

SCHOOL GUIDANCE AS A VEHICLE FOR PREVENTION AND HEALTH
PROMOTION IN PRIMARY SCHOOLS IN SOUTH AFRICA.

by

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DECLARATION

I declare that "School Guidance as a Vehicle for Prevention and Health Promotion in Primary Schools in South Africa" is my own work, that it has not been submitted before for any degree or examination in any other university and that all the sources I have used or quoted have been indicated and acknowledge by complete references.

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SCHOOL GUIDANCE AS A VEHICLE FOR HEALTH PROMOTION
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ABSTRACT

The primary aim of this study is to conduct an analysis of the existing primary school guidance service in the House of Representatives Department of Education and Culture (Reps:DEC) schools in the Western Cape, and to make suggestions for a school guidance approach that optimises the principle of health promotion.

The theoretical framework from which this study draws is that of prevention and health promotion.

The research methods used in this study were:

- (a) Literature reviews of school guidance and the theory of prevention and health promotion.
- (b) Analysis of relevant policy proposals in South Africa
- (c) Semi-structured interviews: with heads of psychological services in Reps:DEC, and teachers in primary schools. An interview guide was used to structure this process. The questions formulated within the interview focus on the existing guidance service in Reps:DEC primary schools; and suggestions for a future school guidance service for primary schools.

The analysis highlights that in some instances group guidance does exist in primary schools although the different areas of guidance are not implemented throughout the different phases of the primary school years - but the principle of prevention, which should be the cornerstone of any group guidance programme, particularly in the primary school, has not been clarified nor has it been fully developed.

Suggestions proposed at the conclusion of this study focus on the need to optimise the principles of prevention and health promotion in the primary school. In particular, group guidance in the primary school should become a "whole-school" issue within the context of Lifeskills and general school development, within a comprehensive education support services framework.



CHAPTER ONE

INTRODUCTION

The purpose of Chapter One is to explore the following:

- 1.1 The aim of the proposed study
- 1.2 A broad review of school guidance in South Africa
- 1.3 The methodology envisaged to achieve the proposed aim
- 1.4 A brief outline of the subsequent chapters

1.1 The aim of the proposed study

The primary aim of this study is to conduct an analysis of the existing primary school guidance service in The House of Representatives: Department of Education and Culture (Reps:DEC) schools in the Western Cape and to make suggestions for a school guidance approach that optimises the principles of prevention and health promotion more adequately.

The area of focus is demarcated to Reps:DEC primary schools, largely because I am an educator at a primary school under the aforementioned department with school guidance as one of my teaching subjects, and because of the lack of focus of school guidance in primary schools in South Africa. My fundamental motivation for exploring school guidance in the primary school is because of the importance of early intervention, a principle that is congruent with primary prevention which ought to be intensified and extended at primary school level.

The theoretical framework from which this study draws is that of prevention and health promotion which is drawn particularly from Community Psychology. The concept of prevention, which will be further discussed in Chapter Two, is relatively new in Psychology despite its existence for many years in public health. The principle of prevention is aimed at the promotion of health and reducing the likelihood of a disorder rather than treating behaviour after it has become entrenched (J.Lazarus, 1993). Recently there has been a paradigm shift from a problem oriented notion of intervention towards developing a service that aims to optimise the learning environment by focusing on strengths, competencies and development (J.Lazarus, 1993). These aspects are congruent with the health promotion approach which is defined by J. Lazarus (1993) as follows:

Health promotion supports personal and social development through providing information, education for health and enhancing life-skills. By so doing it increases the options available to people to exercise more control over their health and over their own environments and to make choices conducive to health.

Enabling people to learn through life, to prepare themselves for all its stages and to cope with chronic illness and injuries is essential. This has to be facilitated in school, home, and work and community settings. Action is required through educational, professional, commercial and voluntary bodies, and within the institutions themselves (J.Lazarus, 1993, p.15).

These concepts of prevention and health promotion will be explored in more detail in chapter two.

1.2 A broad review of school guidance in South Africa within the different education departments

Before embarking on an overview of the present nature of school guidance in South Africa or even planning for its future, it is worthwhile to situate school guidance within a historical perspective.

It is only in the last 25 years that school guidance has evolved as part of the broader South African education system, albeit with divergent variations of status, resources, approach and implementation. The establishment of a national school guidance service for Whites was legislated through the National Education Policy Act of 1967 with concurrent initiatives for "Coloured" and "Indian" pupils (Dovey, 1983).

With the introduction of a differentiated system of education in 1967, the then Department of Coloured Affairs established a specialised auxiliary service which included social welfare. Prompted by the developing labour market the then Department of Coloured Affairs introduced a compulsory school guidance service which was initiated in 1967 in standards six and seven, extended in 1968 to standard eight, 1969 to standard nine and ten and finally to the primary school (standard five) (Dovey, 1983).

Towards the end of the 1960's there was a human resource crisis. It then appeared that the entrenchment of school guidance in the broad education system at large was to satisfy the human resource needs of the country because a further concerted effort was made

by the then Department of Coloured Affairs to establish a school guidance service in primary and secondary schools. Numerous visits by subject inspectors attached to psychological services were made to schools in order to administer psychological group-testing programmes, inspect the existing programmes, and to offer in-service training (Department of Coloured Affairs Annual Report, 1973-1976). This resulted in the approach to the school guidance service being based on psychometric assessment with a focus on statistical analysis.

Until 1981, school guidance for blacks (through the Department of Education and Training) consisted mainly of psychometric testing for vocational decision-making according to the human resource needs of the country. It was in that year that school guidance was introduced as an auxiliary service into the Department of Education and Training (DET) schools. Dovey and Mason (1982) assert that this initiative arose essentially from the current instability in black education and that the primary role of school guidance was that of social control. They point out that school guidance is designed to support and perpetuate the interests of the ruling group through its fundamentally normative function. For example, the DET is explicit in its content: a healthy personality means to be responsible, helpful, well disciplined and obedient. Obeying rules and conforming is stressed. Underpinning vocational choice is the question of, "How does it serve society?" with an emphasis on service careers such as nursing, teaching and the police force. Serious questions were thus raised concerning the role of school guidance, particu-

larly with reference to the degree to which it empowers or disempowers people (Ahmed, Ganie, Lazarus, and Sayed, 1989).

In 1981, the Human Science Research Council (H.S.R.C.) reasserted the importance of school guidance in education (De Lange, 1981). It made far-reaching recommendations, the most significant being that school guidance should be split into careers and general school guidance. To date, few of the recommendations have been implemented. However, it is useful to note that the emphasis placed upon careers and human resource in the report has some ten years later re-emerged in the Educational Renewal Strategy (ERS, 1990) document in the form of a vocationally oriented curriculum.

Dovey and De Jong (1990) note that historically a heavy emphasis has been placed on psychometric assessment and human resource needs in school guidance and that a major feature of careers education has been the "matchmaker syndrome".

There is a tendency to assess a person's "job" suitability simply in terms of his/her interests, aptitudes, academic qualifications and even I.Q. and then assume that through a superficial matching of these factors for those called for by stereotype careers description, the person suitably tailored for the "job" (Dovey & De Jong, 1990, p.49)

The early eighties saw the emergence of the "Lifeskills" trend in school guidance which endeavoured to focus on the empowerment of people through the development of basic "everyday" living skills. The University of Cape Town (UCT) was the main facilitator of this initiative, having organised a number of national conferences and regional workshops on "Lifeskills" (De Jong, 1990).

As a result of the People's Education Movement, alternative models of school guidance have been explored. The Community Responsive Teacher Model (Ahmed et al, 1989) is such an example and basically argues that the school guidance teacher ought to respond to the needs of the community and, in consultation with the community, design a school guidance programme which is contextually relevant.

In May 1990 the Minister of National Education announced the development of an Educational Renewal Strategy for South Africa. This strategy was developed in conjunction with the ministers of Departments of State who were responsible for education, and was carried out under the auspices of the Committee of the Heads of Education Department (CHED). A target date of one year was set for finalising this strategy which had to find short and medium term management solutions for problems in education with regard to school guidance.

Recently there have been other policy initiatives that have developed from various interest groups who are trying to reshape school guidance in South Africa. These groups include the National Education Policy Investigation (NEPI): Support Services Research group. The object of this investigation was to interregate policy options in all areas of education within a value framework derived from the ideals of the broad democratic movement. Within the NEPI report (NEPI: Support Services, 1992) there is a particular emphasis on the principle of prevention in school guidance and other support services (school health, social work, remedial and special education, guidance and counselling

and other psychological services). The report also provides a school guidance framework which interfaces with a broader proposed model for educational support services. These proposals inform more detailed ideas concerning curriculum design implications for the training of school guidance and counselling personnel.

The 1995 core syllabus structures for guidance was introduced into schools and includes the following areas: personal and interpersonal developments, family and sexuality education, education and training, work and unemployment, economic education, citizenship education and environmental education.

Currently, school guidance in South Africa is being recognised at national policy level (White Paper on Education and Training, 1995) as being an integral component in the education system, particularly in terms of vocational or careers school guidance. In practice, however, school guidance remains a marginalised service in the majority of the schools in South Africa due to the economic and political stresses that have been facing the country. School guidance has been further marginalised particularly in schools under the Reps:DEC as a result of the rationalisation process.

Traditionally, education in South Africa has been segregated by legislation according to race and language: there are White Afrikaans-speaking schools, White English speaking schools, African schools, "coloured" (mixed race) schools, and Indian schools. Support services are administered by racially and

ethnically divided departments, resulting in striking disparities in resource allocation, facilities and curriculum between the different departments. For this reason a discussion of school guidance within the South African education system must be tempered with the idea that what is happening in one education system is not necessarily happening in others. These differences in the different education departments are referred to by Watts (1980) who states:

To move from considering school guidance for Whites to a discussion of careers for Blacks is to move from one world to another. This is hardly surprising, in view of the large differences in educational employment opportunities for the two ethnic groups, in view of the fact that it has been the deliberate policy of the Nationalist Government to maintain these differences (Watts, 1980, pp. 26-27).

It should be recognised that integration of race and language is happening currently, but that one still needs to look at the differences as segregation has had long and powerful historical background which will not be easily eradicated.

The areas that will be explored in the various departments under discussion namely: the Cape Education Department (CED), the Department of Education and Training (DET), the House of Delegates (Dels:DEC) and finally the House of Representatives (Reps:DEC), are:

- (a) Aims of school guidance
- (b) Titles of school guidance personnel
- (c) Management of school guidance
- (d) Content of school guidance - curriculum

(a) Aims of school guidance

Under the CED school guidance is defined in the School Guidance Manual (1981) as:

An education system with the object of providing for maximum development of each pupil with his particular aptitudes, abilities, interests and personality structure (School Guidance Manual, 1981, p.2).

Within the CED school guidance is conceptualised as being an auxiliary service and forming an integral component of the differentiated education system. It should not, as the Guidance Manual (1981) points out, function independently from the mainstream and should offer an "education-oriented" service which includes assisting teachers, parents and other parties.

The focus of the school guidance service offered by the DET schools has been mainly testing the aptitudes and interests of the pupils in standard five, eight and ten (Dovey and De Jong, 1990). In spite of the attempt to offer some kind of school guidance service to black schools, Ndaba's investigation in 1978 on the provision of the latter indicated that essentially no meaningful school guidance service was operating in the schools (Chuenyane, 1990). The situation remains much the same to date.

