the thematic components of Narrative Identity Theory (NIT) explained in the third level of McAdams' life story model (2001), namely narrative identity (NI), and link with psychology studies exploring the relationship between personal narratives, and psychological wellbeing (Ryff & Keys, 1995).

NIT holds that we are self-aware, embodied beings compelled to make sense of our lives by integrating life experiences into internalised and ever-developing stories of the self with a reassembled past, perceived present and an imagined future (Singer et al., 2013). We use stories to situate ourselves in time and place (Woodruff-Burton & Elliott, 2005); to better understand our own and others' actions. We develop strategies to create a structured, credible and above all meaningful whole giving purpose to our lives (Singer et al., 2013). The relationship between constructing life stories showing the ability to adapt, reframe and make meaning can support wellness (McAdams & McLean, 2013; Singer et al., 2013). NI identifies eight thematic elements of personal narrative (McAdams & McLean, 2013), four of which correspond with the themes I identified.

### *Making work meaningful*

NI explains meaning-making as the degree to which we make sense of life, events, emotions, relationships and ourselves (Lips-Wiersma & Morris, 2009). The participants demonstrated the ability to reframe their often-tragic life experiences and difficult circumstances to give their lives meanings, illustrated by frequent expressions of the joy children bring to their lives. Katriena, who had a difficult childhood, says "*I just want them to be happy, when they are happy, so am I*". Having work that has meaning facilitates personal growth, making it significant - an essential aspect of wellbeing (Alan et al., 2016). The decision to care for children and the subsequent choice to open a school-business is directly linked to this ability to make meaning from their own life stories.

### *Agency*

Self-determination contributes to having meaningful work but it is also a consequence thereof. People from lower social class backgrounds often have limited career choices due to lack of access to education and finances (Alan et al., 2016). The data indicates however, that all four participants defied these odds and became agents in the Bandurian sense to intentionally shape their own narratives and to influence their life circumstances by giving it meaning and creating meaningful work. Says Fezeka, after losing her work: "*I was the one who said to others let's start our own business. Now is the time to stand by myself. I feel strong to everything that was happening. [I told] myself this is a job that I like, can't do any other job*". Agency is strengthened through (McAdams & McLean, 2013, p. 234):

- **Self-mastery:** Mandisa saw the need in the community and, despite having sustained severe injuries in an accident, took control of her life because she

“wanted to help kids who are suffering by opening my own crèche in my own house”.

- **Increased status or prestige amongst peers:** Comments on how community members value the work done at the crèches, contribute to giving meaning to their work. Elsie says: “People say they appreciate me, and that we must never close the school”.
- **Achieving a goal:** Katriena is inspired as she feels: “I don’t want to hide my talent under a bushel. I am making a difference in the community”.
- **Empowerment through interacting with something larger than the self:** Elsie explains that what keeps her going is getting out of bed every day for a purpose. Running their own businesses, and having their own money, offer the participants a sense of control over their lives and allow them to intentionally initiate and carry out activities (Bandura, 2001). Personal autonomy improves wellbeing and reduces negative psychological symptoms as they develop their talents and potential (Fisher & Boer, 2011). Katriena considers her business part of her self-care. “It is something I do for myself. It gives me the world of pleasure” and Mandisa says: “No one tells me what to do. I get ideas on what to do. Creativity, that is who I am”.

### Redemption

One of the meanings of redemption in NI (Alan et al., 2016) refers to personal growth and learning new skills. The participants indicate that their involvement with teaching, their ECD training and continued professional development has led to personal growth and skills leading to positive psychological responses when evaluating job experience (Judge & Klinger, 2008) and contributing to wellbeing (Connolly & Myers, 2003). Fezeka says: “I get support and information from doing courses and workshops, so I feel I can do what is needed”. Despite some complaints, participants agree to experiencing job satisfaction, some even considering it a calling (Geldenhuys et al., 2014).

