

## **Using Clinical Supervision to Lower EFL Teachers' Burnout**

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### **Abstract**

The present study was an attempt to explore the effect of clinical supervision on EFL teachers' level of burnout. For this purpose, a total number of 80 male and female EFL teachers within the age range of 26 and 47 who were working at a language school in Tehran participated in this study. Forty teachers in the experimental group underwent a clinical supervision program which comprised the three steps of pre-observation conference, observation, and post-observation feedback conference while the other 40 teachers who were in the control group were subjected to the conventional supervision program of the language school. The program for both groups spanned a total period of 12 weeks. Prior to the program, the Maslach Burnout Inventory (MBI) questionnaire was used to measure the burnout level of all the teachers as the pretest, and, again, at the end of study, both groups took the MBI questionnaire as the posttest. The analysis of the test scores using a test of analysis of covariance (ANCOVA) revealed that the clinical supervision program had significantly lowered the participants' burnout. As a result of this study, the researchers suggest that ELT establishments take into consideration the practice of clinical supervision to enhance their teachers' performance.

**Keywords:** Supervision, clinical supervision, teacher burnout

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## INTRODUCTION

The importance of elevating quality has always been an ultimate desire for most, if not all, policymakers of various fields of activity. One key element which has effectively helped promoting and maintaining the quality intended by policymakers is supervision (Hoy & Woolfolk, 1989); the latter has in turn turned into one of the determining parameters that contribute to the enhancement of educational efficacy throughout different societies (Glanz, 2018).

Nevertheless, supervision – just as almost any other procedure in education – is not free of its downsides and there is thus hardly any denying that the absence of a nurturing interaction between supervisors and teachers can propel negative attitudes toward the profession (Ibrahim, 2013) as supervision mostly embodies “unpleasant responsibilities such as providing negative feedback, ensuring that teachers adhere to program policy, and even firing employees if the need arises” (Bailey, 2006, p. 5). Among the aforesaid negative attitudes of teachers is the emergence of burnout. It is a well established fact that teachers with high levels of burnout are less efficient in performance productivity (Bakker, Albrecht, & Leiter, 2011; Brouwers & Tomic, 2000; Goswami, 2013). In addition, teachers’ intentions of leaving the profession is predicated by the exhaustion dimension of their burnout (Leung & Lee, 2006). When teachers suffer from burnout, they develop a negative attitude towards learners which results in demotivation of the students, and, consequently, reduction of students’ success (Williams & Burden, 1997).

## LITERATURE REVIEW

### Supervision

Supervision, as Okorji and Ogbo (2013) point out, “may be seen as the process of helping, guiding, advising and stimulating growth in teachers in order to improve the quality of teaching” (p. 902). Accordingly, Klein (2017) notes that teachers’ degree of commitment to their profession together with their level of job satisfaction and self-efficacy is very much defined through supervision. Furthermore, Nolan and Hoover (2008) define supervision as an institutional function for promoting teacher growth and quality of teaching and learning.

Gebhard (1990) looks into the concept of supervision from a different angle and defines supervision as ongoing continuous process of teacher education through which the supervisor observes all that is occurring in the classroom while focusing on improved instruction. Another perspective is presented in a very recent publication by Faas, Smith, and Darmody (2018) who emphasize the role of an inclusive approach of the principal in conducting a supervision which is aimed at the enhancement of teacher performance.

Since teachers play a pivotal role in student achievement and performance (e.g. Hashemian & Azadi, 2010; Tsui, 2011, as cited in Tajeddin & Askari, 2016), they face new learning needs in the enhancement of their professional development (Bransford, Darling-Hammond, & Le Page, 2005; Fullan, 2000). At the same time, this professional development may be hampered as Kayaoglu (2012) states that certain scholars maintain that supervision by nature brings about discomfort and distress. It is suggested that the mere mention of the term supervision would perhaps culminate negativities whereby teachers would refrain from expressing freely their doubts and concerns in fear of running into probable issues with the establishment.

To help overcome the aforesaid problem, supervisors may be responsible for providing a climate which engenders reflection, exploration, and change (Chamberlin, 2000) through a process in which a structured observation, analysis, and evaluation of teachers' performance is in place (Findon & Johnston-Wilder, 2018). Despite the issues that supervision may pose which could of course be managed in favor of the learning/teaching process, there is a multiplicity of both theoretical and empirical evidence on the indispensability of supervision in educational contexts (e.g. Barnette, 2004; Bates, Drits, & Ramirez, 2011; Daresh, 2001; Harris & Muijs, 2005; Kim & Danforth, 2012; Ozdemir & Yirci, 2015; Veloo, Komuji, & Khalid, 2013). One supervision modality is clinical supervision: "In response to the adversarial attitudes towards supervision, clinical supervision has gained recognition in many educational settings" (Kayaoglu, 2012, p. 103).