Under the House of Delegates, one of the 10 principles of the National Education Act (39) of 1967 was that education must be provided in accordance with the abilities and aptitudes of the pupils and also to meet the human resource needs of the country. To realise the aim of the system of differentiated education, the

pupils had to receive school guidance that would enable them to make vocationally-oriented educational choices and thereafter receive training that would coordinate with their post vocational orientations (Watts, 1980).

According to the Reps: DEC School Guidance Manual (1991):

School guidance is considered to form an integral component of the whole educational curriculum. The general aim of school guidance is to assist each pupil in the total educational experience by means of individual and group guidance in a systematic and organised manner. It helps the discovery of his unique personal potentialities, the understanding of development of direction in life, the formulation of an independent viewpoint, the making of individual decisions consequently making an independent contribution to society. This enables the pupil to develop his God given mandate in life, to achieve self-actualisation and to adapt to the demands of an everchanging world (Reps:DEC School Guidance Manual, 1991, pp. 2-3).

From the above it appears that while school guidance is in reality an auxiliary service or separate service of the mainstream the stated aims of most of the departments is to provide an integrated approach. The aims and definitions also tend to contextualise school guidance as a decisive factor in individuals' career choices, in relation to the human resource needs of the country. The development of the pupils' potential is a further common theme in the various departments.

(b) Titles of school guidance personnel

Within the different definitions of school guidance in the education system, a wide range of titles for personnel who are responsible for school guidance in the schools is evident.

Under the CED the term "teacher counsellor" is used. The Natal Education Department also uses the term of "teacher counsellor" while it appears that the most popular term used in the Transvaal and the Orange Free State is "vocational guidance teacher" (Roberts, 1989).

The Rep:DEC makes a distinction between the "teacher counsellor" who occupies the school guidance post and is considered a specialist in the field, and the "guidance teacher" who assists the teacher counsellor.

With reference to the qualifications of the teacher counsellor, the Reps: DEC School Guidance Manual (1991) delineates the following:

The teacher-counsellor should have a bachelor's degree with psychology as a major subject and a recognised teacher's qualification. It is desirable for the teacher counsellor to have had previous teaching experience. Since a masters degree in Psychology is a requirement for registration as a psychologist with the South African Medical and Dental Council, teacher counsellors are strongly advised to improve their qualifications (Reps:DEC School Guidance Manual, 1991, p.10).

The House of Delegates makes a similar distinction but refers to the specialist in the post as the guidance counsellor who is assisted by the school guidance teacher (NEPI: Support Services Report, 1992).

The term "guidance teacher" appears to be used for the guidance personnel by the DET. (NEPI: Support Services Report, 1992).

Within the different education departments, therefore, titles such as teacher psychologist, teacher counsellor, guidance counsellor, vocational guidance teacher, and guidance teacher, are used interchangeably, with the title "guidance teacher" being the most commonly used one.

These titles tend to reflect different approaches to school guidance - on the one hand an emphasis on the "educational" nature of guidance, and on the other hand the "service" nature.

Given the disparate nature of education in South Africa, it is not surprising that the different education departments have tended to place different emphases on school guidance depending on their particular framework. It is interesting to note that the white Afrikaans and African sectors have emphasised the principle of prevention through an educational emphasis in school guidance with the "guidance teacher" being the main actor, while the white English and Indian sectors have emphasized a school guidance service that is more service oriented, reflected in the title "counsellor" (Pinchuck 1993 in Spangenberg, 1990).

(c) Management of services

Cognisance should be taken of the fact that recently school guidance services within the education departments have been going through a process of restructuring and rationalisation. The present reduction in staff which is being implemented, particularly in the Reps: DEC schools, has resulted in pupils having "free" periods due to the lack of personnel. Principals

have to contend with skeleton staffs and have been instructed by the department to ensure that the examination subjects receive precedence over non-examination subjects. Therefore, subjects such as school guidance are further marginalised or are totally neglected in schools. This is particularly true in the primary schools.

To date the CED is divided into four regions, with each region being managed by a Superintendent of Education (SE). Each SE is assisted by two Deputy Superintendents of Education, one being responsible for school clinics. The teacher-psychologist, who is a full time staff member located in the secondary school, is accountable to the principal of the school and to the clinic and support centre to which the school is attached. Normally there is one teacher psychologist per secondary school (Roberts, 1989).

The House of Delegates management of services has been similar to that of the CED (Roberts, 1989).

With regard to the Rep: DEC the school guidance service has functioned under the control of a chief school psychologist who has been assisted by a principal school psychologist for each of the following five areas: school guidance; psychometric and psycho-clinical; adaptation class education; remedial education and school social work (de Wet, 1989). The officials have been assisted in these tasks by personnel of the child school guidance clinics which are located in regions.

The DET established the Education Auxiliary Services (EAS) (Chuenyane, 1990). The EAS falls under the supplementary education division of development services, which is one of the three main branches of the DET structure with Head Office being located in Pretoria. The EAS, headed by the Deputy Director, is divided into five sections, namely:

- (1) Psychometric and edumetric assistance (testing)
- (2) Orthopedagogic assistance
- (3) School guidance
- (4) Remedial education
- (5) Sociopedagogic assistance (welfare)

Generally, it appears that the general structure and management of school guidance within the different education departments has followed a hierarchical, top-down approach (Dovey, 1990). This method of management has been further extended to school level, particularly in the primary schools, where principals have played a key role in the management of the school guidance service. Major policy decisions have been made by head office although within the secondary schools, there do appear to be different degrees of autonomy held by the teacher psychologists. These variations tend to be associated with the status of the school guidance in the school, the management style of the principal, the relationship of the school with the school clinic, and the school ethos (Roberts, 1989).

(d) Content of school guidance syllabi

Within the differentiated system of the CED the School Guidance Manual (1981) states two basic principles of school guidance which are:

- (1) Recognition of individual differences
- (2) Provision for the basic needs of the secondary school pupil

The latter principle is addressed by three terrains of school guidance which form the basis of the content of the school programme:

- (1) Educational guidance
- (2) Careers guidance
- (3) Social and personality guidance

Educational and careers guidance appear to be the most dominant areas covered in the school guidance programme. The programme is focused on the secondary school pupil and no mention is made of the primary school. Although there are guidelines concerning the design of the syllabus the content is usually determined by the school and the community's values and ideas.

With regard to the House of Delegates: although the social, personal, recreational and vocational areas are given sufficient attention, special emphasis is placed on the vocational needs of the secondary school pupil (NEPI: Support Services, 1992).

Under the DET, group guidance, where it exists, is applied in the classroom according to a set syllabus which focuses on four areas:

- (1) Educational guidance
- (2) Personal guidance
- (3) Social guidance
- (4) Vocational guidance

Individual school guidance, which presumably includes counselling, concentrates on orientation problems, subject, grade and vocational choices and personal problems. The structure and content for school guidance in standard 5 (primary school) is the same as that for secondary schools.

The Reps:DEC School Guidance Manual (1991) prescribes school guidance from Std 5 in the primary school up to and including Std 10. The emphasis is placed on achieving self actualisation by means of identity through focusing on the following terrains:

- (1) Educational
- (2) Personal
- (3) Social
- (4) Family
- (5) General

In Std 5 one 35 minute period per week per class is allocated for both group and individual school guidance.

Generally it appears that in the education departments in South Africa the content of the school guidance programme has been focused on the secondary school and has included the following areas:

- (1) Vocational/Careers guidance
- (2) Educational guidance
- (3) Social guidance
- (4) Personal guidance
- (5) Family guidance (in certain instances)

In recent years, the importance of vocational and careers guidance has been particularly emphasised by the ERS which states that:

To ensure that learners are equipped with the ability to make meaningful choices, vocational guidance, normally a subdivision of the subject school guidance is of great importance in the curriculum. It is important that bearing in mind the learner's level of development, they should have constant exposure to the world of work with its many vocational possibilities. As learners make progress at school this exposure should concentrate on the exercise of vocational choices. This co-operation of the private sector is essential in this respect. The National Co-ordinating Committee for Career Services (NCCC) should be restricted and upgraded to a higher level in order to be an assistance in this matter. As soon as this has been done the committee could identify other independent parties involved in the development and presentation of vocational guidance programmes and approach these groups with a view to co-ordinating the information on their activities, including the psychological and scholastic testing of candidates (ERS 1992: pp. 48-49).

1.3 Aims and Research Methodology of this study

The primary aim of this study is to conduct an analysis of the existing primary school guidance service in The House of

Representatives: Department of Education and Culture (Reps:DEC) schools in the Western Cape and to make suggestions for a school guidance approach that optimises the principles of prevention and health promotion more adequately.

The following research methodologies were pursued to achieve the goals of the study:

- (a) A broad literature review of school guidance in South Africa under the different education departments
- (b) Future proposals from various interest groups
- (c) Personal interviews with heads of the department of psychological services at Reps:DEC head office in Cape Town
- (d) Structured interviews with some primary school teachers in the Western Cape

Points (b) and (c) were pursued owing to the lack of literature on school guidance in the primary school, and for the purposes of including people's visions for the future.

1.4 Outline for the following chapters

Chapter Two of this study attempts to show the link between school guidance and the principles of prevention and health promotion. An analysis of the concept of prevention, which includes primary prevention, secondary prevention, and tertiary prevention, is examined. The health promotion approach is then discussed within the context of South Africa and internationally. The different strategies of prevention are discussed, after which

a critical examination of the principle of prevention in relation to school guidance in the primary school follows.

Chapter Three further explores the motivation and aims of this study. A discussion of the broad research methodology adopted together with a detailed discussion of the specific research methods pursued to achieve the proposed aim of the study is then pursued. Finally a content analysis of the interviews is conducted.

Chapter Four reviews recent and current policy proposals relating to school guidance put forward by various groupings in South Africa. Suggestions that would hopefully optimise the school guidance programme in the primary school curriculum are then offered.

Chapter Five includes a review of the content of the study within the parameters of the aim of the study. Limitations of the study are then identified followed by issues which lend themselves to further research.

CHAPTER TWO

THE PREVENTATIVE AND HEALTH PROMOTION PRINCIPLES OF SCHOOL

GUIDANCE

The purpose of Chapter Two is to make an analysis of the school guidance in terms of the principles of prevention and health promotion by exploring the following issues:

- 2.1 The relationship between school guidance, health promotion and prevention
- 2.2 Defining the term "prevention" and health promotion
- 2.3 Exploring various strategies of primary prevention as methods of optimising health promotion and the preventative principles of school guidance
- 2.4 A critical examination of health promotion and the preventative principles in relation to school guidance

2.1 The relationship between school guidance and prevention and health promotion

School guidance as a subject in the schools ought to be preventative. By this I mean a strategy aimed at strengthening the well being of the whole school community in an attempt to reduce the incidences of anti social behaviour. A key principle of prevention is early intervention, that is, intervening in the formative years of the child's development. This principle fails to optimise itself because, as noted in Chapter One guidance services are focused on the secondary school instead at the primary school level where prevention ought to be intensified.

Existing school guidance services have, in some instances, equipped schools with guidance counsellors to offer their services in the individual treatment and control of "disordered" behaviour by the school-going population. This refers to the individual guidance or counselling element. An emphasis has also been placed on promoting the general health and well being of the greater school going population through "group guidance" activities.

School guidance, in particular the group guidance aspect, has therefore recognised the need for prevention and general health promotion of all students. The health promotion approach, which reflects the goals of primary prevention (to be discussed below), takes seriously the public health mandate of promoting the general health and well-being of the community at large (Lazarus, 1993). School guidance plays a crucial role in this, particularly in primary schools which are significant sites for prevention because of the access to the children of society that this setting provides.

