

**Enhancing the sense of self of peer supporters
using life design counselling**

by

Marthé-Marie Pienaar

Submitted in partial fulfilment of the requirements for the degree

**PHILOSOPHIAE DOCTOR
(Educational Psychology)**

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at the

UNIVERSITY OF PRETORIA

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DECLARATION

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Student number: 76172831

I, Marthé-Marie Pienaar, hereby declare that the thesis, **Enhancing the sense of self of peer supporters using life design counselling**, which I hereby submit for the degree PhD Educational Psychology at the University of Pretoria, is my own original work and has not previously been submitted by me for a degree at this or any other tertiary institution. I further declare that all the resources that were consulted are included in the reference list.

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PhD

Enhancing the sense of self of peer supporters using life design counselling

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SUPERVISOR

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ABSTRACT

ENHANCING THE SENSE OF SELF OF PEER SUPPORTERS USING LIFE DESIGN COUNSELLING

STUDENT: Marthé-Marie Pienaar
SUPERVISOR: Professor Doctor J.G. Maree
DEGREE: Philosophiae Doctor (PhD) (Educational Psychology)

One of the main challenges experienced during adolescence is that of developing a coherent sense of self, or self-identity (Becht, 2016; Bester & Quinn, 2010; Erickson, 1977). This study used a parallel (or convergent) interactive multi-method design, embedded in an intervention, to explore the possible effects of group based life design counselling on the sense of self of female adolescent peer supporters. The possibility of assisting more individuals by using intervention techniques in groups was also explored. The research study is embedded in a constructivist paradigm and, working from an interpretive stance, the researcher collected, analysed and reported on quantitative and qualitative data to gain insight into the participants' experiences surrounding narrative group life design techniques and their possible impact on enhancing the sense of self.

The overall findings indicate that the intervention programme enhanced the sense of self of the participating peer supporters. The mixed-method research results from this study provide a clearer view of how groups of adolescents can be supported to become better equipped to negotiate transitions in their lives, by enhancing their sense of self.

Key words: adolescence, sense of self, peer supporters, group-based intervention, life design counselling, self-construction, narrativity, independent girls' school, resilience, identity.

GRAMMARFFITI

23 March 2017

DECLARATION OF LANGUAGE EDITING FOR MARTHÉ-MARIE PIENAAR

Dear Supervisor

I, Sarah Heuer, hereby declare that I have edited the paper: *Enhancing the sense of self of peer supporters using life design counselling* for language and style.

If you have any queries, feel free to contact me by emailing sheuer20@gmail.com.

Sincerely



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CHAPTER 1 ORIENTATION TO RESEARCH STUDY

“Every addition to true knowledge is an addition to human power.”

-Horace Mann-

1.1 Introduction

Each developmental stage brings with it new competency requirements, challenges, and opportunities for personal growth (Bandura & Bandura, 2005). As an important transitional phase, adolescence presents a host of new challenges in a society that does not provide many preparatory experiences (Luyckx, Teppers, Klimstra, & Rassart, 2014; Norberg, 2013). One of the main challenges during adolescence is developing a coherent sense of self¹, or self-identity (Bester & Quinn, 2010, Erickson, 1977; Pasupathi & Hoyt, 2009). Developing this multi-domain, multi-layered construct of self-identity is an important, complex life task for an individual's achievement of a stable self that will help bring greater consistency and stability to his or her life (Ickes, Park, & Johnson, 2012, Quinn, 2010; Zeigler-Hill, Besser, Myers, Southard, & Malkin, 2013).

Identity development can be described as the ability to use past experiences to give meaning to the present and future, and therefore to understand one's sense of self through time (Nota, Ginevra, & Santilli, 2015). It can also be described as the degree to which people have a clear picture of their identity, options, goals, values, interests and talents, which includes in-depth exploration of possibilities for future directions they wish to pursue (Berk, 2013; Klimstra, Hale, Raaijmakers, Branje, & Meeus, 2009; Luyckx, Teppers, Klimstra, & Rassart, 2014; Nawaz, 2011). Identity can be seen as the answer to the question "Who am I?" (Bester, 2010, p. 3). Constructing identities involves active participation by people during their own processes of defining who they are, what they value, and what direction they wish to pursue in life (Forthun, Montgomery, & Bell, 2006; Guichard, 2015; Klimstra, Hale, Raaijmakers, Branje, & Meeus, 2010; Marcia, 1980).

According to some researchers (Bandura & Bandura, 2005; McAdams & Olson, 2010), people are active contributors to their own circumstances by being proactive, self-organising,

¹ All relevant concepts will be defined appropriately in section 5: "Clarification of terminology".

self-regulating and self-reflecting. This need to take charge of their own lives and be involved in the construction of their own futures, is described by Bandura and Bandura (2005, p.1) as follows:

They make chance happen by pursuing an active life that increases the fortuitous encounters they will experience. People also make chance work for them by cultivating their interests, enabling beliefs, and competencies. These personal resources enable them to make the most of opportunities that arise unexpectedly.

The above-mentioned authors seem to be saying that by being actively involved in their own process of defining themselves by making sense of different life experiences, and by actively applying the knowledge; adolescents are empowered to take control and authorship of their own lives. Using this positive process of being a participating agent and intentionally changing perceptions regarding circumstances and functioning, should lead to an improved sense of self and self-esteem in adolescence. Research by Zeigler-Hill et al. (2013) confirm previous research results: individuals are viewed more positively when they possess higher levels of self-esteem. They are also perceived by others as possessing more positive personality characteristics (Zeigler-Hill et al., 2013).

How people are perceived by others, especially by their peers, is extremely important, particularly during adolescence (Choudhury, Blakemore, & Charman, 2006; Sumter, Bokhorst, Steinberg, & Westenberg, 2009). Social interaction becomes an opportunity for discovering who they are. Being able to use the information gathered through social interaction constructively to make informed decisions, is hugely influenced by what happens between individuals and the other people they spend time with (Law, 2009; Stewart & Sulda et al., 2011). Opportunities among peers to build relationships and trust, and to transfer information, therefore seems to be an important feature of the development of a positive self-identity (Manczak, Zapata-Gietl & McAdams, 2014; Nawaz, 2011; Zeigler-Hill et al., 2013).

Hirschi and Dauwalder (2015), Maree (2013) and Savickas (2007) confirm the observation that professional people, such as psychologists, can and must be supportive during this discovery and growth process, by creating opportunities for adolescents to reflect on their life stories in such a way that they can live successful lives. Much has been written on the many ways in which psychologists and counsellors can assist adolescents in one-on-one settings. Lately postmodern career counselling techniques, and more specifically life design counselling, have effectively been used in various parts of the developed world, in particular to support individuals during transitional phases (Cheung, Wan, Fan, Leong, & Mok, 2013;

Di Fabio & Maree, 2012; Duarte, 2010). In the South African context, unfortunately, not all people have the privilege of participating actively in this process of defining themselves.

Although Maree and others have paved the way for the use of postmodern techniques in communities challenged by disadvantage, especially in the group context, not nearly enough has been written on the ways in which life design counselling can be provided in group contexts (Di Fabio & Maree, 2012). In addition, a clear need exists to find effective ways of assisting groups of adolescents from different cultures in the South African context in the process of constructing themselves and acquiring stable identities. Group-based life design intervention, facilitated by psychologists trained in the life design approach, may contribute substantially to assist more adolescents in their process of defining themselves and improving self-esteem in a multi-cultural context. Using career construction and life design instruments and strategies to focus on adolescents' meaning-making process and application of new insights should have a much broader and deeper application and value than just career counselling. The postmodern career counselling and life design approach assists people in their reflection on, and redesigning of, their life stories.

If adolescents can be supported in groups, by using life design strategies to assist them in their process of defining themselves and improving the clarity of their sense of self, the intervention will hopefully also serve to enhance all participants' ability to manage their own futures and future changes more confidently and effectively.

1.2 Rationale

Given the current fast-paced and performance- and achievement-driven milieu, there is no denying that girls in middle adolescence may experience a variety of challenges, including anxiety, depression or moodiness, eating disorders, family problems such as divorce, friendship issues, troubled relationships with members of the opposite gender, as well as various kinds of trauma. All these challenges can also be present in adult life. The working assumption of this study is that the more adequate adolescent girls' identity development, self-knowledge, self-esteem and resilience, the easier they will find it to cope with related challenges, and in general, as adults. Happy and productive adults need to take personal responsibility for their actions and they need to seek and find answers to identity-defining questions (Kammeyer-Mueller, Judge, & Piccolo, 2008; Lillevoll, Kroger, & Martinussen, 2013).

The researcher's personal interest focuses on conducting research in such a manner that the outcomes will assist and enable more adolescent girls from different cultures to discover

who they are, what they value, what strengths and resilience they possess, and what future directions they wish to pursue. As these aims are closely linked to identity development and the sense of self, the researcher wants to be useful to them by facilitating a group process, in order to develop in themselves a clearer sense of self.

On an international level, researchers and authors agree on the importance of, and positive impact of, affirmative social support in an environment sensitive to adolescents' developmental needs in terms of their achievement, motivation, behaviour and emotional well-being (Cowie & Wallace, 2006; Wang & Eccles, 2012). Cowie and Wallace (2006) state that young people need affection, physical contact with others, and need to be comforted when they are upset, listened to with sympathy, taken seriously and given opportunities to share feelings like anger, fear, anxiety and bewilderment. Young people need to have access to educational opportunities in contexts that are supportive, and should gain the experience of taking responsibility for themselves and others in age-appropriate ways (Sharp & Cowie, 1998). In the South African context, Quinn (2010) also emphasises the need to support adolescents' quest for identity development.

Far too many South African adolescents do not have the privilege of receiving social and emotional support when they need it most. Many adolescents are unable to afford extended and costly individual therapy sessions with a psychologist. Psychologists employed by schools are often unable to meet the needs of all the learners, due to the high child-to-psychologist ratio. It was therefore important to look at ways in which to reach more learners and to be of assistance to more learners during the process of identity development. The researcher decided to organise a peer support system at the school where she works as an educational psychologist. For the past seven years she has been training a selected group of Grade 11 girls annually, to build relationships with and support the wider school community. An effective peer support programme does not only increase the service delivery at the school, but can also be a means to enable learners to construct themselves more adequately and accept responsibility for their futures (Karcher, 2009).

Although peer support² has long been recognised as an effective method of helping people (Zakaria, 2007), no large-scale research studies have been conducted on the effect of peer support on the supporters (Karcher, 2009). In the search for current studies focusing on the

² In literature similar concepts are described by using different terminology, like peer counselling, peer mentoring or a buddy system. For the purpose of uniformity, the term "peer support" will be used in this study.

training of peer supporters, the researcher could not find any programmes that focused on self-construction and life design activities focussing on the peer supporters. Programmes usually focus on the improvement of communication and listening skills, relationship-building activities, scholastic support, and basic counselling skills (Berndt, 1990; Lekka, 2015).

The group-based intervention model that the researcher is advocating, which incorporates opportunities for the peer supporters to identify their own life themes by utilising life design counselling techniques, may create a scenario for the peer supporters, and not only the groups that they support, to benefit from the peer support programme offered at the school. The group intervention sessions in which they will have the chance to be actively involved in re-creating their own lives, should have the potential to be duplicated in other school environments, in different communities and with learners from diverse cultures, as recommended by Bachman, O'Malley, Freedman-Doan, Trzesniewski, and Donnellan (2011). By implementing the new approach to training peer supporters, more learners in the South African context may benefit from input by psychologists trained in the administration of life design techniques. The significance of this study and the amended project and new way of using contact sessions therefore lay in the attempt that will be made to afford more learners the opportunity to be supported at school while using fewer resources such as time and personal power.

1.3 Statement of purpose

In this study, the researcher aims to investigate the effect of group-based life design counselling on the sense of self³ of female adolescent peer supporters. Because individuals' sense of self is not only influenced by self-representation, but also by social interaction and close relationships (Cross, 2000; Gore, 2013), the assumption is that group intervention may be effective in enhancing adolescent girls' sense of self.

The researcher decided to make use of life design counselling techniques as these techniques seem to enhance awareness of people's inner depth, talents, skills, desires and dreams. Through becoming aware of their own past capabilities for overcoming previous hindrances (an increased awareness), adolescents become more able to learn from the past, become more creative in their problem-solving, and empower themselves in the

³ For this study the postmodern idea of the self will be used, namely that the self is not an existing entity, but rather constructed and changed by self-conceptions (Savickas, 2012).

process of exploring possibilities and opportunities for their futures (Duarte, 2009; Ivtzan, Gardner, Bernard, Sekhon, & Hart, 2013; Vaughan, 2010).

Approaches focussing on self-knowledge and empowerment also allow for meaningful accessibility to learners from different cultures, language backgrounds and religious groups (Bohn, 2010; Chope, & Consoli, 2015; Savickas, 2007; Symington, 2015). People from different backgrounds may benefit from these postmodern narrative approaches, as the psychologist or counsellor is not seen as the expert. Clients are seen as the only experts on their own lives and must be actively involved in the process of narrating their own life stories. The psychologist's task is only to be the motivating, enabling facilitator in the process of self-discovery, exploring opportunities and deriving insight, acceptance and personal growth.

The researcher will attempt to describe the influence of postmodern career and life design counselling strategies on the facilitation of a clearer sense of self towards self-actualisation in female adolescent peer supporters from different cultures. The study will be conducted in an independent English-medium girls' school setting with groups of female adolescents from different cultural backgrounds. Hopefully the research will contribute to the design of strategies to be of use to more learners, to assist individuals in groups to overcome the negative impact of certain life experiences, and to use individual experiences to improve their sense of self and self-esteem.

1.4 Research questions

1.4.1 Primary research question

Based upon the rationale of this research project, the primary research question is:

How does group-based life design counselling influence the sense of self of peer supporters in an independent school for girls?

1.4.2 Secondary research question

The secondary research questions that will lead to a clearer understanding of this topic are as follows:

- What are peer supporters' self-esteem and self-identity needs?
- What are the essential aspects of group-based life design counselling, as seen and experienced by peer supporters?

- How does peer supporter participation in life design group intervention promote self-construction and influence the development of a clearer sense of self and an improved self-esteem?
- How can life design counselling techniques be incorporated successfully in a group setting?
- What are the values and limitations of the newly developed group-based life design intervention programme?

1.4.3 Research hypothesis

The following broad research hypothesis was formulated for my research project:

A clearer sense of self can be facilitated through the use of life design counselling in a group setting. Some aspects of the intervention programme may be experienced as more useful than others by the participants.

1.5 Clarification of terminology

For the purposes of consistency, terms and key concepts used in this study will be clarified in the next section.

1.5.1 Adolescence

Adolescence is a transitional period between childhood and adulthood that encompasses vast changes within brain systems that parallel some, but not all, behavioural changes (Brenhouse & Andersen, 2011; Smith, 2016; Viner et al., 2012). It is often called the “storm and stress” period, because of the emotional turmoil that adolescents go through while moving from dependence to independence, autonomy, maturity and improved cognitive and behavioural control in order to establish an identity (Erickson, 1963; Geldard, & Geldard, 2004; Luna, Padmanabhan, & O’Hearn, 2010; Rattansi & Phoenix, 2009). For the purpose of this study, the emphasis will be on grade 11 adolescent girls (14 to 17 years of age) and activities that will presumably assist them in the process of identity construction.

1.5.2 Self

Gubrium and Holstein's (1994), as well as Nelson-Jones' (2011) idea of the self was that the self is inherent within each person. However, the postmodern belief of Savickas (2012) and Maree (2015) that an essential self does not exist, and rather that the self is formed by conceptions and perceptions of the self, is more pertinent. This hermeneutic approach

regards the self as dialogical, interpersonal, relational, interdependent, and self-interpreting (Thrift & Amundson, 2015).

1.5.3 Sense of self

According to Maree and Molepo (in press) the sense of self reveals who the person believes he or she is. The sense of self refers to various facets of a person's subjective and objective, personal (including career) and social identity, and includes the maintenance and furtherance of the person's life script." In the narrative context, development of the sense of self takes place when people take a look at, and think about, the "me" (Savickas, 2011).

1.5.4 Self-esteem

Self-esteem is described as a person's positive or negative attitude towards him- or herself. It includes self-respect, self-worth, and faith in one's own capacities (Savickas, 2012; Senormancı et al., 2014). Self-esteem can therefore be seen as the evaluative aspect of the self.

1.5.5 Identity construction/self-construction

Constructing an identity is a lifelong process that involves the ability to make meaning of past experiences in relation to the individual's own present and future (Nota et al., 2015). The identity construction process includes defining who one is, what one values, what direction one wishes to pursue, as well as preparing for adulthood (Bester & Quinn, 2010; Rattansi & Phoenix, 2009; Savickas, 2012). According to Hirschi (2010) identity construction is largely influenced by the adolescent's physical appearance, cognitive ability, interpersonal relationships, and interaction within the wider social context. Adolescents purposefully explore and choose activities that will assist them in gathering information about themselves. By getting answers about themselves and telling their own stories, adolescents construct their own identities and gain a feeling of control, which enables them to direct their own lives. Identity construction integrates personal development, the realisation of personality attributes, life stories, and the developmental process in general (Maree & Fernandes, 2003; Savickas, 2012; Usinger & Smith, 2010).

1.5.6 Narrative identity

Narrative identity is the internalised story of the self that people develop to provide a sense of purpose and unity (Adler et al., 2015; Gerryts, 2013; McLean & Breen, 2009). People can enhance the process of identity construction by constructing and telling stories about their life experiences. Narrative meaning-making has been proposed as one of the major

processes by which identity is constructed (Adler et al., 2015; Manczak, Zapata-Gietl, & McAdams, 2014; Symington, 2015). These narratives connect the reconstructed past to the perceived present and steer people towards an anticipated future. A meaningful life story is a critical component for a happy and healthy life (McLean & Mansfield, 2012).

1.5.7 Peer support

Traditionally peer support is seen as an interactive process activated by people's naturally occurring tendency to seek support, help, and advice from social resources available in their immediate environment (Lekka, Efsthathiou, & Kalantzi-Azizi, 2014). Different types of peer support programmes exist (Wroblewski, Walker, Jarus-Hakak, & Suto, 2015). The peer support programme described in this study takes place in an independent senior girls' school context. The peer support programme is a well-organised, voluntary selection programme with a dual focus. Firstly, the psychologist's focus is on the training and personal development of the selected Grade 11 peer supporters, and secondly, the peer supporters' focus is on proactive support to the group of Grade 8 or 9 learners entrusted to them.

1.5.8 Independent girls' school context

The school where this study will be conducted is not a government school, but falls under the Independent Examinations Board (IEB). The IEB provides an alternative voice on curriculum and assessment matters, contributes positively to debate on educational issues and provides an approach that ensures that independent schools are accommodated in respect of their needs and desires within the South African education framework (<http://www.ieb.co.za>). This specific school is a school for girls only. Single-gender schools exist because boys and girls are not seen as a uniform group (Archard, 2012). Some authors, like Nilsen, Karevold, Røysamb, Gustavson, and Mathiesen (2013), and researchers (Forbes & Lingard, 2014; Park, Behrman, & Choi, 2013) have reported the benefits and positive outcomes of single-gender schools, while others (Delfabbro, Winefield, Anderson, Hammarström, & Winefield, 2011; Dollison, 1992; Spielhagen, 2011) did not find single-gender schools to be beneficial. Mansfield (2013) reports on the different views and the debate regarding the pros and cons of single-gender schools. Promising (positive) results at single gender schools are particularly evident in girls' academic achievement, attitudes towards gender roles, self-esteem, and career aspirations (Park et al., 2013). Rogers (in Spielhagen, 2013) found substantial differences in classroom climate, instructional presentation, students' questioning/learning behaviour, and students' attitudes in single-gender classes.

1.5.9 Resilience

From a systemic point of view, resilience can be defined as the complex product of the interaction between personal characteristics and external environmental circumstances that absorb or buffer the effects of undesirable, at-risk situations, which may otherwise lead to negative outcomes (Prince-Embury, 2011; Worsley, 2014) According to Fine and Sung (2014) the dynamic resilience process encompasses a behavioural as well as a psychological manifestation of positive adaptation within the context of significant difficulties. The focus is on healthy and positive characteristics that help bring about positive outcomes, or reduce negative outcomes.

1.6 Research design and methodology

This study uses a parallel, interactive, multi-method design, embedded in an intervention framework. In the next section, a brief overview of the intended research design is provided. Further detail regarding the research methodology, data collection techniques, and data analysis strategies, will be explained in detail in Chapter 3.

1.6.1 Mode of inquiry

This research project represents a multi-method mode of inquiry: quan + qual. The abbreviations indicate that both qualitative as well as quantitative methods will be used. The plus sign (+) signifies the simultaneous collection of qualitative and quantitative data. The fact that both are written in lower-case letters indicates that equal priority will be given to both orientations.

1.6.2 Sampling, data collection, and research sites

Data will be gathered from the 24 selected female Grade 11 peer supporters. All these girls attend an independent girls' school. For the purpose of this study, non-probability sampling within a convenient setting (namely the private school where the researcher works as an educational psychologist) will be implemented (Baker, Brick, Bates, Battaglia, Couper, Dever, Krista, Gile, & Tourangeau, 2013; Maree & Pietersen, 2012). Purposive sampling will take place, as the researcher will set specific boundaries in order to support the purpose of the study and the research questions (Palys, 2008; Van Hoeven, Janssen, Roes, Koffijberg, 2015). The selection process for the 24 peer supporters will be conducted in exactly the same way as has been done in the past, in order to make sure that the criteria relevant to the research are assessed. This will enhance the generalisability of the findings to other peer supporter groups.

The researcher will implement life design intervention with a group of 24 pre-selected (by the previous year's peer supporters) Grade 11 peer supporters from an independent girls' school. The whole group will be given the opportunity to participate voluntarily in the group research project. Instructions and explanations will be given to the whole group by the researcher. Thereafter the participants will be divided randomly into three groups of eight, thus providing for the opportunity to reflect on each activity. Two other psychologists trained in life design counselling will be present, thereby allowing each group access to a psychologist.

The data collection plan will follow a predetermined sequence of events, as recommended by Maree and Van der Westhuizen (2009). The table that follows reflects the sequential steps of the data collection plan, as well as the planned activities and research sites.

Data collection sequence	Planned activities/ techniques	Research Site
Step 1	Advertise for membership of the Grade 11 peer support group for the following year	Advertise at the school and send an invitation for application emails to all Grade 10 learners
Step 2	Interviews conducted by present peer support group for the next year's members	At the school
Step 3	Individual interviews conducted by the researcher with each girl that has been selected to be a peer supporter	At the school
Step 4	Administration of tests: CAAS and RSCA	At the school
Step 5	Qualitative data collection during intervention sessions: the peer supporters will reflect by writing in journals after each intervention session	Six sessions will take place at Zwartkloof Nature Reserve where intervention sessions will be held over a weekend. The last three sessions will take place at school over a two-month period. Qualitative data will be collected after each session. Journal reflections will be used.
Step 6	Administration of tests: CAAS and RSCA (three months after initial testing)	At the school
Step 7	Administer informal questionnaire with open-ended questions. Written answers will be given by the participants.	At the school

Table 1.1: Data collection plan

1.6.3 Data collection and analysis

For this research project, qualitative and quantitative data will be collected simultaneously and will then be integrated to provide a comprehensive analysis of the research problem (Creswell, 2014). The *Career Adapt-Abilities Scale (CAAS)* (Savickas & Porfeli, 2012), and the *Resiliency Scales for Children and Adolescents (RSCA)* (Prince-Embury, 2008) will be administered and then analysed. Certain qualitative approaches, such as interviews and journal reflections, will also be incorporated. A multi-method data collection plan will thus be employed.

1.6.3.1 Collecting and analysing qualitative data

The purpose of qualitative data collection is to obtain understanding and knowledge about a specific phenomenon and includes theory, as well as hypothesis (Myburgh & Poggenpoel, 2007). In the qualitative data gathering process, priority will be given to qualitative data emphasising the exploration and development of the sense of self of each participant. Different methods of qualitative data collection will be used in phases, as described below.

- **Collective data collection:** narrative data collection involves a survey in order to obtain group data by means of open-ended questions. This will be included in order to make explanatory assertions about the group, as motivated by Archard (2012).
- **Pre-intervention, individual, semi-structured interviews:** consisting of open-ended questions focusing on life design themes.
- **Observations:** by the three psychologists.
- **Educational-psychological intervention:** the planned activities executed by the participants will be utilised as qualitative data sources, together with the other data.
- **Journal entries:** after focus group discussions, each participant will be asked to reflect by writing in a journal.
- **Post-intervention questionnaire:** consisting of open-ended questions to be answered by the participants after the nine intervention sessions. The questions in this questionnaire will be related to the questions in the first questionnaire⁴.

⁴ Both the questionnaires and the planned observation schedule are included in the annexure.

The specific scientific process of data analysis, according to a combination of the plans by Braun and Clarke (2013), Creswell, Plano, Clark, Gutmann, and Hanson (2003), and McMillan and Schumacher (2014), will be explained in detail in Chapter 3.

1.6.3.2 Collecting and analysing quantitative data

For the purpose of this study, quantitative data will be gathered by means of the following two tests:

- *Career Adapt-Abilities Scale (CAAS)* (Savickas & Porfeli, 2012)
- *Resiliency Scales for Children and Adolescents (RSCA)* (Prince-Embury, 2007)

In the statistical analysis of the quantitative data, the researcher will make use of the Wilcoxon signed-rank test. This method will also be validated and explained in Chapter 3.

1.6.4 Quality assurance, including validity and reliability

Quality assurance refers to consistent research results, even if said research is conducted by different researchers, or obtained at different times to the present research project (Maree & Van der Westhuizen, 2009). The decision to implement mixed methods research was made with the knowledge that the process will be tedious and time consuming (Scammon et al., 2013). In spite of the complexity of the processes and the extensive logistics involved in identifying and collecting data from diverse sources, the researcher decided on mixed methods research in order to enhance and increase the trustworthiness, triangulation, crystallisation and credibility of the research project (Clark & Creswell, 2011; Maree, 2012; Maree & Van der Westhuizen, 2009; Nieuwenhuis, 2010). Ensuring and verifying the quality of the data is important to the researcher. Both instruments, as well as the means of data interpretation, will be discussed in detail in Chapter 3. Data will be interpreted according to standard protocol so as to ensure that the outcomes achieved are facilitated and moderated by the intervention sessions only (as far as is attainable and viable), and not influenced by other factors.

1.7 Role of the researcher

The researcher will have to conduct interviews, administer and score tests, make observations, fulfil the role as a facilitator during the intervention process and make interpretations regarding qualitative as well as quantitative findings. According to Nieuwenhuis, (2010) the researcher's role may be different during qualitative and quantitative research. Due to the mixed method nature of this study, the researcher will

therefore have to be flexible in terms of fulfilling a more objective role during quantitative research, and a more subjective role during qualitative research. The role of the researcher will be discussed in more depth in Chapter 3.

1.8 Ethical considerations

Caruth (2013) emphasises the fact that ethical considerations that pertain to quantitative and qualitative research methods, also pertain to mixed method research designs. Qualitative studies require researchers to obtain permission, protect anonymity, avoid disruption of sites, and communicate the purpose of the study accurately to participants, while qualitative studies require aspects like clear and accurate communication about the purpose of the study, the avoidance of deceptive practices, respect for the participants, awareness of and correct managing of potential power concerns, and confidentiality (Caruth, 2013). The ethical steps that will be followed and guidelines that will be adhered to, (as specified in the Ethics and Research Statement of the Faculty of Education of the University of Pretoria and The Professional Board for Psychology) will be discussed in more detail in Chapter 3.

1.9 Contributions and limitations

The researcher believes that this study will contribute to the effective support of more adolescents in their journey towards the discovery of a sense of self. It will be cost effective, as it is a group project. Life design counselling is not restricted to a specific group or race. This is a developmentally appealing method, which facilitates a process that encourages self-exploration in adolescents, and which may lead to better understanding and increased knowledge of the self. These are important prerequisites for enabling adolescents to set realistic and well-informed future goals.

The following limitations may arise during the study:

- Learners may not be willing to participate in the study.
- Participants may withdraw from the study.
- Participants may request that specific information not be used or published.
- Participant attendance may be inconsistent.
- Only a small group of female participants from one private school will be surveyed in this study.
- Only people trained in life design counselling techniques will be able to use the programme effectively.

1.10 The structure of the thesis

Underpinned by different theoretical perspectives, this study will explore the impact of life design counselling on the sense of self of adolescent peer supporters. The lay-out will be as follow:

- Chapter 1:** Orientation to research study.
- Chapter 2:** Literature review
- Chapter 3:** Research design and methodology
- Chapter 4:** Results of the research
- Chapter 5:** Discussion of the results

CHAPTER 2 LITERATURE REVIEW

“We are each made for goodness, love and compassion. Our lives are transformed as much as the world is when we live with these truths.”

-Desmond Tutu-

2.1 Introduction

In this chapter the researcher endeavours to explain the theoretical framework and to explore and describe different important concepts, which will form part of the theoretical background of this research project. These concepts all form part of the content of the study and will each be discussed within the context of the relevant literature. This will be followed by a conceptual framework.

2.2 Theoretical framework

According to Sinclair (2007) a theoretical framework can be thought of as a map or travel plan that will guide the researcher through the research process. The theoretical framework provides orientation for the research study and anchors the research in relevant literature (Henning, Van Rensburg, & Smit, 2008). The selected theories can also be applied in the research approach (Athanasou, Mpofu, Gitchel, & Elias, 2015; Maree & Van der Westhuizen, 2009).

Theories centred on the quantitative paradigm are based on developmental paradigms and can be measured and predicted, while theories based on the qualitative paradigm aim to understand how people make sense of their lives and attribute meaning to their experiences (Merriam, 2014). Meanings are constructed by human beings while interacting with the world they live in, guided by neurological, psychological and emotional development. Findings are described and interpreted by the researcher (Merriam, 2014). The research undertaken during this study shall draw on theories from both paradigms, as they are seen as intertwined and interdependent in the development of the sense of self.

2.2.1 Positive and strength-based psychology

The field of positive psychology is about appreciating past experiences, flow, contentment and happiness in the present, and hope and optimism for the future (Seligman & Csikszentmihalyi, 2000). Positive psychology has enhanced understanding of how positive

feelings and flexible cognition can improve people's resilience (Domínguez, Bobele, Coppock, & Peña, 2015). It focuses on the improvement of well-being, emotional intelligence, resilience, positive self-esteem, as well as the self-actualisation of people (Bar-On, 2010; Jones-Smith, 2014; Thompson, Peura, & Gayton, 2014).

Strength-based psychology asserts that people are the heroes of their own lives, and that a positive mind-set is a key factor in experiencing success. This theory focuses on what people want, rather on what they do not want in their lives, as "the internalized stories we tell ourselves about ourselves can lead us toward either strength recognition or weakness recognition" (Jones-Smith, 2014, p. 13). Positive psychology's strength-based perspective is particularly resonant in the current context where the researcher prefers focusing on what people can do and use in order to deal with life, rather than what they lack. All individuals are regarded as the stewards of developing their own strengths to the benefit of not only themselves, but also to the benefit of others. This can only be actualised when people have a clear sense of self, as this provides an internal consistency regarding who they are and gives deeply personal meaning to their lives (Jones-Smith, 2014).

2.2.2 Theories related to adolescent development

To put research in perspective, it is important to study the adolescent phase from a developmental point of view. Looking at where and how the adolescent phase fits in within a full lifespan may highlight specific life course changes, needs, questions and social patterns significant specifically to adolescence (Crosnoe & Johnson, 2011; Johnson, Crosnoe, & Elder, 2011). Neurological changes associated with the adolescent phase will be discussed.

2.2.2.1 *Neuro-development*

Magnetic resonance imaging (MR) **studies** show that the adolescent brain is a unique entity that differs from the child and adult brain. The adolescent brain is characterised by an increase in networking between brain regions, which leads to an increased ability to adapt in response to the environment. This neuroplasticity of the brain allows adolescents to make enormous strides in thinking and socialisation (Giedd, 2015; Zelazo & Carlson, 2012). Improved thinking and social skills are enhanced by improved cognitive function, such as decision-making skills, which depends on development in the prefrontal cortex and the refined dopamine secretion that happens during adolescence (Mastwal et al., 2014; Tseng & O'Donnell, 2007).

The plasticity of networks linking brain regions is key to eventually behaving and thinking like an adult. Understanding the development of these networks, and the incomplete maturation

of the prefrontal cortex during adolescence, can help the researcher to understand adolescents better, as well as the importance of proactive intervention during this important developmental phase.

2.2.2.2 Identity development

One of the earliest theories of identity was developed by Erik Erickson. He distinguished between ego identity (personal differences that distinguish the individual from others) and social identity (Erickson, 1977). Based on Erickson's theory, the self was seen as constructed by social interaction with other people (Bush, Ozkan, & Passmore, 2013). Erikson's theory of psychosocial development encompasses the whole lifespan. Because all humankind shares similar physiological development, and because the stages of ego growth are based on this common physiological substrate, Erikson's theory is assumed to be cross-culturally relevant. Every stage receives a specific ego strength legacy from prior stages, and makes a contribution to succeeding stages (Marcia, 2014). Ego growth and identity development occur when adolescents start negotiating the life cycle journey as they reach the physiological, cognitive, and social levels of development that they expect of themselves to bridge the gap between dependent childhood and mutually interdependent adulthood (Marcia & Josselson, 2013). Savickas et al. (2009) speak of a specific life trajectory in which individuals progressively design and build their own lives.

2.2.3 Person-centred theory

The foundation of the person-centred theory of Carl Rogers is the concept of an inborn tendency in human beings to develop their capacities in ways that serve to maintain or enhance their existence (Rogers, 1951; 1959; 1977). The tendency to develop as a person is described as an instinctive motivational power aimed at autonomy, the extension of their own effectiveness, and constructive social behaviour (Joseph, 2004). The person-centred approach is informative when detecting and describing the mechanisms and processes of development, and emphasises the transactional nature of development (Forthun et al., 2006). In the client-centred tradition the therapist is only the facilitator, as clients are seen as individuals who ought to seek their own meaning, find their own solutions to problems, and to choose their own direction in life (Joseph, 2004; Rogers, 1959). The client-centred theory therefore lends itself well to this project, focusing on the awareness of the self, personal development, and the enhancement of the sense of self.

2.2.4 Personal constructivism or personal construct theory (PCT)

Personal construct theory (PCT) originated with the pioneering work of George Kelly, who proposed that people organise their experiences by developing personal constructs (Chen, 2015). Personal constructs are created by people when they reflect on their own life stories, advise themselves and design and construct successful lives (Maree, 2013). These personalised meanings attributed by the individuals are used to anticipate and predict how people might behave towards them. They continually test their personal constructs by tracking how well they predict life circumstances and by revising their predictions when it is found that they were incorrect (Raskin, 2002).

2.3 Theoretical concepts

2.3.1 Adolescence

Within the field of psychology, adolescence is seen as a period of '*Sturm und Drang*' (storm and stress) (Arnett, 2012). This phrase was imported into psychology from German literature in the late 1880s by Hall, who is usually credited with the 'discovery' of adolescence (Griffin, 1993).

Adolescence is usually seen as a period encompassing anti-social conduct, but also a time of self-exploration with respect to interpersonal goals. There is a sensitivity towards social involvement, and adolescents portray a need for companionship, and acceptance by peers. Time spent with peers increases and becomes the primary social context that impacts adolescents' social development, as they tend to rely on peers to gratify their social needs (Trucco, Wright, & Colder, 2014).

Adolescence is further described as a time of intense emotional turmoil, and the psychological notion of an identity crisis (Ritchie et al., 2013). As adolescents develop more sophisticated abstract thinking skills, they show an increased preoccupation with understanding the self. They tend to focus more on their own multifaceted personality traits, and work actively to gain autonomy and organise their own personalities and lives (Trucco et al., 2014).

Meeus (2016) challenges the tendency to think of all adolescents as going through the adolescent phase at the same time and in the same way. Campbell and Simmonds (2011), as well as Mandarino (2014), also remind their readers that not all adolescents exhibit the same behavioural patterns, and that the process of moving from adolescence to adulthood has become longer, more complex, and less orderly in the modern world. These changed

patterns in adolescent development are due to the fact that adolescents' independent behaviour in terms of separating from, and becoming less dependent on their parents, have changed over the last 50 years (Mandarino, 2014). Longer periods of being dependent on their parents have also had an influence on adolescents' identity formation and sense of self (Mandarino, 2014).

Taking these changed perceptions of adolescence into consideration, the researcher will carefully look at neuro-scientific explanations that have been proposed for typical adolescent behaviour, and will give an overview of certain important aspects of the present developmental phase of the participants, namely adolescents. A need exists to use scientific evidence of typical adolescent development and characteristics in order to place the adolescent developmental phase into context, and to support the research project in deriving appropriate methods for assisting the participating adolescents in the research group. Knowledge of the adolescent phase will further highlight the reason for choosing life design counselling as an intervention method for this study.

2.3.1.1 Definition of adolescence

The concept of adolescence is relatively modern, as it was only developed during the industrial revolution in the nineteenth century when child labour was no longer allowed, and compulsory elementary education was introduced (Elgabalawi, 2015). Adolescence became, and was defined as, the period of life that starts with the beginning of puberty and ends when an established and independent role in society is attained, along with a stable role as an adult (De Pasquale, Pistorio, Tornatore, De Berardis, & Fornaro, 2013; Dumontheil, 2015; Elgabalawi, 2015).