## Clinical Supervision

Clinical supervision is a non-traditional and directive approach pioneered by Goldhammer (1969) that meets all the characteristics required for responsibly and efficiently monitoring the work of teachers (Acheson & Gall, 1992). Perhaps the underlying reason for its being labeled *clinical* is the fact that both the teacher and the supervisor engage with one another trying to diagnose and thereby remedy the instructional problem.

Holland and Adams (2002) described clinical supervision as a one-size-fits-all practice which, as the analogy signifies, could be used in different contexts universally. According to Gürsoy, Kesner, and Salihoglu (2016), clinical supervision is perhaps somewhat linked to reflective teaching in that teachers are encouraged to reflect on their teaching alongside interacting with the class while being observed.

Acheson and Gall (1992) maintained that clinical supervision is performed through three main steps. The first step is the *planning conference* that is a meeting session between the supervisor and teachers. These meetings are scheduled based on teachers' agreement about the topic and objectives for the next meeting. The second step, i.e., a *classroom observation*, involves the supervisor's systematic and nonjudgmental observation of a class in order to collect data related to the objectives agreed upon during the planning conference. The last step involves the *feedback conference* during which the supervisor provides the teacher with a mirror-like reflection of classroom activities "so that teachers can see what they are actually doing while teaching" (Acheson & Gall, p. 12).

Clinical supervision with its humanistic nature may help in solving the ongoing problems among teachers through honest dialog and constructive feedback (Pajak, 2002). The above statement is of course substantiated by ample studies throughout the past four decades or so which reveal that teachers' performance increases as a result of clinical supervisory practices (e.g. Abbott & Carter, 1985; Alba Papa, 2017; Kahyalar & Yazici, 2016; Rodgers & Kettl, 2007; Sullivan & Glanz, 2000). Sergiovanni and Strarrat (2010, as cited in Okorji & Ogbo, 2013) also emphasized that the crucial components of clinical supervision comprise establishing a healthy supervisory climate enabling a support system called *colleagueship*.

In recent times, cognitive coaching – i.e., “a non-judgmental and confidential relationship between a coach and teacher based on authenticity, honesty, respect, and empathy” (Todd Rogers, Hauserman, & Skytt, 2013, p. 4) – is very much in congruity with the overarching goal of clinical supervision which is none other than teacher empowerment towards self-sufficiency. The two approaches are interactive and supportive processes which constantly engage supervisors and teachers thus intended to reduce the negative impact of certain problems that teachers may face in actual practice (Fowler, 2013). These negative impacts are categorized under specific headings with one such impact being teacher burnout (Leung & Lee, 2006).

### **Teacher Burnout**

Teacher burnout, being a major concern in the field of teaching in general due to its significant prevalence (Aloe, Amo, & Shanahan, 2014), was first introduced and defined by Freudenberger (1974) as an emotional exhaustion experienced by people who work in human services. Haberman (2005) defines burnout as the circumstances during which teachers continue their presence as paid employees but cease to function as professionals; to this end, they “go through the motions of teaching with no emotional commitment to the task and no sense of efficacy” (p. 2). Similarly, Herman and Reinke (2014) assert that teachers suffering from burnout have concluded their lack of agency in affecting any impact on their students.

Historically, it was Maslach and Jackson (1981) who – based on Freudenberger’s pioneering work – introduced the most widely accepted conceptualization of burnout and defined it as a psychological syndrome that has three dimensions: *Emotional exhaustion* that refers to feelings of being emotionally drained by intense contact with other people, *depersonalization* which is negative attitudes toward people, and *reduced personal accomplishment* which refers to a decrease in one’s sense of competence and of successful achievement in working with people.

In terms of the adverse effects of teacher burnout, Leiter, Bakker, and Maslach (2014) demonstrated empirical evidence in favor of burnout’s considerable dysfunctional ramifications which lead to substantial costs for both teachers and institutions due to their diminishing productivity. This

can be both what the teachers believe supervisors and trainers should be doing and what teachers perceive administrators are actually doing to facilitate teachers' work (Barnette, 2004).