2.2 Defining the terms prevention and health promotion

Prevention is a relatively new concept in psychology. The prevention concept came to the mental health fields from the public health field which has a rich and distinguished history. Public health practice is characterized by a population orientation in that the health of entire communities is the major concern. The aim in public health practise has been to promote

the well-being of populations. Simultaneously reducing the onset of disease rather than finding cures once disease has occurred.

Rappaport (1977) states that the writings of Gerald Caplan, who has taken traditional public health concepts and applied them to the mental health field, popularised the ideas of prevention, providing concrete examples of how this ideology could influence the practice of psychiatry.

The prevention analogy, as it was first applied to mental health in the early 1960's, was compelling. It seemed logical that mental health professionals should be interested in the psychological well-being of community members generally, not just their individual clients. And it seemed more efficient to promote health and reduce the likelihood of disorder rather than treating dysfunctional behaviour after it has become entrenched.

What underlies much of the community health ideology in the United States of America has been the notion of prevention as opposed to amelioration of mental illness. This idea is expressed well in an old cliché (Rappaport, 1977): "an ounce of prevention is worth a pound of cure".

The logic of prevention was adopted by John F Kennedy in 1963 in his presidential message:

Our major attack must be focused on three major objectives: First we must seek out the cause of mental illness and mental retardation and eradicate them for prevention is far more desirable for all concerned. It is far more economical and far more likely to be successful. Prevention will require both selected specific programmes directed

especially at known causes and the general strengthening of our fundamental community, social welfare and educational programmes which can do much to eliminate or correct the harsh environmental conditions which are often associated with mental retardation and mental illness (Heller, K., Price, R.H., Reinharz, S., Riger, S., Wandersman, A., and D'Aunno, T.A., 1984, p.18).

In defining prevention Kelly (1985) suggests that it is easier to say what prevention is not, than to be precise in specifying what meaning it should have:

- (a) Prevention is not the extension of existing mental health treatment to new populations formerly considered unreachable. Clearly such action, while desirable, simply extends the scope of existing services.
- (b) Prevention is not training new mental health workers (paraprofessionals) to engage in remedial work that might do more efficiently than overtaxed professionals. Again such action serves to extend treatment facilities to new populations.
- (c) Prevention is not the development of new treatment programmes (e.g. community care for the mentally ill, milieu therapy, family therapy, behaviour modification, and the like) no matter how sensible or in vogue such treatment programmes might be (Kelly, 1985, p. 105).

The term prevention refers to the body of professional knowledge, both theoretical and practical, which may be utilised to plan and carry out programmes for reducing:

- (a) the incidence of mental disorders of all types in a community (primary prevention)
- (b) the duration of a significant number of those disorders which do occur (secondary prevention) and
- (c) the impairment that may result from disorders (tertiary prevention (Caplan, 1964, p. 63)

Caplan (1964) distinguishes between three methods or levels of prevention:

(a) Primary Prevention

Caplan (1964) defines prevention as follows:

Primary prevention is a community concept. It involves lowering the rate of new cases of mental disorders in a population over a certain period by counteracting harmful circumstances before they have had a chance to produce illness. It does not seek to prevent a specific person from becoming sick. Instead it seeks to reduce a risk for a whole population, so that although some may become ill, their number will be reduced. It thus contrasts with individual patient oriented psychiatry which focuses on a single person and deals with general influence only insofar as they are combined to his unique experience (Caplan, 1964, p. 64).

The emphasis in the above definition is the focus on counter-acting harmful circumstances before they have had a chance to produce illness. The emphasis on early intervention moves mental health workers into activities that are not traditionally in their domain, since the mental health system is designed to treat identified problems.

Caplan (1964) notes that primary prevention implies a study, not only of illness, but also of health, a point that has unfortunately often not been emphasised or intensified until the recent development in health promotion.

(b) Health Promotion

Among the many definitions of health promotion put forward by Jo Lazarus (1993) the following definition developed from the Ottawa Charter (1986) was found to be useful for this study:

Health promotion is underpinned by a solidarity ethos. Its dominant actions are enablement, mediation, and advocacy and its anticipated outcomes are the development of personal skills, strengthened community action, healthy public policy, and an environment supportive of health (Lazarus, 1993, p. 1).

Lazarus (1993) states that within the South African health context, health promotion has not been given its rightful place because health promotion is perceived essentially as an additional facet of, or annexure to, health provision, rather than as a mechanism or tool to orchestrate and facilitate the accomplishments intended by service provision.

Currently, great emphasis has been laid on the health promotion approach as a means of intensifying and extending the principle of prevention into the education system (Lazarus, 1994).

In keeping with J.Lazarus' (1993) definition of health promotion which aims at the development of personal skills as well as an environment supportive of health, the primary school guidance programmes can play a central role in optimising the lifeskills of the children. These are the basic skills that individuals need for successful living and learning. The primary school programme could cover essential lifeskills such as:

- (a) communication: how to communicate within the school, in the home, and more generally
- (b) conflict resolution: how to handle conflict -whether it be at home or school
- (c) stress management: how to handle stress, examinations, transitions, failure to master a task- whether it be in the home or school environment
- (d) self-concept enhancement: activities that build up the individuals strengths
- (e) creativity and problem solving
- (f) countering prejudice and sexism, which is important in schools in South Africa

These skills could be developed within specific programmes as well as across the primary school curriculum.

Lifeskills education reflects a person-centred approach that emphasises the development of positive aspects of human potential. In contrast, a system or environment-centred approach would focus on the development of a safe and supportive school which would nurture growth and stimulate learning (J. Lazarus, 1993).

Lifeskills relates to the concept of a health promoting school which is being develop at international as well as national level (S. Lazarus, 1994 Workshop Report).

(c) Secondary Prevention

Secondary prevention refers to programmes that reduce the rate of disorder by lowering its prevalence, or the number of identified cases in a given population "at risk". This reduction

may come about either by altering the factors that lead to new cases or by reducing the duration and severity of existing cases through early diagnosis and treatment.

Programmes of secondary prevention are concerned not only with effective diagnosis and treatment of individuals, but also with maximisation of resources to both reach and shorten the problems of mental illness, and thereby reduce the extent of the problems in a given community.

Early diagnosis has also been interpreted to mean early in the "disease process" or at the first signs of disorder and prior to its exacerbation. This may involve detection of disorder in children, but it also includes detection of problems among adults before they reach severe proportions.

Caplan (in Rappaport, 1977) discusses several ways in which early detection may be accomplished:

- (a) By sharpening tools so as to identify the onset of emotional disorder from fewer and milder signs of symptoms.
- (b) By working in a school or school setting because of its potential socializing power and its geographic convenience and amenability to programme input.
- (c) By early detection so as to encourage early referral to treatment if a difficulty is suspected. Public education through the mass media is one such method of encouragement, and would include not only description of symptoms but of where to go for help.

Similarly, consultation with key persons in the community such as physicians, teachers and clergymen, is recommended. The use of "walk in clinics" as part of a general hospital is another method recommended for lowering the threshold

between community and mental health agency contact (Caplan in Rappaport, 1977, p. 64).

d) Tertiary Prevention

Basically, this term encompasses programmes of large scale rehabilitation of people already suffering from mental disorder so as to reduce its duration and destructiveness.

The concept tertiary prevention also has implications for the quality of hospital and clinic care. It implies that such programmes will emphasise more than custodial care which simply maintains chronic patients in large wards. Rather, reform of the services offered to chronic patients includes: innovative programmes of rehabilitation such as milieu or socio-environmental treatment; token economies designed to teach adequate functioning; use of volunteers and non-professional mental health workers, both in hospitals and in the community - as significant others; and halfway houses and vocational rehabilitation.

Within a school context providing services and a supportive environment for learners with special education needs (LSEN) would constitute a tertiary prevention focus.

2.3 Strategies of Prevention

Still a basic problem remains - how does one proceed in designing prevention programmes? One must adopt some working hypothesis about etiological factors in order to conceptualize prevention

activities. Yet views of etiology of mental disorder are marked by considerable controversy. The matter is of some importance as Price (in Daniels 1993) points out, assumptions about etiology do strongly influence our notions of appropriate interventions. This means that one should now think in terms of "multi-factorial causation" or risk factors instead of simple causation.

When planning and carrying out programmes for primary, secondary and tertiary prevention, the intervention programmes should be oriented towards the system e.g. changing the institution, as well as the person by changing the behaviour.

This section will focus on the following intervention strategies

- (a) Environment-and person-centred interventions
- (b) Community-wide, Milestone and High-Risk strategies
- (c) Competency Enhancement and Interpersonal Problem Solving

- (a) Environment-and person-centred interventions

Cowen (in Daniels 1993), Heller et al (1984), and Rappaport (1977) describe a distinction in the prevention literature between system-centred and person-oriented approaches. A systems focus assumes that human development is primarily shaped by a small number of key social institutions and settings, and that prevention should be oriented towards institutional or setting change. Furthermore, interventions assume that the focus of prevention should be on early childhood intervention, with the

key individuals who shape the child's development (e.g. parents, teachers and other primary caregivers), being a major target.

Person-orientated interventions focus on the development of individuals' coping mechanisms to maximise their competence in dealing with life's many challenges. The area of lifeskills education is directly related to this focus. Primary school teachers play a key role in early childhood intervention to help persons to develop the capacity to cope and address the challenges of life.

A similar distinction is made by Catalano and Dooley (in Daniels 1993) who talk about macrolevel and microlevel primary prevention. Macrolevel interventions are those aimed at large social forces in the environment, such as community and organisational factors. Microlevel interventions are aimed at persons including parents and teachers.

Price (in Daniels 1993) proposes that environmental change programmes can be designed in three ways: by means of selection, setting change, and setting creation. Settings can be selected, changed or created to better "fit" individual needs and goals with setting characteristics. For example, helping individuals to select or find recreation, leisure time, self-help groups or educational institutions that best meet their needs. Setting change might be accomplished by consultation and organisation development, and setting creation occurs when groups develop alternative structures (e.g. developing alternative schools) to meet their needs.

Prevention through public education falls within a person-centred approach. Health education campaigns, for example, assume that an educated public will take the necessary steps to protect their health (a strategy which is congruent with health promotion) and that education is an important component of prevention.

There has been a shift from general education about "mental illness" to more focused programmes aimed at educating the public about specific risks, or providing concrete coping information to specific risk groups (Adler, 1977). Examples of such programmes within school settings include: education on AIDS; sex education; drug abuse; teenage pregnancy; smoking. Information could be directed to the total school population or to high risk groups such as those pupils who have unemployed parents or who are left without proper supervision because both parents are working. Children of alcoholic or drug addicted parents and abused children constitute two further typical risk groups.

(b) Community-wide, Milestone, and High-Risk (Secondary Prevention) Strategies

Bloom (1975) describes prevention as involving either community, milestone, or high risk programmes. He explains that in the community-wide programmes all the residents of a community are recipients of the programme. In the milestone approach, citizens are exposed to the programme at specific periods of their lives. Psychological "milestones" might include critical development periods such as birth of a sibling, initial school attendance, entry into adolescence, and first year of marriage. An example

of a milestone event within a schooling context is that of transition, where negative effects can be ameliorated by appropriate prevention efforts such as having a discussion group programme for parents who are concerned about their child's first experience at school. This transition can also be facilitated in the primary school through bridging between pre-primary and primary schools, and between the senior primary and secondary schools.