### Communion

Communion refers to caring for and helping others from close family to the broader community for optimal wellness (Prilleltensky & Nelson, 2000). Communion implies striving for unity, sharing, building affiliations, belonging, supporting and communicating with the self and with others (Lips-Wiersma & Mills, 2014; McAdams & McLean, 2013).

The women’s **relationship with self** however is lacking. Elsie says: “[There is] not much I do for myself, I just go on. There isn’t time for myself”. A lack of work-life balance, boundaries, leisure time and resources lead to a lack of personal self-care. Katriena says: “I don’t take time to spoil myself ... attending to my hair and nails. When I do have money, I think, I can use it somewhere else”.

Physical wellness (nutrition, exercise, rest and hydration) is not prioritised. Katriena, who suffers from a range of lifestyle conditions, says she tends to eat infrequently, often only because she has to eat before taking medication. Also, personal healthcare takes a backseat to work and earning a living. When Mandisa sustained serious injuries, she continued working: “[I]f I stopped, who was going to

*help me? There was no choice. How am I going to survive, how am I going to live? I was helping myself. Because of my love here I am, I keep smiling every day*". Whether from exhaustion or not, the majority of participants said they sleep well at night, Fezeka indicates *"I pray before I sleep"* but Katriena admits to struggling to *"switch off at night"*, leading to conflict with her husband.

Some **personal relationships** appear to be troubled. Family wellness according to Prilleltensky and Nelson (2000) refers to meeting the needs of everyone in the family. Although spouses and family members offer emotional support (Katriena's daughter sometimes treats her mother to a massage or meal), and practical support (Elsie's daughter helps with the crèche's bookkeeping), help with housekeeping chores is less forthcoming. Fezeka's husband supports her business *"but housework is my responsibility"*. Extended families offer little support either by choice or because they live far away. According to Elsie she is *"the pillar of strength in family, not the other way round. (I ask no-one and rely on no-one. I love giving and rely on God)"*.

The majority of participants are actively involved in their **wider community**, caring for the elderly, running a soup kitchen, involvement with youth groups, and organised religion. Katriena says it is her love of young people, including gang members, which prompts her to engage with them while doing patrols for the local neighbourhood watch. Often community engagement ensues from identifying needs and wanting to empower their community. Elsie started the crèche when she *"saw a lot of children on the street. I said to God: now I see where I am going"*. Achieving self-care through building relationships features strongly. Elsie stated: *"We can't just exist for ourselves"*.

**Professional relationships** provide support and they value the role of the NPO as mentor: *"They make my life easier"* (Elsie) and *"(E)very time I have a problem at the crèche, they help me"* (Fezeka). Colleagues become friends who support one another. Fezeka attends weekly ECD forum meetings: *"if you have a problem [you] share and get solutions"*. Also, church attendance serves as professional support for her. *"There are some other people ... they know about business. We share ideas, I can pick up some points."*

All the women expressed the central role **faith** plays. Katriena knows that God helps her achieve her vision. *"He tells us to bring the children to Him; He blesses me without end"*. Elsie explains that she gave up full-time work because God commanded her to start a school. *"I am a very religious woman, I don't despair. If you follow the Lord's plan, He will provide"*. Fezeka says: *"Sometimes there are trials and tribulations but I have faith that there is God, even when I feel that now I can't do it, I know that there is hope for tomorrow"*. Mandisa agrees: *"I keep on praying, reading, the Bible gives me hope. I have to be strong, can't lose faith. Nothing can stop me"*.

## Conclusion

Running a crèche and business is demanding, particularly in a sub-economic area. Failing to properly take care of wellness and self-care, places one-self and the business at risk. However, I found that self-care in the context of many ECD principal-entrepreneurs in indigent societies does not equate to self-indulging pamper parties. Instead, self-care is part of a stubborn battle towards personal and

professional self-preservation and self-empowerment to prevent burnout at best, and despair at worst. Although the participants in this study have, mostly, created ways of meaning-making and job-satisfaction, physical wellness in particular is neglected. Intentional guidance of ECD owner-principals to integrate actions, habits and attitudes promoting workplace wellness and self-care, can enhance resilience, and better quality of life.

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