Indubitably, teachers' burnout is the product of several factors at work (Warren & Sorges, 2013). The major demographic characteristics related to burnout, according to Harris and Mujis (2005), are teachers' age, level of education, and years of experience. Furthermore, teachers' perception of administrative support is also a key factor (Skaalvik & Skaalvik, 2010). However, most studies suggest that environmental factors, particularly characteristics of the work setting, are more strongly related to burnout than are such personal factors as demographic and personality variables (e.g. Maslach & Jackson, 1984; Montgomery & Rupp, 2005; Stauffer & Mason, 2013).

Nias (1996) argues that the most profound negative emotions attributed to teacher burnout are instigated by interactions with fellow teachers or superiors rather than the actual students. Furthermore, certain researchers reported that due to the significant demands associated with being a teacher, they are highly vulnerable to burnout (e.g. Baran et al., 2010; Mukundan & Khandehroo, 2010; Shaughnessy & Moore, 2010; Vladut & Kallay, 2010). Another study conducted by Luk et al. (2010) demonstrated that when teachers are not able and ill equipped to cope with the demands of the job such as work overload, they experience burnout. Lack of social support, time constraints, and a large number of work assignments also contribute to teacher burnout (Cano-Garcia, Padilla-Muñoz, & Carrasco-Ortiz, 2005; Chan, 2007; Dorman, 2003; Lee & Ashforth, 1996; Leung & Lee, 2006; Schaufeli & Bakker, 2004).

Among the factors that lead to a decrease in burnout, psychologists have reported that the more teachers expressed high levels of mental resilience, energy, and persistence in the face of difficulties and willingness to challenge and enthusiasm for their job, the less they reported the risk of burnout (Schaufeli & Bakker, 2010). Likewise, the more teachers were engaged in their work and used job resources (e.g. supervisor support, innovativeness, appreciation, and organizational climate), the more they helped themselves to cope with demanding interactions with students (Bakker, Demerouti, & Verbeke, 2004).

According to certain researchers (e.g. Cable & Edwards, 2004; Verquer, Beehr, & Wagner, 2003), when there is no balance between the demands of a job and its resources (especially when the demands outweigh the resources), it causes stress, job dissatisfaction, and, in the worst case, burnout (Pillay, Goddard, & Wills, 2005; Sharplin, O'Neill, & Chapman, 2011). This is where the role of the management of the educational establishment comes into focus since, as Dworkin (2000) notes, more than all other school personnel, head teachers and principals can break the functional linkage which prevails between school-related stress and teacher burnout.

More specifically, Dworkin, Saha, and Hill (2003) also found that when teachers can have an open communication with the superiors, they were less likely to experience burnout. In this regard, Feiman-Nemser (2003) stated that "without easy access to one another, teachers may feel reluctant to share problems or ask for help, believing that good teachers figure things out on their own" (p. 29). Therefore, finding ways to keep this balance and helping teachers through this difficult state may seem to be an imperative need (Kafele, 2015).

## **PURPOSE OF THE STUDY**

Regarding the abovementioned points and bearing in mind the importance of burnout in all educational settings (including EFL classrooms), the researchers were interested to explore how teacher burnout could be reduced. This is particularly true as quite a sizeable number of studies have demonstrated the incidence of burnout among EFL teachers in the context of Iran too bearing no quintessential difference with the other parts of the globe (e.g. Mohammadi, 2006; Rashidzadeh, 2002; Saberi, Moravveji, & Naseh, 2011; Sadeghi & Khezrlou, 2014).

Meanwhile, with the inevitability of supervision – as discussed above – which is perhaps first and foremost a stress factor for teachers per se, the researchers were thus curious to see whether alternative methods of supervision could mitigate teacher burnout. Accordingly, in their review of the literature, they became acquainted with clinical supervision and how it has demonstrated a reducing impact on burnout in certain professions such as nursing (Hyrkas, 2005). Yet, as to the best knowledge of the researchers, there were no studies on the possible impact of this mode of supervision on

EFL teachers' burnout, they conducted the present study on the possible connection of clinical supervision and burnout among EFL teachers. Thus, the following research question was formulated:

- Does clinical supervision has any significant effect on EFL teachers' burnout?

## METHOD

### Participants

A total of 80 teachers participated in this study; all these teachers were colleagues of one of the researchers (who functioned as the supervisor of these teachers). Furthermore, they all volunteered to participate in this study and they were reassured that participation in this study was merely for an academic research which bore no consequentiality whatsoever for the teachers' performance and/or occupational status at the language school. Hence, there were no selection criteria for participant selection on the behalf of the researchers. In effect, the selection was through non-random convenience sampling. 80 participants were assigned randomly and equally to an experimental group which comprised of 40 teachers and a control group with the same number. They were both males and females ranging in age from 26 to 47 years. Most of the 80 participants had degrees related to language teaching and the rest had some kind of pre-service and in-service training at the language school they were working.