High risk programmes focus on groups vulnerable to specific disorders or stressors, providing special programmes designed to reduce or prevent the incidence of dysfunction. Examples of high risk populations might include: children who experience death of a parent at an early age; children who have parents that are alcoholics or drug addicts; children with physical handicaps; and survivors of natural or person-made disasters such as earthquakes, floods, automobile accidents, and violence.

(c) Competency Enhancement and Interpersonal Problem Solving as Prevention Strategies

Bloom (1975) states that many clinical and community psychologists have adopted a competency orientation. That is, they have begun to conceptualise their task as helping individuals develop psychosocial skills that could be used in a variety of situations. The development of the individual's psychosocial skills has a direct link with the area of lifeskills. Prevention activities in the primary school from this point of view could mean that programmes would focus on building

adaptive strengths with the assumption that a strengthened individual would be able to deal better with any number of stressors that eventually might lead to disability. This is congruent with the health promotion trend and reflects a person centred approach as outlined above.

In summary, to optimise the preventative principle in a primary school guidance programme cognisance must be taken of certain strategies, including adopting both person-centred and environment-centred approaches; taking into consideration the community at large, focusing on specific milestone events; and developing the individual's strengths and lifeskills to ensure that she/he is able to take responsibility of his/her life (Cowen (in Daniels, 1993); Heller et al, 1984).

2.4 An examination of the preventative principle

While a preventative and health promotion approach to health and development is important and clearly a priority in South Africa a brief review of some of the problems relating to this approach is necessary.

The development of a preventative approach is hampered as a result of a number of factors, some of these will be briefly identified.

Rappaport (1977) explains that traditionally, it has been the norm to train professionals with curative skills and attitudes relevant to a curative model. It is an accepted role to wait,

diagnose, and treat rather than to seek to prevent problems. Rappaport (1977) also highlights that professionals continue to view human behaviour in terms of individual variables and therefore continue to deliver individual services. These are difficult attitudes and professional behaviour to transform.

A further prohibiting factor is that the preventative model has not yet provided adequate models of programme evaluation research, as measurable outcomes are often difficult to obtain.

Another limitation is that the preventative model originates from a mental health model within a medical paradigm. It is often problematic to relate and adopt medical terms within a guidance framework within educational settings.

Finally Rappaport (1977) states that while prevention is important, an ideal society is a goal that is virtually impossible to achieve. There will always be many people either by choice, or by circumstances who are unable or unwilling to fit into mainstream society. It must be recognised that there will always be a great need for ongoing services for people with special needs.

When examining the preventative principle in relation to school guidance in the primary school, it seems that the preventative approach has not been fully optimised. Lifeskills programmes are only now beginning to be adequately developed (e.g. De Jong, Ganie, Lazarus, Prinsloo, CEPD: Curriculum Proposals for the

G.E.C., 1995) and the development of health promoting schools has yet to be adequately pursued (Lazarus, 1994).

The health promotion approach which is a strategy aimed at intensifying primary prevention, will ensure a focus on the well-being of all the individuals in the primary school. Within this context the primary school guidance programme could play an important role in helping to develop both person-and environment-centred approaches, to the benefit of all learners.

In summary Chapter Two has emphasised the importance of optimising the prevention and health promotion aspect of school guidance in the primary school. In so doing the following issues relating to school guidance were explored: the relation between school guidance and prevention and health promotion; the terms "prevention" and health promotion; different prevention strategies: including person-centred and environment centred; community and milestone events, and Lifeskills; and the current health promotion trend that intensifies the primary prevention approach. Finally, a brief critique of the preventative principle was discussed.

CHAPTER THREE

METHODOLOGY OF THIS STUDY

The purpose of Chapter Three is to address the following issues:

- 3.1 My motivation for attempting a study of such a nature and the aim I envisaged to accomplish will be once again highlighted.
- 3.2 An overview of the methodology adopted, followed by a detailed analysis of the specific research methods used to achieve the proposed aim of this study
- 3.3 Analysis of the interviews
- 3.4 Summary

3.1 Motivation and Purpose

My major concern in primary schools under the Reps: DEC is the lack or under-development of school guidance. The principles of prevention and health promotion have not been optimally developed within the primary school.

The guidance service of the Reps: DEC schools has employed guidance counsellors whose primary responsibilities have been to service schools with interventions such as assessment and the addressing of problems through counselling. This service has been provided mainly in secondary schools. At primary school level school guidance has been underdeveloped because of the lack of sufficiently trained guidance persons. The guidance service, where it does exist, is usually only directed at the standard 5

pupils. It is therefore not extended to the early years of the primary school. One 35 minute period per week is usually prescribed for school guidance in the primary school and this time is often used to complete obsolete guidance forms. The lack of focus of school guidance in the primary school leaves very little room for prevention and health promotion to be utilised to its fullest potential.

With the development of the current health promotion approach that focuses on the well-being of all individuals, primarily through life skills education and the development of environments supportive of health, there has been a shift in thought around problems in the primary school. There appears to be a move away from individual "treatment" to group guidance which places a greater emphasis on promoting the general health and well-being of the whole school-going population. This important shift should now be directed to the primary school, which is a significant site for prevention. The general health or well-being of the primary school child should be promoted through the primary school curriculum. One of the central channels for this is group guidance - serviced by the class teacher or by the guidance teacher.

The primary aim of this study is to examine the existing school guidance service in Reps: DEC primary schools in the Western Cape, and to make suggestions for a school guidance programme at primary school level that optimises the principles of prevention and health promotion more adequately.

3.2 Overall methodology and the specific research methods used in the study

It must be emphasised that the approach of this study is essentially qualitative. The approach adopted in this study was determined by considering the importance of gathering information relating to school guidance from teachers in the primary school in the Reps: DEC in the Western Cape. It was based on the lack of published material on the questions under investigation, and the assumption that more meaningful data could be gathered on a one to one basis, having direct contact with participants who are able to express their beliefs, experiences and attitudes through open-ended questions during the interview schedule.

According to Bilken and Bogdan (in Daniels 1993), qualitative research refers to research which encompasses those methods that most often use non-numeric information or data. Patton (1980) asserts that qualitative methods are derived from a variety of philosophical, epistemological and methodological traditions. He explains that qualitative data consists of detailed descriptions of situations, events, people interactions and observed behaviours: direct quotations from people about their experiences, attitudes, beliefs, thoughts; and excerpts of entire passages from documents, correspondence, records and case histories. The data is collected in an open-ended manner without attempting to fit people's experiences into pre-determined standardised categories such as response choice that comprise typical questionnaires or tests. In this study a qualitative

approach was pursued in order to capture what people have to relate in their own words.

Lofland (1971) has suggested that there are four elements in collecting qualitative data:

- (a) The qualitative methodologist must get close enough to the people and situations being studied to be able to understand the depth and details of what goes on.
- (b) The qualitative methodologist must aim at capturing what actually takes place and what people actually say.
- (c) Qualitative data consists of a great deal of "pure" descriptions of people, activities and interactions.
- (d) Qualitative data consists of direct quotations from people, both what they speak and what they write down (Lofland, 1971, pp. 26-27).

A qualitative research design which utilized the technique of in-depth interviewing to collect the data, was developed in this study.

The specific research methods used in this study were:

- (a) Literature reviews of school guidance and the theory of prevention/health promotion;
- (b) Analysis of Policy proposals from various groupings in South Africa.
- (c) Semi-structured interviews: with heads of psychological services in Reps:DEC, and teachers in primary schools. An interview guide was used to structure this process.

A total of twenty primary school teachers participated in the study: ten participants were interviewed on a face-to-face basis:

three participants were interviewed telephonically: and the remaining seven completed the interview guide in the form of a questionnaire.

According to Patton (1980), an interview guide is

a list of questions or issues that are to be explored in the course of the interview. It is prepared to make sure that basically the same information is obtained from a number of people by covering the same material. The interview guide provides topics or subject areas within which the interviewer is free to explore, probe and ask questions that will elucidate and illuminate that particular subject. Thus the interviewer remains free to build a conversation within a particular subject area, to word questions spontaneously, and to establish a conversational style but with the focus on a particular subject that has been predetermined (Patton, 1980, p. 200).

The advantages of interview guide is that it makes sure that the interviewer has carefully decided how best to use the limited time available in an interview situation. It helps make interviewing across a number of different people more systematic and comprehensive by delimiting the issue to be discussed in the interview. Another advantage lies in the open-ended nature of questions in an interview over that of the more structured questions (Patton, 1980, pp. 200-201).

A disadvantage of using an unstructured interview guide in comparison to a semi-structured interview guide includes the open nature of this technique which raises problems of recording. Another disadvantage is the the content analysis which places a large onus on the researcher who needs to be skilled in the

techniques of listening, recording and content analysis (Patton, 1980, p. 201).

(a) Literature reviews

The literature reviews were pursued to discover what other people have to say about school guidance in general, and under the Reps:DEC in particular, and to make a closer study of prevention and health promotion theory that is being implemented in other countries.

The literature on school guidance in South Africa and in Reps:DEC particularly was very limited, owing particularly to the lack of regular annual school guidance reports being published. The only current literature that was made available to most schools under the Reps:DEC was the School Guidance Bulletin (January 1991) and the Family Guidance Programme (1987). However the data gathered from these records did not generate much information to develop the aim of this study.

Literature on prevention and health promotion theory was successfully obtained from various sources.

(b) Review of policy and proposals

The following proposals and policies were examined in the context of the aims of this study.

- (a) The Educational Renewal Strategy (ERS,1992)
- (b) The National Education Policy Investigation (NEPI: Support Services, Report 1992)
- (c) Education Department of the African National Congress (ANC, Education Support Services Framework, Dec, 1994)
- (d) Education Support Services in South Africa: Policy Proposals. Cape Town: EPU/UWC. (De Jong, Ganie, Lazarus, Naidoo, Naude and Prinsloo, 1994)
- (e) Report on Health Promotion through schools Workshop, July 1994

(c) Semi-structured interviews

As a result of the dearth of literature on school guidance in South Africa and Reps:DEC primary schools in particular, semi-structured interviews with certain heads of psychological services were arranged in the Reps:DEC in the Western Cape. The interviews were arranged by the head librarian of Reps:DEC with key persons at head office who were acquainted with the management of the school guidance service in the Western Cape.

Making of appointments to interview the key persons on a face-to-face basis was a time-consuming and painstaking experience. When a personal interview finally materialised I was informed that certain information relating to school guidance was not readily available. Access to certain information could only be disclosed prior to a written request which was not always acknowledged. A letter requesting access to information about school guidance was immediately submitted to the head offices of the Reps:DEC.

As a result of these limitations, an attempt was made to interview the school psychologist of the Wynberg region. The school psychologist himself was not in a position to have access to such information regarding school guidance as it is controlled at head office. He was instructed by higher authorities in the department that no information could be disclosed because of the tension between teacher's unions the department at that time.

In the view of these further limitations, semi-structured interviews with some teachers in primary schools in the Reps: DEC in the Western Cape seemed a plausible technique to obtain data that would enable the analysis of the present existence of school guidance in the primary schools in the Western Cape. It also enabled me to capture the complexities of teachers' individual perceptions, attitudes and experiences of school guidance. Their ideas could also facilitate the development of proposals for a future school guidance model that intensifies and extends the preventative approach of school guidance in the primary school.