Although adolescence frequently occurs concurrently with puberty, adolescence must not be confused with puberty. Some changes in the adolescent brain develop independently from hormonal changes associated with puberty. Puberty is a biological phenomenon and refers to the attainment of sexual maturity due to an increase in adrenal and gonadal hormones, and is defined in terms of neuro-endocrinological and physiological terms, while adolescence represents the transitional period between childhood (10/11 years of age) and adulthood (19/20 years of age) (Berk, 2013; Elgabalawi, 2015; Jaworska & Macqueen, 2015).

Adolescence can be described as the final phase of a prolonged period of growth and maturation, during which individuals seek and formulate a clearer and more established self-concept and identity in order to enhance their social integration (Rattansi & Phoenix, 2009; Umana-Taylor, 2016). During this second decade of life, a caring and stimulating environment can have a huge impact on adolescents' well-being while they are actively

involved in the establishment and nurturing of peer relationships, the development of an individual identity, an improved sense of self, a future perspective, independence, self-confidence, self-control, and social skills.

2.3.1.2 *Brain development and typical adolescent behaviour*

The brain consists of three main parts, which will be discussed later in more detail. It is now known that significant development occurs in the adolescent brain in the grey and white matter, and that different brain regions mature at different rates and with differing trajectories. The evolutionary older parts of the brain, such as the brain stem and limbic system, mature in a simpler, more linear trajectory than the regions that evolve later, such as the neocortex. The brain regions that are last to mature are those responsible for complex human behaviour (Sebastian, 2015).

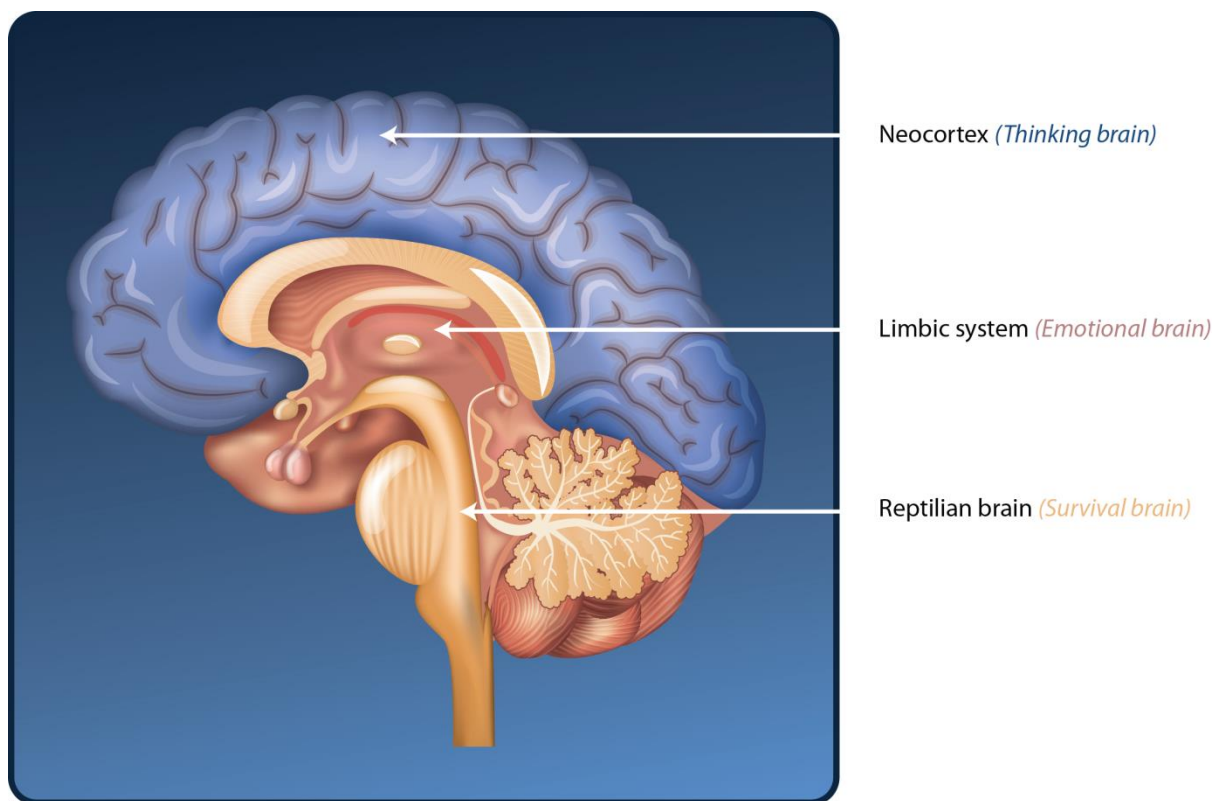


Figure 2. 1: The three main parts of the brain

The brain stem or 'reptilian brain', is situated between the cerebrum and the spinal cord and consists of the midbrain, pons and medulla oblongata. The brain stem provides a pathway for tracks running between higher and lower neural centres and is responsible for the governing and activation of automatic, instinctive behaviour related to survival. It stimulates fight, flight, freeze or 'flock together' reactions (Cole & Knowles, 2011; Miller & Kurtcuoglu,

2011). During stressful or traumatic events, these functions are affected, and the memory of the trauma gets stored in the brain stem (Porges, 2011).

The mammalian brain, or limbic system, is a complex set of brain structures located on both sides of the thalamus and under the cerebrum. It includes the amygdala, hippocampus and hypothalamus, all of which are jointly involved in a variety of functions, including behaviour, motivation, long-term memory, and emotions. The emotional life (largely situated in the limbic system) of human beings can trigger strong feelings like rage, fear, separation, distress, nurturing, social bonding and caring.

While the dorsal cortical networks of the limbic system are involved with the handling of external stimuli, the ventral cortical networks of the limbic system control internal emotions and separate attention and self-regulation from the immediate influences of the context, particularly when the adolescent feels threatened or stressed (Tucker, Poulsen, & Luu, 2015). During challenges, the amygdala communicates with the hypothalamus, which triggers cortisol (a stress hormone), which can flood the prefrontal lobe. When the sensory system is insufficiently matured, this flooding can result in limited rational thinking. As not enough mammalian learning has usually taken place in the adolescent dual limbic system, and decisions are guided by emotions, this flooding can result in irrationality and insufficient flexible behaviour (Lagercrantz, 2015; Tucker, Poulsen, & Luu, 2015).

The neocortex (or rational brain) forms about 85% of the brain. Imagination, problem solving, reasoning and reflecting, as well as self-awareness, empathy and kindness originate here (especially in the prefrontal section). The neocortex also controls higher-level functions like sensory perception, the generation of motor commands, spatial reasoning, conscious thoughts, and language processing, which includes logical and creative thinking skills (Cole & Knowles, 2011).

The fundamental reorganisation of the brain that takes place in adolescence may lead to a characteristic increase in emotional instability and inconsistency, increased risk-taking and diversion-seeking behaviour, as well as the onset of psychological disorders such as depression and anxiety or conduct disorders in many adolescents (Duell, Icenogle, & Steinberg, 2016; Jaworska & Macqueen, 2015; Mewton et al., 2015). Most recent studies indicate that typical adolescent impulsivity and risky behaviour are also due to the mismatch between the maturation of the limbic system's networks (which drives emotions and becomes turbo-boosted in puberty) and the maturation of networks in the prefrontal cortex: this occurs later and promotes sound judgment, represents goal identification and the means to achieve these, establishes the proper mappings between inputs, internal states, and

outputs needed to perform a given task, and controls impulsive and risky behaviour. This imbalance in maturation rates may also account for other noticeable changes in adolescents in terms of behaviour, cognitive development, physical, hormonal, psychological, social, neuro-endocrine, as well as socio-emotional development (Giedd, 2015a; Handy et al., 2016; Keshavan, Giedd, Lau, Lewis, & Paus, 2014; Mier et al., 2010; Miller & Cohen, 2001; Vetter, Altgassen, Phillips, Mahy, & Kliegel, 2013).

Dumontheil (2015) confirms an increase in the onset of psychological disorders and reports that 75% of adult mental disorders (such as anxiety and mood disorders, schizophrenia, impulse-control and substance-abuse disorders) have their onset during adolescence. Dumontheil (2015) further identifies suicide due to depression as one of the leading causes of death in adolescents. In Germany, 62% of all deaths among persons aged 15 to 20 are due to traumatic injuries, which confirms adolescents' typical risk-taking behaviour (Konrad, Firk, & Uhlhaas, 2013). These findings highlight the vulnerability present during the adolescent phase.

It should be noted, though, that the brain is "a plastic, fluid, and ever-changing electrical/chemical/structural system that generates new synapses and neurons and discards old ones in response to sensory input from changes in the environment" (Scaer, 2005, p. 16). Neuroscientific research has identified the child and adolescent phase as a significant period of neuroplasticity. The adolescent phase has been described as "a second window of opportunity in brain development" (Fuhrmann, Knoll, & Blakemore, 2015, p. 558). The significance of the plasticity of the brain during the adolescent phase means that environmental stimulation is highly influential. The limbic plasticity causes a vulnerability, but also provides an opportunity for increased maturation through external environmental stimulation, for both motivation and memory consolidation mediated by the limbic systems (Schibli & D'Angiulli, 2013; Timbie & Barbas, 2014). Ultimately, effective neural communication and positive behavioural patterns will lead to effective management by the rational brain in the neocortex during challenging times (Ko & Woo, 2014). It is therefore of the utmost importance to intervene actively during the adolescent phase, while taking this specific developmental phase into consideration.

2.3.1.3 *Adolescence and well-being*

According to the World Health Organisation, psychological well-being is seen as a state during which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community (World Health Organisation, 2008). Barr, Budge, and Adelson (2016) in

their research evaluated 6 different aspects influencing well-being, namely self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth. Schulte et al. (2015) described well-being as a multifaceted construct that includes a person's perception of his or her own meaningfulness, sense of purpose, and value of life. Evaluating different definitions of well-being, It seems as if well-being entails the following:

- being able to cope
- self-knowledge and self-acceptance
- being able, productive, autonomous and purposeful
- make a contribution and has a purpose in life

A growing concern is being experienced worldwide due to the lack of significant well-being in children and adolescents (Proctor, 2014; Shoshani & Steinmetz, 2014) The situation regarding the well-being of young people in South Africa is also a concern, as many children are exposed to multiple risks that pose a threat to their emotional resources and well-being. These risks include poverty, familial conflict, single-parent households, exposure to violence, educational stressors (a lack of resources and poorly trained educators), the endemic problem of the human immunodeficiency virus (HIV) and the many children who become orphans as a result of HIV (De Villiers & Van den Berg, 2012).

Schools can play an important role in enhancing the well-being of learners. Schools are encouraged to create opportunities through which adolescents can be supported while actively constructing their own world views and their perceptions of who they are, while coming to conclusions about their own places within their social contexts. They need to gain insight about themselves and who they are, and built on their knowledge and perceptions from past experiences. Improved resilience needs to be part of such programmes (Furlong, You, Renshaw, Smith, & O'Malley, 2013; Renshaw et al., 2014).

Seligman (2011) introduced the PERMA model of five core elements that can be applied when looking at psychological well-being, namely positive emotions, engagement, relationships, meaning, and accomplishment (Kern, Waters, Adler, & White, 2015; Seligman, 2011; Slavin, Schindler, Chibnall, Fendell, & Shoss, 2012). The elements of the PERMA model, according to Seligman (2011), form the foundation for a flourishing life. A further advantage of using the PERMA model is that research shows that the above-mentioned aspects of well-being do not fluctuate due to gender, for children living in different types of households, or between different cultures (D'Raven & Pasha-Zaidi, 2016; Proctor & Lindley, 2013). There is also consistent evidence that people can enhance their levels of well-being

through intentional engagement in certain activities focusing on the enhancement thereof (Ferguson & Sheldon, 2013; Guse, 2014).

The five aspects mentioned in the PERMA model, as well as the additional element of resilience, will be discussed in order to improve understanding in terms of what the focus should be when enhancing well-being in adolescents. A sound knowledge about well-being will assist the researcher in her choice of activities to enhance it. Resilience has been added, as resilience has been mentioned by many authors as being an important aspect of well-being (De Villiers & Van den Berg, 2012; Guilera, Pereda, Paños, & Abad, 2015; Slavin et al., 2012).

2.3.1.3.1 *Positive emotion*

In order to experience well-being, people need positive emotions like happiness, hopefulness, peacefulness, love and a sense of connectedness in their lives, so as to feel energetic and revitalised. People need to feel good about themselves and thus must be able to use their talents, strengths and positive connections more often (Xavier, Cunha, & Pinto Gouveia, 2015). Savouring the good times (reminding oneself of pleasant and positive experiences and emotions) may also enhance well-being (Bryant & Smith, 2015). Slavin et al. (2012) recommend the implementation of school programmes to promote resilience and coping skills in order to enhance positive emotions.

2.3.1.3.2 *Experience*

The term 'experience' indicates a state of flow during which the individual perceives that time seems to stand still. It is a time of intense focus, and of being absorbed in an activity that is interesting and fulfilling to such a degree that the person is fully involved in the present. Being fully aware and in the moment, and positively experiencing the moment, are important aspects for living a happier life, and have been confirmed as having a positive effect on well-being (Guse, 2012; Guse, 2014; Jose, Lim, & Bryant, 2012; Kirsten & Du Plessis, 2013). Reflecting on such activities is also recommended in order to enhance the experience (D'Raven & Pasha-Zaidi, 2016).

2.3.1.3.3 *Relationships*

Meaningful and positive relationships with others are core to human well-being. Whittington, Budbill and Aspelmeier (2016) emphasise the importance of a relational culture, especially in fostering girls' resiliency. Their model proposes that psychological growth, the development of self-esteem, feelings of worth, strength, creativity, and resiliency occur within relationships with others when people are allowed to listen to and encourage one another. Research has

consistently proved that close relationships are positively associated with health and well-being (Bush, Ozkan, & Passmore, 2013; Gable & Gosnell, 2011; Peterson, 2013).

Schools are encouraged by Slavin et al. (2012) to implement programmes to increase opportunities for meaningful and productive relationships. Sibthorp and Morgan (2011) stress the importance of adult leaders in such group programmes, who can enhance a sense of relatedness by effectively modelling behaviour and monitoring the group's development. A sense of relatedness occurs when experiencing feelings of connectedness, trust and support in the group, and through being comfortable enough to cooperate and communicate and reflect on experiences (Lee & Ewert, 2013; Prince-Embury, 2011; Sibthorp & Morgan, 2011). Research has shown that feelings of connectedness within a group can serve as an important component for developing resilience in girls between the ages of 13 and 17 years (Jordan, 2013).

2.3.1.3.4 *Meaning*

Meaning comes from serving a cause or focusing on something bigger than ourselves (Seligman, 2011). Most people want to be involved in activities with a greater purpose. These activities may be focussed on religious faith, community work, family, politics, a charity, or may have a professional or creative goal (Seligman, 2011). Altruistic behaviour towards others increases well-being and this is true across cultures (Guse, 2014; Proyer, Wellenzohn, Gander, & Ruch, 2015). Researchers agree that acts of kindness do not have to be financial or financially dependent, but can entail time spent with people, or time invested in other people's lives (Guse, 2014).

To make the investment in other people's lives more meaningful, individuals need to be involved in a personal, chronometric (or lifespan) meaning-making process: factors related to the individual's own sense of meaning and purpose (Wolf, Thompson, & Smith-Adcock, 2012). Autobiographical memories can be used to support adolescents in acquiring an understanding of the narrative construction of their own identities (McLean & Mansfield, 2012).

2.3.1.3.5 *Accomplishment/achievement*

Many people strive to better themselves in some way. They may seek to master a skill, achieve a goal, or win a competition. Well-being is enhanced by taking small but steady forward steps and is less about the goal itself than the action of striving towards a goal. Accomplishment can come from devoting time and energy to what is meaningful, or celebrating each small new achievement (Kern et al., 2015; Furlong et al., 2013).

2.3.1.3.6 *Resilience*

The concept of resilience has received considerable attention and has been extensively debated and defined over the past four decades, since researchers observed that children and youths could cope and adapt in spite of adversity (Ahern, Ark, & Byers, 2008; Guilera, Pereda, Paños, & Abad, 2015; Whittington, Budbill, & Aspelmeier, 2016). Resilience is often associated with difficult periods of transition, adversity, or during disaster.

Ahern, Kiehl, Lou Sole and Byers (2006) compared more than 22 articles on resilience, and in the end defined resilience as a combination of traits influenced by both external and internal factors. Resilience is seen as the ability to respond positively and to cope when faced with challenges, stressors and adversity, and to achieve success, despite disadvantages. Resilient adolescents can therefore be described as young people who are emotionally healthy enough to cope with challenges, obstacles and set-backs. They exhibit a positive self-esteem, a positive sense of self and a strong sense of worth, confidence in their own abilities (self-efficacy), an internal locus of control, the ability to set realistic goals, good problem-solving skills, and the ability to cope by possessing a sense of humour, displaying hopefulness and a balanced perspective (Whittington et al., 2016; Whittington, Mack, Budbill, & McKenney, 2011). Although certain aspects of the temperament, aptitude and behaviour are determined by genetics, the environment (and specifically the presence of nurturing) has a significant effect and can create resilience to support people in times of need (Cole & Knowles, 2011; Cooper & Cefal, 2009).

2.3.1.4 ***Adolescence and the neuroscience of well-being***

The brain contains millions of nerve cells, called neurons. Neurons connect through synapses to form complex networks or neural pathways. The neural system, circulatory system, and lymphatic system are actively involved in brain communication. Messages are conveyed via the neural pathways with the help of specific hormones or chemicals, called neurotransmitters. Neurotransmitters either relay action potentials or modulate this process (Keshavan et al., 2014; Gerhardt 2004; Sunderland 2007). The availability of safe and non-invasive neuro-imaging methods (Magnetic resonance imaging or MRI) during the last sixteen years has revolutionised neuroscientific knowledge. It is important to take note of the following findings regarding the functioning of neurotransmitters in our quest towards a better understanding of adolescent emotional well-being (Sebastian, 2015).

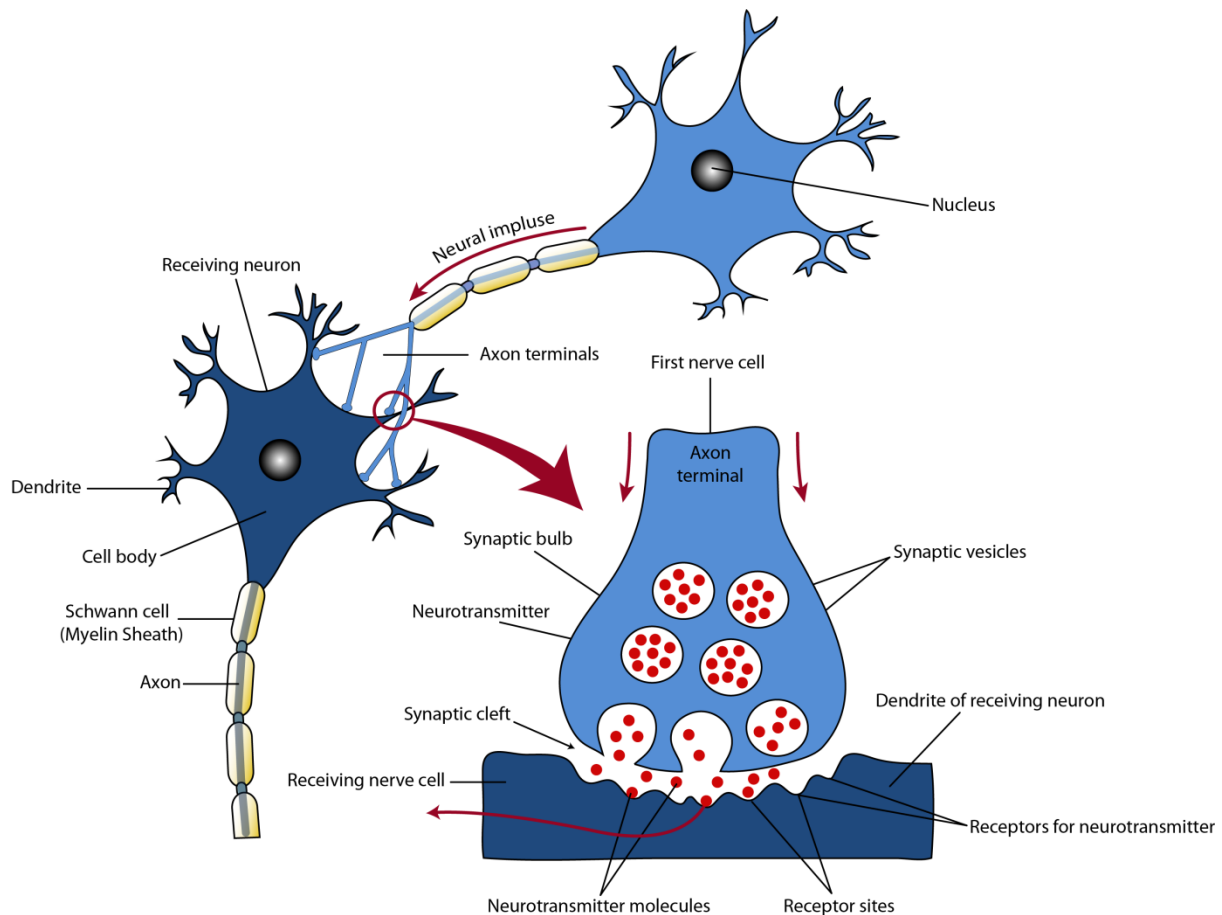


Figure 2. 2: Functioning of neurotransmitters in the brain

- **Dopamine**

Dopamine controls arousal levels in many parts of the brain and is vital for physical motivation and for regulating fear. Dopamine neuron activity elicits more dopaminergic axons in the frontal cortex, and suppresses psychomotor activity in the individual. These changes have proven to result in lasting structural, as well as functional changes in the meso-frontal circuit. Deficiencies in this circuit are associated with adolescent-onset psychiatric disorders. The meso-frontal dopaminergic circuit, which connects the midbrain motivation centre to the cortical executive centre, exhibits prolonged maturation throughout adolescence. Positive stimulation during adolescence (in contrast with stimulation during adulthood) can increase dopamine neuron activity. Adolescence has been identified as a sensitive phase for dopamine stimulation and input (Mastwal et al., 2014; McGowan & Roth, 2015; Paula, Messias, Grutter, Bshary, & Soares, 2015; Spear, 2000).

- **Noradrenaline**

Noradrenaline is the main chemical neurotransmitter of the sympathetic nervous system and is produced naturally by the body. Noradrenaline is responsible for physical and mental arousal, and is often referred to as a 'fight or flight' chemical, as it is responsible for the body's reaction to stressful situations. It excites and causes an alert mood by managing tonic and reflexive changes in the cardiovascular tone (Tucker et al., 2015). Noradrenaline normally produces effects such as increased heart rate, increased blood pressure, widening of pupils, widening of air passages in the lungs and narrowing of blood vessels in non-essential organs. This enables the body to perform well in stressful situations (Goldstein, 2010).

Social stress has particular relevance to adolescents, as adolescence is characterised by an increase in child–parent conflict, a search for autonomy, and a shift in social interaction from familial to peer relationships. The increased importance of social acceptance and activities, leads to an increased potential for unpleasant social interactions with the potential to elicit a stress response (Bingham et al., 2011). According to research done by Bingham et al. (2011), too many adverse events happening during adolescence, can have enduring consequences for the adolescent's mental health. A programme incorporating positive social interaction will therefore be beneficial for the adolescents' well-being.

- **Serotonin**

Serotonin is a major neurotransmitter, responsible for the regulation of social behaviour. Serotonin produces feelings of serenity and optimism when produced in large quantities, and is also known as the “feel good” chemical. It was proven by Paula et al. (2015) to be a neuro-modulatory driver of cooperative behavioural activities. It was also found that higher levels of serotonin were beneficial in complex and challenging situations as they accelerated effective decision-making processes (Iwanir et al., 2015).

During adolescence, the serotonin levels as well as the serotonergic neurotransmission in the brain decline due to increases in sex hormones. The decline in serotonin causes an increase in irritability, aggression, alcoholism and depression, all of which have a negative impact on the general and social well-being of adolescents if not managed properly (Eduardo et al., 2016; Paula et al., 2015; Thurlow & McKay, 2003). Ritchie et al. (2013) report on research results that have found that intervention focussing on identity processes, promote individuals' sense of

well-being. Activities promoting self-knowledge and an improved sense of self, result in reduced anxiety, depressed mood and aggressive behaviour.

As neurotransmitters are essential chemical messengers used by neurons in the brain to send and receive electro-chemical signals, these facilitators of good inter-system communication are responsible for regulating almost all cognitive, physical and mental activities. The optimal inter-dependent functioning of neurotransmitters are therefore of the utmost importance for well-being. The next figure will demonstrate the interdependence of the first three neurotransmitters that have been discussed. Their functioning and the effect of insufficient functioning on the well-being of adolescents will also be illustrated.

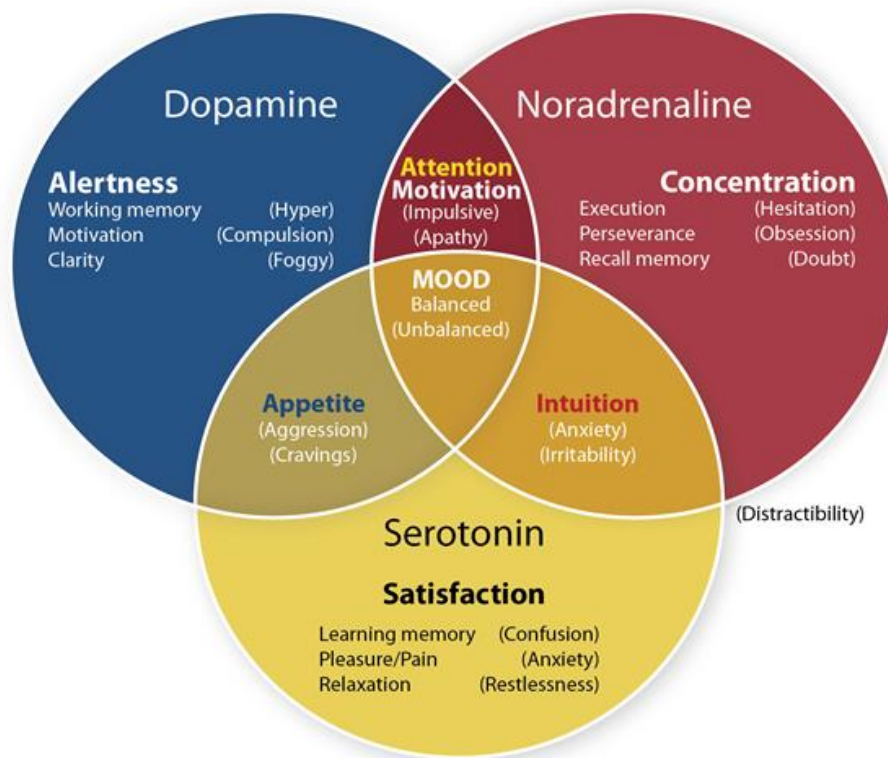


Figure 2. 3: The physiology of balanced and unbalance neurotransmitters

- **Oxytocin**

Oxytocin is released in the mother, particularly at birth and when breastfeeding, to help her bond with her child. Oxytocin has been implicated in nearly every social ability of the human adult, including empathy, trust, stress management, social memory, group cooperation, the need for further social interaction, and emotional facial recognition. These findings provide evidence for humans mastering social competencies via the system that underpins bonding; and for the fact that oxytocin induces a physiological state that affords participation in the world without fear, and stimulates the desire for social contact and affection (Feldman, 2015; Gerber et al., 2015; Meyer-Lindenberg, Domes, Kirsch, & Heinrichs, 2011).

Neural mechanisms underlying social behaviour reflect an array of neural circuits that are implicated in fundamentally different and dissociable functional brain processes, which evolve and adapt to the social demands of a given environment and a specific phase of development as needed. Although there is a developmentally specific timing for the learning of effective and acceptable social behaviour, the specific form of such expression is strongly moulded by experiences and environmental circumstances. Experiences in each phase are interdependent, and positive experiences during adolescence (a developmental phase during which social interaction with, and acceptance by peers is especially significant) can buffer or moderate the effects of strain on individuals' well-being (Nelson, Jarcho, & Guyer, 2014; Wallace, 2013).

- **Endorphins**

Endorphins have a similar effect to morphine and belong to the opioid peptide family. Endorphins are best known for reducing stress, promoting calm and modulating pain. These hormones are involved in affect, memory, cognition, reward, immunity, and respiration. They are produced and released when a person is lovingly touched by another caring person. When an individual does not experience acceptance and closeness, and is often shouted at, criticised or abused, the release of opioids and oxytocin is blocked. The body can then move into a state of hyper-arousal that will activate a mammalian-brain, aggressive response. Over time these responses can become patterns of behaviour that could be triggered by small incidents (Cole & Knowles 2011; Savic, Knezevic, Matic, Damjanovic, & Spiric, 2015). The benefits for adolescents who are included in a caring and accepting group are obvious, when taking the positive outcome of an increase in endorphin production and release in the brain into consideration.

- **Acetylcholine**

Acetylcholine is an organic neurotransmitter that functions in the brain and body and is released chemically by neurons throughout the nervous system. Signals are sent to other cells to activate muscles. As a neurotransmitter in the autonomic nervous system, acetylcholine is both an internal transmitter for the sympathetic nervous system, and the final product released by the parasympathetic nervous system to influence the way other brain structures process information. Acetylcholine plays an important role in arousal, attention, learning, memory, as well as motivation, since it controls activity in the brain. These learning-related skills are especially important during adolescence, as optimal scholastic achievement is very important to meet admission requirements at universities.

- **Nicotine**

During the adolescent phase, adolescents often experiment with the smoking of cigarettes. The addictive qualities of nicotine derive from its effects on nicotinic acetylcholine receptors in the brain, and nicotine responsiveness peaks over the course of adolescence. Both the addictive tendency and responsiveness in females develop more quickly, and peak earlier. Adolescent girls therefore develop nicotine dependence at a much faster rate than their male peers (Hursta, Rollemab, & Bertrandc, 2013; Kawai, Kang, & Metherate, 2011). Adolescent smoking increases the risk of long-term dependence (Breslau & Peterson, 1996; Mackesy-Amiti et al., 1997; Chen and Millar, 1998; Adriani et al., 2003).

Nicotine is well known for having serious systemic side effects, and numerous studies have consistently demonstrated nicotine as being the main cause of preventable cancers. In addition to being highly addictive, nicotine has adverse effects on the heart, reproductive system, lungs, and kidneys (Mishra et al., 2015). As adults' neurological systems are less responsive to nicotine addiction, adolescents must be supported in their journey towards adulthood, regarding who they are, what they want, and the choices they make.

- **Glutamate**

During early brain development, functionally immature synapses are eliminated, but how specific synapses are tagged for elimination during adolescence is unclear. Scientists speculate that the elimination of specific synapses might be related to their experience-dependent plasticity (Kerr et al., 2014; Keshavan et al., 2014; Sanchez, Wang, Rubel, & Andres, 2010).

The elimination of glutamatergic synapses is crucial to forging links between neurons upon which long term memory, and therefore learning, is built. The pruning of glutamatergic synapses further reduces the number of inputs from distracting stimuli, and therefore improves the person's ability to process selectively attended stimuli, and thus contributes to improved attention spans and cognitive functions during adolescence (Keshavan et al., 2014; Mastwal et al., 2014).

The frontal-limbic network interaction is driven by glutamatergic and dopaminergic neurotransmission. Frontal-limbic dysfunction underlies major psychiatric diseases starting during adolescence, and was not found in adults (Gleich et al., 2015). In research done by Gleich et al. (2015) the relevance of glutamate on the reward system, as well as on behavioural traits like impulsivity was also demonstrated in adolescence.

Impulsivity is seen as behaviour displaying urgency, acting before thinking, a lack of perseverance and sensation-seeking (Gott, 2014). In order to help adolescents with the inhibition of impulsive behaviour and increase well-being, desirable behaviour should be reinforced in a warm and caring environment. Adults should stay involved with adolescents, demonstrate appropriate behaviour, and look for opportunities to guide and support them. Ample opportunities for displaying positive behaviour should be generated, preferably with adolescent peers also involved in the process (Shoshani & Steinmetz, 2014). Schilder, Brusselaers, and Bogaerts (2016) recommend that schools implement preventative and intervention programmes focusing on individual differences, strengths, and skills development in order to minimise risky behaviour.

2.3.1.5 The neurology of changed perceptions

Neurons function as building blocks of the nervous system. Neurons are highly specialised so as to process and transmit information through electrical and chemical signals (De Beer, 2014). Signals to other neurons are transmitted via the axon through a synapse to dendrites

of neighbouring neurons (Herculano-Houzel, 2014). A synapse is the contact between the axon of one neuron and the dendrites and cell body of another neuron (De Beer, 2014).

When a neuron receives information, electrical activity activates the release of neurotransmitter chemicals, which are released in proportion to the strength of the incoming signal. The neurotransmitter chemicals spread into the dendrites of neighbouring neurons, thus forcing them to generate a new electrical signal. The input to the brain can be positive, leading to a positive self-esteem, sense of self and high emotional intelligence; or it can be negative. The latter will lead to a negative self-esteem, negative sense of self and a low emotional intelligence (Leaf, 2013). Because of the neuroplasticity of the brain, the physical structure and functioning of the brain can be changed by consciously redirecting thinking patterns into constructive beliefs, dreams, hopes and thoughts. Leaf (2013) states that 75% to 87% of mental, physical and behavioural illnesses develop as a result of negative attitudes. By assisting adolescents to change their thinking for themselves, the neuroplasticity of the brain can be used to their advantage, so as to engrave new and healthy thought processes in their minds. Thus, the neurons that do not encounter repeated negative or insecure thoughts, will start firing apart, wiring apart, and pulling out, and in so doing, will weaken the negative sense of self (Mier et al., 2010).

The high plasticity of the adolescent brain permits environmental influences to exert particularly strong effects on cortical circuitry. This makes intellectual and emotional development and improved well-being possible, if this critical phase is used to the advantage of the individual. In the researcher's opinion, this is exactly where the focus of the psychologist, therapist or counsellor needs to lie: assisting adolescents in finding new goals and perspectives (changed thinking) in terms of themselves, their life stories, and their expectations. Through changes in brain functioning and brain structures, a new positive sense of self should emerge.

2.3.1.6 *Adolescence and environment*

People's experiences influence the amount and nature of the neural pathways that are formed. Studies show that the adolescent brain is not an older child brain or an almost adult brain, but a unique entity characterised by changeability and an increase in networking among brain regions (Giedd, 2015). Although the early developmental years are crucial in the development of neural pathways, the fact that the brain continues to develop and that a second proliferation and pruning of the adolescent brain takes place, is encouraging in a therapeutic and/or educational milieu. This makes the adolescent receptive to compensatory

stimulation and re-interpretation of old experiences, which can counterbalance some of the effects of harmful childhood experiences (Cole & Knowles, 2011).

Environment plays a prominent role in shaping late synaptogenesis. This information is important, as the smooth flow of information throughout the brain depends largely on the structural integrity of white-matter pathways. Gains in cortical white matter improve the speed and efficiency of communication between the fronto-cortical circuits and other brain regions. As the frontal regions respond spontaneously to emotions, good communication is essential for impulse control (more mature behaviour) to be practiced, in a supportive and stimulating environment (Giedd, 2015; Giedd., Blumenthal, Jeffries, Castellanos, Hong, Zijdenbos, Paus, Evans, Rappoport, 1999; Sebastian, 2015).

Without stimulation and feelings of acceptance and love, the prefrontal lobes show less activity, with less blood flow and fewer neurotransmitters (like serotonin and noradrenaline) released, which causes an imbalance that tends to produce depression, for example, in mothers. The depression in mothers is likely to be mirrored in the child's brain and can therefore be passed on from generation to generation if not changed. In contrast, protected and loved individuals, who have caring and involved people in their lives, show healthy brain development. The neocortex becomes proficient at counteracting unpleasant feelings by releasing hormones (like endorphins) that will reduce stress and anxiety in these children and adolescents (Cole & Knowles, 2011; Handy et al., 2016).

Adolescence is therefore a very critical and sensitive period in terms of positive input and stimulation, resulting in a more affirmative mentality and an improved sense of self. Thoughts have remarkable power and scientists have established that the relationship between what people think and how they understand themselves (their beliefs, dreams, hopes and thoughts) have a huge impact on their brain function and can change the shape of the DNA of the brain. Making use of the adolescent plasticity of networks linking brain regions is key to these positive outcomes (Johnson, Jones & Gliga, 2015; Leaf, 2013).

2.3.1.7 *Adolescence and cultural and gender differences*

Studies of gender differences in different cultures might yield deviating results because of the different roles assigned to different genders in different cultures. In some cultures, women may be restrained to more domestic roles, whereas in others they may be encouraged to be competitive with men in all spheres of life, and unrestricted by traditional perceptions of women. These environmental differences in terms of upbringing might cause cultural variations in the personality traits between boys and girls, and make it important to be aware of research results, with regard to whether or not said results confirm that such

differences do exist. Although it is important to look at possible differences between genders and cultures, De Bolle, De Fruyt, McCrae and Lockenhoff (2015) emphasise the value and importance of cross-cultural studies.

The research of Santo et al. (2013) examined the structure of the self (self-concept, sense of well-being and self-worth) of participants in the phase of early adolescence (average age of 10). The results showed that boys' sense of self-worth was higher than that of girls; but that this was only true in co-educational schools, and the results changed as the place of research changed.