All of the participants had at least three years of experience since a minimum of three years of experience was one of the prerequisites of employment at the language school. The teachers taught at different levels from elementary to advanced. Table 1 below provides the detailed demographic data regarding the sample.

**Table 1:** Demographic data of the participants

Category	Subcategory	Frequency	
		Experimental group	Control group
Age	26-30	4	11
	31-35	18	13
	36-40	14	9
	41-50	4	7



<b>Years of Experience</b>	3-5	5	3
	6-10	19	12
	11-15	10	17
	16-20	6	8
<b>Academic Degree</b>	Bachelor's degree	20	16
	Graduate student	0	5
	Master's degree	8	10
	Postgraduate student	12	9
<b>Field of Study</b>	English and related	31	25
	Humanities	9	12
	Science	0	3
	Medical sciences	0	0

## Instrumentation

### *Maslach Burnout Inventory Educator Survey (MBI-ES)*

In order to measure the teachers' level of burnout, the Maslach Burnout Inventory (MBI-ES) on a seven-point Likert scale from 0 "Never" to 6 "Everyday" was used before and after the clinical supervision program. This inventory was designed by Maslach and Jackson (1981) on a strong theoretical basis and provides a multi-dimensional perspective on burnout. It is the most commonly administered measure of burnout consisting of 22 items measuring three factors (Maslach & Leiter, 1997; Maslach, Schaefer, & Leiter, 2001).

Nine items measure emotional exhaustion (e.g. "I feel used up at the end of the day") which define the emotions of being exhausted by work, five items measure depersonalization (e.g. "I worry that this job is hardening me emotionally") that define the condition of being insensible towards people getting service and inappropriate behavior towards others regardless of their personal differences, and eight items measure personal accomplishment (e.g. "I have accomplished many worthwhile things in this job") which define emotions about the ability of coping with the problems related with accomplishment and performance.

A high score in emotional exhaustion and depersonalization dimensions and a low score in the personal accomplishment dimension mean burnout. Accordingly, one cannot calculate an overall burnout score statistically using these three dimensions; rather, "An alternative approach has been to reduce burnout to just one of these dimensions, namely exhaustion... In the research literature on burnout, exhaustion is the most

widely reported and the most thoroughly analyzed component of this syndrome” (Maslach et al., 2001, p. 100). Hence, in this study, the exhaustion score of each participant was taken into consideration as the representative of their burnout.

Similar to the original Maslach Burnout Inventory, the MBI-ES has also been validated. Maslach and Jackson (1984) demonstrated the validity of the instrument with data indicating that high workloads resulted in high scores in emotional exhaustion and depersonalization and low scores on personal accomplishment. The MBI-ES was also validated by Iwanicki and Schwab (1981) with 469 teachers and by Gold (1984) with 462 teachers using factor analysis. The findings supported the three factor structures in the MBI-ES. Cronbach alpha ratings of 0.90 for emotional exhaustion, 0.76 depersonalization, and 0.79 for personal accomplishment were reported by Iwanicki and Schwab. Gold reported 0.88 for emotional exhaustion, 0.74 for depersonalization, and 0.72 for personal accomplishment. Other researchers (Wheeler, Vassar, Worley, & Barnes, 2011) reported 0.90 for emotional exhaustion, 0.79 for depersonalization, and 0.71 for personal accomplishment.

### **Data Collection Procedure**

The following procedures were pursued in order to accomplish the purpose of the study: Prior to the study, the experimental and control groups were formed as discussed above; subsequently all 80 participants sat for the MBI-ES at the pretest level.

#### ***Procedure in the Experimental Group***

At the beginning, the supervisor announced the commencement of a clinical supervision program with the purpose of assisting teachers with their levels of emotional exhaustion, depersonalization, and reduced personal accomplishment. She next explained the three steps of pre-observation conference, observation, and post-observation feedback conference of the program. The teachers were briefed about the purpose and procedure of each step of the observation sessions to record every single event happening in the class to be analyzed and interpreted with the aim of helping the improvement of those classroom traits contributing to burnout.