The research participants were predominantly primary school teachers because of the area of focus. One contact person was arranged from each of the following school regions:

- (a) Grassy Park
- (b) Lotus River
- (c) Retreat
- (d) Athlone
- (e) Mitchells Plain
- (f) Cape Town

These school regions were selected in order to gather a wider spectrum of information relating to school guidance in the Western Cape.

The contacts from the different regions then recruited three other teachers who were interested in school guidance from their respective regions. I became acquainted with the recruits personally, and in certain instances telephonically.

The first meeting with the participants was therefore more of a social one. Meeting on a social level contributed considerably to free expression and spontaneous co-operation to the interview schedule.

In order to get as close as possible to the situation being studied, which is congruent with Lofland's, (1971) definition of qualitative research, the study was carried out at the respective schools.

Each interview ranged from between thirty and forty minutes. Most of the responses were handwritten by the interviewer. In order to capture what was actually said by the interviewee about school guidance in the primary school, direct quotations of the participants were also recorded. In certain instances participants preferred completing the questionnaire in their own handwriting.

In order to capture further unstructured data there were a number of long pauses after each question.

Prior to the interview each participant received a semi-structured schedule containing twenty-three broad questions relating to school guidance in the primary school (Appendix A). This schedule consisted of two sections: Section A consisted of questions relating to the present existence of school guidance in the primary schools under the Reps:DEC; and Section B covered questions relating to suggestions for a future school guidance programme under a national education system. The questionnaire was given to the participants before the actual interview took place to serve as an stimulus and to inform them as to what the discussion relating to school guidance in the primary school was all about.

3.3 Analysis of the interviews

The data that was generated during the interview was subjected to a content analysis focusing on:

- (a) the existing school guidance in Reps:DEC schools in the Western Cape; and
- (b) suggestions for a school guidance programme that optimises the principles of prevention and health promotion more adequately.

This analysis is in keeping with the aim of the study. A number of approaches to the process of analyzing or the explicating of interviewing data have been offered when conducting qualitatively oriented research (Colaizzi, 1978; Neimeyer and Resnikoff, 1982; Stones 1966).

The following procedural steps suggested by Colaizzi (1978) were followed in the content analysis of the interview protocols in this study:

- (a) In this stage, the protocols are read so that a general feeling and overall idea of the subjects' descriptions are ascertained.
- (b) Significant statements, phrases or sentences that pertain to the purpose of the study are extracted. Repetition is avoided by grouping together statements which contain similar themes.
- (c) Meanings to all the significant statements are formulated. Care is taken that objectivity and originality is maintained throughout the content analysis.
- (d) The process is repeated for each protocol, and the similar meanings are arranged into clusters or themes. A check is made to see whether there is anything contained in the original protocol which is not accounted for in the themes and whether the themes propose anything which is not implied in the original protocol. Should either of these possibilities exist, then the preceding steps are reexamined and reconducted.
- (e) All the themes are then integrated into a comprehensive whole and the conclusive summary is formulated keeping in mind the purpose of the study.

It was mentioned in the previous section that the aim when analysing the interviewee's responses was to identify the major "themes" or central tendencies' relating to the experiential area being probed. This is the essence of the qualitative approach and will thus entail a presentation of rich, holistic data and in some cases, quotations from the interview undertaken to illustrate and support the research findings.

This effort at uncovering "patterns" and categories of experiences is a creative process that requires making careful considered judgements about what is really significant and meaningful in the data.

Mention should be made that the guidelines provided above need not be rigidly adhered to as "recipes" for conducting qualitative methods of analysing interview protocols and considerable scope exists for the researcher to display initiative and produce innovations in the analysis of protocols and to conduct research according to individual preference and personal style (Daniels, 1993).

(a) Limitations of study

This study was clearly biased because the data obtained from the semi-structured interviews was limited by the number of participating teachers and the gender of the participants who were predominantly female primary school teachers. The gender of the participants was not equally represented because the majority of the primary school teachers are females. More information

about school guidance in the primary school could have been elicited if the questionnaire had been completed by a broader spectrum of primary school teachers in the Reps:DEC, or better still, by other education departments in South Africa. Another limitation is that three different methods were used to obtain the data.

(b) Discussion of Findings

What follows is an explication and discussion of the themes that were identified from the interview data based on the responses to each of the areas elicited by the questions in the interview.

The findings will be presented in two sections, namely:

Section A will make an analysis of perceptions of the existing school guidance service in primary schools in the Reps:DEC in the Western Cape. Section B will make an analysis of the suggestions made for a future school guidance service at primary school level.

Section A: Existing Services

Question 1 of the interview guide elicited the school region where the questionnaire was completed. The regions that were covered in the Western Cape were Wynberg, Athlone, Mitchell's Plain, Cape Town and Bellville. There were an average of four participants per region.

2 Is there a guidance service at your school?

Ninety percent of the participants reacted positively to this question by stating that a school guidance service did exist. The positive response to this question reveals that a school guidance service is prescribed in all primary schools. Whether this service actually operates is, however, another question.

3 Briefly describe the guidance service that exists at your school.

Question 3 of the interview was aimed at obtaining a broad description of the guidance service at a particular school.

Some of the participants responded in the following way:

"During single allocated periods various aspects of vocations are discussed."

"Family guidance, Vocational/Career is being offered to the standard five pupils."

"We have a family guidance programme from Std 2 to Std 4 and vocational, personal and social guidance for Std 5."

"The school guidance lessons are predetermined in the guidance syllabus for the Junior Section."

One central theme that emerged from this question was that certain areas as prescribed in the School Guidance Manual (1991) were being addressed to some extent in the primary school. These areas include: educational, social, vocational/career, personal, and family guidance. Another theme that emerged from the responses was the lack of whole primary school population school guidance programmes. In this regard, the different areas of school guidance appear to be split up and serviced to different

sections of the primary school. For example: the family guidance service was offered to the junior primary section of the primary school, while vocation choice is offered to the senior primary section.

It appears from the responses that the main areas of focus in the primary school are career choice and family guidance and that there appears to be a lack of focus on developing the primary school child's skills to cope with every day living and learning. Furthermore, the principle of prevention is not being initiated in the junior section of the primary school where, for the purpose of early intervention, it ought to be intensified.

4 "Who provides the school guidance service at your school?"

In response to this question the participants had to indicate their response in terms of a number of possibilities which were: principal, guidance teacher, class teacher, or other. Eighty percent indicated that the class teacher was responsible for providing the school guidance service in the primary school.

From the responses to this question it appears that the primary school is not equipped with trained guidance personnel. The class teacher providing the service has generally received very little if any, training in school guidance method. This is a clear indication of the lack of importance placed on guidance at primary school level.

5 "Which pupils in your school receive a guidance service?"

In response to this question the following significant responses were given:

"There are four standard five classes that receive guidance."

"Only standard five pupils have guidance as a subject."

"In the upper standards that is from Std 2 to Std 5 time is "stolen" to teach Family Guidance."

This question was aimed at finding out whether the whole primary school population received the school guidance service.

The responses clearly confirmed that school guidance is not being extended throughout the primary school. It is usually only the standard five pupils or the senior primary classes that receive a school guidance service at certain schools.

Another finding that emerged was the lack of importance of school guidance in the primary school. This is reflected in one participant's response that school guidance is only being implemented during "stolen periods".

Other significant responses that support the previous point are:

"We do not really teach guidance because we are using the guidance period to "catch up" with notes that the children have missed during the teacher's strike."

"The early package deal left us with a skeleton staff so we have to concentrate on the exam subjects. There is no time for guidance."

From the responses made it appears that school guidance is treated as a marginalised service or is non-existent due to the rationalisation process. This means that problems and the prevention of problems in the primary school do not receive the attention they ought to.

6 "Is the family guidance programme operating in your school?"

The respondents had to indicate their response to this question by either saying yes or no. This question was posed to gain a general idea as to whether the family guidance area was being addressed. Ninety percent of the participants responded negatively to this question, revealing that the family guidance programme was either not operating or receiving very little attention in the primary school programme. It seems therefore that the family guidance programme - which forms part of the general guidance or Lifeskills programme - is being given sparse attention in the primary school.

7 "Is your primary school guidance service preventatively orientated?"

The term "prevention" that was used in this question was defined in the glossary of terms given to interviewees prior to the interview. Responses to the question included:

"Please clarify that term because I never knew that it was related to school guidance."

"We try to prevent problems but we are fighting a losing battle because of the home circumstances. The parents whom we would like to see never turn up for parent's meetings."

"I would like to educate the children on how to cope with life in general but unfortunately the time allocated for guidance does not allow me to do so. I spend most of my time filling in those obsolete guidance forms. It's about time the department did away with them."

"There are so many social problems in our school that need to be cured that we cannot even think about preventing problems."

Various themes developed from this line of questioning. Theoretical approaches such as prevention have not been clearly defined and emphasised in the primary school guidance literature. At certain primary schools there is a lack of parent co-operation. It appears that parents and the schools have not been sufficiently convinced of the important role parents have to play as their child's primary educator. Certain primary school teachers see the importance of teaching the child everyday Lifeskills, which is a strategy in the health promotion trend, but state their dissatisfaction about time allocation that is set aside for school guidance, saying that it does not allow them to address this issue adequately. The need to intensify and extend the prevention approach in the primary school as a strategy of preventing problems is evident in the responses made by the participants.

The last quote, "There are so many social problems in our school that need to be cured that we cannot even think about preventing problems", is highlighted because it is very relevant to the existing guidance service in the primary school and to the aim of this study. The lack of school guidance programmes in the

primary school has resulted in the principle of prevention not being operationalised in the early primary school years. This has resulted in a higher incidence of behavioural and other problems which teachers have difficulty in addressing. These problems then do not receive the attention they need. By developing a health promotion approach in primary schools, many problems could be prevented.

Section B: Future Services

Section B of the interview guide addressed issues that provide possible suggestions for a future school guidance service in the primary school.

1 "Should there be a school guidance service at your school? If yes, why? If no why not?"

Here the respondents had to indicate a negative or positive response and had to substantiate why they chose that alternative. This question was posed to gain a general idea of whether the participants saw the need to have a school guidance service in the primary school.

Predictably, all the participants responded positively to this question, indicating that there should be school guidance service in the primary school.

For example, one interviewee said:

"Yes there should be a school guidance service at our school to help all the pupils, systematically and in an organised manner, to discover their abilities, and help them to find direction and become self supporting individuals."

Another interviewee said:

"Yes pupils face many obstacles whereby they are ill equipped. Guidance boosts confidence that gives insight into these problems and how to cope with it."

"Yes the need exists because the area in which we work is abundant with social problems."

The central theme that emerged from this area is that the primary school teachers see the need for a school guidance service that builds personal competencies and thereby hopefully prevents future problems. Participants felt that learners are faced with obstacles which they are ill equipped to handle. By developing an optimal school guidance service in the primary school, opportunities for becoming responsible for learners' own well-being could be provided. The focus should be on developing the learners' personal skills such as confidence and coping skills, which will hopefully promote a healthier community. These strategies are congruent with the health promotion approach.

2. "Should such a school guidance service exist, give a brief description of the kind of services that should be offered?"

Proposals relating to services that should be offered included the following:

"Emotional and physical needs should be addressed."

"In the primary schools one should concentrate on personality and career development and also focus on child and drug abuse."

"A school guidance service should bring the child into contact with the real world."