De Bolle et al. (2015) report on different studies in which gender has been systematically examined across a wide range of cultures. The results showed that the overall direction of patterns of differences between the two genders was similar in most cultures. Bleidorn et al. (2013) reported similar findings from their research conducted on a sample (aged 16-40) of 62 cultures. Similar results were also found by Soto, John, Gosling, and Potter (2011) in their research with participants between the ages of 16 and 40 from 62 different cultures. All these researchers reported that maturational changes in personality were similar across cultures, but that there were small but significant cultural differences in age effects on personality. They also reported that the adolescent phase is a key period in which gender differences for several personality traits tend to emerge, but that research on only the adolescent group was limited.

De Bolle et al. (2015) conducted a study that was the first to report on the gender differences of adolescents between the ages of 12 and 17. These researchers focused on personality traits across 23 cultures, and covered all populated continents of the world. They found that adult gender differences begin to appear in adolescence, and tend to develop both with respect to direction and degree during adolescence. Female adolescents attained higher scores on more traits than their counterpart adolescent males. These differences were found to be modest in magnitude, and were more general across cultures. With increased age (after the age of 14), the gender differences, related to assertiveness and achievement striving, became smaller. The differences between genders on the scales of anxiety, vulnerability and positive emotions became larger with age. These results are in agreement with the findings of Mewton et al. (2015), who found that female adolescents report higher mean levels of psychological distress than adolescent males. The extent of the gender differences in the different cultures was relatively small (with most gender differences smaller than one-quarter standard deviation and only few larger than one-half standard deviation) and was consistent with what is observed in adulthood (De Bolle et al., 2015).

2.3.1.8 Adolescence and peers

According to research findings, peer relationships are one of the most important features of adolescence (Nawaz, 2011; Vetter et al., 2013). Peers can have a profound effect on the health and well-being of their fellow adolescents. A meta-analytical review of 24 studies revealed a strong correlation between peer attachment and the sense of self and self-esteem in adolescents. This was found to be the case in terms of global peer attachment and self-esteem, but also in studies looking at specific dimensions of peer relationships, like communication, trust, and group inclusion (Gorrese & Ruggieri, 2013).

The increased interest in and focus on peer relationships during adolescence requires the development of more elaborate socio-emotional skills, as adolescents need to interpret their peers' beliefs, needs and emotions correctly (Dvash & Shamay-Tsoory, 2014). Attaining these skills is quite challenging for adolescents, as specific and cognitively challenging higher-order aspects of affective processing are needed to make inferences about emotions and cognitions of their peers, to interpret social situations accurately, to respond appropriately in social situations, and to behave affectively with kindness and empathy, in a caring and supportive way (Dvash & Shamay-Tsoory, 2014; Mier et al., 2010).

Although there are many and diverse definitions of what empathy entails, the most comprehensive definitions express a duality inherent in the concept. Firstly, empathy is seen as consisting of a socio-emotional aspect, which generates the capacity and motivation in the person to perceive other people's perspectives and their associated feelings; and secondly empathy is seen as also comprising an element of action. Empathy enables people not only to understand and predict other people's behaviour, but to be involved to such a degree that they will react accordingly, in a gentle and compassionate way (Dvash & Shamay-Tsoory, 2014; Reed, 2014; Tavabie, Koczwara, & Patterson, 2010).

2.3.1.9 Adolescents and the therapeutic relationship

The therapeutic relationship incorporates a variety of relational aspects evident in the therapist–client interaction (Campbell & Simmonds, 2011). From a developmental perspective, adolescents seek identity, separation from their parents, and individuation. They wish to gain and take better control of their own life direction, to start redefining their personal values and goals, and to prepare for life as adults (Maree & Fernandes, 2003). In this process they start to think differently about, and renegotiate their own position in relation to the adults in their lives. Adolescents often show unreasonable hostility towards adults. This hostility stems from a combination of factors. Adolescents may feel anxious about growing up and all the changes associated with this process. There is also conflict existing

within adolescents: between the need to prove to themselves that they can and want to be independent, and their uncertainty and resulting need to remain children (Berg, 2015; Bertram & Widener, 2014; Campbell & Simmonds, 2011).

According to Campbell and Simmonds (2011) the quality of the therapeutic alliance requires a neutral stance that can only be achieved when the psychologist or counsellor is not seen as predominantly a parent, teacher, or authority figure. Because of the adolescent's sensitivity to sincerity and honesty, the therapist must be mainly seen as somebody who is trustworthy, open, genuine, authentic, and non-judgemental. Interaction with adolescents must be attuned to the individual adolescent's feelings and what is needed in the specific moment, and the therapist or counsellor must never be threatened by adolescents' specific behaviours or reactions (Berg, 2015; Campbell & Simmonds, 2011).

In Campbell and Simmonds' study (2011), adolescent participants emphasised the collaborative nature of the relationship between themselves and their therapist. They also mentioned the importance of the therapist's ability to understand their own world views, as well as their need to feel safe and secure within the relationship. They voiced a need to tell their own stories.

Stories bear witness to the multidimensional realities from which each person emerges (Eide, 2012). Telling their own stories is furthermore an important technique in the construction of identity and in the process of autonomy development, as it give adolescents access to better understanding of themselves (Cosier, 2011; McAdams, 2011; Reese, Yan, Jack, & Hayne, 2010a; Reese et al., 2010b; Thrift & Amundson, 2015).

2.3.2 Peer support

2.3.2.1 *What is peer support?*

Peer support is an interactive process, activated by people's natural tendency to seek support, help, and advice from social resources available in their immediate environments. Peer support is used in interventions aimed at emphasising personal growth and empowerment, self-management, and self-help (Fisher, Boothroyd, Coufal, & Baumann, 2012) and to facilitate a sense of community and mutual understanding via the exchange of knowledge and experience (Ussher, Kirsten, Butow, & Sandoval, 2006). The mutual sharing of personal, lived experiences with others, who can relate to these, is integral to effective peer support intervention. The peer support process creates an opportunity for positive experiences of self-disclosure to occur (Davidson, Bellamy, & Miller, 2012; Repper & Carter, 2011).

Peer supporters usually come together voluntarily to help to address common problems or shared concerns, and in order to overcome difficulties (Ha, 2016). The supporters are usually trained, and are seen as people who provide insight, knowledge, and experience; as well as emotional, social, or practical help (Mead, 2003). Peer supporters are also known as peer mentors or peer counsellors. The members of these support groups usually share characteristics such as age, school, education, life experiences, and lifestyle, resulting in a connectedness between the supporters and those who seek their support (Lekka et al., 2014).

2.3.2.2 *The origin and development of peer support*

The peer support system originated with apolitical groups, such as Alcoholics Anonymous (AA) in 1937, which mainly focused on support offered in groups by means of interaction with other people sharing the same difficulties (McColl, Rideout, Parmar, Abba-aji, & Services, 2014). During the early 1970s, peer support began to evolve, and was used more often in the self-help and psychiatric survivor movements, within the context of de-institutionalisation (Scott, Doughty, & Kahi, 2011; Solomon, 2004). During the 1990s, it entered a new phase, in which support services were often funded mainly within the context of the health system.

Peer support workers in the health system are usually recruited from the same client pool as the individuals whom they are looking after and thus share similar experiences. They receive a basic level of training to offer support and encouragement, which can range from informal visits and sharing of experiences, to formal appointments focused on providing practical information and support in relation to the intervention (MacLellan, Surey, Abubakar, & Stagg, 2015). Through the therapeutic connections developed between non-professional people, peer support emphasises individual empowerment and healing.

The idea of implementing a peer support system in schools originated from the need to make a success of inclusive education by integrating learners with disabilities successfully into mainstream schools (McColl et al., 2014). One or more peers without disabilities were assigned by para-professional adults to support a disabled peer, both socially and academically. These adults gave guidance and support to the chosen peer supporters. According to Furlong et al. (2013), the main goal was to increase academic success and competence in critical thinking skills, cooperation, and collaboration. Wroblewski, Walker, Jarus-Hakak, and Suto (2015) recommend peer support programmes to be divided into different categories according to the kind of support that these different programmes focus on.

Oris et al. (2015) are of the opinion that peer support programmes focusing on adolescents must take the crucial peer socialisation period, with which adolescents are confronted, into consideration. As adolescents become less emotionally dependent on their parents and establish more intimate friendships with their peers, the social support systems provided by peers become increasingly important to ensure optimal functioning. Including peers in intervention activities should therefore be a priority.

Presently the need for non-professional shared-experience support in the mental health, educational, as well as the well-being sector, is growing. According to DeAndrea and Anthony (2013), each year approximately 2.7 to 3.3 people in every 1 000 seek peer support by visiting online chat rooms. This need to connect with peers via the online medium may be due to the fact that the platform is voluntary, flexible, and informal (Boothroyd & Fisher, 2010). In the researcher's experience, a peer support system provides a powerful structure for creating opportunities to learn and grow together; and peer intervention offers a mutually beneficial support system in which the supporters have the opportunity to validate their lived experiences, while simultaneously instilling hope in others (McColl et al., 2014).

2.3.2.3 *Research findings on peer support during adolescence*

Different researchers (Kiefer, Alley, & Ellerbrock, 2015; Wentzel, Russell, & Baker, 2016; . Zhang et al., 2012) report on the positive correlation between the extent to which relationships with parents, teachers, and peers are emotionally close and caring; and learners' motivation, academic performance, success, well-being, and behaviour at school. Although these researchers found the perceived academic expectations and emotional support of teachers and parents to have a stronger impact on academic outcomes than those of peers, the positive outcomes of peer support have been confirmed by many research projects (Wentzel et al., 2016).

It is well known that peer relations are central to adolescents' healthy social and emotional development (Kulik et al., 2015). Repper and Carter (2011) report improved hope in recovery, self-esteem, self-efficacy, socialisation, and self-management after peer support intervention. Research results further show that peer relationships and support are positively linked to the individual's sense of relatedness and acceptance, and are also associated with improved academic achievement (Chui, Ziemer, Palma, & Hill, 2014; Kiefer et al., 2015). Peer support was found to be important due to the fact that peers provide information and life skills needed to cope with high-risk situations, and practical ways to support behavioural changes, by creating the opportunity to bond with positive role models (Morris, Campbell, Dwyer, Dunn, & Chambers, 2011). Peer cooperation and support elicit self-confidence,

empathy, altruism, and an increased likelihood of crisis stabilisation after trauma (Chui, Ziemer Kathryn, Palma, & Hill Clara, 2014; Finestone, 2013; Landers & Zhou, 2011).

Adolescence has been described as a time during which adolescents' sense of belonging, feelings of security, levels of happiness, and classroom engagement are all predominantly influenced by their peers (Brock, Biggs, Carter, Catey, & Raley, 2015; Kiefer & Florida, 2015). The positive and constructive results of peer relationships and support encouraged the researcher to use group peer support intervention strategies during this research project. The idea is to activate and use peer skills and involvement to facilitate healthy identity development, and an improved and clearer sense of self, as described by Marcia, (2014) and Nawaz (2011).

In summary: MacLellan et al. (2015) mention that, despite wide recognition of their value, the impact of peer supporters and the effects of these roles on the peer supporters themselves have not been systematically assessed. The researcher could also not find many research projects on the effect of supporting their peers on the supporters, but McColl et al. (2014) do report that peer support systems do not only benefit the learners who receive support, but also the supporters themselves. Some of the benefits reported are the expansion of their own social networks, opportunities to develop friendships, and the learning of new and important life skills in the process of being a peer supporter. Through being involved with their peers, peer supporters also have the opportunity to develop their leadership and communication skills (Furlong et al., 2013). The researcher will focus on the possible qualitative and/or quantitative benefits derived by the group of peer supporters with whom she works.

2.3.2.4 Peer supporter selection process

Morganett (1994) has provided clear guidelines regarding what to be aware of when selecting support group members. She listed the following important aspects that need to be taken into consideration:

- Group members' ages must all fall within two years of one another.
- Group members must have approximately the same social, emotional, intellectual, and physical maturity.
- Members must be willing to cooperate in a group situation.
- Members must come from different racial, cultural and socio-economical backgrounds; but must not be so different from the rest of the group that they risk being assigned the role of scapegoat.

- Members must not have psychiatric problems, or experience ongoing crises, such as abuse.

The researcher could not find more recent literature with recommendations regarding the choice of peer members. The above recommendations are, however, in accordance with the researcher's own perceptions of group dynamics, structure, and composition and she will therefore take the aforementioned recommendations into consideration.

2.3.2.5 Group intervention

The benefits of group work have long been recognised. Morganett (1994) and Senn (2012) have emphasised the effectiveness of group work, and listed the following benefits:

- As many problems adolescents experience is related to social interaction, a group is a natural dome in which to practice social interaction skills and to receive feedback from peers.
- Groups provide a safe and accepting environment in which to experience a sense of belonging, togetherness and support.
- Groups offer role models for positive attitudes, social values, and behaviours. Learners can learn from each other.
- Groups show how working together is important and provide models for offering support and encouragement and for receiving help.
- Groups are a context in which participants can learn to tolerate and respect others' differences, as well as to empathise with others.
- Groups teach group participants how to trust and how to share ideas, attitudes, and feelings honestly.
- Groups provide an opportunity of reaching and helping more learners, as the group members facilitate one another and the counsellor or psychologist is not the only resource.

More recent researchers like Di Fabio and Maree (2012) investigated the effectiveness of group based life design counselling, as described by Savickas (2011). The results of their research are in accordance with the research results of Del Corso and Briddick (2015), who found the presence of an audience to be quite powerful in life design counselling. Di Fabio and Maree (2012) proposed that the collective constructions created by individuals during group interactions, are likely to support the individuals' ability to merge their personalised constructions with feedback remarks and insights shared by other group members. A further benefit of group life design is emphasised by Del Corso and Briddick (2015), namely the

importance of peer feedback on an adolescents' self-narrative, particularly in terms of the developmental task of identity formation.

Participants in group based life design counselling tend to benefit from sharing their own stories in the group, and are also likely to assimilate more stories and gain further insight by listening to other group members sharing their own experiences (Di Fabio & Maree, 2012). In a group setting facilitated by a psychologist or counsellor, empathy and pro-social behaviour can be encouraged, in order to improve social competence and scholastic performance, and to reduce problematic behaviour (Eisenberg, Spinrad, & Knafo-Noam, 2015).

According to Senn (2012), group intervention must consist of three different stages, namely involvement, transition, and closure. During the initial involvement stage, it is important to develop trust and cooperation among the group members. During the second phase, the working phase, the aim is to work towards commitment, sharing, and insight. The final stage entails closure. The researcher intends to proceed in compliance with these recommended stages during her research.

The researcher further plans to take a proactive stand as emphasised by Bush et al. (2013). She wants to encourage participants to expand their abilities to respond appropriately to other people's stories and pain, and to choose responses and behaviour to benefit others, as described by Eisenberg et al. (2015). She wants to add value in terms of each individual adolescent's well-being and sense of self and also hopes to encourage other researchers to study the field of group life design counselling more extensively, as participants' stories are not formed in a vacuum, but are born out of the relationship they share with significant others (Del Corso & Briddick, 2015).

2.3.2.6 Size of the group

Over the years, a group of at most eight members has come to be identified as ideal (Morganett, 1994; Senn, 2012). Researchers are of the opinion that, although a group of six to eight is ideal, the older the group members, the bigger the group may be (Deblinger, Pollio, & Dorsey, 2016; Machtinger et al., 2015). Groups consisting of as many as 23 participants have recently been used in intervention-focused research projects (Bella-Awusah, Ani, Ajuwon, & Omigbodun, 2016; Uliaszek, Rashid, Williams, & Gulamani, 2015). For this research project, the researcher has decided on 24 participants, subdivided into three groups of eight members each.

2.3.2.7 Ground rules during group intervention

The researcher has decided on the following ground rules for the intervention groups. These rules are a combination of what was found in literature, as well as being based on her own experiences of group work:

- Take turns talking and sharing.
- All participants should be involved.
- Participants should demonstrate good listening skills.
- Participants should talk directly to other group members, and not to the psychologist.
- No member will be allowed to put any other member down or to respond in a negative way towards other members.
- Personal information shared by group members remains confidential and nobody will be allowed to discuss shared information outside the group.
- All participants should be punctual and should attend all the group sessions.
- Participating group members will be encouraged to share their feelings openly.
- Each individual should take responsibility for her own actions (Morganett, 1994; Senn, 2012; Shadmehr, 2015).

2.3.3 Sense of self and identity development

2.3.3.1 Identity and self-identity

Identity and identity development are complex and multifaceted concepts. Identity refers to a sense of oneself as having continuity with the past, active direction in the present, and a future trajectory (Marcia, 2014). One of the earliest theories of identity was developed by Erik Erickson, who identified the adolescent phase as the time during which identity development is the main focus and during which the individual develops a personalised identity (Marcia, 2014). Erickson further distinguished between ego-identity and social identity (Kroger, Martinussen, & Marcia, 2010). The concept of ego identity focuses on personal differences that distinguish the individual from other people, and refers to both a conscious sense of individual uniqueness, as well as an unconscious striving for continuity of experience; an optimal identity, as well as a psychosocial sense of well-being. A positive ego identity is associated with a feeling of being at home in one's body, a sense of knowing where one is going, and an inner certainty in terms of expected recognition from significant others (Bush et al., 2013). Social identity indicates that the development of the autonomous sense of self, or self-identity, happens simultaneously with the establishment of sustained

close relationships with others. The process of self-identity development is subsumed under the label of individuation (McLean, Breen, & Fournier, 2010).

The formation of self-identity is seen as a self-constructed theory of the self and the result of the work of the ego (Jespersen, Kroger, & Martinussen, 2013; Rattansi & Phoenix, 2014;). According to Jespersen et al. (2013) ego development refers to a holistic process: a striving for consistency and understanding, of oneself and others, over time. It can, however, never reach an ultimate level of perfection, and is also influenced by specific social contexts, for example particular peer groups, as the self is seen as constructed by social interaction with others (Bush et al., 2013; Rattanski & Phoenix, 2009).

Identity formation and a clear sense of self are crucial developmental tasks in adolescence towards becoming a productive, satisfied, and happy adult. It requires exploration by adolescents to get a clearer idea of who they are, what they do well, and what they wish to achieve after school. As they begin to evaluate their strengths, skills, and abilities, the peer group influences them significantly, and serves as a basis for adult expectations, choices, commitments, and goals (Berk, 2013; Bururia, Marangu, & Nyaga, 2014; Mullis, Graf, & Mullis, 2009; Nawaz, 2011).

When the adolescent has not made a commitment regarding a specific developmental task, in this instance towards personalised identity development, this is known as identity diffusion (Marcia, 2014). The adolescent may have done some exploration among different alternatives in that domain, but no commitment has been made. This may result in the adolescent being unprepared for the psychological challenges of adulthood (Hill et al., 2007).

An inability to develop and achieve a personal identity is known as identity confusion. This implies that the adolescent is unprepared for the challenges of adulthood (Bururia et al., 2014; Hill et al., 2007). If this is not resolved during adolescence, it can result in role confusion, where an adolescent is unable to integrate his/her various roles successfully. As there is a strong relationship between identity status and self-esteem, identity confusion will also impact negatively on the development of own identity direction, sense of purpose, and decision-making abilities (Bester, & Quinn, 2010; Louw, & Louw, 2007; Marcia, 2014a; Ryeng, Kroger, & Martinussen, 2013).

In contrast with identity confusion, an optimally developed identity emerges when a person has undergone an exploratory period of finding individual goals, values, meanings, strength and weaknesses, personality, motivation, and work-ethic within a social context. When critical elements of the self have been discovered, resulting in a sense of feeling at home

with who one is and what one is doing in life, there is a commitment to a specific future direction and a set of personal beliefs (Bush et al., 2013; Hirsh et al., 2016; Marcia, 2014a).

2.3.3.2 Narrative identity and sense of self

The self is a dynamic, multi-dimensional phenomenon that can be influenced by experiences throughout one's lifespan, and is an especially important component of development during adolescence (Santo et al., 2013). The first component of the self refers to self-concept. Self-concept includes the person's perception of his/her own functioning in specific areas of life, like academic performance and sport or artistic ability. The second component of the self refers to the evaluative self. The evaluative self is linked to an overall sense of well-being and adequacy (Santo et al., 2013).

The sense of self is seen as the mental processes that provide people with feelings of singularity, coherence, individuality, and unity; which define them as unique human beings (Prebble, Addis, & Tippett, 2013). The exploration process towards a clearer sense of self entails the organisation and vocalisation of emotionally significant personal stories (or narrations) along acceptable interpersonal plot lines, which result in the occurrence of a self-narrative that coherently connects the lived past with the on-going present and probable future (Angus & Kagan, 2013). Theories of narrative identity suggest that people make sense of their lives by constructing and telling stories about their own lives and personal experiences. These narratives, which connect the reconstructed past to the perceived present and the anticipated future, provide the self with a sense of purpose and unity (Adler et al., 2015; Kern et al., 2015).

Savickas (2012) explained the process by stating that people begin to form psychosocial identities by associating the psychological self with social roles and cultural images, from which they gather a comprehensive identity narrative. According to him, narrative identities provide a way of interpreting and understanding the self in order to orientate people effectively in terms of the social world. Through narratives, people interpret the self as if it were another person (Savickas, 2012).

During adolescence, the smallest unit of the life narrative, namely autobiographical memory, begins to emerge (McLean, 2005). Autobiographical memory is a complex mental system, important in the construction and maintenance of a mental picture of the objective self in the present moment and across time (Prebble et al., 2013). It allows people to recollect autobiographical information, events, and experiences from their pasts.

Autobiographical information gets organised conceptually, chronologically, and thematically from significant sensory, perceptual, emotional, and remembered details of particular moments. The reorganisation of memories enables the person to transform memories into autobiographical memories, influencing the conceptual self. Autobiographical memories are used to construct the mental representation of the self; and the resulting conceptual self informs the way memories are accessed, stored, and constructed (Prebble et al., 2013). Stories that distil a strong sense of purpose and unity, should promote the narrator's health and well-being. Narrative identity should provide convincing causal explanations for the self, reflect the richness of lived experience, and advance socially valued actions (Adler et al., 2015; McLean, Wood, & Breen, 2013).

According to Grysman (2012), research results suggest that threats to a positive sense of self can be mitigated by self-enriching behaviour. The practice of analysing remembered narrative content to gain a deeper understanding of the impact of recalling significant events is encouraged in order to change the sense of self for the better. In narrative theories of identity, a subjective perspective on events is an essential part of the self-concept and sense of self. Clarifying one's perspective on an event is a means of establishing the self. Accordingly, autobiographical memory theorists contend that personal narratives are linked to self-understanding throughout development (Reese, Yan, Jack, & Hayne, 2014).

2.3.3.3 Self-defining activities

Individuals participate in a wide range of structured as well as unstructured activities. Activities that are important for identity development are those that provide the energy and motivation for self-actualisation; those self-defining activities that have the greatest likelihood of actualising the person's talents and capabilities, and result in the understanding of who the person really is and how he/she fits in socially. Through participation in these activities, the person discovers and recognises elements of the true self by means of personal goals, values, interests, talents, and abilities (Mao et al., 2016). Coherent identity development is therefore associated with action taken by the individual and an understanding of activity features that will promote own identity strength and a sense of meaningfulness (Mao et al., 2016).

2.3.3.4 Self-reflection and self-construction

2.3.3.4.1 Self-reflection

Self-reflection requires meta-cognitive skills, as it is the ability to think about one's own thoughts in order to search for meaning. Self-reflection also implies that people use derived

knowledge to add meaning and direction to their lives, and to improve themselves in the process of self-construction (Dimaggio, 2011; Lysaker et al., 2011).

2.3.3.4.2 *Self-construction*

Self-construction implies that people are proactive agents in their own self-organisation, in order to maintain order and continuity in terms of their own experiences (Mahoney, Gucciardi, Mallett, & Ntoumanis, 2014). According to Guichard (2015), people construct themselves in a specific way, at a given moment, in a given society. People connect the different spheres of their lives and order them according to various scenarios, while looking for meaningful attributes regarding their own lives (Maree, 2013; Savickas et al., 2009). Self-construction thus implies thinking critically about life events, while being dynamically self-aware.

Experiencing the constructed self as successful and satisfactory is very important for well-being. By constructing the self in the form of a life story that provides coherence and continuity, people are able to pursue their purpose and ventures with integrity and vitality (Savickas et al., 2009; Savickas, 2012). These self-constructed lives should further be designed in such a way that re-designing is possible, if necessary due to changed circumstances. People are expected to be more self-sufficient and able to source advice and guidance from within. They are expected to hold themselves and their lives together in an ever-changing context (Savickas, 2012; Vanhalakka-Ruoho, 2010).

Individuals are seen as the experts on their own lives and therefore are expected to build on their own strengths and advise themselves (Swart, 2013). Advice can be drawn from their own life stories. They must therefore be encouraged to think and talk about difficult decisions, and talk, write and perform their own life stories to find meaning and to equip them with the necessary insight to face an unknown future (Newark, 2014). Savickas (2012, p. 14) expressed it clearly when he said: "*one speaks one's story, so one makes oneself, and this self-constructing is a life project.*"

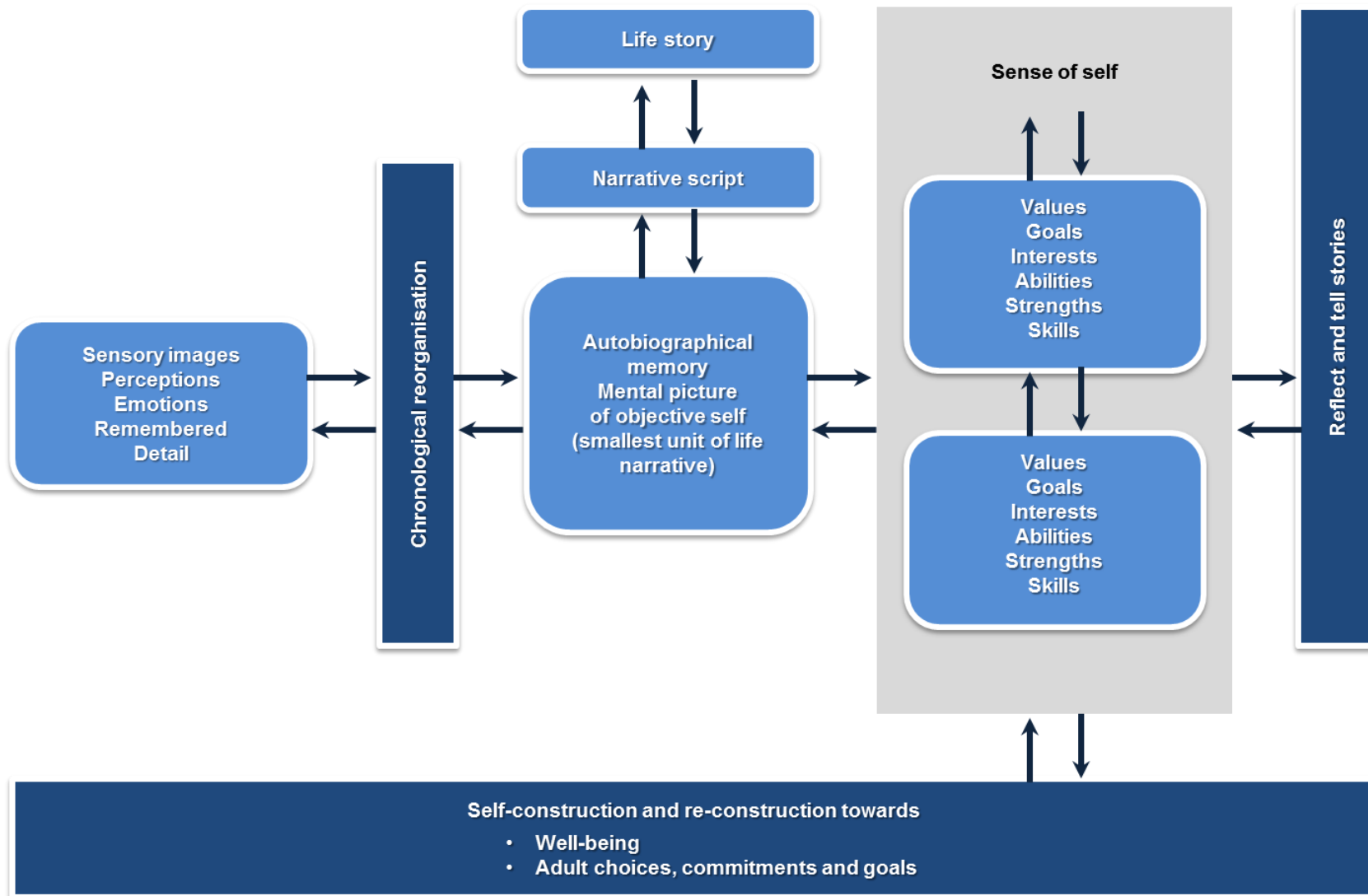


Figure 2. 4: Construction and re-construction of the sense of self

2.3.4 Life design and life design counselling

2.3.4.1 *A new development*

The modern-day world is characterised by globalisation, rapid changes in technology, and many social and economic insecurities. These transformations underlie the life design paradigm (which was first presented in 2009), focusing on multiple identities as offering potential for human development, and for individuals to determine for themselves what their core values are and what life means to them personally (Guichard, 2015).

In this new paradigm, individuals are seen as active agents in their own development: people managing their own lives and crises, by being motivated to change (Hirschi & Dauwalder, 2015). Clients are regarded as the sole experts on themselves and should be encouraged to narrate and authorise their own stories (Maree, 2014). Agent, goals, means, and interactions must be integrated to form a unified and meaningful identity narrative or life portrait (Savickas, 2012). An internal narrative identity is created by the evolving life story that a person constructs to make sense and meaning out of his or her own life. The story is shaped by an autobiographical past and a narrative anticipation of the imagined future, which serves to explain how the person came to be where he or she is, and where his or her life may be going (McAdams, 2011; Manczak, Zapata-Gietl, & McAdams, 2014).

2.3.4.2 *The role of the counsellor/ psychologist*

During this new life design process, the psychologist's role is to assist people in developing the reflexivity they need to design their lives, to encourage them, and to create a safe space and positive atmosphere in which the client can find meaning through discovering life themes (Savickas et al., 2009). In their role as co-constructors, counsellors or psychologists can use the natural tendency of all people, but especially of adolescents, to be engaged in a process of self-knowledge and self-discovery, of personal development and designing an individualised, meaningful life (Hirschi & Dauwalder, 2015; Reid & West, 2011).

The psychologist can invite the client to start the self-construction life design process by appealing to the client to focus on specific principles, to narrate his or her own story, and to express empathy and improve self-efficacy. The specific life story should be used to help the client to rise above his or her perceived weaknesses and to believe in his or her own ability to design a successful life (Savickas et al., 2012), and to construct his or her own self-identity (Maree, 2013). This is done through reflection in order to identify main life themes that can be used in the self-advising and life construction processes. This is important,

because: "True, meaningful advice can be given only by clients to themselves, albeit under the guidance of a counsellor" (Maree (2013, p.44).

The power of adolescents' self-advice, personal choices and agencies are paramount in all their major life decisions (Teixeira & Gomes, 2000). As behaviour and decisions are also influenced by the client's inner world of ideas and perceptions, the future life may be shaped and influenced by the past. The psychologist must therefore not only focus on the negative elements of the past, but also on positive features that make life worth living, like autonomy and self-regulation, hope, wisdom, creativity, courage, spirituality, responsibility, perseverance, and future mindedness (Carlson & Corturillo, 2016; Seligman & Csikszentmihalyi, 2000).

2.3.4.3 Theoretical foundation

2.3.4.3.1 Constructivism

In contrast with the more common view that nature reveals how things are so that people can attach meaning thereto, Constructivism advocates that humans create knowledge in ever-changing contexts by being actively involved in the meaning-making process (North, 2016). Constructivism assumes that learning is an active process which takes place through a continual process of constructing, interpreting and modifying perceptions of reality, based on the individual's own experiences, rather than seeing it as a static process of discovering facts through scientific endeavours (McWilliams, 2016). Learning can therefore be achieved when individuals are hands-on and actively involved and take part in experiences, activities, and discussions. By being actively involved in their own construction process, people have the potential to reach a more comprehensive understanding of these environments, and are then able to adapt to the demands of the world in progressively more effective ways (Cook, 2015; Li & Guo, 2015).

2.3.4.3.2 Self-construction and intervention

According to Guichard, Pouyaud, Calan, and Dumora (2012), self-construction suggests that each individual forms subjective identities, constructed in specific settings, resulting in an evolving self-identity. Self-identity relates to specific social roles, and impacts on how people think of themselves in specific social roles; it influences how they act, interact, and relate to themselves differently in different social contexts. Knowledge about oneself and self-identity are constructed through dialogue in social interactions with others (Jespersen, Kroger, & Martinussen, 2013b; Savickas et al., 2009). Identity is not a fixed entity, but individuals seek identities that are stable and coherent over time, with a balance between a connectedness

with others and differentiation from others (McLean et al., 2010; Schumacher & Camp, 2010).

Based on the dynamic model of self-construction, intervention activities focus on helping individuals design and redesign their lives by integrating their current and past experiences with future perspectives. They also have to commit themselves to the implementation of this design process, which may lead to redesigning the initial plan. The psychologist or counsellor's task is to find activities, interactions and resources to increase the chances of the client to experiencing and growing through this process (Guichard et al., 2012). Intervention should provide opportunities to the client to accumulate and integrate information that will help to clarify own beliefs, values, roles, positions, knowledge and feelings, relevant or irrelevant, to given situations, in that order (Alvermann et al., 2012). Intervention (or identity work) is, according to Alvesson and Willmott (2002, p. 9), actively engaged in "forming, repairing, maintaining, strengthening or revising the constructions that are productive of a precarious sense of coherence and distinctiveness".

2.3.4.3.3 *Life design counselling – a narrative approach*

Narrative approaches focus on the importance of developing a sense of personal coherence and continuity through time via the construction of a life story. The narrative approach is based on the theory that better understanding of people about themselves and the world around them, happens through the construction of narratives in interpersonal contexts (McLean et al., 2010).

Life design counselling (a narrative approach) focuses on supporting clients in constructing a narrative of their own past, present and future, by providing a sense of continuity and coherence in their lives. In other words, life design counselling intends to facilitate the development of re-authoring the narrative identity, and projects new possibilities for self-construction (Cardoso, Silva, Gonçalves, & Eduarda, 2014; Cardoso, Gonçalves, Eduarda, Silva, & Alves, 2016). Narrative practices permeate life design counselling due to the emphasis on language, dialogue and theme development. The individual's life purpose and values become apparent to the client through this narrative process of self-reflection and expression (Setlhare-Meltor & Wood, 2016; Severy, 2008).

Narrative therapy uses life story-telling as a process of actual identity reconstruction and a way of succeeding in the act of narrating itself. Disruptive life events can be integrated into the life story and a new perspective on the self can be generated. Life narratives facilitate the process of sense-making of difficult experiences, the reconstruction of meaning and purposes of life, and the review of one's own strengths and resources that might help one to

overcome personal and environmental challenges (Corsten, Schimpf, Keilmann, & Hardering, 2015).

Narrative techniques has the capacity to cater for a diversity of clients of different ages, races and cultures, as they all should be able to make meaning of and interpret their life experiences, losses, transitions, indecisions, or hopes. It supports a holistic perspective, recognising emotional as well as psychological aspects related to life-changing decisions, and recognises the individual person as the hero or main character in, as well as the author of, his/her own story (Peila-Shuster, 2016). The inherent positive qualities of narrative life design counselling promote commitment, and empower people to participate actively in their own developmental process (Maree, 2013; Locke & Gibbons, 2008; Setlhare-Meltor & Wood, 2016).

Life design counselling narrative approach seems to unlock the personal meanings that play an integral part in the process of life design, concerning the what (vocational identity), the how (personal adaptability) and the why (specific life themes) (Di Fabio & Maree, 2012; Savickas, 2012). Self-evaluation reflects thoughts people hold about their own worth, competencies and abilities, and is directly related to their level of job performance, satisfaction, achievement, and well-being (Di Fabio, Palazzeschi, & Bar-On, 2012) It provides an anchor that securely and steadfastly navigates the person through difficulties and insecurities (Stebleton, Soria, & Huesman, 2014). People are therefore encouraged to construct stories that allow them to actively master what they have passively suffered, by reliving specific problematic experiences repetitively in the hope that they will become more equipped to resolve these (Savickas, 2011).

In narrative life design counselling, people are afforded the opportunity to tell their own stories, with different episodes or chapters stretching across their lifespan. By listening empathetically, the audience or counsellor, like an efficient editor, may be able to extract metaphors or proverbs that add meaning and value to the narrative – collaboratively shaping the story with the person (Patton & McIlveen, 2009; Stebleton, Soria, & Huesman, 2014). The listener(s) further provide a means of unlocking hidden motives and reveal possible problematic areas (Del Corso & Briddick, 2015).

Maree and Symington (2015) emphasise the value of sharing life stories with others in an educational setting. Participants or peers become a “witnessing community” and this allows for the witnessing of self through others (Maree & Symington, 2015, p. 143). Mutual transformation becomes possible due to the power of empathy, and the solidarity that is derived from listening to others.

2.3.4.4 *Important aspects and goals of life design counselling*

The life-design framework for counselling intervention aims to increase clients' narratibility, adaptability, intentionality and activity, as part of a dynamic, life-long, holistic, contextual and preventative process (Maree, 2015; Savickas et al., 2009).