The supervisor subsequently created a group on the Telegram messaging cellphone application to manage the teachers and their observation schedules. Furthermore, relevant ELT articles, books, teaching tips, short clips on different teaching areas, and helpful strategies were uploaded with no size limitations. The teachers were also asked to share their ideas, teaching experiences, problematic areas in and outside the class, and feelings about the whole process of clinical supervision in an anxiety-free ambience. This group made them feel as if they were members of a family where they could share with no fear of being seen or judged. Based on the arrangements made in the Telegram group, the supervisor created a timetable according to which 10 teachers were observed in the first week. Prior to the observations, the pre-observation conferences were held for each teacher individually. The length of these pre-observation conferences ranged from 20 to 30 minutes. During these pre-observation sessions, an atmosphere of teacher empowerment and support was created. The teachers were the leaders and the supervisor acted as a facilitator and both collaboratively agreed upon the method and what to be observed. The researcher also asked some questions to clarify what the teacher had in mind for the observation session. These questions referred to the type of the data to be recorded such as students' behaviors and movement patterns, methods of recording the data, and steps to be taken in the following post-observation session.

For a period of 12 weeks, the supervisor observed the 40 teachers of the experimental group. Three observations were done for each teacher every four weeks and three feedback sessions were held individually after each observation session in the language school. Based on the timetable, 10 teachers were observed every week, meaning that by the end of the fourth week, all 40 teachers were observed once. These observations focused on the factors contributing to burnout among the teachers. Again, during the second cycle of the clinical supervision program, 10 teachers were observed for the second time until the end of the eighth week. The third cycle was also conducted accordingly.

The supervisor recorded the voice of the class of those teachers who consented in order to have a clearer picture to be discussed in post-observation sessions. The teachers were fully aware that some of the information of these recordings would be transcribed but all remained

confidential – through a coding process – and were used only for the purpose of analyzing the working environment. During the observation, the supervisor also took some notes of the areas to be discussed in the post-observation conference.

Following each observation session, the researchers analyzed the data collected and developed a plan to be discussed by the supervisor in the post-observation conference. The researchers highlighted the most important concerns to be addressed in the following conference through preparing the following questions:

- How do you feel about your working environment? Does it affect your work life?
- What kinds of situations do you find particularly emotionally demanding in teaching and in what ways?
- Can you give an example of a difficult interaction with a student or other teachers?
- Have you ever been subjected to verbal abuse by a student, parent, or other teachers?
- Is there anything outside of the working environment that affects your work life?
- Do you feel burdened by preparing for classes?
- Have you experienced any physical symptoms that might relate to your daily work life such as tiredness?

During the post-conference sessions, the supervisor and each teacher critically examined and discussed the problems related to the students (mentioned earlier) to determine an approach, which could reduce the burden of the problems. The length of these sessions ranged from 45 to 60 minutes. In these post-conference sessions, the teachers' needs were addressed through a mutual understanding of the problems and also the reflection process. Finally, when all 40 teachers in the experimental group were observed three times in the duration of 12 weeks and three post-observation conferences were held for each, they were again asked to fill the MBI-ES questionnaire, this time as the posttest.

### ***Procedure in the Control Group***

According to the regulations of the language school, every teacher had to be observed at least once during a semester with the purpose of promoting teaching quality and teachers' performance. Therefore, the same supervisor (one of the researchers) had to observe the control group classes but she also emphasized that this observation would not affect their summative evaluations and was only for the purpose of an academic study not pertinent to the language school. Furthermore, all the information would remain confidential. During the period of 12 weeks, the supervisor observed each teacher of the control group once, randomly and unannounced. Contrary to the clinical supervision program, there was no pre-observation conference for reviewing what was to be observed or evaluated. The observation sessions were held and subsequently, the feedback sessions followed.

The supervisor used the standard observation sheet of the language school in her supervision in the control group which was standard practice at the language school. The supervisor rated the teachers by checking the items on the observation sheet. Also, she wrote notes and comments regarding all the events happening in the classroom (teachers' questions, students' behaviors, motivation, and aggressiveness, problematic students, movement patterns, student-teacher interaction, classroom setting, teaching material, etc.) as accurately as possible.

The sheet contained four different categories to be observed including planning and preparation, classroom environment, instruction, and professional responsibilities. Each category contains the following 10 components:

1. Knowledge of resources;
2. Designing coherent instruction;
3. Creating an environment of respect and rapport;
4. Communicating with students;
5. Managing classroom procedures;
6. Engaging students in learning;
7. Managing student behavior;
8. Using questioning and discussion techniques;

9. Organizing physical space; and
10. Demonstrating flexibility and responsiveness.

Each of the above 10 components includes some subcomponents which provide a more accurate picture of the classroom progress. Using the sheet, the teacher was rated as *failing*, *needs improvement*, *proficient*, and *distinguished* in each component. The supervisor utilized this data to discuss and reflect on the necessary points with each teacher.