"School should offer family counselling because when a child is experiencing a problem it develops into a family concern. For this reason family counselling and parenting skills should be made available."

The above quotes reveal a range of possibilities about the kind of services that should be offered. The services suggested differed from school to school depending on the needs perceived to be addressed. In general, however, the proposals included the following areas:

- (a) emotional needs
- (b) physical needs
- (c) personality development
- (d) child abuse
- (e) drug abuse
- (f) family counselling
- (g) parenting skills

One interesting quote about services that should be offered was the one which proposed that a school guidance service in the primary school should bring the child into contact with the real world. This could be interpreted as offering a school guidance service that enables the pupils to cope with every day living and learning and not to prepare the child for idealistic goals that are beyond his/her attainment.

3 "Who should be responsible for providing such a school guidance service?"

The following responses were made about who should be responsible for providing a school guidance service in the primary school:

"A specialist guidance teacher that has received training."

"The class teacher because she is in contact with the class most of the time."

"Teachers who show a genuine interest in the subject."

"A social worker because we are dealing with social problems."

"A trained person who is not on the staff because pupils often suspect that their weaknesses are discussed with other members on the staff and the pupils who deviate are labelled."

"A qualified, sympathetic, alert, guidance teacher."

"A trained school psychologist."

"The school nurse is equipped to handle certain issues."

"Key persons in the community with whom the pupil often comes into contact. Are you aware that we even called in a policeman to educate the children about "stranger danger."

The quotes reveal a range of possibilities about who is best equipped to offer an adequate school guidance service in the primary school.

Persons who are well trained and sufficiently qualified, including general classroom teachers who do not have special training, seem to be considered to be the best persons to offer a school guidance service in the primary school. However, it is interesting that many of the suggestions refer to an extension

of the guidance service in the primary school - to key persons in the community as an attempt to establish the primary school guidance service.

4 "Which students in your school should receive such a school guidance service?"

The responses made by the participants as to who should be serviced were as follows:

"It should be made accessible to everyone."

"Guidance should start at the beginning of Junior Primary phase."

"All the pupils."

The general theme that emerged from this question was that school guidance at primary school level should be made accessible to the whole primary school population and not only to the senior section of the primary school. It appears that there is a recognised need to shift away from individual treatment, which is an approach that is related to individual counselling, towards whole-school population approaches such as group guidance on an integrated approach to guidance. This suggests generally a tendency towards a preventative health promotion approach. This is further highlighted in the responses to the following question.

5 "Should the school guidance service be preventatively or curatively orientated?"

The responses made to the approach of school guidance in the primary school were as follows:

"Preventatively"

"Preventative, but curative can also be considered for the present problems."

"In the primary school the school guidance service should be preventative."

The overall theme that emerged from this line of questioning was that the approach to school guidance in the primary school should be primarily preventative, but in designing school guidance programmes cognisance should be taken of those learners who have problems and therefore need individual treatment.

3.4 Summary

An analysis of the above findings within the context of the aim of the study (which is to examine the existing primary school guidance service in Reps:DEC in the Western Cape, and to make suggestions for a school guidance programme that optimises the principles of prevention and health promotion more adequately) suggests that the existing guidance service is not adequately addressing the principles of prevention and health promotion. Furthermore, suggestions proposed by the interview participants reveal a general consensus for the need of a more preventative approach. Chapter Four of the study will develop these

suggestions for a school guidance programme that optimises the principles of prevention and health promotion more adequately.

An analysis of the findings briefly discussed in section A of the interview schedule, focusing on the existing school guidance services in Reps:DEC primary schools, revealed the following:

It seems that in the regions researched, school guidance has been prescribed in the primary school curriculum. Areas prescribed in the school guidance manual include: educational, social, vocational, personal and family guidance. The different areas are not implemented throughout the different phases of the primary school years. The different areas have been sub divided between the junior and senior section of the primary school. There seems to be a general focus on vocational guidance in the senior section, and family guidance in the junior section.

It appears that the family guidance programme, which is perceived as an addition to the guidance programme, is not being implemented in the majority of the primary schools and where it does exist, it is only addressed in the junior section of the primary school.

In the primary school the guidance service lacks the expertise of a trained guidance person. The school guidance service is generally provided by the class teacher who is not a specialist in the field.

Interpretation of the data has also revealed school guidance has been treated as a marginalised service, and in certain instances has been non-existent due to the rationalisation process that is taking place in the Reps:DEC schools in the Western Cape.

The principle of prevention, which should be the foundation of any group guidance programme, particularly in the primary school, has not been clarified neither has it been optimised. The lack of focus on the principle of prevention has resulted in proliferation of problems. However, most of the primary school teachers see the significance of focusing on the preventative and health promotion approach as a method of addressing problems that arise in the primary school but are dissatisfied with the prescribed time for school guidance in the primary school because it does not allow them to address needs optimally.

It should be noted that this summary of responses relating to the current existence of guidance in primary schools in the Reps:DEC suggests certain realities, but, because of the small sample of teachers interviewed, it cannot be taken as a generalisation of the current situation.

Suggestions for a future school guidance service for primary schools from the responses revealed the following:

The general feeling of the participants revealed that an adequate school guidance service should be integrated into the primary school curriculum. Suggestions revealed that the family guidance programme should be extended throughout the primary school.

The guidance programme should be provided by a specialist guidance person (preferably the class teacher) and extend to include key persons in the community in order to optimise the guidance service.

The approach to school guidance in the primary school should be primarily preventative, and, to a lesser degree, curative-to address the needs of those learners who require special help and those learners who are at high risk.

In summary, chapter three set out to address the following areas:

My motivation for making a study of such a nature, followed by a review of the aim of this study. An overview of the methodology adopted, with special reference to the specific methods used in the study to achieve the proposed aim, was then presented. A content analysis of the interviews was then pursued, and a discussion of the findings was presented. Finally, an attempt was made to directly link the findings of the research with the aim of the study.

CHAPTER FOUR

SUGGESTIONS FOR AN ADEQUATE SCHOOL GUIDANCE SERVICE

IN THE PRIMARY SCHOOL

The purpose of Chapter Four is to review proposals for school guidance that have been put forward by various groupings in South Africa, and to develop suggestions that hopefully utilise the preventative and health promotion principles within the guidance service in primary schools.

The suggestions are developed from a comprehensive analysis of:

- (a) Background literature on school guidance in South Africa as explored in Chapter One of the study
- (b) The theoretical framework of the principles of prevention and health promotion as analysed in Chapter Two
- (c) The research findings as discussed in Chapter Three, and
- (d) Policy proposals emerging from various groupings in South Africa

4.1 Review of policy proposals put forward by groupings in South Africa

Before developing specific proposals for an adequate primary guidance service, a review will be made of documents containing policy proposals put forward by various groupings in South Africa. These include:

- (a) The Educational Renewal Strategy (ERS, 1992)
- (b) The National Education Policy Investigation (NEPI: Support Services, Report 1992)
- (c) Education Department of the African National Congress (1994)
- (d) Education Support Services in South Africa: Policy Proposals. Cape Town: EPU/UWC. (De Jong, Ganie, Lazarus, Naidoo, Naude, and Prinsloo) (1994).
- (e) Report on Health Promotion through schools Workshop, July 1994 (Lazarus, 1994)

(a) The Educational Renewal Strategy (ERS, 1992)

The ERS (1992) represents the previous governments policy standpoints and proposes short and medium term solutions for the most important problems and questions in education. The issues that are highlighted below relate to the area of school guidance.

The ERS (1992) proposes that there should be a linkage between formal and non-formal education (that is the formal education system and the vocational training sector) in order to establish national vocational qualifications that are based on standards of knowledge and skills for (for competencies) and levels of literacy required by the employer sector. The ERS (1992) proposes that the learner should be awarded with vocational qualifications that are based on the literacy levels required by the employer.

The ERS (1992) suggests that, to ensure that learners are equipped with the ability to make meaningful choices, vocational guidance, which is normally a subdivision of the subject school guidance, is of great importance in the curriculum.

The ERS (1992) states that as learners make progress at school exposure to the world at work should be pursued to aid the exercise of vocational choices. This exposure to the world of work should occur from Sub A upwards.

The ERS (1992) further suggests that programmes for teacher education should be adapted to provide for the adequate equipment of teachers for the vocational development of learners in schools in order that they, in co-operation with the private sector and the Department of Manpower, may present education programmes which include vocational opportunities in the syllabus.

In summary, and with relevance to the aim of this study, proposals put forward by the ERS continue to focus primarily on the vocational aspect of school guidance. There is, however, a shift of focus to the junior division of the primary school where an emphasis is placed on exposing the learner to the world of work from Substandard A upwards. The issue of extending school guidance in the primary school to the junior division is being addressed to a certain extent, in the form of family guidance and the added issue of enablement which is congruent with the health promotion approach is being recognized.

(b) The National Educational Policy Investigation (NEPI: Support Services, Report 1992)

The NEPI: Support Services, Report (1992) was a project of the National Education Co-ordinating Committee (NECC) and was conducted between December 1990 and August 1992. The object of

this investigation was to interrogate policy options in all areas of education within a value framework derived from the ideals of the broad democratic movement. One of the areas of focus for this investigation was support services, including school guidance and counselling, school health and special education.

The policy options identified in the NEPI: Support Services, Report (1992) are framed within the general NEPI principles of non discrimination (race and gender), democracy, equity, and redress. The options are identified within the following four broad areas: (i) conceptualisation (ii) administration and control (iii) service provision and (iv) resources.

(i) Conceptualisation

Within the NEPI: Support Services, Report (1992) document there is a particular emphasis on the principle of prevention in school guidance and other support services, with schools being considered as central sites for primary, secondary and tertiary intervention. Linked to the principle of prevention is the systemic approach which takes into cognisance other operational systems, such as the child's school environment, when planning intervention strategies. Furthermore, the NEPI options include a commitment to the integration of school guidance in the general curriculum where school guidance is treated as a separate subject but at the same time integration which refers to interdisciplinary collaboration of school guidance and counselling, special education, social work, school health and general psychological services.

(ii) Structure, Administration and Control

Included in the suggestions is that there should be more linkage and co-operation between the formal schools and the school/district clinics and non-formal sector, including the Department of Manpower and Non-Government Organisations (NGO's).

The proposals suggest that linkages could be made by means of resource centres which would be set up regionally and locally, making use of existing infrastructures such as the many existing personpower centres in the country. These could be used as the basis for the development of regional or district centres and at the same time serve as comprehensive community centres. The role of the NGO's and the business sector in helping to provide community based guidance and counselling services is emphasised in the NEPI proposals.

The NEPI: Support Services, Report (1992) proposes the inclusion of various sectors such as parents, teachers and community representatives - in policy and curriculum development in school guidance and even in direct service provision, where appropriate.

(iii) Service Provision

In addition to the psychologist two other school guidance personnel are emphasised: the school guidance teacher and the guidance counsellor. The former is seen to be primarily responsible for the implementation of school guidance in the schools, identification and referral of problems, links with

outside personnel, and the improvement of teacher-pupil relationships. The counsellor is seen to be responsible for all counselling activities in the school.

Proposals emerging from NGO's⁴ emphasise the importance of including school guidance and counselling services for the vast number of unemployed youth in South Africa.

The NEPI document identifies the need for school guidance and counselling at primary school level.

(iv) Resources

The NEPI report proposes that the development of human resources in the areas of pre-service and in-service training programmes is a priority. Utilization of specialised personnel in the in-service training of less qualified specialist and ordinary teachers is a system advocated strongly in the school guidance policy options.