2.3.4.4.1 *Facilitating narratibility*

People draw on autobiographical knowledge and reasoning when they attempt to make changes in their lives. The narratability of people's own stories entails their ability to tell others who they really are (Maree, 2010). Their life stories become more real and substantial, and room is created for them to move and change, while having continuity. They use their own stories to embrace themselves (Savickas et al., 2009; Vess & Lara, 2016; Winslade, 2015). A counsellor's main aim is therefore to help clients to narrate and listen to their own stories.

2.3.4.4.2 *Encouraging biographicity*

Savickas (2012) explains that a shift in responsibility from institutions to individuals must take place in life design counselling. The term "biographicity" (which was first used by Alheit in 1995) is used by Savickas (2012, p. 14) to describe the process of bridging transitions in the client's life, by using the capacity of the individual to use his or her own stories as holding environments when intruding and disturbing changes happen in their lives (Maree, 2010). The psychologist or counsellor has to be able to encourage clients to identify their life themes during their biographicity process.

2.3.4.4.3 *Adaptability*

The life-design model aims to assist individuals in telling and portraying an individualised story that supports adaptive and flexible responses to developmental tasks, traumas, and life transitions. It aims to support the development of their capabilities to cope with changing contexts in their own lives. It also helps them find ways to achieve their dreams by being involved in a variety of activities (Savickas et al., 2009; Savickas, 2012).

2.3.4.4.4 *Intentionality*

According to Richardson (2009) an intentional process is central to the broader task of constructing a life. Clients should be encouraged to concentrate on meaning, rather than on choices, as the world that they live in is filled with uncertainties. Life construction implies,

therefore, meaning making through intentional processes and through continued reflection (Savickas et al., 2009).

2.3.4.4.5 *Activity*

By engaging in diverse activities, individuals become aware of their own abilities, talents and interests (Savickas & Pouyaud, 2016). Through activities and interaction with other people, they get the opportunity to formulate new perceptions, change their self-concepts and own identities, and construct changes in their life stories (Hirsh et al., 2016; Savickas et al., 2009). Being fully involved in self-defining activities with enjoyment, can facilitate the subjective experience of flow (Mao et al., 2016). Life design interventions create links to the future by promoting intention and action. Activity assists clients to live ahead of themselves and to turn intentions into meaning-infused behaviour. Action retains meaning from the past while carrying the individual into the future (Savickas, 2012).

2.3.4.5 ***The life design counselling process***

According to Savickas et al. (2009) the life-design intervention model and techniques require a dynamic shift in the five fundamentals paradigm, as outlined below.

2.3.4.5.1 *From traits to context*

In the 20th century, psychologists tried to find universal laws directing human behaviour. There was a strong focus on ability, stable personality traits, assessments, and normative profiles (Savickas et al., 2009). Currently, clients are seen as dynamic human beings, with unique life stories, who are able to interact and change. The consolidation of the numerous experiences of every day, shape the person into a unique, complex and dynamic individual (Akhurst & Mkhize, 2006).

2.3.4.5.2 *From prescription to process*

Instead of prescribing to clients, psychologists and counsellors are encouraged to assist clients in their narrative meaning-making construction processes and to assist them in developing efficient strategies for problem solving, action planning, taking action steps and overall life designing (Maree, 2013; McLean et al., 2013; Porfeli & Savickas, 2012). Individuals are inspired to actively embrace a process of meaning making that entails the interpretation of experiences in terms of interrelated, interactive, changing and dynamic relationships; rather than adopting the approach of individuals as fixed entities with innate permanent characteristics (McWilliams, 2016).

2.3.4.5.3 *From linear causality to non-linear dynamics*

Traditional scientific reasoning is linear and deductive. People, however, are dynamic and must rather be seen as being able to grow and change in non-linear ways. Psychologists and counsellors are encouraged to patiently implement interactive problem-solving strategies and life design strategies over a period of time (Savickas et al., 2009).

2.3.4.5.4 *From scientific facts to narrative realities*

According to Savickas et al. (2009), the exclusive use by psychologists and counsellors of standardised test results may provide a false sense of security and result in a self-fulfilling prophecy that may make the individual's task of verifying his or her true validity under real-life conditions difficult. We are experiencing a paradigm shift from theories based on logical positivism (e.g. trait-factor), to postmodern perspectives emphasising counsellor-client collaboration (Katsanevas & Tsiaparikou, 2014) and client self-construction. Self-construction entails construction of the self as a story, and the enhancement of the self as an inner compass to deal with transitions (Maree & Africa, 2016).

Research by Savickas, Maree and others shows that understanding clients' own construction of their multiple subjective realities, through analysis of their own individual narratives, offers the advantage of not only understanding the individual's actual circumstances, but also the roots of his or her unique situation (Maree, 2015b; Savickas et al., 2009). Instead of depending on tests and test results, psychologists and counsellors are encouraged to focus on clients' on-going construction and re-construction of their own subjective and multiple realities (Di Fabio, 2016; Setlhare-Meltor & Wood, 2016). A variety of ways to interpret own life experiences enables different life designs, and thus psychologists and counsellors facilitate empowerment, flexibility, adaptability, reconstruction and insight into new perspectives, which are assets that individuals can successfully use in future as well (Savickas et al., 2009).

2.3.4.5.5 *From describing to modelling*

Savickas et al. (2009) see dependence upon simple descriptive statistics as limiting, as therapy and counselling should address multiple subjective realities with different and individual roots for different clients. The life design intervention model, as described by Maree (2015), recommends six steps informed by the individual life experiences of the individual:

- Joint definition of the problem by the psychologist/counsellor and client.

- The psychologist or counsellor encourages the client to explore his or her existing subjective perspective of him- or herself in different contexts.
- Broadening the perspective of the client and revising the story.
- Identification by the client of relevant activities to actualise his or her own newly established identity.
- Short-, medium-, and long-term follow-ups.

2.3.4.6 Narrative life design counselling techniques

Narratives are not only a technique to examine identity development, but also a vehicle by means of which identity is constructed. From a narrative approach, identity development occurs as one reflects on past experiences in relation to the present and the future self. Through this reflection process, an understanding of the individual's sense of self develops over time (McLean et al., 2010). Different reflective intervention strategies can be used to acquire this understanding.

2.3.4.6.1 Family genogram

The genogram is a standardised graphic structure used to represent the internal structure of a family (Leonidas & Santos, 2015). The genogram was initially developed by Bowen (Burley, 2014; Butler, 2008; Shaw, 2003), with the goal to reduce anxiety, to promote change through the development of a systemic understanding of the family's issues and dynamics, and to improve overall functioning. Themes can be identified to facilitate discussions, insight and growth (Burley, 2014).

2.3.4.6.2 The use of early memories

Earliest memories have been a focus of research since the late 1800s, when it was first noted that most adults lack memories from the first three to four years of their lives (Bauer, Tasdemir-Ozdes, & Larkina, 2014). As early as 1932, Adler (1932) was convinced that early childhood memories do not happen by chance. He believed that memories represent the stories of people's lives, as they tend to repeat significant stories to themselves. In order to meet their future with a verified plan of action, people use the repetition of the lived memories to comfort themselves, to keep themselves focused on their goals, and to prepare themselves through drawing advice from these experiences (Adler, 1932).

Autobiographical memory development in early childhood depends in part not only on general neuropsychological maturation, but is also of fundamental significance for the self, emotions, and for the experience of being an individual (Conway & Pleydell-Pearce, 2000;

Reese et al., 2014). Personal autobiographical memories are an important source of evidence for continuity of the self over time, through which a definition of the self is formulated (Bauer, 2015a). Memories of defining moments in people's lives are long lasting, and also of critical importance to their sense of self (Bauer, 2015b). Healthy narrative identity combines memory specificity with adaptive meaning-making to achieve insight and well-being (Singer, Blagov, Berry, & Oost, 2012).

Guided autobiography is a written procedure during which the client is asked to identify and portray the most important episodes or events in his or her own life story that he or she can remember. The client is instructed to select ten key events that stand out as especially vivid or important. For each of the chosen events, the client is asked to write at least one or two paragraphs describing what happened in the event, when the event happened, who was involved in the event, and what the accompanying thoughts and feelings were during the event. Clients are also encouraged to reflect on why the specific events were chosen and what the events say about the client (McAdams et al., 2006).

For this study, the researcher will combine the guided autobiography with the drawing of a lifeline as described by Fritz and Beekman (2015). The drawing of a lifeline is a valuable process for gaining a developmental perspective on and identifying patterns in one's own life (Watson & McMahon, 2010). In the intervention process, the lifeline will allow the participants to create a visual representation of an autobiographical review. Participants will be asked to draw a horizontal line across the page, with the left side representing birth, followed by the early childhood years. The right side will represent the present. The participants will be asked to record important incidents or memories chronologically on the lifeline.

After allowing them to draw a lifeline consisting of memories that stand out (negative as well as positive impacting or peak events), the participants will have the opportunity to discuss their own experiences with the peer supporters in their groups. They will be encouraged to identify and verbalise emotions and cognitions they experienced, significant people, helpful skills that emerged, and lessons they had learnt.

The researcher will make use of three early anecdotes, as explained by Savickas (2006a). The following questions will be used to elicit three early memories:

- What is the first thing you remember about your life?
- What are your earliest recollections?

- Tell three stories about things you can recall happening to you between the ages of three and eight.

2.3.4.6.3 *Personal portfolio*

Bester and Quinn (2010) describe the personal portfolio as a portfolio consisting of different types of performance-based samples such as artwork, picture journals and dictations, as well as observations. There are no specific rules regarding the appearance of a portfolio and the content is open-ended and based on the individual's needs.

The researcher will provide each participant with a book containing sections for each of the activities in which they will participate. They will use the books to complete activities in, as well as for reflective journal writing. The aim with the personal portfolio is to promote reflection and to encourage deep learning, which is associated with meaning-seeking and the motivation to understand better (Bester & Quinn, 2010; Roth, Suldo, & Ferron, 2017).

2.3.4.6.4 *Circle of influence*

This technique requires the participants to identify and reflect on the people who had an influence on their lives (Cochran, 1997). The participants will be asked to plot these people in concentric circles around a central circle that represents the participants. The closer to the central circle, the greater the influence of that person will be experienced by the participant. Reflection and discussions will be encouraged.

2.3.4.6.5 *Life story and future focus*

This technique, described by Cochran (1997) uses life chapters to encourage reflection and insight. A life story is not a full representation of the client's life, but a coherent narrative that merges experiences to help the client to understand what influences impacted his or her life, and had an influence on the present position experienced by the individual (Reese et al., 2014).

During the intervention phase of this particular study, participants will be asked to think of themselves as authors of their own life stories. They will be encouraged to discuss the different chapters of their own autobiographies with the other members in their groups. Each chapter must be given a title, reflecting the content of that specific chapter. The participants will have the opportunity to stand back, listen to their own stories and find meaning in the sequence of events (Cochran, 1997).

As authors of their own life stories, the participants will have to decide on future chapters and discuss and write a future chapter for their own life stories. Winslade (2015) discussed this narrative exercise of focussing on a positive future, based on the work of Foucault. Clients are encouraged to create an imagined distance from past and present painful or problematic experiences, as the power of these narratives can undermine future life projects. Clients are encouraged to think, talk and write about their best possible future; an alternative future that might strengthen them to pursue a more positive life path (Hill, Terrell, Arellano, Schuetz, & Nagoshi, 2015).

This technique will be incorporated with the life story technique, because although people's pasts can never be ignored or deleted, their capacity to think, interpret and construct new meaning must make them realise that they are accountable for their own fate and future. The narrative future will then make sense and have significance, as it is linked to and encapsulated in a unique and meaningful past.

2.3.4.6.6 *Role models for self-construction*

Role models are people that clients admire and wish to emulate. Role models are an indication of the client's self-concept and represent the kind of person the client sees himself or herself as (Flynn, 2015). The choice of role models can also be an indication of his or her main goals in life and preferred solutions to central life problems (Di Fabio & Maree, 2012). Identifying and discussing role models has often been suggested as a way of motivating individuals to set and achieve ambitious goals and perceived outcomes. The influence and impact of role models can be channelled to increase and enhance the clients' aspirations and motivations, reinforce their existing goals, and facilitate their embracing of new goals (Morgenroth, Ryan, & Peters, 2015). Through the use of role models, clients may perceive what it is possible to achieve, as role models provide an example of the kind of success that one may achieve, and often also provide examples of behaviour and discipline that are needed to achieve such success (Morgenroth et al., 2015).

2.3.4.6.7 *Favourite movies, books and mottos*

The favourite book or movie question may prompt a life script that discloses a way to achieve goals and resolve problems. Favourite sayings or mottos may offer self-advice (Di Fabio & Maree, 2012). Both these techniques will be used with the peer supporters in the intervention phase of the research project.

2.3.4.6.8 *Reflective journal writing*

Journal writing can take on many forms, with different purposes in mind. It is a unique way of dialogue that enables the client to deconstruct, construct and reconstruct meaning through written language. The process before the actual writing takes place entails listening to their inner voices, the clarification of questions, and intuitive structuring of life experiences (Fritz & Beekman, 2015).

In this study the focus of journal writing will be to engage individually at a deeper level of inquiry and reflection after specific life design counselling group activities. The participants will be encouraged and challenged to reflect and grow on a deeper level, after being involved in interactive narrative group activities.

2.3.4.6.9 *Collage*

Making a collage is a diverse technique that works well with a variety of client populations and settings. It can be used as an assessment instrument and or as a therapeutic art technique. It has proven to have a calming effect on clients (Stallings & Chichester, 2015), and allows the assemblers of the collage to reflect at length on a topic about themselves (Watson & McMahon, 2010). Collages can serve as an enhancer of verbal communication, as it can be seen as a form of “pictorial storytelling” (Fritz & Beekman, 2015, p. 166). Collages can also assist clients in sound decision-making skills (Stallings & Chichester, 2015). The material they choose, how they arrange and present the material in the collage, and how they find meaning and inevitably tell their stories, all facilitate improved self-knowledge (Epp, 2016; Fritz & Beekman, 2015), and therefore an improved sense of self. In this study the participants will not have to adhere to any rules or boundaries apart from exploring the topic. They will be allowed to use any combination of pictures, quotes, symbols, material, and photographs or words that portray or illustrate the topic, namely: “Who am I? A soul/identity collage”.

As the collage will be the last group technique used during the intervention phase, the participants would already have had the opportunity to think and reflect on who they are, what their goals are, what they like and dislike, what is important to them, their dreams and aspirations, as well as a future vision. They will be allowed to add quotes, role models or any other content that they decide will be relevant.

2.3.4.7 Benefits of life design counselling

The initial aim with life design counselling was to frame counselling as an inter-subjective process, focusing on vocational and career issues (Duarte & Cardoso, 2015). Constructing a career-life cannot, however, be seen independently from constructing other areas of a person's life. Life design intervention should therefore be beneficial to the individual in more than one way, as intervention methods and techniques focus on facilitating self-knowledge, decision-making, and insight into the cognitions behind specific actions (Duarte & Cardoso, 2015). Increased self-awareness and knowledge about own strengths promote a willingness to further develop those strengths to enhance positive relationships and future success (Isis, 2016).

Life design further promotes continuity and extends beyond just offering clients once-off or temporary guidance. It focuses on infusing qualities that will benefit the person throughout his or her life by taking different aspects into consideration, and identifying when, where and how these skills and knowledge will be needed (Savickas et al., 2009). Clients are, through the use of life design counselling, reminded that they are the authors of their own career-life stories and therefore skilled enough to construct and/or reconstruct alternative plots or story lines or outcomes at any point in their lives (Ciornai, 2016; Del Corso & Briddick, 2015). Clients will hopefully acquire skills to be able to explore different options and cope creatively with difficulties, as well as during life-altering events that need specific skills, in future.

Life design counselling can therefore be seen as an identity intervention process, in which old stories are used to compose new stories; old identity narratives are revised; old traumas and transitions are confronted; and a life that is experienced as satisfactory is designed. Constructs are utilised through the use of small stories, reconstructed into a life portrait with a new episode or episodes (Savickas, 2012), leading to a new life story. The life story provides unity and purpose over the life course of the individual. Healthy narrative identity combines memory specificity with adaptive meaning making, to achieve insight and well-being (Singer, Blagov, Berry, & Oost, 2012).

Another important advantage of narrative life design counselling is the fact that it is a culturally friendly platform for all participants from diverse backgrounds to share their stories without being judged (Chinyamurindi, 2016). Symington (2014) found through her research that all participants in her life design intervention programme experienced the sharing of life stories in a diverse group useful and effective for pulling the various aspects of their lives together into a unified whole.

2.3.4.8 A group intervention model

Life design group intervention has multiple benefits, including reaching more people, creating more meaningful lives, social support, peer support, social skills rehearsal, self-efficacy and intrinsic motivation enhancement, and universality (Barclay & Stoltz, 2016). Dialogue between group members encourages reflection (Kuijpers, Meijers, & Gundy, 2011) and the wisdom of the group may positively impact on the meaning making and self-construction of each individual group member (Di Fabio & Maree, 2012).

2.4 Conceptual framework

A conceptual framework sets the stage for the researcher's investigation to approach the proposed study (Regoniel, 2015). Although it is based on ideas that already exist in the field, it is a personalised application of the theory in the researcher's research strategy (Maree, 2007) serving as a lens or perspective through which the construct of investigation can be understood. It serves as an explanatory framework for the research project (Maree & Van der Westhuizen, 2009). The conceptual framework preferred in this study offers a tentative framework for the explanation of the phenomenon under discussion, namely the improvement of the sense of self of female adolescent peer supporter in an independent school for girls within the theoretical paradigms of positive and strength-based psychology, theories related to adolescent development, person-centred theory, as well as personal constructivism within a social context.

The researcher's point of departure was personal and social constructivism, as life design is founded within the constructivism (Maree, 2015b). People are actively involved in the construction of their own lives by reflecting on their own life stories (Chen, 2015). By doing that, they become more aware of who they are (Santo et al., 2013). This process of improving their own sense of self is seen to be more effective when it happens during social interaction and interpersonal affiliations, as people construct their realities mainly through language and social interaction (Jose, Jose, Ryan, & Pryor, 2016). As this study will focus on group intervention and an improved sense of self, the theory of constructivism was seen as ideal as the foundation of the theoretical underpin of the research study.

For the purposes of the current study it was important to look at adolescence as a developmental stage. To understand the neuro-developmental changes taking place during adolescence and to be aware of specific aspects of life that they struggle with, will guide the researcher in her interaction with the participants. The researcher is of the opinion that, while looking at the past, focus on a positive future perspective during the self-actualisation

process is beneficial to an improved sense of self of adolescents. Positive and strength-based, as well as person-centred psychology principles were therefore incorporated during the intervention process.

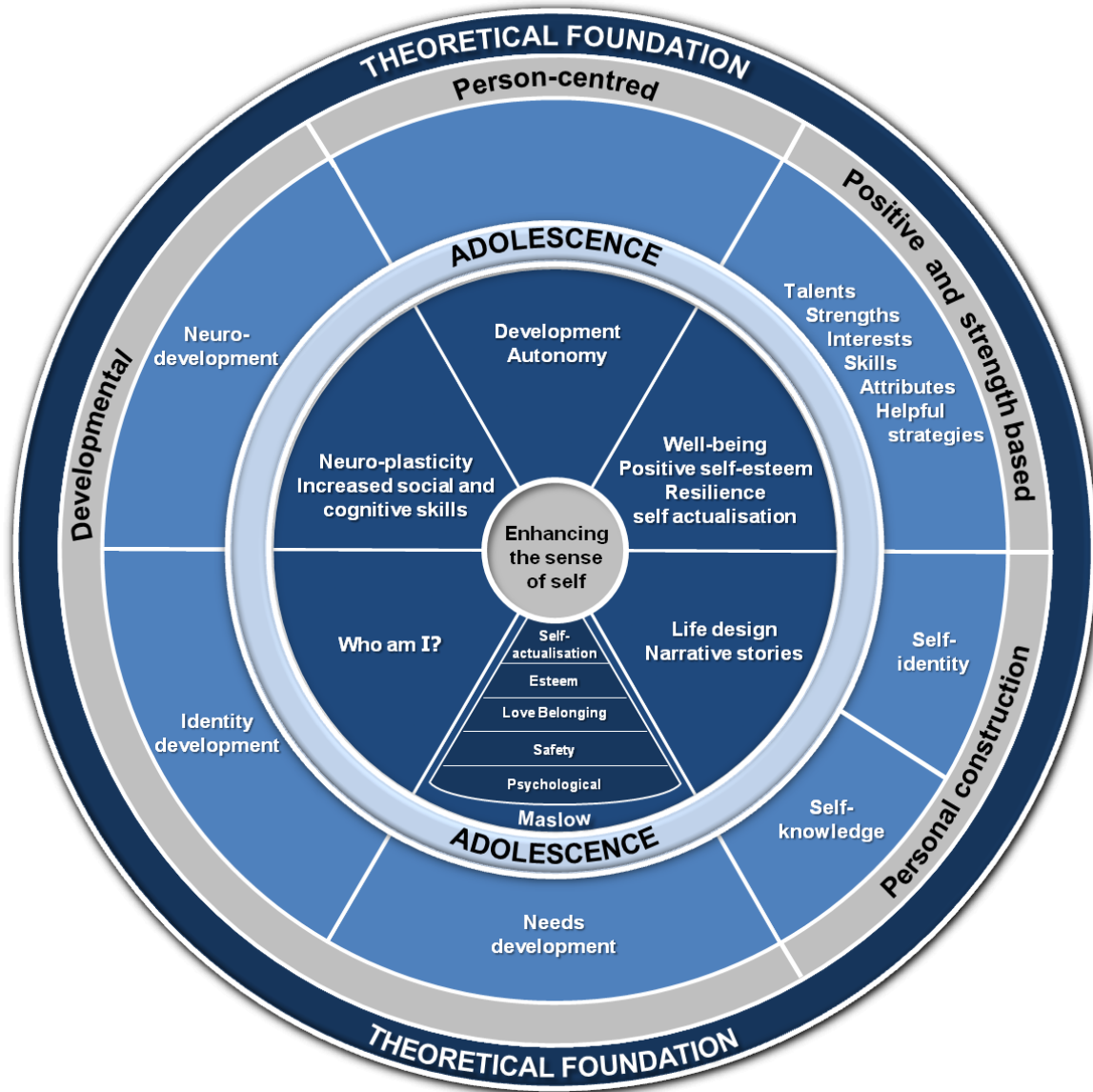


Figure 2. 5: Conceptual framework

The visual representation of the conceptual framework (Figure 2.5) is underpinning the specific and unique context on which this study is based and from which it will be conducted. It illustrates the researcher’s conceptual thinking about adolescents within the theoretical models previously discussed, which will provide the framework that will guide the researcher throughout the research project (Jaimes & Chang, 2000).

2.5 Paradigmatic perspective

The paradigmatic perspective represents the broad theoretical orientation from which the world is viewed and interpreted by the researcher (Cohen et al. in Maree & Van der Westhuizen, 2009). The researcher's perspective is rooted in both the interpretivist/constructivist epistemology, as well as in the positivist/post-positivist paradigm. The researcher's interest in understanding human behaviour makes working from an interpretivist/constructivist paradigm ideal, as she is hoping to gain more insight into the participants' qualitative experiences while exposed to life design group intervention. This will allow for creative reasoning aimed at making a significant and useful contribution to existing scientific knowledge. The researcher's dedication towards the positive psychology model, which embraces post-modernistic life design approaches, influenced her choice of intervention strategies.

Both quantitative and qualitative data will be used in order to address a wider range of questions, to mutually validate the findings of both approaches and to provide a more holistic picture of the research problem (Creswell, 2014; Creswell & Plano-Clark, 2011b; Flick, 2010; Tsushima, 2015). The combining of two different data sources will be employed as a method of triangulation, in the belief that a coherent justification for the themes will be built.

2.6. Overview and conclusion

The literature review in this chapter commenced with a theoretical framework, followed by a summary of literature and research pertaining to adolescence: the developmental stage, brain maturation and the effect thereof, and the relationship with different aspects like environment, culture, gender, and peers. These topics have been discussed and researched in detail, and salient and useful contributions have been made. The aim was to enhance the reader's understanding of this specific developmental stage.

This section was followed by available information on peer support. It is important to note that there is a limited amount of literature focusing on peer support at a senior school level, and even less information and research results focusing on the supporters. Although it is important to look at existing information, the lack of specific information related to this research topic compels one to be cautious in generalising information across diverse contexts.

A comprehensive understanding of what the sense of self and identity development entail is essential in order to shed light on the research questions. These aspects have been linked with life design counselling, as specific techniques associated with life design counselling will

be used during the intervention phase of the research project. It must be noted that these techniques have not been extensively used in groups. Notice must therefore be taken of the gaps in present literature and research.

In the next section a written, as well as visual illustration of the conceptual framework was given. The researcher's paradigmatic perspective was also discussed.

The decision to use peer supporters in groups during the intervention process was influenced by two beliefs held by Mother Teresa. Mother Teresa said that nobody must think that they are the only ones who can do something worthwhile, and that we will never be asked by God how many good things we had done, but with how much love it was done. By being merely the facilitator during the intervention process, the researcher is hoping not only for an increased sense of self in the peer supporters, but to empower each individual who will be part of the process to believe that she will always be able to make a difference in her own and other people's lives. People tend to think that success must always be measured in terms of profit, but there is value in being there for others; in listening without anticipation of reward; as this, according to mother Teresa, will teach us love.

CHAPTER 3

RESEARCH DESIGN AND METHODOLOGY

“Disciplining yourself to do what you know is right and important, although difficult, is the highroad to pride, self-esteem, and personal satisfaction.”

-Margaret Thatcher

3.1 Introduction

A research design is a plan and strategy reflecting the researcher's procedures for collecting, analysing, interpreting, and reporting data (Creswell & Plano-Clark, 2011; Nieuwenhuis, 2010). Research designs help guide the methods that will be used during the research process, and outlines the logic by means of which interpretations are made at the end of the project (Creswell, 2014; Creswell & Pano-Clark, 2011).

3.2 Research design

This study uses a parallel interactive multi-method design, embedded in an intervention framework. Each of the concepts embedded in this will be described and explained. In addition, the researcher will focus on an explanation of the research site, sampling style, data collection and analysis, and interpretation.

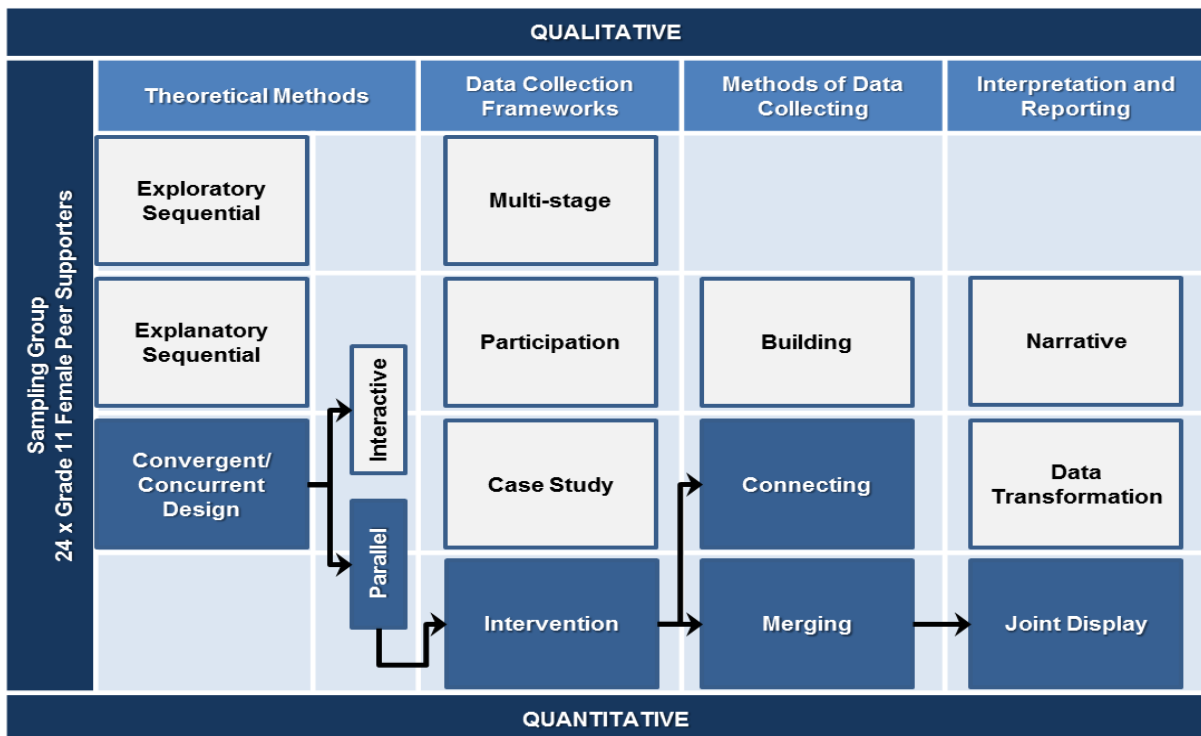


Figure 3. 1: A schematic representation of the research design (The highlighted blocks indicate the chosen methods that will be used in this specific research project.)

3.2.1 Multi-method approach

Multi- or mixed methods research implements a design using both qualitative and quantitative methods of data collection, analysis and interpretation. The mixed method approach presupposes certain philosophical assumptions as well as specific methods of inquiry. It attempts to blend numerical data with qualitative data. The mixed method was chosen to conduct the research under discussion, as the researcher is of the opinion that the convergence of research results will be complementary and will possibly lead to a wider and deeper explanatory perspective, which will increase the usefulness of the findings. Quantitative data will be used to help explain findings from the qualitative data, and the qualitative data can be used to assess the validity of quantitative findings, as explained by Fetters, Curry and Creswell (2013).

3.2.2 Parallel or convergent research design

The parallel design approach was initially conceptualised as a convergent triangulation design, and is the most well-known approach to mixing methods during research (Creswell & Plano-Clark, 2011). Two different methods, namely quantitative and qualitative, are used simultaneously during the data collection and analysis phases, after which the two sets of results are merged in order "to obtain different but complementary data on the same topic" (Creswell & Plano-Clark, 2011, p. 77). Qualitative methods of data gathering include interviews, field notes and images; while quantitative data indicates numerical data and statistical analysis (McBride, 2013; Somekh & Lewin, 2011). The intent in using parallel design is to bring together equally valued data simultaneously within a restricted time frame. The differing strengths and non-overlapping weaknesses of quantitative methods (large sample size, trends, generalisation) can be combined with those of qualitative methods (small sample, detail, in-depth results) (Creswell & Plano-Clark, 2011).

3.2.3 Intervention research

Fraser and Galinsky (2010) describe intervention research as research requiring the blending of existing research and theory with other knowledge to create intervention principles and action strategies. Action strategies include the provision of responsive feedback and support in relatively structured activities. Jenson (2014) summarises the three core steps in conducting basic intervention research as follows: specifying a problem, creating or selecting an intervention strategy or programme, and testing the effectiveness of the intervention. Convergent designed mixed method research can happen within an intervention framework (Miller, Crabtree, Harrison, & Fennell, 2013).

3.3 Research methodology

3.3.1 Sampling

Convenience sampling, a non-probability sampling method (Maree & Pietersen, 2007; Nieuwenhuis, 2010; Welman, Kruger, & Mitchell, 2010) will be used to select participants from a specific school for this study. This kind of sampling method has been selected for reasons of convenience: the girls at the school where the researcher is employed as an educational psychologist are accessible for sampling purposes.

Sampling must also be purposive and that requires the researcher to set specific boundaries in order to support the research question of the study (Punch, 2005). As this study focuses on mentors, or peer supporters as they are called at the school where the sampling will occur, 24 participants will be purposefully selected to be part of the Grade 11 peer supporter group.

The following schematic presentation is a visual representation of the research design. The data collection plan used to answer the research question will be described in tabular form, as recommended by Maree and Van der Westhuizen (2009a) and will be followed by a table that links the research questions to the data collection techniques (Maree, 2007).

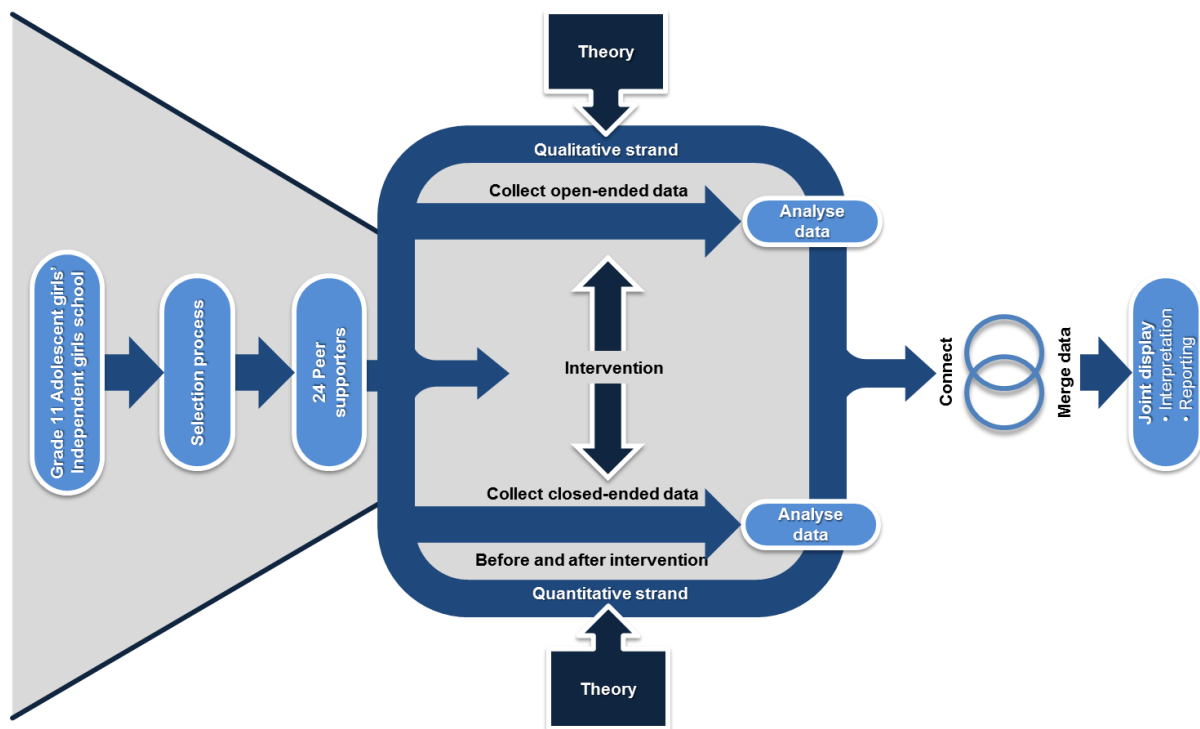


Figure 3. 2: A schematic presentation of the research design and sample group

3.3.2 Data collection

For the purpose of this study, qualitative and quantitative data collection will occur in parallel: both the quantitative and qualitative strands will be implemented during a single phase of the research study, and analysis for integration will only begin after the data collection process has been completed (Creswell & Plano-Clark, 2011). The two forms of data will be analysed separately and will then be connected and merged, as explained by Fetters, Curry and Creswell (2013), and as illustrated in Figure 3.2.

The multi-method data collection techniques, methods and data sources can be seen in Table 3.1. This is followed by a table (Table 3.2) linking the specific research questions applicable to this study, to the research techniques.

Data collection techniques		Data collection methods	Data sources
Quantitative	Psychometric testing: CAAS	Completion of the questionnaire pre- and post-intervention	Completed questionnaires
	Psychometric testing: RSCA	Completion of the questionnaire pre- and post-intervention	Completed questionnaires
Qualitative	Narrative group data collection	Open-ended questions sent to all selected group members	Typed or written answers
	Focus group interviews	Verbatim transcriptions pre- and post-intervention	Transcription
	Reflective diary Journaling	Some of the intervention activities and reflections will be done in journals; these will cater for reflective diarising of personal experiences	Personal experiences will be written in personal diaries
	Observation	The researcher's observations, as well as the observations of two helpers (qualified psychologists) will be recorded (written field notes)	Field notes

Table 3. 1: Multi-method data collection plan

Primary research question	Quantitative and qualitative techniques	Purpose
What is the impact of postmodern narrative life design group counselling on the sense of self and the self-esteem of adolescent girls in an independent girls' school context?	Administration of psychological tests (CAAS and RSCA) Open-ended questions Intervention: postmodern life design group counselling Field notes, diaries, journals and observations	To compare and investigate the correlation between scores from the two questionnaires that will be completed pre- and post-intervention To investigate the correlation between qualitative data gathered pre-, during and post-intervention. To arrive at conclusions and attain better insight
Secondary research questions	Quantitative and qualitative techniques	Purpose
What are the essential aspects of group-based life design counselling?	Qualitative reflection by participants	To distinguish between more and less helpful and effective group-based life design counselling-related activities
How does learners' participation in life design (including self-construction) group intervention influence the development of a clearer sense of self and improved resilience?	Administration of psychological tests Open-ended questions Postmodern narrative life design group intervention Field notes, diaries, journals and observations	To examine the nature of the responses and scores from the two questionnaires pre- and post-intervention To examine the nature of the responses from the quantitative strand as compared to data from the qualitative strand To arrive at research-based conclusions regarding the effect of group-based life design counselling and attain better insight into the effect on the sense of self and possible changes in resilience of participants
How can life design counselling techniques successfully be incorporated in a group setting?	Reflection by researcher Recommendations by two psychologists who observe and make field notes and recommendations Reflection and recommendations by participants	To enable me to make recommendations about more effective group-related life design counselling and adapt the intervention programme for more effective use in future
What are the values and limitations of such a group intervention programme?	Qualitative evaluations by researcher, observers and participants	To shape the future application of group life design intervention

Table 3. 2: Linking research question to data collection techniques

3.3.2.1 Quantitative data collection

The choice of instruments that will be used for data collection, depends very much on the reason for measurement and the primary concepts of interest (Theofilou, 2013). Instruments have to be able to measure outcomes effectively and provide outcome criteria with strong theoretical links to the desired outcomes (Finestone, 2013). For the purpose of this study, quantitative data will be gathered by use of the *Career Adapt-Abilities Scale (CAAS)* (Savickas & Porfeli, 2012), through the provider Vocopher; and the *Resiliency Scales for Children and Adolescents (RSCA)* (Prince-Embury, 2007), through the provider JvR Psychometrics.