During the course of 12 weeks, the 40 teachers were observed randomly. The supervisor observed four teachers per week and provided them with feedback following the observation session. Normally, these feedback sessions lasted for 20 to 30 minutes. During these sessions, the supervisor pointed out the areas that needed improvement, highlighted some class management skills, and finally provided tips helping to enhance teaching practice.

Also, to compensate the number of sessions in the experimental group and removing the risk of bias against the control group, the researchers planned three additional observation and feedback sessions for the teachers in the control group. Accordingly, the supervisor organized a schedule to randomly observe 40 teachers three times in six weeks. Following each observation session, the teachers were provided with feedback regarding their teaching performance. These observation sessions were unannounced. Finally, the teachers of the control group were asked to fill out the MBI-ES questionnaire again, this time at the posttest level.

## Data Analysis

Once both groups had taken the posttest, the researchers engaged in the data analysis which – as detailed in the next section – included both descriptive statistics on the pre- and posttest results of both groups together with an analysis of covariance (ANCOVA). All the prerequisites for running this parametric test were, of course, put in place a priori.

## RESULTS

### Descriptive Statistics of the Pretest

As discussed earlier, the MBI-ES was administered to both control and experimental groups at the outset prior to the treatment. Table 2 below includes the descriptive statistics of this administration. As is clear from the table, the mean and standard deviation of the scores of the control group on the pretest stood at 4.77 and 1.90, respectively while those of the experimental group were 5.80 and 1.38, respectively.

It is worth noting of course that since the design of this study was pretest-posttest and that an analysis of covariance would be applied for the statistical analysis, the lack of homogeneity of the two groups at the outset would not be taken into consideration.

**Table 2:** Descriptive statistics of the MBI-ES pretest

	N	Minimum	Maximum	Mean	Std. Deviation	Skewness	
	Statistic	Statistic	Statistic	Statistic	Statistic	Statistic	Std. Error
<b>Control Pretest</b>	40	1	8	4.77	1.901	-.037	.374
<b>Experimental Pretest</b>	40	3	8	5.80	1.381	.133	.374
<b>Valid N (listwise)</b>	40						

As is seen, the scores also enjoyed normalcy ( $-0.037 / 0.374 = -0.099$  and  $0.133 / 0.374 = 0.355$  both falling within  $\pm 1.96$ ). The reliability of this administration was 0.801 using Cronbach's alpha.

### Descriptive Statistics of the Posttest

Table 3 below includes the descriptive statistics of the posttest. The mean and standard deviation of the scores of the control group on the posttest stood at 4.73 and 1.72, respectively while those of the experimental group were 2.95 and 1.15, respectively.

**Table 3:** Descriptive statistics of the MBI-ES posttest

	N	Minimum	Maximum	Mean	Std. Deviation	Skewness	
	Statistic	Statistic	Statistic	Statistic	Statistic	Statistic	Std. Error
<b>Control Posttest</b>	40	1	8	4.73	1.724	.071	.374
<b>Experimental Posttest</b>	40	1	5	2.95	1.154	-.004	.374
<b>Valid N (listwise)</b>	40						

Again all the scores also enjoyed normalcy and the reliability stood at 0.824.

### Responding to the Research Question

In order to test the null hypothesis formed based on the research question (i.e., clinical supervision has no significant impact on EFL teachers' burnout, an ANCOVA was run on both groups' scores on the MBI-ES pre- and posttests. Running this parametric test has certain preconditions, however. Firstly, as discussed earlier, all four sets of scores enjoyed normalcy.

Next came the test for homogeneity of variance for which the Levene's test was run; the variances were not significantly different ( $F_{(1,78)} = 0.888, p = 0.349 > 0.05$ ).

As one covariate was used in this study (burnout pretest), the third assumption of the correlation among covariates did not apply in this case. As for the fourth and last assumption, i.e., homogeneity of regression slopes, Table 4 below shows that the interaction (i.e. Group) is 0.781 which is larger than 0.05 thus indicating that the assumption of homogeneity of regression slopes has not been violated.