For the purpose of this study, it is interesting to note that the NEPI report emphasises the principle of prevention and the significance of primary schools as sites for primary, secondary and tertiary prevention. The report proposes that school guidance could be further optimised in the primary school if it is treated as a separate subject and at the same time integrated with other subjects, and if school guidance is extended to include significant community representatives.

c) Education Department African National Congress (1994)

This policy framework sets out proposals for ANC policy on education and training. The following proposals highlight areas relating to school guidance. The ANC Framework (1994) proposes that specialised school health, welfare, school guidance and counselling, and special education services need to be made available to those with particular physical, psychological and academic needs.

With regard to special needs the ANC Framework, (1994) proposes that correcting the massive and scandalous neglect of the learning needs of children and others with physical or other disabilities and impairments must constitute an urgent priority in a reconstruction programme committed to the development of all in South Africa.

The ANC Framework, (1994) proposes that collaborative management structures encompassing school health, welfare and educational support services should be established through multi-disciplinary and multi-sectional councils and committees at national provincial, and local levels.

The ANC Framework, (1994) argues for a national core curriculum for the General Education Certificate (G.E.C.), that is, the first 10 years of schooling. The G.E.C. will provide a general education based on the integration of academic and vocational skills. The curriculum will not therefore differentiate between academic and vocational subjects. In all subjects students will

be exposed to the world of work. The provision of general education is premised on the understanding that it needs to prepare individuals to adapt to the needs of a changing and dynamic economy and society. Lifeskills has been identified as a core area in the general curriculum.

The national curriculum for the Further Education Curriculum (F.E.C.) will be based on differentiating between compulsory core general subjects and optional vocational or academic subjects. The differentiation between core options is necessary in order to integrate the education and training systems by unifying general education and vocational education and training into a single structure with a single qualification and certificate. The F.E.C. marks the completion of further education (based on the integration of general education and vocational education and training) whether school based or work based.

Finally the ANC Framework, (1994) proposes the promotion of career paths as an aid to mobility within all sectors of economic activity.

With regard to this study, the ANC Framework, (1994) proposes the need to correct the neglect of the special needs of children. This proposal is relevant with regard to secondary and tertiary intervention programmes that aim to help groups who are at risk or who already experience difficulties. The ANC Framework, (1994) goes on further to support a primary preventative approach by suggesting that general education and vocational education should

be integrated into a single structure, and that school guidance should be integrated into the primary school curriculum.

(d) Towards a model for school guidance and counselling in South Africa in Education Support Services in South Africa policy proposals (De Jong, T; Ganie, L; Lazarus, S; Naidoo, T; Naude, L & Prinsloo, E., 1994). One of the many position papers that developed from the NEPI initiative is a position paper on school guidance and counselling (De Jong, T; Ganie, L; Naidoo, T and Prinsloo, E, 1994) is one of many which have developed from the NEPI initiative. It represents a collective attempt to locate school guidance and counselling within specific policy dimensions by providing a framework which interfaces with the broader proposed model for the development of educational support services (Donald and Lazarus, 1994) and in turn informs the more detailed ideas concerning curriculum design and implications for the training of school guidance and counselling personnel. Particular proposals emerging from this paper are outlined below.

(i) Structure of the proposed model

The management structure of school guidance and counselling refers to the team of representatives from various interest groups such as students, teachers, parents, the school guidance and counselling team, community members, and the district or community centre. This structure is responsible for advising the school's guidance and counselling team on the coordination of delivery of a school guidance and counselling service in the school.

At the centre of the service is a school guidance and counselling team. The team constitutes three administration levels of personnel: the general teachers: guidance teachers and guidance-counsellors: and community centre consultants, offering school guidance and counselling. The lines of accountability are lateral and bi-directional, with management being a collective and democratic process.

An alternative to having guidance counsellors in schools is to locate the guidance counsellor in the District or Community Centres where he/she can be responsible for more than one school.

(ii) Some Implications of this proposed model

A basic assumption upon which this proposal is based is that there will be a unitary education system with a significant degree of regional autonomy, and that time will be allocated specifically for school guidance and counselling activities in the curriculum.

With regard to the focus of the study the position paper proposes to optimise the school guidance service by extending the school guidance team to various interest groups such as teachers, students, and parents.

(e) Report on Health Promotion through schools Workshop, (S. Lazarus 1994)

A general feeling arising out of this report is that a specialist support service should be an indispensable and integrated part of education and training. This service should be specifically directed towards providing for special educational needs, their prevention, and the promotion of development for all learners. The importance of infusing Lifeskills in a realistical manner within the South African context is also emphasised. Lazarus argues that Lifeskills, health education, and Educational Support Services generally, will have to be a focus for serious advocacy for some time to come. The report also includes an argument for health promotion as a "whole-school" issue. The need for a cohesive conceptualisation and coordinated policy and practice in health promotion through schools in South Africa was generally recognised.

An Analysis of the above-mentioned proposals and policy options

An analysis of the above proposals and policies will be briefly discussed:

Various common issues emerge from the various interest groups. For example both the ERS (1992) and ANC Framework (1994) emphasise the importance of a vocational/career guidance in the curriculum. However, this aspect is rather under-emphasised by the other groups. A vocational/career focus is an important

thrust but could fall into the danger of being the only focus which is out of context of the general lifeskills development.

The ANC Framework (1994) and the Health Promotion Report (1994) perceive school guidance as a "whole-school" issue, particularly within the context of general Lifeskills development. The ERS (1992) also recognises this but in a limited, and primarily vocational, way.

The NEPI (1992), De Jong et al, (1994) and Health Promotion Report (1994) reports propose that the school guidance service should be extended to include teachers, parents and community organisations as resources in the development of school guidance programmes.

One key principle underpinning the principle of prevention is early intervention which means planning or designing effective intervention programmes that are implemented very early in the individual's process of development. Both the NEPI: Support Service Report (1992) and ANC Framework (1994) support a preventative approach but prevention is more fully developed in the ANC framework because the document emphasises the need to initiate the principle of prevention in the early childhood years.

Both the ANC Framework (1994) and NEPI: Support Services Report (1992) recognise the need for individual counselling. The ANC Framework (1994) places a great emphasis on correcting the neglect of special needs.

In making this analysis to the aims of this study, the following options suggest ways of optimising the principle of prevention more adequately:

There should be a shift away from a career only focused curriculum to school guidance being a "whole-school" issue within the context of general health promotion development, within a comprehensive education support services framework.

To optimise the principle of prevention it is proposed that a special emphasis should be placed on initiating intervention programmes in the early years of the learners' schooling.

Finally the policy options and proposals propose that the health promotion approach could be further intensified in the primary school if the school guidance programme is extended to parents, teachers and community organisations.

4.2 TENTATIVE SUGGESTIONS FOR A SCHOOL GUIDANCE PROGRAMME AT PRIMARY SCHOOL LEVEL

The suggestions that follow will be directed at optimising the principles of prevention and health promotion at primary school level and will be explored under the following sub-headings:

- (a) conceptualisation
- (b) service provision
- (c) curriculum development
- (d) resources

(a) Conceptualisation

School guidance in the primary school should be conceptualised as a channel to enable the whole school community to cope with every day living and learning. This includes a person-centred Lifeskills approach. These Lifeskills need to be developed within a healthy environment (systems approach) which implies the need to develop a "health promoting school". If school guidance places a greater emphasis on these two aspects, namely Lifeskills and the development of a healthy school system, the primary school guidance programme is on its way to optimising the principles of prevention and health promotion. All the possibilities causing problems should be investigated by the guidance personnel whether it be stemming from the individual or from the environment.

(b) Service provision

In providing a service, the primary school guidance programme should not single out one sub-division or phase of schooling, nor should it develop one aspect out of context of the general Lifeskills approach. A comprehensive approach, including all phases and areas, should be developed. It is suggested that the following essential areas of Lifeskills be included:

- (a) self awareness & self-concept enhancement
- (b) family life
- (c) relationships and dating
- (d) sexuality
- (e) time management

- (f) study methods
- (g) factors influencing the environment
- (h) communication
- (i) conflict resolution
- (j) stress management
- (k) creativity and problem solving
- (l) countering prejudice and sexism

In addition to the development of a relevant Lifeskills programme, guidance programmes should include interventions focusing on key socialization agents such as parents and teachers, as well as interventions that focus on whole school development.

This latter aspect is critical if a supportive "environment" or "healthy school" is to be developed (Report on Health Promotion through schools Workshop, July 1994).

All of these programmes should be developed within an Educational Support Services framework to utilise school guidance in the primary school.

The role of the school guidance personnel includes:

- (a) The planning and carrying out of programmes to reduce the incidence of all types of problems that are relevant to a particular school. These programmes should be aimed at individuals (person-centred) and the environment.

Practical examples include:

Public education is a specific primary prevention strategy that aims to educate the public about specific risks and strategies for reducing these risks. Programmes that could be conducted in the primary school and directed to the whole primary school population during the group guidance programmes include education about sexuality, including Aids; stranger danger; conflict resolution; relationships; stress management; and so on. These programmes should be aimed at identifying both helpful and harmful environmental factors that influence the school community's ability to cope with the stresses of life. If teachers feel ill equipped to tackle certain issues, they should call in experts from the community to address the school.

- (b) The planning and carrying out of programmes for reducing the duration of a significant number of problems which occur. In this regard the guidance personnel will be functioning at a secondary prevention level and the programmes will be directed to persons and to the environment. Secondary prevention programmes are particularly directed at high risk groups in the primary school, for example, learners who have single parents, divorced parents, parents who have been sentenced to jail, parents who are experiencing antisocial problems such as drug addiction and alcoholism, parents who are experiencing economic problems such as unemployment, retrenchment, or who are not able to cope with the inflation rate. Secondary prevention programmes should take into account developmental crises such as: death, marriage, re-

allocation of home or school, or birth of a sibling. Secondary intervention programmes should also aim at specific milestone events such as sitting for a final exam, entry into high school, going on a first bus trip alone, and so on.

- (c) Identifying learners with special educational need among the primary school population, encouraging early referral to treatment if a difficulty is suspected, constitutes tertiary prevention interventions. This level of prevention encompasses school guidance programmes that create opportunities for rehabilitation of people already suffering from a problem or disability so as to reduce its duration and destructiveness. In the context of school guidance in the primary school learners who are identified as having learning problems should be referred for remedial teaching. If children are identified as having poor eyesight they should be referred to health personnel. Sexually abused learners could be referred to a crisis centre. In addition to referral, tertiary prevention is also about creating conditions whereby these learners are accommodated in an accepting and empowering way within the school. This includes the forming of support groups, educating the entire primary school population about their disablement, not attaching stigmas to the special learners, and generally ensuring that the school curriculum fosters diversity in terms of abilities and preferences.

Finally, the guidance personnel should shift their thinking to incorporate a "multi-factorial" analysis of risk factors.

(c) Primary Prevention: General Curriculum Development

Prevention in the primary school should be perceived as a "whole-school" issue. This includes a focus on the development of the school as an organisation providing a supportive environment for student and staff and on the development of a curriculum that fosters the development of lifeskills.

School guidance in the primary school could be optimised if treated as a separate subject and given some form of evaluation as other exam subjects. However, school guidance in the primary school should also be integrated within other school subjects. For example, when conducting Religious

Education the topic about the "Leper" could be a useful medium for effectively integrating a guidance lesson on Aids.