Although most South Africans can communicate in English (Oakland, Wechsler, & Maree, 2012), South Africa's unique demographics make it important to the researcher to use instruments that have been validated in South Africa.

3.3.2.1.1 The Career Adapt-Abilities Scale (CAAS)

The term "career adaptability" has its origins in the vocational psychology of Donald Super (Salomone, 1996), who moved away from the concept of developmental stages, to a more inclusive concept of adaptability, which focuses more on maturity. The CAAS is therefore well suited for use in this research project that focuses on individuals, their sense of self and their psychosocial resources.

Career Adapt-Ability Scale (CAAS)			
Concern	Control	Curiosity	Confidence
The scales measure psychological resources for managing occupational transitions, developmental tasks and work traumas. These are all seen as part of the developmental tasks of adolescence, for developing a clearer sense of self.			

Table 3. 3: Career Adapt Ability Scale (CAAS)

3.3.2.1.1.1 Standardisation of the CAAS

The research-based version of the CAAS (Savickas & Porfeli, 2012) will be used to measure the participants' adaptability. The CAAS is a multi-factorial self-rating measure comprising of 24 items (four scales, each with six items). The four scales measure Concern, Control, Curiosity, and Confidence as psychosocial resources for managing transitions, developmental tasks, and work traumas. This assessment tool was developed by means of the collaboration of researchers in 13 countries (Savickas & Porfeli, 2012).

In the South African context, 435 Grade 9 and 11 participants (of which 257 were girls) with a mean age of 15.49 years ($SD=1.32$) voluntarily participated in a research project to determine the psychometric properties of the CAAS (Maree, 2012). The mother tongue of the participants was any of the 11 official languages and any other African language. The multi-cultural participants attended three English-medium secondary schools in the Molopo area in Mafikeng. One of the schools was a private school (Maree, 2012).

3.3.2.1.1.2 *Validity of the CAAS*

To provide initial evidence for the validity of the CAAS-USA, the CAAS' scale scores were compared to the scores of the *Vocational Identity Status Assessment (VISA)*. The correlation coefficients showed a consistent pattern of association between the VISA subscales and the CAAS-USA adaptability score, with five of the six correlations being significant at $\alpha=.01$ level. These results pertain only to the USA data.

Comparing the CAAS-South Africa to the CAAS-International, Maree (2012) reports that the item means indicated that the typical responses were in the range of strong to very strong. The subscale means were similar for the South African and International Forms, with all of the loadings found to be statistically significant at $\alpha=.01$ level. Confirmatory factor analysis (CFA) showed that data for the CAAS-South Africa fit the theoretical model very well. Based on the results of the statistical analysis of the CAAS-South Africa, the researcher is satisfied that the coherent multidimensional, hierarchical structure that the CAAS-South Africa demonstrates, is proof that the instrument measures the constructs it was designed to assess.

3.3.2.1.1.3 *Reliability of the CAAS*

The *Career Adapt-Abilities Scale (CAAS)-International Form 2.0* has demonstrated excellent reliability and appropriate cross-national measurement equivalence (Savickas & Porfeli, 2012). In the statistical analysis of the CAAS-South Africa, the items descriptive statistics show an internal reliability for the full score of .91. This reliability score is slightly lower than the reported reliability of the CAAS-International, namely a score of .92. The reliability for the subscales of the CAAS-South Africa was slightly lower than the reliability for the full score, namely .77 for the subtest "Concern", .71 for the subtest "Control", .78 for the subtest "Curiosity" and .80 for the subtest "Confidence (Maree, 2012). Overall the internal consistency estimates demonstrated were good to excellent.

The norm population consisted of 257 girls from different cultures and with a variety of mother tongues, from English-medium schools (of which one was a private school). These qualities are very similar to the qualities of the participants in this research project. The researcher is therefore satisfied that the CAAS will give reliable results.

3.3.2.1.2 Resiliency Scales for Children and Adolescents (RSCA)

The *Resiliency Scales for Children and Adolescents (RSCA)* provides a theoretically and empirically sound assessment of the core characteristics of personal strength and resiliency, namely Sense of mastery, Sense of relatedness and Emotional reactivity. The assessment instrument consists of three scales of 19 to 24 questions each. The purpose of the scales is to assess the core characteristics of personal resilience in children and adolescents from 8 to 18 years of age (Prince-Embury, 2007). The full measure includes 64 Likert-type items and yields two Index scores: Resource and Vulnerability. A Resource Index combines the two strength-based scales into one score. The Vulnerability Index expresses the discrepancy between the participants' Emotional Reactivity Scale and Resource Index Scores (Prince-Embury, 2011). The subscales and rationale of each of the scales of the *RSCA* can be seen in the next table (Table 3.4).

<i>The Resiliency Scales for Children and Adolescents (RSCA)</i>		
SCALES	Subscales	Rationale
Sense of Mastery Scale	Optimism Self-efficacy Adaptability	A sense of mastery will increase the likelihood that a child will be able to cope with adverse circumstances.
Sense of Relatedness Scale	Trust Support Comfort Tolerance	A sense of relatedness serves as a buffer against stress.
Emotional Reactivity Scale	Sensitivity Recovery Impairment	The emotional reactivity scale evaluates vulnerability to stress or impact from adversity as it relates to a child's pre-existing condition.
Personal Vulnerability Index		This index serves to compare the difference between a child's experiences of personal resources with his/her experience of emotional reactivity.
The scales measure psychological resources for managing occupational transitions, developmental tasks and work traumas. These are all seen as part of the developmental tasks of adolescence in developing a clearer sense of self.		

Table 3. 4: The resilience Scales for Children and Adolescents (RSCA)

3.3.2.1.2.1 *Psychometric properties of the RSCA*

The *RSCA* was originally developed and normed for use with adolescents, but was later also expanded for use with younger children (Prince-Embury, 2007). It is based on findings from previous research into the personal strengths and resiliency of children and adolescents and is grounded in developmental theories. Its purpose is to provide an empirically and theoretically sound assessment tool for core characteristics of personal resiliency in learners aged 9 to 18 (Prince-Embury, 2005).

3.3.2.1.2.2 *Standardisation of the RSCA*

The *RSCA* self-report questionnaire (Prince-Embury, 2007) has been standardised on children (9 to 11 and 12 to 14 years old) and adolescents (15 to 18 years old) in the United Kingdom. The adolescent sample consisted of 200 adolescents (100 male and 100 female participants) (Prince-Embury, 2007). Evidence of internal consistency was good to excellent for all three global scales across the three age bands (Prince-Embury, 2007). Internal consistency for both Index scores was excellent. For the most part, alpha coefficients for subscales were adequate for younger students and good to excellent for adolescents, and the three *RSCA* global scale and two Index scores were found to be effectively used for screening, selection of intervention, and pre-/post-intervention assessment at group and individual levels (Prince-Embury, 2011).

Prince-Embury (2011) found the three-scale structure to apply similarly across genders and race/ethnicity, without bias being caused by these factors. The UK adolescent group consisted of 200 participants (n=200), of which 100 were girls (n= 100). Unfortunately no proof of standardisation of the *RSCA* in South Africa could be found. Since the instrument has not been standardised in South Africa, all results should be treated with caution.

3.3.2.1.2.3 *Validity of the RSCA*

The validity of the *RSCA* was assessed by using different statistical methods:

- **Confirmatory factor analysis**

Confirmatory factor analysis was used, as the grouping of subtests was done a priori. Different models, with between one and three factors, were tested and compared with one another to confirm the hypothesised factor structure of the *RSCA*. Each model was compared to a general one-factor model and a model with no common factors. Three goodness-of-fit indices were used (none of them very sensitive to the size of the

standardised groups), namely the Adjusted Goodness-of-Fit Index (AGFI) (Jöreskog & Sörbom), the Tucker-Lewis Index (TLI) and Steiger's Root Mean Error of Approximation (RMSEA) (Prince-Embury, 2007). The confirmatory data analysis using the three goodness-of-fit indices resulted in the following results for the adolescent girl norm group (Prince-Embury, 2007).

Interrelatedness/Internal structure of scales Confirmatory factor analysis - Adolescent girls			
Model 1 was used as the baseline, rather than the null model.			
Model	Goodness-of-fit index		
	AGFI	RMSEA	TLI
1	.75	.13	.87
2	.84	.09	.94
3	.86	.08	.95

Table 3. 5: Validity evidence of the RSCA based on confirmatory factor analysis

The researcher is satisfied that the RMSEA values of .08 and .09 confirm adequate model fit with reasonable errors of approximation in the population.

- **Relationship with other variables**

The RSCA results were correlated with scores on other related instruments, clinical groupings, as well as with non-clinical control groups. Convergent and divergent validity evidence is discussed in terms of specific criteria, as shown in the next two tables.

TESTS	<i>Resiliency Scale for Children and Adolescents (RSCA)</i>
Reynolds Bully/ Victimization Scale (BVS)	<p>Significant gender differences were displayed. For girls both the scales that reflect strengths or resources, namely Sense of mastery (-.77 level of significance) and Sense of relatedness (-.63 level of significance) act as buffers and are related to less bullying and victimisation. Adaptability (-.76) showed a higher significance than the other two subtests on the Sense of mastery scale (Self-efficacy was -.65 and Optimism -.58). All the Sense of relatedness subtest scores were also strongly negatively related to bullying behaviour for girls, especially the subtests Comfort with others (-.66), Trust (-.58) and Support (-.51).</p> <p>The Emotional reactivity scale showed a relationship with the other scores for boys, but not a significant relationship for girls.</p>
Brown ADD-	<p>A moderate significant correlation was found in the predicted direction.</p> <p>As none of the participants in the research study was diagnosed with or meet the diagnostic criteria for ADHD, these results are not regarded as of high relevance and importance to this specific study.</p>
BYI-II for Depression, Anxiety, Anger, Disruptive behaviour and Self-concept	<p>A negative correlation was found with the Sense of mastery (-.51 to -.61), as well as Sense of relatedness scales (-.45 to -.57) and this shows a buffer effect for negative emotions and behaviour.</p> <p>A high positive correlation was found between the Emotional reactivity scores, as well as the Vulnerability index scores on all the BYI-II Negative affect scales, confirming that a high degree of emotional reactivity is associated with negative affect and behaviour. Scores were between .60 and .77.</p> <p>The Sense of mastery scale had a positive correlation with the Self-concept scale ($r=.74$).</p> <p>The Sense of relatedness scale also showed a positive correlation with the Self-concept scale ($r=.70$).</p>
Piers-Harris 2 Resiliency Self-Concept	<p>The Sense of mastery score and subscale scores (between 0 .03 (Popularity) to 0 .70 (Behaviour)), as well as the Sense of relatedness scores and subscale scores (0.35 (Popularity) to 0.61 (Behaviour)) showed a positive correlation with the total Pier-Harris 2 scores. A notable strong negative correlation of -.61 was found between the Vulnerability index score and the Piers-Harris 2 scores. The researcher is satisfied. that there is statistical proof that lower self-esteem in adolescents is related to greater vulnerability and impaired emotional reactivity (Prince-Embury, 2007).</p>
Connors Adolescent symptom scale: Short scale (CAAS:S)	<p>A strong negative correlation was found between the Resources index scale scores and the CAAS:S scores: Hyperactive-impulsive: -0.43, Cognitive problems: -0.51, Conduct problems: -0,56 and ADHD index: -0.63., indicating the buffer of Resources against psychological symptoms.</p> <p>The Vulnerability index scores correlated strongly with all CAAS:S scores: Hyperactive-impulsive: 0.48, Cognitive problems: 0.59, Conduct problems: 0.62 and ADHD index: 0.68. The findings provide valid evidence for the Vulnerability index to be related to different problem areas.</p>

Table 3. 6: Validity evidence of the RSCA based on correlation with other measures

Validity evidence based on criteria group comparison	
Adolescent sample	<i>Resiliency Scale for Children and Adolescents (RSCA)</i>
Depressive disorder	n=45 (clinical and matched control group), with 32 of the clinical group members being female. The Bonferroni correction index and Cohen's formula were used for statistical analysis of data. An absence of resilience and greater vulnerability were found in adolescents diagnosed with depression.
Anxiety disorder	n=26 (of which 12 were female). The Bonferroni correction results showed average score results for all individuals in the control group, but significant differences in the group diagnosed with anxiety disorder:
Conduct disorder	n=38 (of which 11 were female). Valid evidence was found that differences in resiliency and vulnerability are related to conduct disorders in adolescents.
Bipolar disorder	n=8, with 5 female participants. No significant differences were found (probably due to the small sample group), although large differences were found in the subscales Sensitivity and Impairment (not statistically significant).

Table 3. 7: Validity evidence of the RSCA based on criteria group comparison

In summary it can be said that criteria group comparison with matched control groups provided strong and consistent validity for the Resiliency Scales. Differences in scale and subscale scores showed a significant difference in the predicted direction, with strengths acting as a buffer against different disorders (Prince-Embury, 2007).

3.3.2.1.2.4 *Reliability of the RSCA*

The internal consistency of each of the subtests of the *RSCA* is important to assure that each scale assesses the same constructs. For each of the three Resiliency scales and subscales, Cronbach's alpha coefficients were computed to assure internal consistency across items within each scale and subscale. The standard error of measurement (SEM) was also calculated to determine the number of errors in individuals' observed scores, which is inversely related to the reliability of the given scale. A smaller SEM indicates better reliability. The test-retest reliability coefficients for the adolescent sample were based on the test results of 65 (35 male and 30 female) adolescents. The mean interval between testing and retesting was 8 days, with the interval ranging between 3 and 23 days.

All the scales and subscales demonstrated high internal consistency for all the female adolescent samples, with the reliability coefficients for all of the three scales ranging between .83 for Sense of mastery, and .92 for both the Resource index and Vulnerability index. The SEMs were smaller for each successive age band and particularly small for adolescents. This indicates reliable test scores for all age groups, but more so for adolescents. The test-retest reliability was also high (for subtests Sense of mastery, Sense of relatedness and Emotional reactivity) and excellent (for the subtest Vulnerability) (Prince-Embury, 2007).

The psychometric results convinced the researcher of the reliability of the *RSCA* and that it can be used with confidence for the research project. Specific results are presented in the following table (Table 3.8).

SCALES	Subscales	Internal consistency (female adolescents) Cronbach's alpha coefficient n=112	Standard error of measurement (SEM) (female adolescents) $SEM = SD\sqrt{1 - r_{xx}}$ n=113	Test-retest stability (adolescent girls 15-18 years old) Mean interval between testing and retesting: 8 days (3-23 days) Standard difference (Cohen's formula 10.4) n=65
Sense of Mastery Scale	Optimism	.78	.95	0.03
	Self-efficacy	.84	.90	0.11
	Adaptability	.64	1.37	-0.31
Sense of Relatedness Scale	Trust	.84	.95	0.03
	Support	.71	1.24	-0.08
	Comfort Tolerance	.82 .77	1.12 1.12	0.00 0.00
Emotional Reactivity Scale	Sensitivity	.78	1.16	-0.36
	Recovery	.74	1.12	-0,11
	Impairment	.89	1.95	-0.45
	Resource Index	.94	1.73	-0.01
	Vulnerability Index	.94	1.73	-0.21

Table 3. 8: The internal consistency of the RSCA

3.3.2.2 Qualitative data collection

In the qualitative data gathering process, priority will be given to qualitative data emphasising the exploration and development of the sense of self of each participant. In order to collect narrative responses from the female peer supporters within the girls' school context, two different methods of qualitative data collection will be used in three phases. The first phase of narrative data collection involves a survey in order to obtain group data by means of open-ended questions. This will be included to make explanatory assertions about the group, as motivated by Archard (2012).

The second phase of data collection involves focus group discussions and observations (conducted by the researcher) with the chosen group of peer supporters. Within a social constructivist framework, the purpose of focus group discussions is to encourage participants to engage in processes of collective sense-making (Nel, Romm, & Tlale, 2014). This is similar to Wilkinson's (2012) suggestion that researchers can observe how individual participants construct their views during group discussions. These focus group discussions and observations will be woven into and form part of the life design intervention group sessions. Since life design counselling emphasises the concepts of identity (the self), narrativity of identity (the story) and intentionality (meaningful action) (Lent, 2012), life design intervention in this research will seek to promote the peer supporters' level of agency by adding meaning to their group interactions, as mentioned by McMahon and Watson (2013). The researcher will be the facilitator during the process of co-construction between the peer supporters and the counsellor. Two other qualified psychologists will assist in the process of data collection through observation and field notes, and will also act as facilitators when the big group divide into smaller groups consisting of eight participants each. The qualitative data analysis will allow for an in-depth exploration of the verbal and non-verbal responses and perceptions of the peer supporters, as well as the possible observed cognitive, emotional and behavioural changes during the intervention sessions.

The third phase of qualitative data collection involves a second questionnaire consisting of open-ended questions to be answered by the participants. The questions in this questionnaire will be related to the questions in the first questionnaire⁵.

⁵ Both the questionnaires are included in the addenda.

3.3.2.3 *Multi-method data collection plan*

Data will be gathered at an independent girls' school from the 24 chosen female Grade 11 peer supporters. Qualitative and quantitative data collection will occur simultaneously. The data collection plan must follow a predetermined sequence of events as recommended by Maree and Van der Westhuizen (2009). The next table reflects the sequential steps in the data collection plan, as well as the planned activities that will take place during each phase.

Data collection sequence	Planned activities/ techniques
Step 1	Advertise for membership to the Grade 11 peer support group
Step 2	Interviews conducted by previous year's peer support group
Step 3	Administer informal questionnaire with open-ended questions
Step 4	Administer tests: CAAS and RSCA
Step 5	Qualitative data collection during intervention sessions
Step 6	Administer tests: CAAS and RSCA (three months after initial testing)
Step 7	Administer informal questionnaire with open-ended questions

Table 3. 9: Data collection plan

3.3.3 **Intervention strategy**

3.3.3 **Intervention strategy**

The basic foundation of life design counselling emphasises the concepts of identity (the self), narrativity of identity (the story) and intentionality (meaningful action) (Lent, 2012). The specific life design (related) intervention in this research study will seek to promote the peer supporters' level of agency by adding meaning to their interactions, as mentioned by McMahan and Watson (2013). The researcher (with the help of two other psychologists) will be the facilitator during the process of co-construction between the peer supporters and herself. The planned life design intervention programme will follow the model proposed by Savickas, which relies on stories and activities, rather than test scores and profile interpretations (Savickas, 2012). The specific model that will be used in the research is based on the model as described and explained by Savickas et al. (2009). The researcher concurs with Savickas and other members of the life design team in believing that not only one, but different life design techniques and programmes are available. The researcher will use techniques from different sources and authors to fit this specific research

context.⁶ The sequential planned intervention objectives and linking planned activities can be seen in Table 3.10.

Steps	Intervention objective	Planned activities and techniques to achieve intervention objective
General	Looking within for guidance Assisting participants to achieve psychological growth and improved well-being by strengthening the sense of self	The narrative approach that I will use will focus on themes and patterns in participants' own perceptions, life stories and beliefs.
Step 1	Establishing a working alliance relationship Conveying the message that participants are the architects of their own lives and the idea of co-construction in partnership with the researcher Participants become aware of main domains of their lives Objectives that participants want to achieve are defined	Ice breaker: linking information to specific participants and getting to know each other. Poem: "Of roses and thorns": Read and discuss, and find and communicate personal meanings and opinions about the poem to the group. Family constellation (genogram). Draw, tell and discuss meaningfulness and family attributes and assets. Four boxes technique. Identify symbols that will represent the following: Who am I? What would I like to become? What hinders me? What will help me to overcome the obstacles? Journal writing: reflecting on activities.
Step 2	Exploration of participants' subjective sense of self through verbalising their experiences, expectations, actions, interactions, relationships and future anticipations Facilitation of self-reflection	Draw a lifeline. Discuss easy/happy times and difficult times with the group. Talk about earliest recollections (stories) before the age of 6 years old. Empowering narrations: What do you learn about yourself? Discussion of role models and their qualities and their importance to the participants. Discussion of favourite book/film and impressive qualities of the hero/heroine. Think about and discuss own success experiences and strengths. Journal writing: reflecting on activities.
Step 3	Objectifying stories to open new perspectives Recognising assets and strengths Reorganising, revision and revitalisation of stories by distancing themselves from	Talk about own life story (past and present life chapters). Awareness of uniqueness facilitated. Discussion. Wheel of life used to think of the question: "Who am I?" Journal writing: reflecting on activities.

⁶ A work booklet (with areas for journaling) will be compiled for each participant, in which all activities will be explained and reported. The layout of the booklet will be included in the addenda (on CD).

Steps	Intervention objective	Planned activities and techniques to achieve intervention objective
	their own narratives Facilitation of re-authoring in a positive way	
Step 4	Problematic areas placed in new stories Participants create a synthesis of old and new by selecting and tentatively committing to some sense of self Reconfirmation of ability to realise desired identities	Life story: future chapters and name of own book to emphasise ownership. Identification of strengths and problem-solving skills. Use the phrase: "If you could have your life over..." To facilitate and encourage creative thinking and problem-solving skills.
Step 5	Actualising identity Specifying activities that actualise an identity – assisting the participants to craft a plan that will help address barriers Telling the new story to an audience	Contrast "vicious" and "virtuous" life. Use a flower as symbol to integrate ego-states. Discuss old beliefs, new decisions. Discuss three favourite quotes. Guided fantasy or imagery: * Creative arts using rainbow paper * Collage of "Who I am and what shaped me" * Creative writing – an unstructured activity
Step 6	Follow-up	Regular follow-ups and further intervention for the rest of the year as part of the peer support programme.

Table 3. 10: The intended life design intervention plan

3.3.4 Data analysis

The final step in the research process involves the analysis and interpretation of data, from which meaning can be generated. A multi- or mixed method research study necessitates statistical data analysis of numerical values, as well as an interpretive analysis of the participants' experiences pre and post intervention (Morgan & Skar, 2015). Data analysis will therefore take place in two different strands, namely qualitative and quantitative data analysis. The analysis for integration will only take place after completion of the intervention sessions (Fetters et al., 2013), i.e. after a period of three months. The scientific process that will be followed in both strands of analysis will be described in the next section.

3.3.4.1 Quantitative data analysis

In the statistical analysis of the quantitative data, the researcher will make use of the Wilcoxon signed-rank test. The Wilcoxon signed-rank test will be used, because it is a non-parametric statistical hypothesis test specifically used when comparing repeated measurements on a single sample that is not normally distributed (Maree & Pietersen, 2012). The results will show whether the mean rank of pre- and post-intervention results differ, and if the differences are statistically significant with $p < .05$ (Field, 2009).

3.3.4.2 Qualitative data analysis

Descriptive statistics is an all-encompassing term that describes how data can be organised and summarised in a meaningful way (Maree & Pietersen, 2010). The validity of the qualitative part of a research project is the degree to which the concepts and interpretations are mutually meaningful to the researcher and the participants. The researcher must therefore take care that the process of data analysis follows a specific scientific process. A combination of recommended six-step plans proposed by Clarke and Braun (2013), Creswell (2003) and McMillan and Schumacher (2001) will be employed. The researcher will reduce data, and identify and analyse patterns in the qualitative strand of the research project. The following table lists the steps that will be followed, as well as the techniques that will be used.

Data analysis sequential steps		Planned activities/ techniques
Step 1	Familiarisation with data	Reading and re-reading of written data
Step 2	Preparation and organisation of data	The data will be prepared for analysis, which involves the transcribing of all audio-recorded data This step includes data-reduction: unnecessary information will be discarded
Step 3	Coding of data by reading the data again, analysing the data and searching for themes (Nieuwenhuis, 2010)	Divide data into meaningful analytical units (Nieuwenhuis, 2010) Use themes from assessment data and themes that were found in 6 previous studies (Maree, 2015) as a guideline, but also identify possible new themes that may occur Collate all data relevant to themes Use different symbols/numbers for different participants and techniques.
Step 4	Reviewing of themes and identification of sub-themes	Make sure that all identified themes are significant and relevant Identify sub-themes specifically related to the sense of self
Step 5	Defining and naming themes	Identify the most prominent and recurring themes Discard unnecessary themes or themes that are not prominent Identify essence of each theme
Step 6	Write up	Integrate and write down research findings, personal conclusions, literature study and theory

Table 3. 11: Thematic analysis (TA) plan

3.4 Quality assurance

Quality assurance refers to consistent research results, even if conducted by different researchers or obtained at different times to the present research project (Maree & Van der Westhuizen, 2009). The decision to implement mixed methods research was made with the knowledge that the process will be tedious and time consuming (Scammon et al., 2013). In spite of the complexity of the processes and many logistics involved in identifying and collecting data from diverse sources, the researcher decided on mixed method research in order to enhance and increase the trustworthiness, triangulation, crystallisation and credibility of the research project (Creswell & Plano-Clark, 2011; Maree, 2012; Maree & Van der Westhuizen, 2009; Nieuwenhuis, 2010). Ensuring and verifying the quality of the data is important, and will be discussed in the following section.

3.4.1 Quantitative quality assurance

Determining and providing quantitative or numerical variables is an essential part of quantitative research. Certain constructs in psychology are multidimensional and are not easily measured. The researcher well aware of possible threats to the validity as well as the reliability of research data, and will take the necessary measures to minimise such threats in order to draw correct inferences from the data (Creswell, 2014).

3.4.1.1 Reliability of quantitative data

Reliability refers to the extent to which the research results are consistent at different times of data collection, or over different forms of the same instrument. The reliability coefficients and other psychometric properties of both the CAAS and the RSCA have been discussed earlier in Chapter 3. Both these instruments are standardised questionnaires.

The researcher will address the external reliability by using the same experimental group pre- and post-intervention over a period of only three months. She will also apply, with the help of the Statistics Department of the University of Pretoria, statistical significance testing, as suggested in the *Publication Manual of the American Psychological Association* (APA) (2010).

3.4.1.2 Validity of quantitative data

A distinction can be drawn between internal and external validity. Internal validity refers to the degree to which differences in research results pre- and post-intervention can be claimed to be due to the impact of the treatment programme, and not to other factors. Internal validity therefore refers to the relationship between the dependent and the independent variables in

the research project (Di Fabio & Maree, 2012). External validity can be divided into population validity, temporal validity and ecological validity, and refers to the possibility of generalising findings to contexts or individuals different to those used by the researcher (Di Fabio & Maree, 2012). Potential threats to the validity that need to be controlled or minimised can be seen in Tables 3.12 and 3.13.

Threat	Description	Strategy
Instrumentation	Different instruments may be used pre- and post-intervention and may affect the participants' performance.	The same tests, namely the CAAS and the RSCA, will be used. The psychometric properties of these tests will be discussed later in Chapter 3.
History	External events may occur and may unduly influence the test results beyond the intervention.	The tests will be administered directly before and after the intervention programme. If any external factors are present during the three-month intervention period, these will be reported. If the external factor is safe and can be controlled, all participants will be exposed to the experiences.
Maturation	Normal developmental changes (physical, emotional and intellectual) may have an effect on the test results.	Data collection will only take place over a restricted three-month period. All the participants will be in Grade 11 and will probably change at the same rate.
Regression	Participants with extreme scores may be selected.	All the selected peer supporters will have the opportunity to be part of the experimental group.
Mortality	Participants may withdraw voluntarily from the study or may not complete all the phases of the research project.	All the chosen peer supporters will be given the opportunity to participate in the research study. All the Grade 11 learners may apply to become a peer supporter and will be informed about the research study that will be conducted.
Testing	Exposure to the test may influence the outcomes of the retest results or may cause statistical regression.	The time between the test and retest will be three months.
Experimenter's behaviour	The expectation of a specific outcome may influence the participants' behaviour and the researcher's data collection or perception of characteristics.	The researcher will adhere to the scientific principles of a researcher and will have all interpretations checked by her supervisor, Professor J. G. Maree.

Table 3. 12: Steps that will be taken to enhance the internal validity of quantitative data

(Adapted from Creswell, 2014 and Di Fabio and Maree, 2012)

Threat	Description	Strategy
Insufficient realism	The researcher may have unrealistic strategies and expectations.	Intervention will be as realistic and apparent as possible.
Ecological validity	Research conditions may influence the degree to which research results can be generalised.	The researcher is well known to the peer supporters and will make sure that they are comfortable and relaxed during the research project.
Failure to describe (independent) variables explicitly	The participants may not be fully aware of the implications of the research project.	The researcher will inform all the participants and their parents about the details of the research project.
Temporal validity	The generalisation of findings across different time frames may be limited.	Mixed method research will be used with multiple comparisons from different sources at different times.
Population validity	Inadequate representation of the population has a limiting effect on the generalisation of findings.	Participants will be from different cultures and from diverse backgrounds.

Table 3. 13: Steps that will be taken to enhance the external validity of quantitative data

(Adapted from Creswell, 2014 and Di Fabio and Maree, 2012)

3.4.2 Qualitative quality assurance

In qualitative research, internal validity refers to the assumption that differences in results obtained pre- and post-intervention are due to experimental treatment, and not because of other influences (Maree & Van der Westhuizen, 2009). Golafshani (2003) proposes that validity in qualitative research is sufficient to establish reliability, and recommends the use of the term "trustworthiness", which includes credibility, neutrality or confirmability, consistency or dependability and applicability or transferability (Creswell, 2014; Creswell & Plano-Clark, 2011a; Mertens, 2010):

3.4.2.1 Trustworthiness

Trustworthiness refers to the way in which data is collected, sorted and classified (Di Fabio & Maree, 2012) and have mutual meanings between the participants and the researcher (McMillan & Schumacher, 2014). Di Fabio and Maree (2012) discuss four criteria that enhance the trustworthiness of qualitative research findings:

- **Credibility:** credibility refers to the extent to which research findings are trustworthy and believable.
- **Confirmability:** Research findings and interpretations must be confirmed by another objective person, or other people.
- **Dependability:** Reference is made to the extent to which the researcher, or another researcher, can duplicate the research findings with similar participants in a similar research context.
- **Transferability:** Transferability refers to the extent to which the research findings can be generalised to other contexts.

3.4.2.2 *Triangulation*

Triangulation refers to the process by which the source of validation is increased. Triangulation implicates that information is gathered from a wide base of resources: different sources of information, methods, researchers, theories and types of data should be used to complement each other and to facilitate the validation of results (Di Fabio & Maree, 2012).

3.4.2.3 *Crystallisation*

Crystallisation takes place when researchers consider different perspectives and interpretations, and go beyond simply reading the data gathered and depend on self-reflection (Nieuwenhuis, 2007). In doing this, the trustworthiness will increase and it will lead to an in-depth understanding of complex issues (Di Fabio & Maree, 2012).

The researcher will use the following strategies, adapted from Maree (2010) to enhance the trustworthiness of the study (Table 3.14):

Credibility	<p>Multi-method strategies</p> <p>Peer debriefing if necessary</p> <p>Participant review</p> <p>The same tests used pre- and post-intervention</p>	<p>Triangulation – Both qualitative and quantitative data will be collected for divergence and convergence of evidence (Archibald, Radil, Zhang, & Hnason, 2015).</p> <p>Crystallisation – The focus will be on the complex patterns and themes that emerge during the data collection and interpretation (Nieuwenhuis, 2010).</p> <p>Continuous observation of the participants will be carried out during the interviews and during intervention.</p> <p>Journaling of observations, experiences and decisions to increase better comprehension regarding the researcher's reasoning process (Nieuwenhuis, 2010).</p> <p>All coded data will be checked and audited in order to ensure that the identified themes will be an accurate representation of the raw data.</p> <p>All participants will get the opportunity to determine whether the results and inferences are accurate.</p> <p>Misunderstandings will be discussed and cleared up with all participants before the data is interpreted and analysed, to ensure a comprehensive understanding of the phenomena.</p>
Dependability	<p>Verbatim reporting of responses</p> <p>Low inference explanations: presentation of negative or contradictory information</p> <p>Mechanical data gathering</p> <p>Avoidance of selective use of data</p>	<p>An audit trail will be carefully maintained.</p> <p>All interviews, comments and observations will be recorded and transcribed.</p> <p>Test results pre- and post-intervention will be carefully managed.</p> <p>All qualitative and quantitative information (including possible contradictory information) will be included in the data.</p> <p>All conversations will be recorded and transcribed.</p> <p>The coding, as well as the interim data analysis, will be checked by an external coder, namely the supervisor, Professor J.G. Maree, who is acknowledged as an internationally acclaimed researcher in the field of life design counselling (Merriam, 2014; Mertens, 2010).</p>
Confirmability	<p>Data will be used comprehensively and not selectively</p>	<p>The data obtained, the methods used and the decisions made during the project will be documented comprehensively</p>
Transferability	<p>Inferences will only be made if enough evidence exists</p>	<p>Observations will be documented in a research journal</p> <p>Detailed descriptions of the particular setting and the techniques used will be provided</p> <p>Inferences will be made only if they can be supported by the collected data</p> <p>Sufficient information will be given on the content and context of events for future researchers to replicate the study</p>

Table 3. 14: Strategies to increase and enhance trustworthiness during qualitative data collection and analysis

(Adapted from Maree, 2010, p. 37)

3.5 The role of the researcher

The researcher's role is of the utmost importance during the research project (Poggenpoel & Myburgh, 2003). In this study, the researcher will provide evidence that she is aware of all relevant responsibilities, as detailed below:

- **Two roles:** As a psychologist employed at the participating school, the researcher will explain her two roles to the participants and will take care to ensure that there is no (or at least minimal) conflict of interest, by emphasising that participation is voluntary and that participants will be under no obligation to participate in the research project.
- **Atmosphere:** A warm atmosphere of respect, acceptance, and unconditional regard will be created.
- **Basic rules:** Basic rules will be adhered to.
- **Information:** The purpose and process of the research project will be explained to the participants and their parents/guardians.
- **Informed consent and assent:** Informed consent will be obtained from the participants and their parents/guardians for them to be part of the research project and for the use of recorded and written data obtained from the participants.
- **Safety:** Care will be taken that the participants are always safe and that there are other psychologists available, if help or intervention is needed.
- **Respect:** All participants will have an opportunity to participate without unnecessary interruptions.
- **Scientific:** The researcher will be well prepared and will have all necessary equipment available for the facilitation of activities. The analysis and interpretation of the data will be done in a scientific way, while being aware of own biases.
- **Ethical:** The ethical code as specified by the Health Professions Council of South Africa (HPCSA) will be adhered to.
- **Confidentiality:** All data will be kept in a safe place and care will be taken that participants remain anonymous throughout.

3.6 Ethical considerations

The essential purpose of research ethics is, on the one hand, to protect the welfare of the participants, and on the other hand, to extend research quality assurance (Wassenaar,

2006). The researcher using qualitative or mixed methods research must be aware that interactions with participants may be ethically challenging, as the researcher will be personally involved in all the different stages of the study (Sanjari, Bahramnezhad, Fomani, Sho, & Cheraghi, 2014). It is therefore of paramount importance for the researcher to keep ethical principles in mind throughout the research project. Aggarwal and Gurnani (2014), Garzon (2014), Sanjari et al. (2014) and Schreuder and Coetzee (2010) highlight some useful ethical guidelines, of which the researcher is aware and with which she will comply.

- **Respect for people:** All participants and their parents will be provided with clear and comprehensive information in terms of the goal of the investigation, procedures, possible risks, as well as the benefits. They will also be made aware of the fact that participation is voluntary, without any coercion.
- **Informed consent/assent:** Written permission will be obtained from the parents/guardians and the learners to conduct research at the specific independent girls' school. After both the parents/guardians and the prospective participants have been informed of all the details regarding the research, informed consent forms must be signed by the parents/guardians and an assent form must be signed by the potential participant before the latter will be included as a participant in the research.
- **Consent from the school:** Permission from both the school principal as the chairlady of the governing body of the school will be obtained before research commences.
- **Beneficence (do no harm):** Care will be taken to follow standardised procedures with all participants, to inform them about the data that will be used, to keep data safe, and to destroy or remove data that has not been used. No secretive or unfair means of collecting data will be used, and participants will have the right to know what data will be included in the study.
- **Justice:** All people will be treated fairly, and as equals. Everyone in the group will be given an opportunity to reflect and participate without interruption or fear of negative feedback. Every effort will be made to minimise the inaccurate interpretation of data. Research results will be made known to the participants and their parents/guardians, and the researcher is committed to being transparent in her research. She will also constantly be aware that she will be fulfilling her role as researcher (and not as the psychologist employed at the school). Two colleagues will therefore be available, in case any of the participants needs to be referred to them.