**Table 4:** Tests of between-subjects effects (1)



Source	Type III Sum of Squares	df	Mean Square	<i>F</i>	Sig.	Partial Eta Squared
Corrected Model	70.250 <sup>a</sup>	3	23.417	11.079	.000	70.250 <sup>a</sup>
Intercept	111.243	1	111.243	52.631	.000	111.243
Group	.165	1	.165	.078	.781	.165
PreBurnout	7.237	2	3.619	1.712	.187	7.237
Group * PreBurnout	160.638	76	2.114			160.638
Error	1409.000	80				1409.000
Total	230.888	79				230.888
Corrected Total	70.250 <sup>a</sup>	3	23.417	11.079	.000	70.250 <sup>a</sup>

a. R Squared = 0.304 (Adjusted R Squared = 0.277)

With the above assumptions in place, running an ANCOVA was legitimized. According to Table 5 below, the burnout pretest scores (the covariate in the model) came out to be significant ( $F = 0.007$ ,  $p = 0.931 > 0.05$ ) thus demonstrating that prior to the treatment, there was no significant difference between the two groups in terms of burnout.

**Table 5:** Tests of between-subjects effects (2)

Source	Type III Sum of Squares	df	Mean Square	<i>F</i>	Sig.	Partial Eta Squared
Corrected Model	63.029a	2	31.514	14.456	.000	.273
Intercept	105.979	1	105.979	48.615	.000	.387
Burnout Pretest	.016	1	.016	.007	.931	.000
Group	56.836	1	56.836	26.072	.000	.253
Error	167.859	77	2.180			
Total	1409.000	80				
Corrected Total	230.888	79				

a. R Squared = 0.273 (Adjusted R Squared = 0.254)

Furthermore, there was a significant relationship between the covariate (the burnout pretest) and the dependent variable (the burnout posttest) while controlling for the independent variable ( $F = 26.072$ ,  $p = 0.0001 < 0.05$ ). Hence, the null hypothesis of the study which stated that clinical supervision did not bear a significant impact on EFL teachers' burnout was rejected with those in the experimental group who gained a

lower mean bearing a significantly lower burnout rate than those in the control group.

## **DISCUSSION**

As stated above, the findings of this study showed that clinical supervision was significantly beneficial in lowering EFL teachers' level of burnout. This is perhaps consistent with the results of many studies such as those reported earlier in this paper demonstrating the positive impact of clinical supervision on lowering burnout in different contexts (e.g. Abbott & Carter, 1985; Alba Papa, 2017; Gürsoy et al., 2016; Kahyalar & Yazici, 2016; Rodgers & Ketl, 2007). Interestingly, a pioneer study conducted by Stein (1985) reported that teachers with higher levels of burnout greatly requested for collaborative supervision. The consistency perhaps lies in the fact that in congruence with collaborative supervision and in contrast with traditional methods of supervision, clinical supervision is conducted very much in an interactive manner. That is, teachers with high burnout are not interested in a conventional supervisory program where the supervisor simply provides them with feedback of their classroom observation.

Furthermore, the results of the present study are convergent with those of the studies conducted on clinical supervision revealing that the latter enhances different attributes of teacher performance. Sullivan and Glanz (2000), for instance, emphasize that clinical supervision which is founded upon refraining from a top-down approach and replacing that modality with a peer-to-peer mindset significantly contributes to teachers' better performance. In line with the above, Veloo et al. (2013) conclude that clinical supervision which is conducted through encouraging ongoing dialogues between the supervisor and the teacher helps teachers in improving many aspects of their performance all the way from writing daily lesson plans and presentation and development of lessons to evaluating the exercises and assignments and class control.

The studies conducted by Okorji and Ogbo (2013), Thomas (2008), and Zepeda (2007) which were conducted in highly diverse settings all favor, among many, the application of clinical supervision in teaching contexts as it yields promising results in terms of enhancing teacher performance. Needless to say, all three studies focus on the collaborative

nature of clinical supervision as the determining factor at work when it comes to the advantageousness of this procedure.

Therefore, it can be concluded that since through a clinical supervision program, both supervisors and teachers are engaged in a mutual and collaborative relationship, professional growth is accessible because teachers feel actually in control of their own problems; the latter trend creates motivation for them both. This is why the teachers participating in this program showed a positive attitude toward the whole supervisory practices. They posted very positive comments on Telegram about their feelings of involvement and how they are supported emotionally in this program.