(d) Resources

The issue of resources is discussed under two sub headings (a) human resources; and (b) financial resources

(i) Human Resources

It should be emphasised that in order to intensify the focus of school guidance in the primary school, the school should be

equipped with well trained guidance teachers who can be responsible for school guidance, and where possible guidance counsellors who can address the special needs of individuals. The school guidance service could be further developed if the service utilises the resources of other stakeholders such as: other teachers, parents, and significant community members. At the primary school the school guidance programme should not be the sole responsibility of the guidance teacher or guidance counsellor but should be extended to include other primary school teachers on the staff, as well as other significant members.

Specific training of guidance teachers at primary school level should be included in teacher training curricula.

In-service and on going training of all school personnel should be provided by education support services centres and other relevant organisations and institutions.

The school personnel should also use their existing expertise and talents to the fullest potential. For example, if a teacher has received training in conflict resolution these skills should be shared amongst the staff and pupils.

Inexperienced teachers should be encouraged to turn to experienced teachers, retired teachers, and specialists for assistance.

(ii) Financial Resources

With regard to financial resources it is the duty of the state to offer financial assistance to primary schools with regard to school guidance but schools should at the same time arrange their internal fundraising drives to upgrade the school guidance service. One strategy that could be adopted would be for small businesses to adopt a neighbouring school, offering financial support where needed. In this way, the formal sector can be fruitfully linked with the informal sector.

(e) In summary

School guidance in the primary school should be conceptualised within the framework of Lifeskills and "health promoting schools" to ensure that the principles of prevention and health promotion are being optimised. The service provision should reflect a comprehensive Lifeskills approach and should not over or under-emphasize sub-divisions of the school guidance programme. Interventions that focus on whole school development, aimed at developing a "health promoting school" should also be pursued.

The primary school should be equipped with well-trained guidance personnel. The guidance personnel could be expanded to include other significant members in the community. The guidance programmes implemented by the primary school personnel should be directed at the learners (person-oriented) and at the environment (systems or environment-centred approach). The guidance

programmes should also function at all levels of prevention: primary, secondary, and tertiary and should promote the well-being of both staff and students.

School guidance in the primary school could be further optimised in the primary school curriculum if a closer link is made between formal and non formal sectors and between formal and non formal subjects so that all areas in the primary school are given sufficient attention. The primary school curriculum should also ensure that school guidance programmes are treated as a separate subject and extended across the primary school curriculum.

With regard to resources there are two sub-divisions, namely: human resources and financial resources. The primary school guidance programme should not be the sole responsibility of the guidance teacher and guidance counsellor but extended to include other primary school personnel and outside resources. In-service training should be provided by education support services centres and other relevant institutions. Inexperienced teachers should also receive extra guidance from the more experienced staff and the primary school staff should be encouraged to use their talents. It is basically the duty of the state to offer financial assistance but fundraising drives could be encouraged to upgrade the school guidance service in the primary school and a method could be followed whereby neighbouring small businesses could adopt neighbouring primary schools.

CHAPTER FIVE

CONCLUDING REMARKS

The purpose of Chapter Five is to focus on:

- (5.1) A review of the content of the foregoing chapters within the parameters of the aim of the study
- (5.2) The limitations of the study
- (5.3) Issues that lend itself to further research

(5.1) A review of the content of the foregoing chapters within the parameters of the aim of the study

The aims of this study were to make an analysis of the existing school guidance service in the Reps: DEC primary schools in the Western Cape, and to make suggestions for a school guidance approach that optimises the principle of health promotion more adequately.

The area of focus was on primary schools and the theoretical framework from which this study drew its literature was that of prevention and health promotion.

A broad review of school guidance in South Africa revealed the following important aspects in Chapter One:

It was only in the last 25 years that school guidance evolved as part of the broader South African education system. The entrenchment of school guidance in the broad education system was primarily to satisfy the personpower needs of the country (Dovey, 1983).

In the early 1980's, the HSRC De Lange (1981) Report reasserted the importance of school guidance in education and recommended that school guidance should be split into careers and general school guidance. The early 1980's also saw the emergence of the "lifeskills" trend in school guidance which endeavoured to focus on the empowerment of learners through the development of basic "everyday" living skills.

Recently, in the 1990's, groups have tried to reshape school guidance in South Africa. The ERS (1992) had to find short and medium term management solutions for problems in education with regard to school guidance. The NEPI: Support Services Report, (1992) emphasised the principle of prevention in school guidance. The De Jong et al (1995) proposal for a curriculum framework for lifeskills developed ideas about curriculum design and the training of school guidance personnel. The ANC Framework (1994) proposed the integration of general education and vocational education into the school curriculum. The Report on Health Promotion laid a special emphasis on the development of lifeskills programmes and a "health promoting school".

Chapter Two of the study analysed the relationship between the principle of prevention and school guidance in the primary school. The principle of prevention incorporates three levels of intervention: primary, secondary and tertiary. The different methods of prevention are either directed at the learner (person-centred) or at the environment (system or environment centred) or both.

Currently, a greater emphasis has been laid on the health promotion approach as a means of intensifying and extending the principle of prevention. Health promotion aims at the development of competencies of the learner by developing the basic skills, and the development of a supportive environment or "health promoting school".

Chapter Three of the study outlined the research methods that were adopted in this study. The approach of the study was essentially qualitative. The specific research methods that were used in the study were:

- (a) literature reviews and policy analysis
- (b) semi-structured interviews with primary school teachers

The literature on school guidance in South Africa particularly, in the Reps: DEC primary schools, was very limited. As a result personal interviews with certain heads of psychological services were arranged only to discover that they themselves were not able to disclose information. The only plausible alternative was to arrange interviews with some (20) primary school teachers in the Western Cape.

The semi structured interview schedule was divided into two categories:

Section A included questions that were related to the existing school guidance service; while Section B probed for suggestions that would optimise the principle of prevention more adequately

in the primary school. The data was then analysed and discussed in relation to the aims of the study.

The main points that emerged from the interview were that in the existing guidance service school guidance has been prescribed in the primary school curriculum. However, the guidance service lacks the expertise of trained guidance persons. The data also revealed that school guidance has been treated as a marginalised service, and in certain instances has been non-existent. The lack of focus on the principle of prevention has resulted in a proliferation of problems.

Suggestions for a future school guidance service for the primary school revealed the following: An adequate school guidance service should be integrated into the curriculum. The guidance programme should be provided by a specialist guidance person. The approach to school guidance in the primary school should be primarily preventative, and, to a lesser degree, curative.

The purpose of Chapter Four was to highlight proposals from various groupings in South Africa relating to school guidance in South Africa.

Ideas that relate to the development of the principles of prevention and health promotion in relation to primary school guidance were highlighted.

Both the ERS (1992) policies and proposals and the ANC Framework (1994) emphasised the importance of a vocational or career

focused approach in the school guidance approach. The ANC Framework (1994) and the Report on Health Promotion through Schools Workshop (1994), and to a lesser extent the ERS (1992) proposals, perceived school guidance as a whole school issue within the context of a comprehensive Lifeskills development. NEPI: Support Services (1992) and the ANC Framework (1994) espoused a commitment to prevention in their approach to school guidance.

Based on all of the above, the following recommendations for the development of a "health promoting" guidance programme at primary school level were offered.

School guidance should be focused on all phases of the primary school level, and particularly in the junior section where early interventions ought to be initiated.

There should be a shift of focus from individual counselling and treatment to group guidance programmes that focus on the well-being of the whole school population.

The health promotion approach should be reflected as a whole school issue and therefore be integrated across the whole primary school curriculum, and aimed at general school development.

A comprehensive approach to school guidance should be developed. For example, vocational choice should not receive precedence, nor be isolated from the other aspects of school guidance. The primary school guidance programme should promote the development

of basic learning and Lifeskills of the learners. Prevention programmes should also be directed at whole school development.

Finally the school guidance programme in the primary school should be coordinated by a well-trained guidance person.

5.2 Limitations of the study

Limitations that were experienced during the course of the study included the following:

The study was carried out at a time when education in South was in the process of changing over to one national education system. The process of change made it extremely difficult to remain up-to-date with rapid developments. Within this process of change teacher unions protested against certain policies and practices carried out by the Reps:DEC and other departments. Outsiders who visited schools or requested information from the department were therefore suspiciously viewed.

Another problem that developed was the division between teachers in terms of those who do and do not belong to teacher unions. The results of this position also placed me in a precarious position because when I visited certain primary schools I first had to win the trust of certain teachers. Certain psychological heads were also instructed from higher authorities not to disclose any information relating to education because the department did not know in which direction the new education system would be developing.

With regard to the research methodology in this study the following limitations should be recognised: A small and biased sample was used to analyse existing services. This limited the generalisation of the data obtained in the interviews. A further limitation was the lack of depth which was dependent on the nature of the questions asked.

5.3 Further research

Areas that lend itself to further research include: an exploring of innovative ways to extend the principles of prevention and health promotion in the primary school. A further issue that could be explored is to look at different strategies for how Lifeskills education can be developed across the primary school curriculum so that it becomes a whole school issue and not only a body of skills relating to school guidance.

Interventions that focus on whole school development and therefore the development of a "health promoting school" should also be developed.

Finally, the pre-service and in-service training of teachers should be explored, so that they are more fully trained in the prevention and health promotion trend.

School guidance in the primary school is a dynamic vehicle for providing Health Promotion and Lifeskills which are essential in order to survive. Remember, what you learn as a child you remember for the rest of your life. If you are taught to succeed in your early years, you are half-way there.

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APPENDIX

GLOSSARY OF TERMS

GUIDANCE

A process of bringing the learner into contact with the real world in such a way that they acquire lifeskills and techniques which allow them to direct themselves competently within the educational, personal and social spheres and the world of work.

COUNSELLING

One - one or 1 - group intervention to help people cope with developmental or crisis problems.

FAMILY GUIDANCE

A process of helping people to understand their families, family relationships and their sexuality.

PREVENTATIVE

Intervention geared towards the prevention of the development of problems.

CURATIVE

Helping, or being able to cure problems that have already developed.

INTERVIEW SCHEDULE

SECTION A

1) SCHOOL REGION

Wynberg
Athlone
Mitchell's Plain
Belville

2) Is there a guidance service at your school?

YES
NO

3) Briefly describe the guidance service that exists at your school.

4) Who provides guidance at your school?

Principal
Guidance Teacher
Teacher Assistant
Other

5) Which pupils in the primary school receive the guidance service?

6) Is the Family Guidance Programme being addressed in your school?

YES
NO

7) If the Family Guidance Programme is being addressed, is the programme treated as a separate subject or is it intergrated into the curriculum?

8) Does the Family Guidance Programme replace existing Guidance Programme or is it an addition?

9) Who is responsible for the implementation of the Family Guidance Programme?

10) Which pupils in the primary school receive the Family Guidance Programme?

11) Describe the type of training that has been undergone by the guidance teachers or guidance persons who are responsible for guidance.

12) What are the major issues that form a focus for your guidance service?

13) Are your guidance services curatively or preventatively orientated?

SECTION B

1) Should there be a Guidance Service at your school? If yes, why? If no, why not?

2) Should such a guidance service exist, give a brief description of the kind of services to be offered.

3) Who should be responsible for providing such a service?

4) Which pupils in your school should receive such a service?

5) Should there be a Family Guidance Programme in your school? If yes, why? If no, why not?

6) Who should be responsible for the implementation of the Family Guidance Programme?