- **Anonymity:** Participants' real identity will not be revealed, but codes will be used instead.
- **Confidentiality:** The researcher will maintain participants' confidentiality throughout the research project.
- **Different roles:** The researcher is well aware of the different roles she will need to assume when acting as qualitative researcher (Poggenpoel & Myburgh, 2003). The supervisor, Professor J.G. Maree, will act as a sounding board to make sure that she adheres to the conventions, and behave appropriately as a researcher, and that she does not neglect to differentiate between the different roles that are entailed.
- **Social value:** The project's aim is to find a way to be of assistance to many more adolescents, and therefore the researcher aspires for her research project to benefit society as a whole.
- **Providing counselling if and when needed:** The researcher is aware that the intervention process may trigger emotions that warrant intervention from a psychologist. As a trained psychologist, it is most likely that manifested behavioural and emotional changes will be recognised. The researcher will therefore be able to identify when intervention and support are needed. To avoid role confusion and to safeguard the well-being of participants throughout, an arrangement will be made for counselling to be provided by two fellow educational psychologists (colleagues) who have agreed to be available and to offer this service, should it be required. The researcher's sole function therefore will be that of researcher.

3.7 Concluding remarks

In this chapter the research methodology that will be used in this research project was discussed. This includes the research design, methodology, data analysis and interpretation. The researcher also discussed different strategies that will be taken, in her attempt to enhance the reliability, validity and trustworthiness of the data. The results of both the qualitative as quantitative research will be discussed in Chapter 4.

CHAPTER 4

RESULTS OF THE RESEARCH

“Confidence is all about being positive concerning what you can do --- and not worrying over what you can't do. A confident person is open to learning, because she knows that her confidence allows her to walk through life's doorways, eager to discover what waits on the other side. She knows that every new unknown is a chance to learn more about herself and unleash her abilities.”

-Joyce Meyer-

4.1 Introduction

This research project was undertaken to explore the value and limitations of using life design counselling in terms of the sense of self of female peer supporters attending an independent school for girls. Pre- as well as post-intervention interviews and assessments were conducted. The peer supporters comprised 24 pre-selected participants. The 24 Grade 11 participants engaged in 12 life design sessions, which took place over a period of 12 weeks. Both the pre- and post-intervention results are presented below.

4.2 Research results

The participants' mean age was 197,52 months (16 years and 6 months rounded off to the nearest full month), with a standard deviation of 6.4 (rounded off to one decimal).

4.2.1 Results of quantitative data analysis: Descriptive statistics

The *Career Adapt-Abilities Scale (CAAS)* and the *Resiliency Scales for Children and Adolescents (RSCA)* were administered pre- and post-intervention. Results of the four subscales of the *CAAS* and the 10 subscales of the *RSCA* were calculated by dividing the achieved result through the possible total, multiplied by one hundred ($\frac{\text{achieved mark}}{\text{maximum mark}} \times \frac{100}{1}$).

The results of quantitative data analysis for the 24 participants for both tests are presented in the tables below. The information was summarised with descriptive statistics, and *Wilcoxon signed rank tests* were performed to test the hypotheses: that the interaction resulted in a change. In this study the *p*-value approach to hypothesis testing has been followed, i.e. the null hypothesis is rejected if the *p*-value is less than the specified level of significance, α . The level of significance, α , has been specified as the usual 5%. The *p*-value approach involves determining the probability of change by assuming that the null hypothesis is supported. In

the interpretation of the results, the following guidelines regarding the p -values will be applied:

$p < 0.01$	➔	Convincing evidence of a significant difference between the pre- and post-intervention results.
$0.01 \leq p < 0.05$	➔	Strong evidence of a significant difference between the pre- and post-intervention results.
$0.05 \leq p < 0.1$	➔	Moderate evidence of a significant difference between the pre- and post-intervention results – these results have also been reported.

Eighteen different hypotheses were formulated to assess whether the post-intervention scores were significantly higher (or lower, depending on the scale) than the pre-intervention scores on both the *CAAS* and the *RSCA*. The total score of the *CAAS*, as well as each of the sub-scale-scores of both tests, were assessed; and directional (one-sided) hypotheses were formulated. The null hypotheses state that there is no change between pre- and post-scores, i.e. $H_0: \text{me}_{(\text{Post-Pre})} = 0$

Hypotheses CAAS:

It is hypothesised that the intervention will result in higher post *CAAS* scores, i.e. $H_1: \text{me}_{(\text{Post-Pre})} > 0$.

The hypotheses were formulated for the overall *CAAS* and each of the four subscales. To save space, the corresponding null hypotheses for the four dimensions of the *CAAS* will not be stated here.

Hypotheses RSCA:

It is hypothesised that the intervention will result in higher post-intervention *RSCA* scores for Mastery and its three subscales, and for Relatedness and its four subscales, i.e. $H_1: \text{me}_{(\text{Post-Pre})} > 0$; but that the effect of the intervention for Reactivity and its three subscales will result in lower post-intervention scores, i.e. $H_1: \text{me}_{(\text{Post-Pre})} < 0$.

The hypotheses were formulated for the overall *RSCA*, Mastery, Relatedness, and Reactivity and each of their subscales. To save space, the corresponding null hypotheses for the dimensions and sub-dimensions of the *RSCA* will not be stated here. The descriptive statistics tables will be followed by a discussion of the initial findings.

Convincing evidence is defined as evidence based on a statistically significant result between two measurements obtained during different times, where the p -value (significant difference) is less than the significant level 0.01 (1%). The probability of the null hypothesis can be approved, because it can be presumed that the observed effect did not occur due to sampling errors alone. The researcher may then conclude and report that the result actually convincingly reflects a change in the characteristics of the research group (Johnson, 2013).

Strong evidence is defined as evidence based on a statistically significant result between two measurements obtained during different times, where the p -value (significant difference) is more or equal to the 0.01 and less than the 0.05 level of significance (5%). The probability of the null hypothesis can be approved, because it can be presumed that the observed effect did not occur due to sampling errors alone. The researcher may then conclude and report that the result convincingly reflects a change in the characteristics of the research group (Johnson, 2013).

Moderate evidence is indicative of a p -value bigger or equal to 0.05, but smaller than 0.1 (5% - 10%).

4.2.1.1 The Career Adapt Abilities Scale (CAAS)

CAAS	Median	\bar{X}	Std deviation	Q1	Q3
Pre	90.00	89.46	13.02	82.50	98.50
Post	92.50	91.67	13.74	84.00	98.00
CAAS Subscales					
Concern Pre	23.00	23.13	3.10	20.50	25.00
Concern Post	24.00	23.88	3.33	22.00	26.00
Control Pre	24.500	23.21	4.04	20.00	26.50
Control Post	25.50	24.46	4.73	20.00	28.00
Curiosity Pre	21.00	20.67	4,76	16.50	24.50
Curiosity Post	20.00	20.92	4.62	17.00	24.00
Confidence Pre	23.00	22.46	3.86	19.50	25.00
Confidence Post	23.00	22.42	3.94	20.00	24.50

Table 4. 1: Descriptive statistics for pre- and post- intervention with regard to the results of the Career Adapt-Abilities Scale (CAAS)



CAAS	Z-statistics; p-value (1-tailed)
CAAS (overall)	Z=1.11; p=0.13
CAAS Subscales	
Concern	Z=0.96; p=0.17
Control	Z=2.25; p=0.012 **
Curiosity	Z=0.34; p=0.37
Confidence	Z=0.08; p=0.47
** = significant at the 1% level (convincing evidence of a change)	

Table 4. 2: Wilcoxon signed rank test of the 24 participants for the *Career Adapt-Abilities Scale (CAAS)*

4.2.1.2 Resiliency Scales for Children and Adolescents (RSCA)

RSCA Mastery	Median	\bar{X}	Std deviation	Q1	Q3
Pre	47.50	47.00	4.75	45.00	50.00
Post	51.00	49.67	7.013	45.00	54.50
Mastery Subscales					
Optimism Pre	66.07	63.10	10.30	15.00	20.00
Optimism Post	69.64	68.90	13.38	16.00	22.00
Self-efficacy Pre	67.50	70.94	9.26	26.50	31.00
Self-efficacy Post	77.50	76.46	12.51	26.50	33.50
Adaptability Pre	83.33	77.08	19.39	7.00	11.00
Adaptability Post	75.00	73.96	20.90	7.00	11.00

Table 4. 3: Descriptive statistics for pre- and post- intervention with regard to the results of the 24 participants for the *Resiliency Scales for Children and Adolescents (RSCA): Mastery*



Mastery	Z-statistics; p-value (1-tailed)
Mastery (overall)	Z=2.42; p=0.01***
Mastery Subscales	
Optimism	Z=2.46; p=0.01 ***
Self-efficacy	Z=2.38; p=0.019**
Adaptability	Z=-0.85.; p=0.20
** = significant at the 5% level (strong evidence of a change)	
*** = significant at the 1% level (convincing evidence of a change)	

Table 4. 4: Wilcoxon signed rank test results of the 24 participants for the *Resiliency Scales for Children and Adolescents (RSCA): Mastery*

RSCA Relatedness	Median	\bar{X}	Std deviation	Q1	Q3
Pre	46.00	45.50	5.59	41.00	49.50
Post	47.00	46.71	7.45	39.50	52.50
Relatedness Subscales					
Trust Pre	64.29	65.33	9.03	16.00	20.00
Trust Post	64.29	66.96	12.78	16.00	21.50
Support Pre	83.33	80.90	13.45	17.00	22.00
Support Post	87.50	82.47	13.06	18.00	22.00
Comfort Pre	75.00	70.05	17.77	8.50	14.00
Comfort Post	75.00	73.18	17.24	9.00	14.00
Tolerance Pre	73.21	70.83	10.88	18.00	22.00
Tolerance Post	75.00	72.92	15.69	17.50	24.00

Table 4. 5: Descriptive statistics for pre- and post- intervention with regard to the results of the *Resiliency Scales for Children and Adolescents (RSCA): Relatedness*



Relatedness	Z-statistics; p-value (1-tailed) *
Relatedness (overall)	Z=1.52; p=0.07*
Relatedness Subscales	
Trust	Z=0.77; p=0.22
Support	Z=0.15; p=0.44
Comfort	Z=1.65; p=0.0495** ⁷
Tolerance	Z1.03; p=0.15
* = significant at the 10% level (moderate evidence of a change)	
** = significant at the 5% level (strong evidence of a change)	

Table 4. 6: Wilcoxon signed rank test results of the 24 participants for the *Resiliency Scales for Children and Adolescents (RSCA): Relatedness*

RSCA Reactivity	Median	\bar{X}	Std deviation	Q1	Q3
Pre	51.50	52.33	9.64	44.50	58.50
Post	50.00	52.38	8.43	46.50	56.00
Reactivity Subscales					
Sensitivity Pre	43.75	45.31	17.99	7.00	14.00
Sensitivity Post	43.75	42.88	17.13	7.50	13.50
Recovery Pre	25.00	30.21	20.16	3.00	6.00
Recovery Post	25.00	28.39	19.93	3.00	5.50
Impairment Pre	20.00	25.00	16.58	5.00	13.00
Impairment Post	27.50	27.60	17.56	5.00	15.00

Table 4. 7: Descriptive statistics for pre- and post- intervention with regard to the results of the *Resiliency Scales for Children and Adolescents (RSCA): Reactivity*

⁷ For obvious reasons, this figure was not rounded off to two decimals.

Reactivity	Z-statistics; p-value (1-tailed)
Reactivity (overall)	Z=0.09; p=0.46
Reactivity Subscales	
Sensitivity	Z=-0.87; p=0.19
Recovery	Z=-0.33; p=0.37
Impairment	Z=0.67.; p=0.25

Table 4. 8: Wilcoxon signed rank test results of the 24 participants for the *Resiliency Scales for Children and Adolescents (RSCA): Reactivity*

4.2.1.3 Summary and discussion of quantitative results

Six of the 19 null hypotheses are rejected (see previous tables). These results indicate significant directional differences after intervention on six of the 19 scales that were assessed. At this stage, it can only be hypothesised as to why increases were noted in certain fields and not in others. In order to verify these, a more detailed and refined comparative analysis of the content of each test and subtest, and exactly what each scale tests, as well as a comparison of the statistics, is necessary. The hypotheses regarding the possible reasons will only be stated after an in-depth analysis of the qualitative data as well.

4.2.2 Results of qualitative data analysis

Researchers agree that there are several ways in which qualitative research data can be analysed and reported on (Punch, 2009). Analysing qualitative data is seen as an eclectic activity that does not require the use of any specific ‘correct’ method, as most qualitative researchers wish to avoid standardising the process, in order to promote the creative involvement of the researcher (Schumacher & Camp, 2010). However, Castro, Kellison, Boyd and Kopak (2010) do recommend the identification of the smallest number of ‘strong’ thematic categories possible, where strong categories contain at least 20% of the total number of response codes, thus accounting for a significant percentage of the clarifying variance.

In this research study, individual pre- and post-intervention interviews were conducted with each of the 24 participants. Forty-eight interviews took place in total. All qualitative data, including all the data gathered from the interviews, therapeutic intervention techniques, as well as the reflective journal entries, were included in the data collection process. The

process of data analysis involved making sense of the raw data through studying, analysing, organising, preparing, and coding the data in order to interpret the holistic meaning of the data. This process was aimed at understanding how participants made sense of, and created meaning through, the phenomena identified by means of their participation in the intervention process.

During the process of identifying and categorising themes in order to report back, the researcher started off with themes described in related literature, and thereby found the categories and subcategories of the quantitative assessment tools used in this specific research project. The researcher has been mindful of the fact that researchers are encouraged to rely more heavily on inductive reasoning, whereby acquired data leads to the identification of conceptual categories and descriptive themes; rather than matching existing theories to specific hypotheses, when conducting qualitative research (Suter, 2011). As a qualitative style of interpretation constitutes an integral part of mixed-method research, the researcher decided to start off with themes that one could expect to find, but was also on the lookout to identify new themes and subthemes that were not anticipated at the beginning of the study. The researcher concurs with the following view (Bernard & Ryan, 2010, p. 107): “No matter how hard we try, there are no purely inductive (or deductive) studies”. The style of data analysis used in this research study can probably best be described as deductive-inductive. As expected, a few additional subthemes emerged spontaneously during analysis of the data.

An expert coder was asked to verify the codes, themes and subthemes identified by the researcher. The researcher substantiated the identified themes and subthemes by including two to four examples of participant responses in tabular form for feedback.

The researcher decided to use a four-digit coding system for reporting participants' responses: the first digit refers to the participant, the second to the technique or data source (i.e. transcribed interviews or reflective journal entries), the third to the page number where the entry can be found, and the fourth digit to the line or lines in which it can be found.

Table 4.8 summarises the proposed referencing system, and will be followed by tables presenting the inclusion and exclusion criteria of subscales, as well as inclusion and exclusion criteria used in the development of the subthemes within the themes. Thereafter, the themes and subthemes that emerged from interviews and reflective journal entries will be presented.



Participant number	Data source		Page numbers	Line numbers	
Participants: numbers 1 to 24	1	Pre-intervention interview	1	1-13	
	2	Reflective journal	Genogram	21-23	Different lengths
	3		Four boxes	24-25	Different lengths
	4		Lifeline	26-28	Different lengths
	5		Earliest recollections	29	Different lengths
	6		Life story	30-33	Different lengths
	7		Role models	31	Different lengths
	8		Books and films	32	Different lengths
	9		Wheel of life	34-35	Different lengths
	10		Collage	43	Different lengths
	11	Post-intervention interview	1	1-16	

Table 4. 9: The referencing system

By way of example, the code 1-2; 2-19 means that this response refers to participant number 1. She wrote in her reflective journal after completing her genogram, and her entry can be found on p. 2, line 19.

The results of the qualitative data analysis will now be presented.

Theme 1: Skills necessary for career adaptability		
Subscales and subthemes	Inclusion Criteria	Exclusion Criteria
Subscale 1.1: Concern	Any comments participants made referring to concerns, awareness, anticipation, or plans with regard to their future careers.	Any comments participants made that are not related to or referring to their concern, awareness, anticipation, or plans with regard to their future careers.
Subscale 1.2: Control	Any comments participants made referring to a belief that they have some influence over their own lives, thus taking responsibility to achieve their goals and attain success.	Any comments participants made that do not refer to a belief that they have some influence over their own lives, thus taking responsibility to achieve their goals and attain success.

Theme 1: Skills necessary for career adaptability		
Subscales and subthemes	Inclusion Criteria	Exclusion Criteria
Subscale 1.3: Curiosity	Any comments participants made referring to any exploratory behaviour that potentially elicits information about the participants and/or their environments.	Any comments participants made that do not refer to any exploratory behaviour that potentially elicits information about the participants and/or their environments.
Subscale 1.4: Confidence	Any comments participants made referring to their focus on and anticipation of achieving their goals.	Any comments participants made that do not refer to their focus on and anticipation of achieving their goals.

Table 4. 10: Inclusion and exclusion criteria utilised for Theme 1

Theme 2: Mastery		
Subscales and subthemes	Inclusion Criteria	Exclusion Criteria
Subscale 2.1: Optimism	Any comments participants made that refer to a positive attitude about the world in general and about the individual's life specifically, at present, as well as in future.	Any comments participants made that do not refer to a positive attitude about the world in general and about the individual's life specifically, at present, as well as in future.
Subscale 2.2: Self-efficacy	Any comments participants made that refer to a positive approach to obstacles and problems, and the sense that the individual can master her environment.	Any comments participants made that do not refer to a positive approach to obstacles and problems, and the sense that the individual can master her environment.
Subscale 2.3: Adaptability	Any comments participants made that refer to the capacity to manage change and solve problems, which includes adjusting to changing circumstances and situations, understanding problematic situations, and coming up with effective and alternative solutions.	Any comments participants made that do not refer to the capacity to manage change and solve problems, which includes adjusting to changing circumstances and situations, understanding problematic situations, and coming up with effective and alternative solutions.
Subscale 2.4: Improved sense of self	Any comments participants made that refer to a clearer sense of who she is, her own significance, and what she is capable of.	Any comments participants made that do not refer to a clearer sense of who she is, her own significance, and what she is capable of.



Theme 2: Mastery		
Subscales and subthemes	Inclusion Criteria	Exclusion Criteria
Subscale 2.5: Improved insight	Any comments participants made that refer to an improved insight into their own situation, leading to a more positive perception about their own situations, or a more positive outcome.	Any comment participants made that do not refer to an improved insight into their own situation, leading to a more positive perception about their situations, or a more positive outcome.
Subscale 2.6: Identifying strengths and weaknesses	Any comments participants made that refer to an awareness of the participants' own strengths and/or weaknesses, and a willingness to use the information in a positive way.	Any comments participants made that do not refer to an awareness of the participants' own strengths and/or weaknesses, and a willingness to use the information in a positive way.
Subscale 2.7: Awareness of own emotions	Any comments participants made that refer to an awareness of own emotions.	Any comments participants made that do not refer to an awareness of own emotions.
Subscale 2.8: Growth as a person	Any comments participants made that refer to an improvement in perceptions, thoughts, skills or behaviour due to the participation in the life design research project.	Any comments participants made that do not refer to an improvement in perceptions, thoughts, skills or behaviour due to the participation in the life design research project.
Subscale 2.7: Giving back to others	Any comments participants made that refer to an understanding and or a willingness to give back to individuals or communities.	Any comments participants made that do not refer to an understanding and or a willingness to give back to individuals or communities.

Table 4. 11: Inclusion and exclusion criteria utilised for Theme 2



Theme 3: Relatedness		
Subscales and subthemes	Inclusion Criteria	Exclusion Criteria
Subscale 3.1: Sense of trust	Any comments participants made that refer to the ability to perceive other people as reliable and accepting.	Any comments participants made that do not refer to the ability to perceive other people as reliable and accepting.
Subscale 3.2: Perceived access to support	Any comments participants made that refer to the participants' perceived support of others for them, and their belief that there are other supportive people available, to whom they can turn when dealing with adversity.	Any comments participants made that do not refer to the participants' perceived support of others for them, and their belief that there are other supportive people available, to whom they can turn when dealing with adversity.
Subscale 3.3: Comfort with others	Any comments participants made that refer to feeling comfortable in the presence of others.	Any comments participants made that do not refer to feeling comfortable in the presence of others.
Subscale 3.4: Tolerance of differences	Any comments participants made that refer to tolerance of differences and an ability to safely express own thoughts and different perceptions within relationships.	Any comments participants made that do not refer to tolerance of differences and an ability to safely express own thoughts and different perceptions within relationships.
Subscale 3.5: Benefits of group activities	Any comments participants made indicating that they benefited from group activities.	Any comments participants made that do not indicate that they benefited from group activities.

Table 4. 12: Inclusion and exclusion criteria utilised for Theme 3



Theme 4: Reactivity		
Subscales and subthemes	Inclusion Criteria	Exclusion Criteria
Subscale 4.1: Sensitivity	Any comments participants made that refer to getting upset easily, leading to loss of control, making mistakes, not thinking clearly or getting into trouble.	Any comments participants made that do not refer to getting upset easily, leading to loss of control, making mistakes, not thinking clearly or getting into trouble.
Subscale 4.2: Recovery/ Resilience	Any comments participants made that refer to insight into, and the ability to recover from, emotional arousal or emotional disequilibrium.	Any comments participants made that do not refer to insight into, and the ability to recover from, emotional arousal or emotional disequilibrium.
Subscale 4.3: Impairment	Any comments participants made that refer to an ability to maintain emotional equilibrium when aroused.	Any comments participants made that do not refer to an ability to maintain emotional equilibrium when aroused.

Table 4. 13: Inclusion and exclusion criteria utilised for Theme 4



Theme 1: Skills necessary for career adaptability	
Subscales	Description of inclusion criteria
Concern	Concern (Savickas & Porfeli, 2012) refers to comments participants made that refer to their concern, awareness, anticipation, or plans with regard to their future careers.
	Examples ⁸ of participants' responses and codes
<p>(15-1; 11-2): "I hope that everything will go according to plan. I must do well in Maths and Science, as I want to study Astro-Science. I want to study overseas in America."</p> <p>(17-1; 1-2): "I feel quite uncertain about my future. My marks are not there yet. I want to become a gynaecologist and want to focus on woman and children."</p> <p>(18-1; 1-2): "My plan is to study law and to become an expert in Social Media Law. On our career day I realised that it may be a lonely road...I am now thinking of Journal Law."</p>	
It was interesting to notice that all comments made regarding participants' concerns about their future careers were made during the pre-intervention interviews. This may be explained by the fact that the programme did not address careers specifically in any way.	
Control **	Control (Savickas & Porfeli, 2012) refers to the participants' belief that they have some influence over their own lives, leading to their acceptance of the responsibility to achieve their goals and attain success.
	Examples of participants' responses and codes
<p>(11-1; 1-1 & 5): "I dislike it when people can't do things for themselves. I do not dwell on negative things."</p> <p>(17-1; 1-5 & 6): "It is up to you! You can make a choice! I think about what I want to achieve. I think about my options. Then I do what I have to do."</p> <p>(21-1; 1-3): "You need commitment to be successful. You can't stop and give up if you can't do something."</p> <p>(9-11; 1-6): "I learnt that sometimes you need to rely on yourself to pick you up. You can't always turn to other people. Be self-motivated!"</p> <p>(24-11; 1-6): "Even if you fail, learn from that, become stronger and try again!"</p>	
Almost all the participants showed a sense of responsibility in terms of making a success of their own lives.	
Curiosity	Curiosity (Savickas & Porfeli, 2012) refers to any exploratory behaviour that potentially elicits information about the participants and/or their environments.
	Examples of participants' responses and codes
Although the whole intervention programme focused on the exploration of the self, the researcher could not find any comments referring directly to exploratory behaviour initiated by the participants themselves.	

⁸ Participants' diary entries were edited only marginally to preserve authentic meaning.



Theme 1: Skills necessary for career adaptability	
Subscales	Description of inclusion criteria
Confidence	Confidence (Savickas & Porfeli, 2012) refers to participants' focus on and anticipation of achieving their goals. It refers to a sense of self-efficacy and the confidence to cope with challenges and overcome obstacles in making and implementing choices.
	Examples of participants' responses and codes
	(23-1; 1-3): "To be successful in life ...you must believe in yourself, you must have goals for yourself (goals that are tough but not impossible to reach, you must be positive, have determination, and you must never forget where you are coming from." (2-1; 1-4): "Success means that you have completed your long term goals. You must plan everything and reach those goals. I want to get my PhD."
	Confidence was portrayed by participants both pre- and post-intervention.

Table 4. 14: Themes and subthemes based on tests and research findings, as well as on additional themes and subthemes identified from qualitative data analysis



Theme 2: Mastery ***	
Subscales	Description of inclusion criteria
Optimism ***	<p>Optimism is seen as a positive attitude about the world in general and about an individual's life specifically, at present, as well as in future. A positive self-esteem is also included in the definition (Sandra Prince-Embury, 2007a).</p> <p>Examples of participants' responses and codes</p> <p>(10-7; 7-33): "I want to be a legend; actually, I will be one, because I am indeed a 'legend in the making!'"</p> <p>(2-11; 1-1 & 5): "I have a deep appreciation for many things." "My past is embedded in my everyday life, because I have learned and built myself up from those experiences."</p> <p>(6-11; 1-5): "My past...is full of ups and downs, and I don't want to dwell on the downs. Rather, I want to celebrate my ups and use them as encouragement to keep doing great things."</p> <p>(11-11; 1-2): "I feel like... that my future is bright."</p> <p>From the data received, as well as informal observations and communication during the intervention phase, all the participants portrayed a positive attitude towards life in general.</p>
Subscales	Description of inclusion criteria
Self-efficacy **	<p>Self-efficacy is an indication of the person's approach to obstacles and problems, and the sense that one can master one's environment. Self-efficacy can also be seen as a sense of competence (Sandra Prince-Embury, 2007a).</p> <p>Examples of participants' responses and codes</p> <p>(15-1; 1-5): "You learn life lessons as you learn from your mistakes. You also learn from what you do well. I have learnt a lot from sport."</p> <p>(14-11; 1-6): "You will always bounce back if you give yourself the strength to do so by being positive and optimistic."</p> <p>(17-11; 1-1): "I reflect a lot and like to figure things out."</p>
Subscales	Description of inclusion criteria
Adapt-ability	<p>Adaptability refers to the capacity to manage change and solve problems, which includes adjusting to changing circumstances and situations, understanding problematic situations and coming up with effective and alternative solutions (Opper, 2013; Prince-Embury, 2007).</p>

Theme 2: Mastery ***

Subscales Description of inclusion criteria

Adapt-ability Examples of participants' responses and codes

(13-1; 1-12): "Life is about change...it is a problem if you can't adapt!"

(17-1; 1-9): "You survey a situation, understand what is going on and modify your behaviour to deal with the situation."

(18-1; 3-9 & 10): "You need to be able to adapt if situations change. I tend to be a control freak. I had to learn to make other plans."

(9-11; 1-10): "I had to go from being happy and cheerful to helping someone when they were crying and to change my mood to comfort them."

Participants seemed to have shown signs of adaptability pre-, as well as post-intervention.

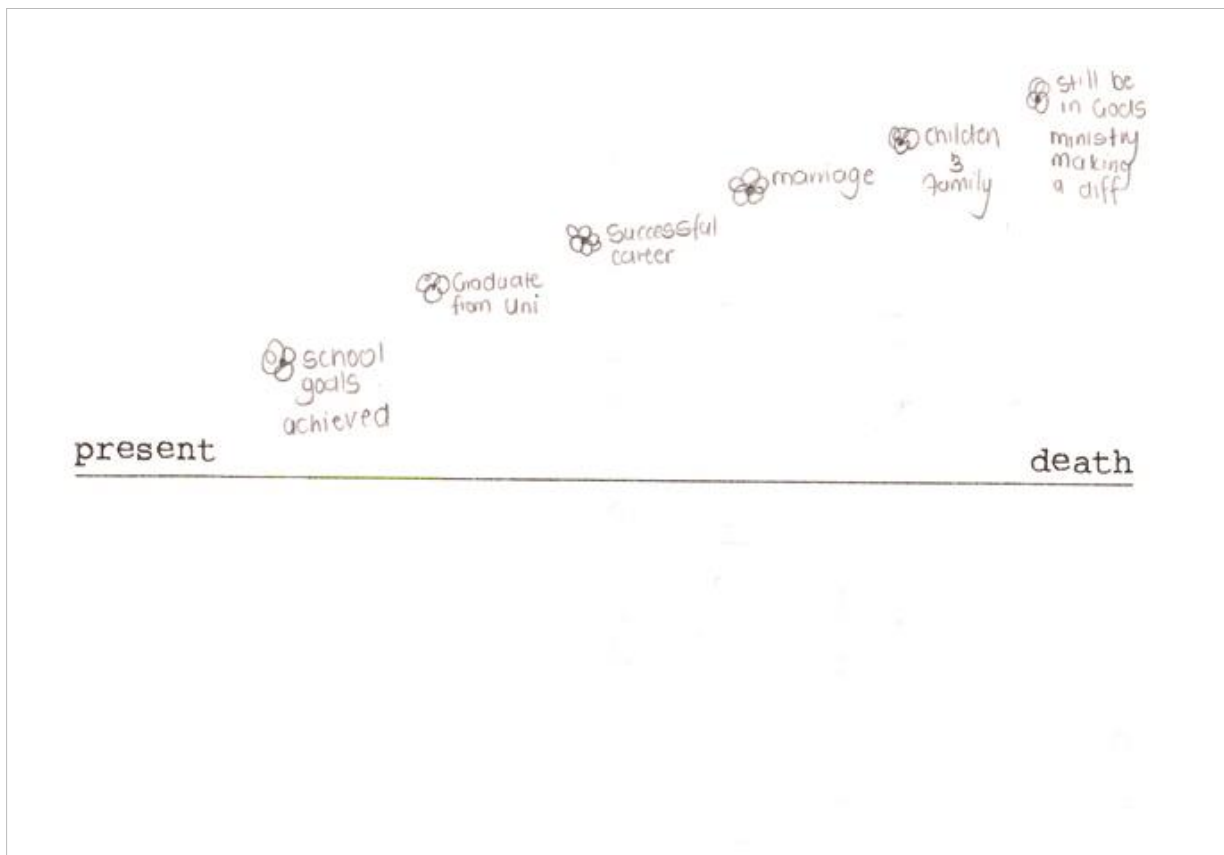


Figure 4. 2: This lifeline illustrates the participant's positive attitude and a belief in herself, and in the fact that she can master her environment



Theme 2: Mastery ***

Additional subthemes: Mastery

Subthemes	Description of inclusion criteria
Improved sense of self	The sense of self refers to feelings of singularity, coherence, individuality, and unity, which define people as unique human beings (Prebble et al., 2013). An improved sense of self refers to a clearer sense of who one is, one's own significance, and what one is capable of.
	Examples of participants' responses and codes
<p>4; 1-16): "The programme has helped me to get to know myself better." (24-11; 1-1): "I have learnt that I am a lot stronger than I think." "I am capable of so much more."</p>	
<p>All the girls indicated that they benefited from the programme. One, however, expressed an additional need for individual sessions as well.</p>	
Improved insight	Improved insight refers to any words, phrases or sentences indicating an improved insight into the participants' own situation, leading to a more positive perception about their own situation, or a more positive outcome.
	Examples of participants' responses and codes
<p>(9-11; 2-14): "People around me invest so much in my life. I should do the same for them." (12-10; 43-1-3): "In the duration of my collage it reminded me about how blessed and fortunate I am."</p>	
Identifying strengths and weaknesses	Any words, phrases or sentences that refer to an awareness of the participants' own strengths and or weaknesses, and a willingness to use the information in a positive way.
	Examples of participants' responses and codes
<p>(11-11; 1-2): "I understand what my strengths and weaknesses are and how to use them to my advantage." (13-3; 24-1-4): "I have noticed my own negatives and what I want to be. I have also noticed that my prevention may affect my strengths which give me more motivation to get to where I want to be."</p>	
Awareness of own emotions	The ability of participants to express an awareness of their own emotions.
	Examples of participants' responses and codes
<p>(7-1; 1-11): "Being scared makes it difficult to be adaptable." (16-3; 24-3-5): "I am afraid to fail and let everybody down." (22-3; 24-5 & 6): "I can be impatient and lose my temper quite easily... and then I feel guilty afterwards."</p>	



Theme 2: Mastery ***

Additional subthemes: Mastery

Subthemes	Description of inclusion criteria
Personal growth through participation in the programme	Any comments referring to an improvement in perceptions, thought, skills or behaviour due to participation in the life design research project.
	Examples of participants' responses and codes
	(2-11; 2-15): "I will be able to communicate better, have more patience and tolerance, and a better understanding of how I have come to be the person I am today. My people skills have improved. Participation in the programme opened my mind, eyes and heart." (8-11; 1-1 & 2-12): "I have come to accept that not everyone will like me, and as a result I've become emotionally stronger". "I have become more sociable and independent."
Giving back to others	Any comments about an understanding and or a willingness to give back to individuals or communities.
	Examples of participants' responses and codes
	(20-1; 1-13): "I want to be giving back to the community. It is good for me to give and help others." (9-11; 2-14): "People around me invest so much in my life. I should do the same for them."



12. Four Boxes

(Dail, 1989)

You receive four boxes.

- Draw 4 different pictures; one for each box.
- Find and draw something that represents the answers to the following four questions:

What am I (what represents me and why)

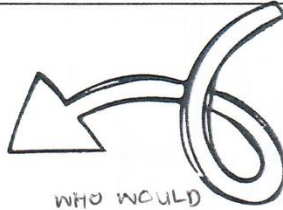
What would I like to be/ become?

What hinders me?

What will help me to overcome the obstacle?

Discuss it with a friend and write down your thoughts about the content of each box/question.

Notes & Thoughts:



<u>Piano</u> -	<u>Ngwono</u> -	1 <u>Fear and lack</u>	<u>Faith and believing</u>
when it is	it was my	2 <u>of confidence -</u>	<u>in myself -</u>
just sitting	father's symbol	3 <u>I am afraid</u>	<u>This could help</u>
there it is	but I too	4 <u>to fail and</u>	<u>me accomplish</u>
nothing much -	would like to	5 <u>let everyone</u>	<u>my goals and</u>
But when	be like that.	6 <u>down</u> Sometimes	<u>make new</u>
people begin		7 <u>I don't even have</u>	<u>and bigger</u>
to create music		8 <u>the confidence to</u>	<u>ones than</u>
it has purpose.		9 <u>start or finish</u>	<u>before.</u>
		10 <u>the project.</u>	

	Title: Written with the left hand.
	Chapter 1: Expectations
	2: The Start of Music
	3: Friends
	4: Confidence
	5: Fear
	6: Faith
	7: Certainty: I will discover myself
	Main Characters: Friends, Family, God
	That doing good brings good. Working hard with passion determination gets you far in life. Love those who hate you. They need it.

Figure 4. 3: These are two examples (by the same participant) of good insight, awareness of own emotions and sense of self, as well as a wish to give love to others – even if they do not love the participant



Theme 3: Relatedness *

Additional themes and subthemes: Relatedness

Subscales	Description of inclusion criteria
Sense of trust	Trust refers to the ability to perceive other people as reliable and accepting, and is also an indication of the degree to which participants can be authentic in relationships (Sandra Prince-Embury, 2011).
	Examples of participants' responses and codes
	(7-11; 1-11): "It was easy to adapt because of the way the people were and just relating to them because of the situation." (19-3; 25-1 & 2): "You need to realise that not everyone is there to bring you down. Some genuinely wants to help you."
Perceived access to support	Support is an indication of the participants' perceived support of others for them, and their belief that there are other supportive people available, to whom they can turn when dealing with adversity.
	Examples of participants' responses and codes
	(3-2; 23-1 & 15-17): "I love all aspects of my family." "(My parents) make up a large part of my support system and I believe they always will." (4-9; 35-1-4): "As I look at my Wheel of Life, I am so happy, because I see my support line is so big and I can turn to so many people."
Comfort with others **	Comfort with others is an indication that participants feel comfortable in the presence of others (Sandra Prince-Embury, 2011).
	Examples of participants' responses and codes
	(2-11; 1-11 & 12): "In the past I was worried about what I would be expected to say." "I can now speak to the masses...without being fearful of anything." (5-11; 1-10 & 11): "I sometimes feel awkward around people. That has changed. When I go somewhere I have more courage to speak to people and interact."
Tolerance of differences	Tolerance of differences indicates an ability to safely express own thoughts and different perceptions within relationships (Sandra Prince-Embury, 2011).
	Examples of participants' responses and codes
	(17-1; 1-10): "I am always myself and the same. My opinion stays my opinion. People just have to deal with it." (2-11; 1-11): "In the past I was worried about what I would be expected to say." (14-11; 1-1): "I have learnt to stand up for myself... even if it means losing friends."





Theme 3: Relatedness *


Additional themes and subthemes: Relatedness

Subscales	Description of inclusion criteria
Benefits of group activities	Any comments indicating that participants benefited from group activities.
	Examples of participants' responses and codes
<p>(5-11; 2-12 & 14): "What I found helpful in the programme was working in groups." "My social skills improved."</p> <p>(6-11; 2-12 & 13): "I have gained better listening skills, reading people's body language, understanding my boundaries as a supportive friend, and learning to be more open about myself." "I can now communicate with people better than before."</p> <p>(7-11; 1-10 & 2-14): "I had gone through that are similar to them." "Speaking in groups about past experiences helped close those chapters."</p>	



"So long as you're still worried about what others think of you, you are owned by them!"