Examples of these posts include: *"When you get back home, you are not finished yet and you have to prepare tomorrow's materials, practice sheets, look for new things, but in other jobs when you get home your work is finished."* Consequently, the teachers came up with the idea of having a comprehensive archive from all levels. All teachers were asked to upload and share designed materials for different levels so they could have easy access to different sort of materials which facilitated their work in terms of materials preparation. Teachers also found the uploaded teaching newsletters and articles helpful as one of them posted: *"I think I am reading more these days and I like it, it is helpful!"* Another teacher stated: *"I feel a lot of things have changed around here, now we are valued and heard. If we suggest an idea, we know that we are heard."* A third teacher's comment: *"I believe constructive changes have happened that will help us. I see teachers are less critical and judgmental. They are more open to help and share, now I have the sense of working as a team."* And finally, another teacher commented: *"I could say I am supported and know that when facing problems, there is someone who I can share them with and who can help me."*

The teachers in the experimental group praised the whole program since they were free to share and express their feelings, emotions, and ideas as, unlike other forms of supervision which teachers do not feel comfortable with, teachers were very satisfied with the clinical program, and they described it as considerably helpful. As discussed earlier in this section, not only the researchers in this study but apparently others who have explored the application of clinical supervision among teachers of

different majors highlight the significance of replacing the perhaps predominant element of confrontation in traditional supervision with that of cooperation in clinical supervision. It is indeed this very sense of collaborative dialogue between the supervisor and the teacher that paves the way for the growth and promotion of the culture of ownership among the teachers. This ownership in turn encourages the teachers to move away from a defensive stance vis-à-vis the supervisor (who may be traditionally viewed as the unwanted critic) towards positively and not antagonistically engaging with the supervisor through the ongoing constructive dialogue, which is perhaps the cornerstone of clinical supervision.

## **CONCLUSION AND IMPLICATION**

This study has a number of pedagogical implications. First and foremost, a successful clinical supervision program needs careful planning. Building a collaborative and teacher-centered relationship and culture based on trust is not an easy task; nevertheless, supervisors, principals, and teacher trainers who are committed to this cause can succeed in creating and promoting such an organizational culture among teachers. This climate of collaboration would pave the way for a clinical supervision program to flourish whereby teachers participating in this program would be willing to take risks and confront problems because they know they are supported even if they fail. It is this support which is essential in introducing change of attitude and behavior among teachers (Khabiri & Marashi, 2016).

This program also requires time. Therefore, supervisors and administrators would need to allocate time in their schedules to promote successful clinical supervisory programs. Supervisors, teacher trainers, and trainers could be encouraged to have clinical conferences with the teachers on a regular basis to close the gap between them. It is important to constantly discuss, negotiate, and agree upon the problems and existing issues. This may also in turn reduce teachers' general anxiety communicating with a superior which would promote collegial relationship and enhance the spirit of teamwork. Moreover, teachers can express themselves and their problems freely with no fear of being judged. As a result, supervisors and teacher trainers can schedule their time more efficiently as observations become more objective and feedback sessions more reflective. Workshops and training sessions could be constructive and

in a positive manner where learning is encouraged and orientation sessions could become much more interactive and dialogical. Teachers who join the clinical supervision program experience a collegial relationship with the supervisor as these programs allow teachers to reflect on their problems and analyze themselves. Teachers become leaders and more confident while they benefit from professional growth and development in a non-threatening environment regardless of their teaching experience.

Alongside teachers and supervisors, syllabus designers could also use the essence of clinical supervision programs in designing training courses and curriculums for teachers and trainers to encourage self-reflection and collaboration in EFL teaching courses. These courses can also build the sense of teamwork among teachers. In addition, teaching courses encourage teachers to work cooperatively with the trainer or supervisor. Also, syllabus designers may design stress management courses which could help teachers recognize and cope with their anxiety or work environment stressors successfully. In addition, designing courses for trainers and supervisors which sensitize them to certain supervisory behaviors may affect teachers positively.

TOT – training of the trainers – courses could also be modified according to the values of clinical supervision program. These courses should constantly promote teacher empowerment and leadership. Therefore, trainers would encourage supervisors, and teacher trainers to create such a culture. Eventually, through designing a clinical-based syllabus for both student teachers and teacher trainers, developing an interactive and collaborative relationship is promoted.

As discussed earlier, demographic factors are among the variables contributing to different levels of burnout. In this study, the researchers did not have any control over these variables; therefore, the findings of the study may not necessarily be generalized to all population cohorts. It is thus suggested that other research projects be conducted where the demographic traits of burnout such as age, gender, years of experience, and/or particular factors such as stress, workload, or teachers' motivation contributing to burnout would be taken into consideration.

Furthermore, the researchers realized in the course of the implementation of this study that setting the required pre- and post-observation sessions for 40 teachers is indeed a time consuming task

necessitating very careful planning. This issue may in effect hamper the feasibility and efficiency of clinical supervision. It is hence recommended to focus on strategies which would reduce time and thus facilitate the procedure.

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