Yo! Listen up, this stuff is important! Be the ^{best} you, you can be. **DONT** listen to the ^{HATERS}, who are there to bring you ^{down}. Work hard, strive for Greatness and ^{SURROUND} yourself with AMA-ZING people  who will only bring you ^{up}! They should ^{GRAMMAR SPELLING FERROR} you lift your spirits and you theirs. This is a two way street , do unto others as you would want them to do unto you! So spread the ^{LOVE} and

STAY FIERCE  **SWAG!**

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Figure 4. 4: This reflection displays the participant's improved insight, sense of self, and comfort with being herself



Theme 4: Reactivity	
Subscales	Description of inclusive criteria
Sensitivity	Sensitivity indicates how easily the participants become upset, leading to loss of control, making mistakes, not thinking clearly or getting into trouble (Sandra Prince-Embury, 2011).
	Examples of participants' responses and codes
Comments fitting the description were not made by any of the participants.	
Recovery/ Resilience	Recovery is an indication of the insight into, and ability to recover from, emotional arousal or emotional disequilibrium (Sandra Prince-Embury, 2011).
	Examples of participants' responses and codes
<p>(2-11; 1-6): "Bouncing back up is the most important trait in life. One must be resilient always, because life has many hurdles and obstacles and setbacks. You need to experience failure to enjoy success."</p> <p>(6-11; 1-7 & 1-6): "I think that I am quite resilient." "Resilience means that when something bad happens, you are able to move past it and use it as a stepping stone to achieve greater things."</p>	
Impairment	Impairment is indicative of the degree to which the participants are able to maintain emotional equilibrium when aroused (Sandra Prince-Embury, 2011).
	Examples of participants' responses and codes
No comments referring to the maintaining of equilibrium were made.	
Additional themes and subthemes: Reactivity	
No additional themes were identified.	

97. I am a tree
(De Klerk, R & le Roux, R, 2003)

Draw yourself and your life as a tree: olive tree



Figure 4. 5: The participant expressed her resilience by describing herself as an olive tree: “Olive trees have lots of uses, can grow anywhere and are ‘durable’. I do not crumble when circumstances change”

4.2.3 Discussion of qualitative data analysis

During analysis, four general themes emerged consistently across the qualitative data, namely:

- Skills necessary for career adaptability, comprising three subthemes, namely Concern, Control, and Confidence.
- Mastery, comprising nine subthemes, namely Optimism, Self-efficacy, Adaptability, Improved sense of self, Improved insight, Identifying strengths and weaknesses, Awareness of own emotions, Personal growth through participation in the programme, and Giving back to others.
- Relatedness, comprising six subthemes, namely A sense of trust, Perceived access to support, Comfort with others, Tolerance of differences, Being honest in the group, and Specific benefits of group activities.
- Reactivity, with one subtheme, namely Resilience.

These themes, as well as the additional subthemes that emerged, will now be discussed.

4.2.3.1 *Skills necessary for career adaptability*

Concern: Fifteen of the 24 participants mentioned concerns about their future careers in their answers during the pre-intervention interviews. These concerns were mainly related to their marks in Mathematics and Science, as well as uncertainty regarding their career choices. These concerns were not mentioned again during the intervention phase or in any of their answers for the post-intervention questionnaire. All the post-intervention answers to the same question, namely “How do you feel about your future (after participating in the programme)?” were positive, indicating that the participants felt more secure about their futures. Participant 11 said: “*I feel my future is bright. I understand what my strengths and weaknesses are and how to use them to my advantage.*” (11-11; 1-2). This may be due to the fact that the programme did not focus specifically on careers, but more on an improved sense of self. The responses do indicate an improved sense of self and self-knowledge that will probably result in less concern and more contentment, with more thoughtful and considered career and life choices made possible.

Control: During the analysis of the data, it became apparent that the participants became more aware, through participation in the programme, that they cannot blame their parents or their pasts for their present situations. The intervention programme seemed to foster the development of responsibility and control in the participants as they thought about their futures, while engaging in the various activities. Most of the participants overtly conveyed the

message that they realise the role they themselves play in making good choices, and the need to take responsibility for the success of their own lives. One of the participants put it as follows: *“I need to be more driven and self-emancipated. I need to know what I want and know how to get it done. I also need to be more bold and sure of myself.”* (6-11; 1-3).

Confidence: Although the word “confidence” was not mentioned by any of the participants, their improved confidence became evident through many of their responses, such as:

“It (my past) is embedded in my everyday life, because I have learnt to build myself up from those experiences.” (2-11, 1-5). “I have a bigger picture and can see my goals clearer.” (5-11; 1-13). “I will be strong enough to cope with my problems in a positive manner.” (7-11; 1-2). These comments reflect the statement by Savickas (2011), who wrote that confidence reflects the ability to strive for one’s goals and aspirations, and thus one is empowered to overcome obstacles (Del Corso & Briddick, 2015) while constructing one’s own future.

Mastery: The sense of mastery provides young people with the opportunity to interact with other people and appreciate and enjoy relationships with others (Sandra Prince-Embury, 2007a). The peer supporter programme was specifically designed to empower the Grade 11 peer supporters to be capable of interacting easily and effectively with younger learners, in order to support them. A sense of mastery is therefore seen by the researcher as a very important requirement of peer supporters. Optimism, self-efficacy and adaptability are seen as three characteristics that merge to form the foundation of a sense of mastery (Prince-Embury, 2007). Most of the girls reflected a sense of mastery in more than one of the research activities. Participant number 21 sees herself as represented by the sunrise, saying: *“I bring light in dark situations”* (2-19; 35-12); while participant number 13 said: *“I enjoy having fun with family and friends.”* (13-8; 31-6).

Optimism: Optimism was prevalent in all the participants, ranging from positivism embedded in their trust in God, to an overall positive attitude towards life. Examples are: *“I am very optimistic...”* (8-11; 1-2) and *“I see a bright future for myself. God has a good plan for me.”* (11-1; 1-2). These remarks reflect positively on the well-being of the participants, as research mentioned by Carver and Scheier (2014) indicates a positive relationship between optimism, perseverance and well-being.

Self-efficacy: According to Schwarzer (2014), self-efficacy reflects the perception of accomplishment, and has been shown to exert an influence on performance and even ability levels. All 24 participants portrayed a sense of competence and a positive approach towards obstacles, with comments like *“I will be strong enough to cope with my problems in a positive*

manner” (7-11; 1-2); and “I hope to leave a powerful legacy behind of a brutal business woman but a caring family person.” (18-6; 33-11 & 12). Some of the participants’ senses of self-efficacy were already strongly developed before the intervention programme started: “I am proud and very positive. I do not give up...figure skating taught me to be resilient. It helped me to become mentally very strong.” (19-1; 1-1 & 7).

Adaptability: Several comments that were made indicated a dual capacity to be adaptable. One perception focused mainly on an ability to cope and adapt to life changes. This was apparent in comments such as: *“You need to be able to adapt if situations change.” (18-1; 1-9 & 10). The other comments focused on an ability to adapt one’s own emotions and behaviour; to be more connected and in tune with people who need support: “I had to go from being happy and cheerful to helping someone when they were crying and to change my mood to comfort them.” (9-11; 1-10).*

Improved sense of self: All the participants indicated that the intervention programme assisted them in understanding themselves better, and therefore an improved intrapersonal insight developed through participation in this research programme. A variety of comments and answers indicated an improved sense of self, such as: *“[The life design programme] improved my self-knowledge, understanding of myself and understanding of others.” (17-11; 2-13).*

Improved insight: Although “improved insight” is closely linked to “improved sense of self”, the researcher distinguishes between the two concepts. Insight (for the purpose of this study) focuses more on circumstances and other people, while the sense of self focuses on the individual participant’s intrapersonal insight. The researcher found from the qualitative research results that it was mostly participation in and reflection on the lifeline and genogram that led to improved insight for most of the participants. Research done by Cox and McAdams (2014) established that positive meaning-making derives from reflection on both high and low points of the lifeline. These reflections predict positive emotional regulation, positive refocusing, positive reappraisal, and putting experiences into perspective. Comments such as the following were made by participants in the present study: *“I have learned that my family never let their past situation define them; so I should also not.” (7-2; 55-4).*

Identifying strengths and weaknesses: Twenty-three of the 24 participants specifically mentioned strengths and/or weaknesses. Different habits and characteristics were mentioned, like being strong in tough situations (7- 6; 31-1), taking charge (5-6; 31-1), resilience (17 and 20-6; 31-1), being determined (8=6;31-1) and being caring and loving

(1,2,21,22 and 24-6; 31-1), to name only a few. The programme definitely seems to have encouraged the participants to be more aware of what they are good at and what their positive qualities are. This confirms what Corsten, Schimpf, Keilmann, and Hardering (2015) have said, namely that life narratives facilitate the process of sense making, which leads to the reconstruction of meaning and purpose in life, and the review of one's own strengths and resources that might help to overcome personal and environmental challenges.

Awareness of own emotions: Strayer (2002, p. 47) describes emotions as “organizers and motivators in the dynamics of life cycle identity construction”. Recognition of and being in contact with one's own emotions is therefore important in the adolescent's self-construction process. Many of the participants mentioned that telling their stories made them emotional. Participant number 13, for example, said: *“It was 100% more emotionally intense than I would have ever expected.”* (18-10; 49-1&2). Other emotions were also mentioned: “[My triggers are] *jealousy, stress, fear and anxiety.*” (16-6; 31-2). *“It makes me sad and I isolate myself.”* (13-8; 31-2).

Growth as a person through participation in the programme: Insight and the resulting growth as a person could be perceived from observations and comments like: “[The wheel of life] *made me realise that I am closer to my family than I actually realised or thought. They have a big impact on the person I am and want to become.*” (7-9; 35-7 to 11).

Giving back to others: It was heart-warming to see and hear how many of the girls want to invest in the lives of less-privileged people. This desire extended much further than their wish to be peer supporters. Participant number 16, for example, said: *“I want to go to medical school. My dream is to cure cancer.”* (16-10; 43-1 and 3). Participant number 12 voiced her desire to be *“showing people that loving and caring for people is what matters...it's about what you do for others.”* (12-5; 33-17 to 19). The general feeling among the girls can be summarised by a comment made by one of the participants: *“Generosity is love.”* (13-6; 33-11).

Relatedness: A sense of relatedness is an indication of the individual's feelings of secure connectedness in social contexts and is seen as one of the basic human needs (Sandra Prince-Embury, 2007a). Connectedness in a school context (teacher–student relationships, feelings of belonging, inclusion, acceptance, and interpersonal support) has been linked to positive student engagement, positive academic outcomes, self-efficacy, and task/goal orientation. It has been found that connectedness across the spheres of family, school and peers can predict the well-being of the individual. Higher levels of relatedness therefore

predict higher life satisfaction levels, greater confidence, positive affect and higher levels of aspiration (Jose et al., 2016).

Sense of trust: The intervention programme started off on a weekend camp that all 24 participants attended. All the participants shared their narratives with the other group members. This began on a superficial level, but as the weekend progressed, a deeper sense of trust and connectedness were displayed. One of the participants voiced her experience as follows: *“A short weekend with lots of self-growth. I started off not having strong emotional friendships with extreme depth and trust with majority of the peer supporters... however, looking back I have developed stronger connections with many different individuals and a sense of trust.”* (3-10;47-1 to 9).

Perceived access to support: The peer supporters who mentioned the advantage of receiving support all related this concept to family and peer support. They expressed feelings of gratitude because of the support they receive. One participant said the following: *“In the duration of my collage it reminded me about how blessed and fortunate I am. I have a beautiful family and a bright future ahead of me. I am [name] who believes in God and is blessed to have a family that supports her.”* (12-10; 43-6 to 8). Another participant became aware of the fact that support is available and voiced it as follows: *“Because I have been hurt so many times, that shouldn’t stop me from trusting others and looking for support through people, because it is okay to ask for help.”* (4-10; 53-6 to 11).

Comfort with others: All the participants voluntarily applied to be peer supporters. This implies that they wanted to interact with other people. All 24 participants participated freely in group sessions, sharing their emotions and experiences. As time progressed, the researcher observed improved comfort and openness within the group sessions. The researcher’s observations were confirmed by what the participants experienced: *“These sessions we had made me dig deep and realise who I am and what are my strengths and weaknesses. It made me open up to people and listen to what other people had to say and that made me realise that I am not alone.”* (10-10; 4-1 to 6).

Tolerance of differences: Tolerance implies that differences are acknowledged, and their importance is neither denied nor discredited (Nieto, 2015). The use of genograms are encouraged to help family members to understand, trust, respect and develop tolerance for one another (Shaw, 2003). In the present research study, it was not only reflections after the genogram that improved the tolerance of the participants, but also as a result of the use of other activities. A tolerance for their own uniqueness was also expressed:

“Don’t lose yourself trying to fit in with everyone else. You were put on this world as a single unit and you need to live that way.” (6-10; 48-1 to 3).

“My personal strength is that I am not afraid to speak my mind.” (9-6; 31-1).

One participant also stressed the fact that comparisons between people are not helpful: *“Comparing yourself to others won’t get you anywhere.” (20-10; 50-1).*

Benefits of group activities: Human actions and responses are rarely performed in isolation. Contextual information regarding what other people in the group are doing provides useful clues, and also guides more introverted and less open individuals to participate (Noceti & Odone, 2014). In this research study, all 24 of the participants felt that they benefited from the group activities. Some of the comments were:

“I have learnt to be more open about myself.” (6-11; 4-13).

“I am very closed off, but the group discussions helped me to open up.” (24-11; 1-13).

“I got to know so many girls on a deeper level and spoke to those I never thought I’d speak to. Getting to know others (during group activities) helped you open up to them as well.” (12-10; 49: 9-14).

Working in groups proved to have more benefits than simply reaching more people. According to the feedback, the group interaction also led to more insight into the circumstances of others and their narratives, and encouraged an openness, and a willingness, to share and to support one another.

Recovery: Recovery skills will determine how soon and how easily a person returns to equilibrium after strong emotional arousal (Sandra Prince-Embury, 2007a). As this is a complex phenomenon and difficult to evaluate, qualitative information is important for gaining more information and insight about participants’ abilities in terms of recovery and resilience. Most of the girls mentioned resilience, and one even called one of her life story chapters *“Bouncing back”*. The researcher is, however, not convinced that the life design programme had an effect on the participants’ ability to recover. It seems as if it made them more aware of the benefits of being resilient and motivated them to strive towards quicker recovery after setbacks, but no convincing evidence of an improvement in recovery could be found, because of the input from the researcher.

4.2.4 Integrated research: qualitative and quantitative research results

The purpose of the final stage of the data analysis and integration process is to identify areas in which a substantial improvement (or the lack thereof) as a result of participation in the life design research project, which stretched over twelve intervention sessions, was demonstrated. Results, obtained from both methods of analysis (quantitative and qualitative) of the pre- and post-intervention data, will be presented in Table 4.15.

Integration of quantitative and qualitative research results			
Themes that showed substantial improvement pre- and post-intervention from quantitative as well as qualitative analysis of results			
Themes from assessment tools	Additional themes identified	Quantitative research results	Qualitative research results
Mastery		***	Mentioned by most or all of the participants
Optimism		***	Mentioned by most or all of the participants
Control		**	Mentioned by many of the participants
Self-efficacy		**	Mentioned by many of the participants
Adaptability		**	Mentioned by many of the participants
Comfort with others		**	Mentioned by many of the participants
Confidence			Mentioned by a few participants, but not enough to be accepted as substantial
Sense of trust			Mentioned by a few participants, but not enough to be accepted as substantial
Perceived access to support			Mentioned by a few participants, but not enough to be accepted as substantial
Tolerance of differences			Mentioned by a few participants, but not enough to be accepted as substantial

Integration of quantitative and qualitative research results

Subthemes that showed significant differences pre- and post-intervention from qualitative analysis of results

Themes from assessment tools	Additional themes identified	Quantitative research results	Qualitative research results
	Improved sense of self	Not specifically assessed	Mentioned by most or all of the participants
	Identifying strengths and weaknesses	Not specifically assessed	Mentioned by most or all of the participants
	Growth as a person through participation in the programme	Not specifically assessed	Mentioned by most or all of the participants
	Benefits of group activities	Not specifically assessed	Mentioned by most or all of the participants
	Improved insight	Not specifically assessed	Mentioned by many of the participants
	Awareness of own emotions	Not specifically assessed	Mentioned by a few participants, but not enough to be accepted as substantial
	Giving back to others	Not specifically assessed	Mentioned by a few participants, but not enough to be accepted as substantial
	Being honest in the group	Not specifically assessed	Mentioned by a few participants, but not enough to be accepted as substantial

Table 4. 15: Significant themes and subthemes based on results from quantitative as well as qualitative research results⁹

⁹ Related to quantitative results:

*** means $p < 0.01$ (convincing evidence of a significant difference between the pre- and post-intervention results);

** means $0.01 \leq p < 0.05$ (strong evidence of a significant difference between the pre- and post-intervention results); and

As can be seen from a quantitative perspective, the group life design intervention programme resulted in improved Control (Table 4.2), Mastery, Optimism, Self-efficacy (Table 4.4), and Relatedness and Comfort (Table 4.6). From a qualitative perspective, these results were confirmed, but additional subthemes emerged, as can be seen in table 4.13. The additional identified subthemes, which seem to confirm the fact that the benefits stretch further than the above-mentioned quantitative aspects, are an Improved sense of self, Being able to identify own strengths and weaknesses, Growth as a person, Improved insight, and Finding group activities beneficial (see table 4.13).

Scrutiny of the integrated research results, as can be seen in table 4.14, reveals that it seems as if the narration of participants' individual life stories, which were all inherent in the life design programme activities, could hypothetically have helped the participants to grow as holistic, distinct, self-organising, meaning-making people (Brott, 2001), and to cultivate a willingness to give back to other less privileged people, as encouraged by Miller (2013). As can be seen from tables 4.2, 4.4, 4.6, 4.13 and 4.14, the findings of this research project portray how group-based intervention programmes, when based on life-design principles, could serve as a viable intervention process for adolescent girls in their discovery process, towards the identification of a unique sense of self.

4.3 Concluding remarks

The results of the research study, presented in Chapter 4, commenced with quantitative findings. These findings were followed by qualitative observations and findings. Qualitative findings were presented according to various themes and subthemes identified by researchers in related literature. Themes and subthemes of the quantitative assessment tools used in this specific research project, as well as subthemes deductively identified through qualitative analysis, were also included and assessed. Thereafter, the themes derived inductively from both stages of data analysis were summarised. The results were tabulated, followed by themes and subthemes that originated purely from qualitative data analysis. The degree of improvement that was facilitated through participation in the research project was indicated. In Chapter 5, the results will be teased out critically and discussed in detail, by relating said results to the theoretical literature and framework of the study.

* means $0.05 \leq p < 0.1$ (moderate evidence of a significant difference between the pre- and post-intervention results).

CHAPTER 5

DISCUSSION AND LITERATURE CONTROL

“If you can love yourself, you can love other people so much better.

-Kristin Chenoweth-

5.1 Introduction

In Chapter 5 the research results are discussed within a literature control framework. Literature related to life design counselling, an improved sense of self, as well as peer and group intervention, especially during adolescence, will be used to compare the present research findings to previous research findings. Findings will be linked to relevant aspects of literature already mentioned in previous chapters, but additional references to literature not previously mentioned will also be included. It should be stated upfront, though, that it has become evident from the literature review that limited research has been conducted on the sense of self of girls attending a private or independent school, as well as on life design counselling not focusing on careers. The researcher will therefore look at research on life design counselling and the facilitation of the sense of self, and will not discount studies not conducted on girls in a private school setting.

Comparisons between the results of the present study and previous studies will take place within a contextual theme discussion structure. Identified themes (as mentioned in Chapter 4) will be explored and discussed with reference to both the quantitative and the qualitative data generated. This will be aided by the triangulation of both the quantitative and qualitative research results in order to build a coherent validation for themes, adding to the validity and trustworthiness of the study. The researcher will also attempt to answer the main research question, namely, how does group-based life design counselling influence the sense of self of peer supporters in an independent school for girls? During the validation process, the following questions will be kept in mind:

- Do previous findings concur with the findings of this research project?
- Which of the findings of the present study do not concur with previous findings?
- Are there findings from the present study that have never before been reported?
- Are there specific trends that emerged in the findings of this study?

5.2 Quantitative results

The results derived from the quantitative data were generated in three distinct stages and by making use of data from two different instruments, namely the *Career Adapt-Ability Scale*

(CAAS) (Savickas & Porfeli, 2012) and the *Resiliency Scales for Children and Adolescents* (RSCA) (Prince-Embury, 2007a). The first stage of data generation consisted of gathering pre-intervention data. The second stage comprised gathering post-intervention data, and the third stage entailed the statistical analysis of the differences between pre- and post-intervention data, so as to determine if there were any significant differences between the two groups of scores.

The researcher will look at test results derived from the two above-mentioned tests, but also at the four subscales of the CAAS, namely Concern, Control, Curiosity and Confidence, as well as the three subscales of the RSCA and their subdivisions, namely: Sense of mastery (Optimism, Self-efficacy and Adaptability), Sense of relatedness (Trust, Support, Comfort and Tolerance) and Emotional reactivity (Sensitivity, Recovery and Impairment).

5.2.1 Quantitative results: CAAS

The collaborative development of the *Career Adapt-Abilities Scale* (CAAS) was initiated due to a growing interest in understanding how individuals, through their self-regulative capacities, respond to the changing nature of careers (Tolentino et al., 2014). However, Tolentino et al. (2014) also state that individuals who are willing to adapt and are able to adapt, are more likely to make successful transitions and adaptations in changing environments. This was also found by Havenga (2011), who is also in agreement with the opinion of Hamtiaux, Houssemand and Vrignaud (2013) who stated that the capacity to adapt is a key element in coping or succeeding in a dynamic and ever-evolving world. They make it clear that this success is not only evident in people's professional, but also in their personal lives. With these statements in mind, the researcher chose the CAAS (Savickas, 2011d; Savickas & Porfeli, 2012) as one of the assessment instruments to generate quantitative data, although this study was not focused on career adaptability as such.

The researcher was especially interested in the participants' ability to take control over and responsibility for their own lives (as assessed by the subtest Control) and their confidence in achieving their goals (as assessed by the subtest Confidence), as these two subtests are believed by the researcher to have possible wider applications and benefits than just career success. Cowden and Meyer-Weitz (2016) see self-directed changes in order to improve performance (therefore taking responsibility), and a positive attitude towards achieving goals (therefore Confidence), as directly linked to being self-aware and to understanding one's own thoughts, emotions and behaviour. The researcher therefore sees information regarding these two aspects as important contributors towards better understanding during the study of enhanced sense of self.

5.2.1.1 Analysis of differences between pre- and post-intervention scores: CAAS

Adaptability, Concern and Curiosity

The analysis of the collected quantitative data will potentially shed light on whether or not the life design intervention programme enhanced the participants' sense of self, which should be seen in their adaptability, but more specifically their ability to take control and to show confidence in their ability to achieve their goals. Because the intervention programme did not focus on career adaptability as such, no significant changes were expected (although hoped for) in the Career adaptability score (total test scores), or for the subtests Concern and Curiosity, after participating in the life design intervention programme. No statistical significances were found; however, it needs to be noted that the effect size of the difference between pre- and post-interventions scores for the total score of the CAAS (and therefore career adaptability), as well as Concern, were 0.2 (rounded to one decimal). According to Pearson's correlation coefficient, which determines the strength of the effect size, an effect size of 0 would have meant no experimental effect was found, and an effect size of 1 would have meant the intervention programme resulted in a perfect effect (Field, 2009). Although not significant, a small positive change was therefore noticed in career adaptability areas as a result of participating in a group life design programme focussing on enhancing the sense of self. A group life design programme could therefore impact positively on career-related aspects such as career planning, career choices, career exploration, and occupational self-efficacy. A cross-sectional study by Hirschi, Herrmann and Kellera (2015) with 1 260 German university students found a significant relatedness to resources of Concern, Control, Curiosity, and Confidence. These results were also confirmed by the results of a study by Hirschi and Valero (2015).

The improvement in career adaptability is relevant to this study, as the research based on the results of 90 studies shows that career adaptability is, among other factors, also significantly associated with processes of adaptability (aspects like self-esteem, core self-evaluation and optimism) and adaptive responses such as self-efficacy (Rudolph, Lavigne, & Zacher, 2017). This was confirmed by a recent study by Perera and McIlveen (2017), which indicates that adaptability was found to be the highest in the group (they had three distinctive research groups) that was most "adaptive ready" (Perera & McIlveen, 2017, p. 70). The 'adaptive ready' group was associated with higher levels of conscientiousness, openness and agreeableness. Higher levels of adaptation (outcome) are therefore potentially expected for those who are adaptive (willing) and who show better adaptability in terms of behaviour that addresses changing circumstances (adapting) (Savickas & Porfeli, 2012; Xie, Xia, Xin, & Zhou, 2016).

Control

Control, as described by Hartung, Porfeli, and Vondracek (2008) and Del Corso and Briddick (2015) involves self-regulation through decision-making and taking responsibility for ownership of the future. The pre-intervention and post-intervention results of the present study showed strong evidence of change (p -value of 0.012) on the Control scale. The effect size was 0.5 (rounded to one decimal), meaning a large effect, accounting for 25% of the variance, was found due to participation in the programme. The study therefore shows an increased awareness of participants' responsibility to be accountable for their own success in life, after participating in the 12-week life design intervention programme.

Sibunruang, Garcia, and Tolentino (2016) emphasise the importance of being part of a social environment during the career construction process, as social environments provide opportunities for individuals to clarify the psychosocial nature and importance of their own responsibility in the career-adaptability and construction process. Being part of a group helps to shape them, and provides the opportunity to take control and adapt strategies necessary to be successful in terms of career adaptability. The fact that the present life design intervention programme was aimed at a specific group may have enhanced the increase in accepting responsibility after intervention, as many studies have identified an increase in self-efficacy and intrinsic motivation after participating in group career intervention (Barclay & Stoltz, 2016; Fitch, Marshall, & McCarthy, 2012).

The positive results of the subscale Control are substantiated by an exploratory study conducted by Twigge (2015) who determined that a life design perspective could be helpful in constructing a self that enables participants to be agents of both their own development, and the development of a healthy and sustainable environment. It does, however, need to be recognised that Twigge's study was conducted on a qualitative basis only, consisted of only six participants who were 18 years or older, and that the life design intervention process only consisted of career reconstructing activities and journal reflections.

The present research results confirm the findings of an extensive longitudinal research study by Usinger and Smith (2010). For this study, 60 adolescents living in economically disadvantaged urban and rural communities from different cultures were interviewed twice a year over a period of six years. What was notable in these findings was that it appeared that adolescents must have an internally derived sense of self before career exploration becomes intentional and therefore meaningful. The participants who were found to be actively involved in constructing, navigating, and positioning themselves in the world as they understood it, were taking responsibility to create a new and better future. The adolescent

group not actively involved in reconstructing their own lives seemed trapped in their present circumstances, self-absorbed, detached, angry, and overwhelmed. They displayed a lack of belief in their own uniquely defined selves, and their ability to take control of and recreate their own lives.

Quantitative findings of research conducted by Cook (2015) did not confirm significant improvement after life design counselling on any of the scales of the CAAS. Again, it must be noted that the content and focus of the intervention differed from that of the present study, as it focused largely on careers. Cook's study took place in less privileged environments compared to those of the present study, wherein the participants attended a private school. In contrast to research undertaken by Cook (2015), Maree and Symington (2015) report positive qualitative adaptability results on a collective case study, conducted in a private school setting with five Grade 11 participants, after being exposed to eight group-based life design counselling sessions. The participants seemed to display improved adaptability in all four areas, namely concern, control, curiosity and confidence.

Confidence

The quantitative findings of this research project did not confirm a significant improvement on the scale Confidence. Qualitative research undertaken by Setlhare-Meltor and Wood (2016) found, in contrast to the results of the present research study, that narrative interventions assisted an adolescent in designing an alternative, more hopeful future narrative. The study by Setlhare-Meltor and Wood (2016) had only one participant, who formerly lived on the streets. The absence of a significant improvement on the subscale Confidence in the present study may be explained by the fact that the peer supporters were identified after going through a selection process. One of the criteria for selection was pre-existing confidence. The group of adolescent girls who participated in this research project therefore started off as confident young ladies. The results may be different if the research group does not comprise a pre-selected group of confident ladies with leadership qualities.

5.2.2 Quantitative results: RSCA

The sense of self is an essentially human characteristic that is mediated by neural processes (Prebble et al., 2013). The sense of self portrays who people believe they are, and this sense develops when people take a look at themselves and think about who they are (Maree & Molepo, 2017; Savickas, 2011). Despite abundant theoretical discussions about the sense of self, according to Prebble et al. (2013) empirical assessment instruments have been slow to develop, partly because of the seemingly ephemeral and abstract character of the "self"

(Prebble et al., 2013). As there is no specific instrument that assesses the sense of self as such, the researcher had to find an alternative instrument to support the quantitative research findings. The researcher decided to make use of *The Resiliency Scales for Children and Adolescents, (RSCA)* (Prince-Embury, 2007b) as it is a useful and effective instrument to evaluate specific aspects of the self.

Resilience is often seen as the result of a complex interaction of personal characteristics and external support, which buffers the effects of hostile situations that place children at risk of negative outcomes (Prince-Embury, 2011). Many researchers (Masten, 2015; Prince-Embury, 2007b; Oaklander, 2015) agree that resilience itself is a process rather than a trait, and can therefore improve. The *Resiliency Scales for Children and Adolescents (RSCA)* is an example of an instrument developed specifically for assessing factors of personal resiliency that are relevant for children and youths in school settings, focusing only on personal characteristics. Three areas of perceived strength and/or vulnerability, related to psychological resilience, are measured (Prince-Embury, 2007b).

- Sense of mastery: Optimism, Self-efficacy and Adaptability
- Sense of relatedness: Trust, Support, Comfort and Tolerance
- Emotional reactivity: Sensitivity, Recovery and Impairment

The researcher is of the opinion that, if these aspects can show an improvement after participating in a life design counselling process, this will equate to proof of the enhancement of the sense of self.

It needs to be noted that the findings from the present study, deriving from results from the *RSCA*, have never before been reported on, as the *RSCA* has never been used to judge the effectiveness of a life design intervention programme. Research results will therefore not be linked to the life design counselling programme that was used in this research project.

5.2.2.1 Analysis of differences between pre- and post-intervention scores: RSCA

Sense of mastery

A sense of mastery is seen as the degree to which people see themselves as having the ability to overcome and have control over challenges in their own lives. A sense of mastery can therefore be seen as a quality linked to the construct 'Control' as measured in the *CAAS*, although not specifically linked to career construction (as with control in the *CAAS*), as it is more closely related to taking control and overcoming everyday challenges. The construct 'Mastery' is also associated with self-efficacy (Bandura, 2006; Erol & Orth, 2011).

The researcher involved in the present study has anticipated that the sense of mastery of participants will improve after participation in the life design intervention programme.

Resilience and a sense of mastery are very important for everyday well-being. Montpetit and Tiberio (2016) conducted theoretical and empirical work on the nature of resilience. From an application perspective, their results imply that the malleability of self-esteem, and therefore an increased sense of self, makes it possible to facilitate resilience by expanding self-esteem and the sense of mastery. Increased resilience and mastery mediates well-being by reducing depression and anxiety (Burns, Anstey, & Windsor, 2011), enhancing scholastic achievement (Novotný & Křeménková, 2016), as well as resulting in better coping mechanisms and better performance in stressful environments (Parker, Jimmieson, Walsh, & Loakes, 2015).

Erol and Orth (2011) conducted a study consisting of eight assessments over a period of 14 years with 7 100 adolescents and young adults participating in the study. The participants came from different cultural groups and both sexes were represented. The sense of mastery was assessed with the seven-item *Pearlin-Schooler Mastery Scale*, which measures the extent to which individuals perceive having control over their lives. The researchers found that a high self-esteem could be predicted by an elevated sense of mastery. According to McLean, Wood and Breen (2013), as well as Sales, Merrill and Fivush (2013), the traits of planning and mastery are positively connected to the individual's sense of meaning and purpose in life.

The results of the present research project showed convincing statistical evidence (p-value of 0.012)¹⁰ of an improved sense of being able to take control and master difficult circumstances (i.e. Mastery) after participating in a life design programme. The effect size for the subtest Mastery was 0.5, indicating a large effect, and confirms the results derived from the correlated design using the Wilcoxon signed rank test. The effect accounts for 25% of the variance (Field, 2009). These results imply that participation in the programme resulted in participants demonstrating an increased sense of personal authorship. Participating in a narrative group life design programme thus has the potential to facilitate increased well-being and an enhanced sense of self.

¹⁰ See Table 4.2

Optimism

The results of the research study, during which pre- and post-intervention scores were compared, indicate convincing differences (p-value of 0,01)¹¹ in optimism. The effect size for Optimism was 0.5, indicating a large effect and increase in the participants' positive attitudes about the world and their lives in general due to their participation in the life design intervention programme.

Optimism is associated with a high level of positive orientation. Optimistic people are, according to Sobol-Wapinska (2016), content and convinced of the validity of their own positive beliefs: that life is good and that their futures are secure. A positive attitude and optimism enhance resilience (Domínguez et al., 2015), improve quality of life and prevent the pathologies that arise when life feels desolate and meaningless (Seligman & Csikszentmihalyi, 2000). An intervention programme with the potential to increase optimism is therefore of great value.

The value of improved optimism was also reported on by Shoshani and Steinmetz (2014). They report on a one-year intervention programme at a large middle school in the centre of Israel. 537 Grade seven to nine learners' pre- and post- intervention results were compared to the results of 501 students in a demographically similar control school. The intervention programme was conducted by teachers in class groups. The teachers were trained by psychologists and counsellors. Although the techniques were based on positive psychology principles, the researcher of the present study sees similarities to her own intervention programme, as it was group-based, and it included activities and discussions with elements of positive psychology. The researchers also reported on lively discussions that frequently generated emotional responses, and on the programme resulting in the creation of new channels for communication among students.

The above-mentioned programme resulted in a significant decrease in general distress, anxiety, and depression symptoms among the intervention participants; reduced interpersonal sensitivity symptoms; and also resulted in enhanced self-esteems, self-efficacy, and optimism. The results from the present study confirm what was found in the aforementioned study, namely, that group intervention strategies that encourage group participation and discussion demonstrate potential benefits to group members, especially regarding greater optimism and increased well-being.

¹¹ See Table 4.1

Self-efficacy

A study conducted by Manganelli, Lucidi and Alivernini (2015) with 3 352 Italian eighth-grade adolescents resulted in findings suggesting that classroom climates in which students are encouraged to participate will improve self-efficacy. The results of the present study are congruent with the results of this 2015 study. The self-efficacy of participants in the present study improved significantly (p-value of 0.019) after participating in life design group sessions during which they were encouraged to share their stories, experiences, and emotions within their peer group. The improvement is further proved by an effect size of 0.5 (rounded to the first decimal), indicating a large effect. This strong evidence of improvement in self-efficacy enhances the understanding of the importance of peer engagement during the adolescent phase, when emotional involvement with peers and teachers seems to be of the utmost importance (Pietarinen, Soini, & Pyhältö, 2014; Ulmanen, Soini, Pietarinen, & Pyhältö, 2016).

Adaptability

Žunic-Pavlovici, Pavlovic, Kovacevic-Lepojevic, Glumbic and Kovacevic (2013) used the *RSCA* to assess 805 adolescents (45.2% boys and 54.8% girls) from seven high schools in Kraljevo, Serbia. The age of the adolescents ranged between 15 and 18 years. The findings indicated that antisocial behaviour, anger, a negative self-esteem, and a poor sense of self were significantly negatively related to adaptability, among other aspects.

The following studies focused specifically on career adaptability and not adaptability in general. As life design counselling is mostly used with clients who seek career guidance, the researcher has decided to include career adaptability results in the discussion of the research findings.

In a study conducted in Switzerland, by Maggiori, Johnston, Krings, Massoudi and Rossier (2013), the researchers found that career adaptability positively predicted workers' general, as well as professional, well-being. Negru-Subtirica, Pop and Crocetti (2015) published results for a study of 1151 adolescent participants (58.7% female), in which career adaptability positively predicted adolescents' ways of dealing with vocational exploration and commitment. These can be described as positive behavioural trends linked to the ability to be adaptable. Studies done by Barclay and Wolff (2012) resulted in the same findings, and Cook's research results (2015) have confirmed the effectiveness of narrative career interventions to increase adaptability skills.

The present research study did not indicate a significant improvement in adaptability through participation in a life design intervention programme. Even the effect size for adaptability ($r = 0.2$) only indicated a small effect when pre- and post-intervention results were compared. However, all the other aspects assessing Mastery (*RSCA*) did manifest a significant improvement after participation in the group-based life design intervention project: Optimism with a p-value of 0.01 and Self-efficacy with a p-value of 0.019.

According to Brown, Bimrose, Barnes and Hughes (2012) a low score on the subscale Adaptability, along with a high scores on the subscale Mastery, may be an indication of a protective avoidant way of coping, as the adaptability scale of the *RSCA* focuses more on being personally receptive to feedback, learning from one's own mistakes, and asking for assistance, rather than the ability to think of alternative solutions and to switch one's mindset (which is reflected in the scores of the subtest Self-efficacy) (Prince-Embury, 2007b). Although the post-intervention scores were not low, the absence of a significant difference may be due to the personal circumstances of some of the participants, which could have resulted in a more protective-avoidant way of coping, as described by Prince-Embury (2007). The researcher therefore finds it important to mention that five of the participants experienced severe trauma during the time of intervention:

- Participant number 3's parents filed for a divorce.
- Participant number 5 left the school at the end of term one, due to financial reasons that must have been discussed at home during the time of the research programme.
- Participant number 19 became very sick and had severe pain in her joints. She was diagnosed with juvenile arthritis. She stopped attending school after term one and has been home-schooled since then.
- Participant number 20's mother left South Africa to go and live in France (her country of origin). Soon after her mother left, her father passed away (during the intervention programme).
- Participant number 24's mother separated from her partner. This led to participant number 24 moving away from the house and the family whom she loved dearly.

As the above-mentioned situations can all be described as incidents that can be quite challenging to adapt to by learning from mistakes or asking for help, this may have caused the participants to go into a protective avoidant way of coping, as was mentioned by Brown et al. (2012). This would have had an influence on the overall adaptability score of the

participants as measured after intervention, as they were all exposed to trauma, about which they could not do anything, between the first and second assessments.

Sense of relatedness

Being in a relationship is seen as a basic human need. Experiencing a sense of relatedness is defined as “feeling securely connected to individuals in a social context” (Prince-Embury, 2007b, p. 11). A sense of relatedness has been proved to be positively associated with the passion and perseverance to achieve long-term goals, successful achievement in school, sport, as well as other domains, as well as with an overall sense of well-being (Datu, 2017). These research results concur with the results of King (2015), who found that a sense of relatedness has a crucial role to play in enhancing valued outcomes. King’s study suggests that teachers and peers seem to be more important predictors of positive well-being, while parental relatedness seems to be a more important buffer against negative well-being.

The above-mentioned research results are important to note, as the participating group in general portrayed a high level of relatedness pre-intervention. The only moderate statistical improvement (p-value of 0.07) in the participants’ sense of relatedness due to their participation in the programme (a medium effect size of 0.3) could therefore be explained by the fact that research participants were already (before participating in the intervention programme) characterised as people who met the criteria for exhibiting a good sense of relatedness. Firstly, the girls who participated in the peer support programme were chosen as peer supporters because of their ability to relate well to their peers and other people. Secondly, the overall profile of these female adolescents fit the description for people who display a good sense of relatedness and achievement, as described by Datu (2017) and King (2015). A summary of their achievements, which have been recognised by the school during the year in which the research and intervention project took place, can be seen in the following table:

Participant	Recognised sporting achievements	Leadership positions	Academic recognitions	Cultural recognitions
1	√	√	√	-
2	-		√	√
3	√	√	√	√
4	√	√ Three different leadership positions		√
5	She left the school soon after completion of the post-intervention assessment. No extra information was made available to the researcher.			
6	-		√	√
7	-		√	√
8	-	√ Two different leadership positions		√
9	-	√ Two different leadership positions	√	-
10	√	√		-
11	√	√	√	-
12	-	-	-	-
13	√	√ Three different leadership positions	√	√
14	-	√	-	-
15	√ Participated in four different sports	√	√	√

Participant	Recognised sporting achievements	Leadership positions	Academic recognitions	Cultural recognitions
16	√	√ Two different leadership positions	√	√
17	√	-	-	√
18	√ Participated in two different sports	√ Two different leadership positions	√	
19	√ Participated in two different sport	-	√	√
20	√	-	-	-
21	√	-	√	
22	√	√ Two different leadership positions	√	
23	√ Participated in two different sports	√ Two different leadership positions	√	√
24	√ Participated in two different sports	√	-	-

Table 5. 1: Achievements (recognised by the school) obtained by participants

As participant number five left the school unexpectedly, the researcher did not have access to her achievements. All information about learners is removed from the system as soon as they leave the school. The following discussion of achievements will therefore only mention the 23 participants who still attend the private school at which the research process took place.

Scholastic achievement

Four of the 23 peer supporter participants were included in the top ten academic achievers in their grade, with average percentages higher than 80%. Eighteen of the 24 participants achieved average percentages higher than 70%, for which they received academic recognition. The participant with the lowest marks achieved an average mark of 54%. Her average mark was influenced by the fact that she is from Botswana: she has never been exposed to Afrikaans, and therefore achieved only 18% for Afrikaans. If Afrikaans was not taken into consideration, her average percentage would have been higher than 60%. The participants can therefore be described as academically successful individuals.

Leadership positions

It also needs to be mentioned that, of the 23 female adolescents from the participating group (who are still attending the school), 15 had been chosen as school leaders – some in more than one position. As these positions were only announced at the end of their Grade 11 year, it is not clear how many would have been chosen if they did not partake in the group life design intervention programme.

Sport achievement

In total, 16 of the participants were members of the first teams in different sporting disciplines. Some of them, as indicated in Table 5.1, reached this level of achievement in more than one sporting discipline. One participant came fourth at the world championships in an event for a specific sport.

Cultural activities

Of the 23 participants, 12 were recognised by the school for their exceptional cultural achievements. These varied from music and drama to public speaking.

Comfort

Trust and reciprocal self-disclosure in the context of adolescent friendships are both factors that are conducive to relationships with attachment characteristics (Gorrese & Ruggieri, 2013). Narrative theorists believe that language is the vehicle through which individuals create and recreate their understanding of the self and the world (Rehfuss & Di Fabio, 2012). Narrative disclosures and the sharing of personal information and feelings were therefore encouraged within the group setting during the intervention phase of the research project. The results between the pre- and post-intervention scores on the sub-test Comfort in the present study showed strong evidence of an improvement (p-value of 0.0495) with an effect size of 0.3 due to participating in the group life design programme. This improvement in different sub-test on the relatedness scale could be explained by the participants' narrative group involvement. This confirms what Oaklander (2015) believes, namely that resiliency skills develop when people are obliged to move out of their comfort zones.

Attachment theory, as proposed by Bolby (2005), provides a compelling framework for understanding the importance of interactive, close emotional relationships with others, as was applicable in the present research study. People seek relatedness with others to regulate emotional distress, and this provides a context in which they experience a sense of safety, in an environment where they can trust others, be comfortable, and have the confidence to demonstrate assertiveness in social situations (Gorrese & Ruggieri, 2013). Group peer activities that facilitate and encourage peer attachment (as conducted in the present study) may provide an important relational context to promote comfort during narrative self-disclosure and to develop an increased self-esteem, sense of self, and well-being.

5.2.2.2 *Emotional reactivity*

Emotional reactivity is defined as a pre-existing vulnerability or a genetic predisposition for low tolerance to adverse circumstances or events (Prince-Embury, 2007b; Prince-Embury, 2011). The emotional reactivity scale was developed to gather information regarding how easily a person gets upset, the degree to which emotional reactivity overwhelms the person, the time it takes for intense emotions to dissipate, and to determine if the arousal of emotions has an impact on the functioning of the person (Prince-Embury, 2007b; Prince-Embury, 2011). As the participating peer supporters went through a selection process, emotional reactivity could not be predicted to be present in the members of the research group.

This prediction was found to be valid, as the overall findings pertaining to the theme of emotional reactivity showed no significant change in sensitivity, recovery, or impairment after participation in the research intervention programme. The effect size of the subtest sensitivity was 0.2, and therefore showed a small improvement in terms of returning to a state of equilibrium after experiencing strong and potentially disruptive emotions due to their participation in the programme (Sandra Prince-Embury, 2007a). The improvement in terms of this aspect of resilience may be explained by the findings of Cowden and Meyer-Weitz (2016). These researchers found that self-reflection leading to self-insight was positively linked to resilience and improved coping mechanisms with regard to stress. Through their participation in the narrative life design group intervention project, the participants of the present study demonstrated a small improvement in returning to a state of well-being after having been exposed to stressful situations. These results infer improved well-being, as research in the field of developmental psychopathology has demonstrated that adolescents who can regulate their reactivity in the presence of adversity are less prone to developing pathology, and demonstrate good overall well-being (Prince-Embury, 2011).

5.3 Qualitative results

The qualitative part of the mixed-method research project focused on qualitative enquiry by means of collecting textual data, verbal data and images as recommended by Ivankova, Creswell, and Clark (2012). The main themes and sub-themes that emerged in the qualitative data from the individual interviews and the reflective journals¹² will now be explored. Multiple comparisons of the findings across the two data-collection phases (pre- and post-intervention interviews), and reflection on the nine different techniques used, form an integral part of this discussion. Shifts in the participants' cognitions and emotions will be highlighted. The results of the qualitative findings will be guided by themes and sub-themes, and findings will be compared to any relevant qualitative research. If themes overlap with themes mentioned in the quantitative data discussion, this will also be highlighted.

5.3.1 Qualitative themes and sub-themes

5.3.1.1 Theme 1: Control

The participants' responses confirmed the results from the quantitative research analysis, namely that the life design group intervention programme assisted them in the process of

¹² See Table 4.14 for a summary

taking even more responsibility for and control over their futures.¹³ Participants in the present study displayed clear signs of self-construction and the development of plans for their futures in their reflective post-intervention responses, as described by Savickas et al. (2009). On being asked the question: “How will the knowledge that you have gained about yourself influence your success in future?”, all the participants exhibited the ability to visualise a positive future, by giving answers such as “*It changed me for the better and will help me to be more successful in the future*” (9-11; 1-4) and “*...now that I know myself better, it will also help me to understand others better as well. This will help me to work better with other people*” (6-11; 1-4).

Upon reflection on the four boxes activity, participants gave responses like “*I realise I can do anything that I put my mind to*” (1-3; 53-1) and “*I have noticed that my prevention [putting myself down] may affect my strengths, which gives me more motivation to get to where I want to be*” (13-3; 24-1 to 4). This confirms the opinion of Presti et al. (2013), that the desire to take control and make positive decisions regarding one’s own future seems to be influenced by, among other factors, the person’s perceived efficacy and problem-solving skills. On the contrary, an increased ability to take control predicts, according to (Hirschi, 2010) an increased sense of power that is beneficial for the increase in well-being.

From the above-mentioned examples derived from the present study, it becomes clear that all the participants, through participation in the programme and the reflective processes involved in the programme, became more aware of who they are, what is important to them, and what is preventing them from achieving their goals. Participation in the programme seemed to have helped them to take control and responsibility for their own successful and fulfilling futures. Several researchers, such as Fritz and Beekman (2015), Maree and Hancke (2011), Reese, Yan, Jack, and Hayne (2010), Sales et al., (2013) and Watson and McMahon (2010) emphasise the significance of subjective meaning making, as it creates an awareness of alternative opportunities and prospects (Di Fabio & Maree, 2012; Hamm, Carlson & Erguner-Tekinalp, 2016; Reese et al., 2010). This seems to be confirmed by the present study.

In contrast with the above-mentioned results, Cook (2015) found qualitative improvement after implementing her life design career intervention programme with participants from only one of the two schools that were involved in her self-construction intervention programme. The students from a school with fewer resources available for the learners did seem to have

¹³ See Table 4.2

improved, in terms of their tendency to be more accountable for their own futures, due to their participation in the intervention programme. The participants in the present study come from affluent backgrounds, but participated successfully, and improved after participating in the life design programme. This may be due to that fact that the latter project's focus was wider than mere career construction and focussed more on personal construction in a variety of life domains, as well as on the sense of self in general.

5.3.1.2 Theme 2: Mastery

Nine sub-themes, which can be grouped under the theme Mastery, were identified. These sub-themes are: Optimism, self-efficacy, Adaptability, an Improved sense of self, Improved insight, Identification of strengths and weaknesses, Awareness of emotions, and Personal growth and giving back to others.

Optimism

The qualitative interpretation of the participants' responses concurs with the results of the quantitative data analysis that also formed part of the present study, namely, that participants in the study became more optimistic not only about life in general, but also about their own lives specifically.¹⁴ In response to the question regarding how participants felt about their own futures after participating in the programme, the following statements were made: *"I feel I now know what my future goals are. I have learned many things that will help me in the future"* (1-11; 1-2 and 4), and *"I will be able to use my strengths to my advantage when doing certain tasks [in future]"* (5-11; 1-2). Participant number 8's comment about her perspective of the future after participating in the programme was: *"I am very optimistic [about my future]"* (8-11; 1-2). From the above findings, the conclusion one can draw is that the potential to increase optimism was facilitated and developed through reflexive group life design techniques.

Self-efficacy

The significant positive change found in the quantitative results after participation in the current research project¹⁵ was also portrayed in the qualitative comments made by some of the participants. Their comments indicated resilience and a positive approach to challenges and obstacles after completing the group life skills intervention programme. Participant

¹⁴ See Table 4.4

¹⁵ See Table 4.4

number 5 used the encouraging sentence: *“I need to persevere, not give up!”* (5-11; 1:3) and participant number 8 commented: *“You don’t give up despite how long it may take for you to rise up again”* (8-11; 1-5). On the question regarding how the participants felt about their own futures after participating in the programme, the following answer was given: *“I will now be strong enough to cope with my problems in a positive manner”* (7-11; 1-7).

Because trauma challenges the worldview and identity of people, the ability to be psychologically flexible and resilient after experiencing difficult situations is very important to buffer post-traumatic symptoms and to increase well-being (Vieselmeyer, Holguin, & Mezulis, 2017). People who exhibit higher levels of self-efficacy and resilience have been found to experience fewer symptoms of anxiety, depression, vulnerability, and readjustment difficulties (Meichenbaum, 2014; Thomas, 2015). It is therefore encouraging to find that the adaptive cognitive and emotional processes that were encouraged during the intervention phase of the present research project seem to have led to an improvement in the participants’ self-efficacy and positive self-talk, as suggested by Meena, Sethi, and Vaneet (2016).

Adaptability

Although comments regarding the participants’ adaptability were often mentioned and therefore identified as a theme, the researcher found that all the comments were made before the participants partook in the intervention programme, or referred to an improved adaptability with regard to different social groups. This observation is summarised by the following comment: *“I was already very adaptable before the programme, but the programme has helped me to understand people better which helped me to form more friendships with people from different social groups”* (6-11; 1-6).” It therefore seems as if the programme assisted the participants in more efficiently fulfilling their obligations as peer supporters, by being adaptable regarding different ages and social groups and by having a better understanding of and improved empathy for different groups of people.

The capacity of participants to manage change and solve problems, which includes adjusting to changing circumstances and situations, understanding problematic situations, and coming up with effective and alternative solutions (as measured by quantitative techniques) (Prince-Embury, 2007) appeared to already have been present before their participation in the intervention programme. This aspect of adaptability is closely linked to the identified theme (which will be discussed later) of Giving back to others.

5.3.1.3 Improved sense of self

Consequential qualitative data from the present study confirms that narrative group intervention techniques (such as the genogram, lifeline, circle of influence, collages, and group discussions) could, among other things, help participants to discover a clearer and more authentic self. The narration of their own life stories aimed to assist the participants in acquiring knowledge of the self, which corresponds with statements made in this regard by Cochran (2007), Di Fabio and Maree (2013), and Savickas (2008, 2009). This is an important contribution, as self-insight helps to clarify future goals (Chen, 2015), and is positively linked to resilience, although negatively associated with stress (Cowden & Meyer-Weitz, 2016).

Having a clearer sense of self seemingly helped the participants make sense of their experiences (both past and present) and to reconstruct their interpretations about themselves and others, resulting in a more positive future perspective: “[After having participated in the programme] *I feel I have learned better ways to deal with issues and how to constantly take other people into consideration and have a positive mindset and approach to everything*” (9-11; 1-2 and 3). The results of the present research project resonate with remarks made by Cook’s participants (2015), who became aware (through participation in a career and self-construction programme) of the positive impact of self-knowledge on managing (career) transitions, and also communicated the idea that self-knowledge guided the choices that they made (Cook, 2015). Results also confirm assertions made by Brott (2001) that a person’s world and life are explored through narrations and reconstructed in dialogue with somebody else.

The qualitative data in the present study suggest that most of the participants developed a clearer sense of self and others, due to their active involvement in the narrative life design group intervention programme. Although attaining self-knowledge is seen as a lifelong developmental process, it is also viewed as an important fundamental building block essential to well-being, as it helps the individual to identify what makes life meaningful, and to select suitable objective to pursue (Shin, Steger, & Henry, 2016).

Improved insight into circumstances and other people

De Jong, van Donkersgoed, and Pijnenborg (2016) mention the importance of metacognitive skills in the process of forming integrative representations of self and others. These authors are of the opinion that, in order to discern meaning in past and current circumstances and people, and to make decisions regarding how to respond to challenges, a sense of self must

be developed through the use of metacognitive skills. The present study used narrative techniques in group settings; and encouraged the participants to think about and reflect on past and present experiences, and to challenge their own prior perceptions about people and things. Metacognitive skills were therefore stimulated and encouraged. This is also in accordance with Savickas (2001), who sees the development of a more balanced and objective view of past and present experiences, through the use of narrative life design techniques, as a central premise of life and career construction processes.

Comments and reflections from the participants indicate improved insight into their own circumstances, and those of other people, by being exposed to the programme. The “circle of life” activity seemed to be especially effective for the purposes of reflecting on other people, as can be seen by the following metaphors recorded as journal entries: *“My dad is a bear because he really cares about his family and will do anything to help and protect them”* (6-9; 35-1 to 3). Participant number 7 elaborated: *“I realised that I am fitted with different and positive things around me. All the people in my life add value to my life because of all the qualities they possess. It made me realise that I am closer to my family than I actually realised or thought...there is a chain connecting all of our values and interests”* (7-9; 35-1 to 14).

Reflective journal entries, after participating in the lifeline activity, tended to focus more on improved insight in terms of the seasons of life and the benefits attached to reflective activities: *“I have learned through every up there’s going to be a down and that sometimes downs leave an impact on you. You have to continue trusting in God, because He’ll lead you through everything, for He has a plan for you”* (9-4; 28-1 to 7); and *“The gift of hindsight has shown that it does in fact get better. Keep the memories of the hard times to make you strong, but keep your bubbles of happiness close to your heart”* (18-4; 28-4 to 8). These results concur with the findings of Meichenbaum (2014) and Thomas (2015), namely, that reflecting on traumatic experiences, through constructive narrative reflections, can bolster resilience and enhance personal growth.

Another aspect that was uncovered with regard to improved insight was that participants in the present study tended to realise that (while looking at the “ups and downs” portrayed in their lifelines) focusing on the positives is more beneficial to one’s well-being than focusing on the negatives: *“People give too much energy on the negative instead of their positive. If the energy was used on the positive it will help one to grow emotionally and spiritually”* (13:4; 20-1 to 4).

Creating a family genogram, and reflecting on one's family of origin and the accompanying relationships, seemed to result in altered perceptions in terms of the participants' own circumstances. Participant number 21 felt negative about her family and said: *"I want my family to get their ducks in a row and sort out their lives"* (21-2; 55-5). After completing the genogram and reflecting on her family, her journal inscription read as follows: *"I realised I need to appreciate my family – I sometimes forgot – and spend more time with them. I realised I appreciate my dad"* (21-2; 55-2). These findings seem to link with the findings of Burley (2014), whose participants mentioned the benefits of externalising family relationships by means of the genogram. The genogram was also recommended by Fassinger and Morrow (2013) as an effective tool for engaging participants from different cultural groups. In the present study, all the participants found the genogram acceptable and helpful when reflecting on their families and family relationships, during the process of reconstructing a new understanding and empathy through metacognitive exploration.

Identifying own strengths and weaknesses

All the participants in the present study remarked on the intervention programme resulting in a clearer knowledge of their own strengths and weaknesses, as well as the ability to make use of this knowledge in future: *"I have learned that I am actually a really good listener. I have also learned that I am too soft sometimes and I let people take advantage of my soft and kind nature"* (6-11; 1-1). *"Participation in the programme helped to establish what my strengths and weaknesses are, so I will know how to work around them when I begin working"* (8-11; 1-4).

A study by Littman-Ovadia, Lazar-Butbul, and Benjamin (2014), which was based on positive psychological principles, shared many similar intervention aspects with the present study. The researchers used techniques like polyvocality, in which the clients employed their interpersonal and social resources to identify their own strengths. Clients were further encouraged to examine unpleasant life experiences, to take a fresh look at those experiences, to reframe them and to remember past successes. The researchers also used metaphors during the intervention sessions.

In the present study, participants were also encouraged, during the personal life story activity, to identify their own strengths. During the four boxes activity, participants were encouraged to use metaphors to describe themselves and to discover their ability to find solutions, as can be seen from the following example: *"I think I am an ocean...I can be calm and soothing...or passionate. I aspire to be a sunflower, to face the sun (positive) and leave my shadow (troubles) behind"* (4-3; 24-1 to 6). The genogram as well as the lifeline were

used to reflect on favourable as well as adverse life experiences and to take a fresh look at them. One participant made the following journal inscription after completing her lifeline: “As I did my lifeline I realised it was much easier to focus on the good things that happened and not the low times in my life. As I look at my timeline I see I had an amazing childhood with more ups than downs, which I am grateful for” (4-4; 1-7).

The study by Littman-Ovadia, Lazar-Butbul, and Benjamin (2014) resulted in participants showing an enhanced self-esteem after participating in the intervention session. The present study’s results seem to coincide with these results, as the participants’ insight into their own strengths and weaknesses was linked to positive goals and a sufficiently positive self-esteem to achieve these goals. One participant identified Nelson Mandela as one of her role models and said the following about him (and implicitly about her ideal self): “He fought for change and never gave up. He forgave people” (4-6; 31-8). “My personal strengths are taking charge and giving (to others)” (4-6; 31-1). “I am hard working and dedicated” (4-6; 31-5). “I will fight for what is right and won’t give up” (4-6; 32-12). Both these research projects reinforce the positive nature of high self-esteem, as was also found by Wu et al. (2014).

Based on literature by Savickas et al. (2009), the researcher would argue that, by engaging actively in the life design intervention programme, a trend emerged that participants were given the opportunity to gain insight into their own strengths and weaknesses. They received an opportunity to reframe prior experiences, and ultimately reached a new level of insight, as well as new perspectives in terms of their abilities and how to make the most of these abilities in future. In so doing, this qualitative approach appears to have successfully enhanced participants’ sense of self, future perspectives, and well-being.

Personal growth

According to Vasile (2016), personal development implies the awareness of being a unique human being with inborn resources to make positive changes in one’s life, in order to live in harmony with oneself and with others. Having a better understanding of and greater compassion for oneself has also been shown to be a protective factor for a wide range of well-being indicators, and has been associated with compassion for others (Duarte, Pinto-Gouveia, & Cruz, 2016). By taking the above-mentioned statements into consideration while simultaneously looking at the comments made by participants, it can be concluded that the present research study probably played a positive role in the personal growth processes and well-being of the participants, and will hopefully support them in being empathetic in their interaction with others. This is corroborated by the following responses: “Now that I know myself better it will also help me to understand others better as well. I will be able to form

stronger relationships with new friends and also strengthen the ones I have now. I will now be able to analyse and think problems through, will be able to deal with different people and challenges, and will find meaning in stressful situations” (7-11; 1-4). “By knowing yourself better it is easier to get to know others as you can relate” (1-3; 53-2 to 5). “From this experience I have grown as a young woman and learnt about myself in depth which will give me more confidence in everything I take part in” (13-11; 1-4).

As counselling is essentially a journey towards personal growth, in which clients are playing an active and intentional role (Robitschek et al., 2012), the results of this research project actually indicate that when groups of people that closely resemble the group involved in the researcher’s study participate actively in a narrative life design intervention programme, similar positive results regarding personal growth can be achieved. Brott (2001), Maree (2015), and Savickas et al. (2009) describe the storied approach as an opportunity for the participants to deconstruct unproductive past life stories, in order to develop new functional and helpful stories. The aforementioned remarks (see previous paragraph) made by participants in the present research study indicate that these positive outcomes (regarding personal growth) of the storied approach are also applicable to group intervention projects, as was also found by Cook (2015). Research by Lampadan and Thomas (2016) found a weak correlation between social integration and personal growth in students; improvement seems to be due largely to the narrative part of the life design intervention offered to the group, as opposed to the results of merely being part of, and integrated into, a group.

5.3.1.3 Relatedness

Datu (2017) reports relatedness to be positively linked to well-being outcomes. Spinelli (2016) confirms this argument, by saying that the subjective experience of being cannot be separated from its foundational grounding in relatedness. It is through relatedness, and the experience of a core self in relation to other people, that an individual subjective self develops (Spinelli, 2016; Stern, 1985). Emotional relatedness is not only important for relational development, but also provides a safe haven for identity exploration (McLean & Thorne, 2003).

Increased comfort with others

Barclay and Stoltz (2016); Butler et al. (2013), as well as Cook (2015) found group counselling sessions to be effective in terms of the participants’ abilities to become aware of, and share their emotions openly. According to Savickas (2011b), self-construction happens when self-expression takes place. A life design programme encourages participants to go above and beyond the surface scenes of their narrations, and into the clarification of deeper

thoughts and emotions (Chen, 2007, p. 31). However, Savickas (2011b) argued that, in a group setting, this would not necessarily happen.

This willingness to share life stories, experiences, and emotions freely in a group setting was, nonetheless, evident in the present study. This is seen by the researcher as an indication that the participants experienced comfort among one another. The majority of the participants indicated how difficult it was at first; but that the experience of being part of the intervention process assisted them in becoming more comfortable in the group, leading to a sharing of their own experiences and emotions: *“I feel very comfortable and everything just feels right...I have learned that confiding brings comfort, as opposed to bottling up your feelings”* (8-11; 5-6 and 10-12). According to the researcher, these findings coincide with the benefits of group activities, which will be discussed next.

Benefits of group activities

Taking the importance of relatedness, especially during the adolescent years, into consideration, the researcher became very aware of the growing tendency amongst young people to make use of technology to connect with existing friends and to make new friends. Communication through social media is seen as an alternative when face-to-face communication becomes uncomfortable (Zurbriggen, Hagai, & Leon, 2016). People have time to edit their words before sharing them, and virtual communication allows them to hide emotions that might have a negative effect on relationships (Zurbriggen et al., 2016). Communication technology can further impact on the identity development of adolescents, as it has been found to spur arguments leading to harassment, bullying, abuse, and even physical violence (Draucker & Martsolf, 2010).

According to Bergdall et al. (2012) 93% of young adults already owned cell phones in 2009, and the same percentage were making use of the internet to connect to other people. In 2014, more than 415 active social network sites, with several of them having more than 100 million active consumers, were in existence (Tsotsou, 2015). According to Khosrovani and Desai (2016) the use of media networks is almost the same for different races and different ethnic groups that formed part of their research project (i.e. blacks, whites and Latin-Americans). The high levels of access to and use of social media were confirmed by the present research group's use of internet and social media by all the participants. The following table illustrates the participants' diversity in terms of cultural groups, home languages, countries of origin, whether they are boarders or day girls, as well as their use of social media:

Racial group	Boarder (B) or day girl (D)		Home language	Country of origin (Citizenship)			Internet and social media			
	B	D					Access to internet	Have cell phones	Make use of social media	
White	10	0	5	English	6	South Africa	5	All the participants	All the participants	All the participants
		1				Botswana				
		0	2	Afrikaans	2	South Africa	2			
		0	1	French	1	France	1			
Indian	2	0	2	English	2	South Africa		All the participants	All the participants	All the participants
Black	12	0	1	English	1	South Africa	1	All the participants	All the participants	All the participants
		1	1	Tswana	2	South Africa	2			
		1	0	Setswana	1	Botswana	1			
		1	0	Sesotho	1	Lesotho	1			
		1	0	French	1	Congo	1			
		0	1	Xhosa	1	South Africa	1			
		2	0	North Sotho	2	South	1			

Racial group	Boarder (B) or day girl (D)		Home language	Country of origin (Citizenship)			Internet and social media		
	B	D					Access to internet	Have cell phones	Make use of social media
					Africa				
					Lesotho	1			
	1	0	Shona	1	Zimbabwe	1			
	0	1	Sepedi	1	South Africa				
	1	0	Zulu	1	South Africa		All participants	All participants	All participants
	1	0	Zulu	1	South Africa		All participants	All participants	All participants

Table 5. 2: Diversity of the participants (cultural group, home language, country of origin, boarder or day girl) and the use of social media

All the girls from the present research group have their own computers and cell phones, have access to the internet and social media, and make use thereof to stay in contact and to connect with other people. All of them come from high-income households and are enrolled in a private school. They come from six different countries and three cultural backgrounds, which include 12 different home languages.

New technology is used to employ and explore new identities unconstrained from the limitations of spatial location and face-to-face interaction (Pertierra, 2013), but the excessive use of social media, to communicate and to relate to and connect with peers, can result in an inaccurate identity, as self-identity, intimacy, and sexuality are best developed through social and interpersonal interactions (Valkenburg & Peter, 2010). A valid sense of connectedness and acceptance by means of face-to-face interaction is therefore seen as an important contributing factor to validating and expanding the sense of self. This is also the opinion of Kalus (2016), namely, that social contexts are important and relevant during the process of building one's own identity.

Qualitative findings from the present group programme emphasise the positive effect of relational aspects of the intervention process. The majority of the participants specifically mentioned the group factor when they were asked what they found most helpful in the programme. Participant number 7 answered: *"Speaking in groups about past experiences helped close those chapters"* (7-11; 2-13). Participant number 23 elaborated further when she reflected on the advantages of group activities: *"I also realised that I am not the only one that has had heartbreaks, stress, pain and all of those horrible feelings... and it is nice to learn different things from other people because I have form trust with new people and bonds with new people"* (23-10; 53-5 to 11).

These findings confirm the findings of different researchers regarding the success of qualitative techniques when working with groups of individuals (Elgán et al., 2016; Roth, Suldo, & Ferron, 2017). Del Corso and Briddick (2015), as well as Maree and Pienaar (2009) contend that the subjective opinions of an audience are of utmost importance in the co-construction of meaning during adolescence. Their opinion also reflects the emphasis of other researchers (Chope & Consoli, 2015; Maree, 2010; Meijers, Hague, & Lengelle, 2016; Savickas et al., 2009) on the importance of validation when sharing one's life story.

Honest and open expression of perceptions and insights was encouraged during reflective times in the present study; as construction of the self is, according to Carroll, Bower and Muspratt (2017), in concurrence with Savickas (2011), reliant on the extent to which people authentically reflect on themselves. This also concurs with the argument of Sutton (2016)

and Okonji and Aryal (2016) who are of the opinion that self-reflection and insight predict beneficial outcomes such as psychological well-being and improved social connectedness. Brott (2001) and Del Corso and Rehfuss (2011) mention that inconsistencies in life stories are uncovered through honest self-reflection, leading to new and productive stories, which can help individuals to make informed decisions about the future. When these self-reflections are shared in a group, as encouraged by Savickas (2011), self-construction goes beyond acknowledging one's true self to expressing it. This leads to a comforting and content realisation that they are not alone and that they may be imperfectly human (Bitter & Byrd, 2011). By accepting their own imperfections and realising and expressing elements of the self, participants are able to change narrative conception of the self that are linked to core problematic self-narratives (Cardoso, Silva, Gonçalves, & Duarte, 2014). The design and self-construction of a meaningful life, based on respect for all, becomes possible (Cochran, 1997; Di Fabio, 2016; Maree, 2015).

The positive effect of group intervention on the participants' sense of self is pleasing. Although one participant made the recommendation that individual intervention must be added to the programme, the other twenty-three felt that the group intervention strategies provided sufficient opportunities for personal development and an increased sense of self: This positive experience of the programme was (perhaps over optimistically) described as: *"IT'S PERFECT"* (9-11; 2-15) and *"The programme is perfect the way it is. I personally think it's amazing and people who receive the opportunity to be part of the programme are absolutely lucky: (10-11; 2-15).*

5.4 Summary of results

The integrated findings of the present research study, along with existing literature, have been presented in this chapter. The discussion was guided by identified themes and sub-themes, generated from both quantitative and qualitative research results. The researcher attempted to connect the themes and results to the research question, as described in Chapter 1. A summary of the results will now be provided, by means of concise referral to the following themes: Control over own future, Mastery, Improved sense of self, and Relatedness.

5.4.1 Control over own future

With regard to experiencing control over their own futures, the quantitative data,¹⁶ as well as qualitative data, which was generated¹⁷ suggests that the group life design intervention programme had a positive impact on many of the participants. This confirms previous findings as discussed earlier in Chapter 5, and also as found by Hansen and Tovar (2013), Havenga (2011), and Maree and Crous (2012). Participants' responses further suggest an increase in self-belief and motivation, a clearer awareness of alternative opportunities, as well as a belief in a positive future, made possible through self-construction and solution-focused visualisation (as was presented in the four boxes technique).

The narration, deconstruction, and reconstruction of participants' respective life stories, inherent in various activities throughout the intervention programme, could speculatively account for the ability of participants to make more positive and informed projections regarding their respective futures. Increased insight into their own strengths, previous successes, and own resilience may have enhanced the positive outcome regarding developing an internal locus of control, core self-evaluations, and taking responsibility for their own futures. As such, the factors: locus of control, self-evaluation, and taking responsibility, as measured by the CAAS subtest Control (Öncel, 2014), are positively associated with identity achievement (Lillevoll, Kroger, & Martinussen, 2013) and well-being (Sales et al., 2013). These factors are also applicable in terms of life domains other than that of career choice (Hamtiaux et al., 2013). The results of the present study are important for answering the research question related to a clearer sense of self through participation in a group life design programme.

5.4.2 Mastery

In terms of Mastery as a theme, and regarding the quantitative data collected,¹⁸ the comparative pre- and post-intervention results indicate quantitative significant changes in the participants' ability to conceptualise problems and find adequate coping skills, as defined by De Jong et al. (2016). These results were substantiated by the results obtained through

¹⁶ See Table 4.2

¹⁷ See Table 4.14 and discussion under section 5.3.1.1

¹⁸ See Table 4.4

qualitative data collection.¹⁹ Most of the participants portrayed a positive self-esteem, and all of them demonstrated a positive attitude towards their own lives specifically, as well as towards the world in general. The group life design intervention programme resulted in an increase in the overall mastery of participants, but especially with regard to their optimism and self-efficacy.²⁰ A sense of competency was exposed through their reflective journal entries, signifying a positive approach towards possible obstacles and challenges.

This association between group life design counselling and a positive sense of mastery could speculatively be attributed to the participants' involvement in re-authoring their narrative experiences by either muting or amplifying them (Campbell & Ungar, 2004; Eide, 2012; Vess & Lara, 2016) and then project new possibilities of self-construction (Cardoso, 2016; Savickas & Guichard, 2016). During the process of change, which stems from the search for self-fulfilment, there is the need to find ways to increasingly recognise one's own value in order to reach personalised goals (Duarte, 2009; Morgenroth et al., 2015). This optimistic and self-efficient personalised process of growth should have a positive effect on the participants throughout their journey towards discovering and enhancing their own sense of self. The results are relevant and important for the purpose of clearer insight into the present research project, focusing on the impact of group life design counselling on the participants' sense of self.

5.4.3 Improved sense of self

The purpose of life-design intervention is to help people meet possible challenges by increasing the meta-competencies of adaptability and identity (Savickas, 2013). With regard to the impact of the group life design programme on the sense of self of participants, the research results suggest that there was an increase in participants' sense of self, as reported on in Chapters 4 and 5. Participants revealed improved insight into circumstances and in terms of other people, made mention of their own strengths and weaknesses in an accepting manner, and showed signs of personal growth due to their participation in the research programme.²¹

¹⁹ See section 5.3.1.2

²⁰ See Table 4.4

²¹ See section 5.3.1.4

Group membership through peer support programmes has shown evidence of providing role models who help to shape participants' identities and promote growth through positive interaction (Morris et al., 2011). Within a supportive group, participants experience understanding and acceptance, which affirm their identities (Butler et al., 2013; Morris et al., 2011). Membership and shared venues of participation in the peer supporter group may therefore have contributed to the inferred improved sense of self of the members. Thus, it appears that, by bringing members of the peer supporter group closer together through mutual participation, may progressively impact on the sense of self of the members. Such a positive impact on members through group participation was also found by Opper (2013).

Another possible positive influence on the process of discovering and enhancing the sense of self may lie in the narrative techniques that have been used. Narrative techniques illuminate the possibility for better understanding of self and others (Gilling, 2016). During the narrative process of listening to stories that the person can identify with, a process of self-examination and mental challenge, for the purpose of growth, takes place (Chope & Consoli, 2015; Moridi & Rezaee, 2017). Participants benefit by becoming more self-aware: by listening to their own narratives, as well as to the narratives of the other group members. Developing self-awareness through the use of narrative techniques is an emancipatory process, through which a more truthful inner self can be discovered (Winslade, 2015).

Participants in the current research project also had the opportunity to articulate their growing understanding of themselves, other people, and their worlds. The verbalisation and sharing of emotions, narratives and new perceptions, and insight within a group context, as encouraged by Carvalho-Malekane (2015), Olney, Herrington, and Verenikina, (2009), as well as Greenberg, Wortman, and Stone (1996) could also have contributed to the improved sense of self of participants. It can be surmised that verbalising insight, obtained during the time that participants were given to reflect and re-author their experiences and perceptions, fostered self-awareness and self-understanding. The participants were able to reflect both verbally and in their reflective journals.

Supplementary to their peer supporter group membership, and the opportunity to narrate and share within the group, the members' apparent improved sense of self may further be explained by the fact that the focus of group intervention was based on life design counselling principles and techniques. Life design counselling may encourage the growth of identities that may have already existed, and may lead participants to an understanding of who they are, which facilitates insight and decision-making (McMahon, 2015). The identification of life themes leads participants to a clearer understanding of their own values, interests, and needs (Hartung, 2015).

The success of life design techniques in a group setting have been discussed in detail earlier.²² The findings in the present study will hopefully contribute to the wider use of group life design counselling to enhance the sense of self of group members by improving participants' awareness of their own strengths and weaknesses, and by allowing for an increased insight regarding themselves, others, and their worlds, leading ultimately towards their enriched lives, improved well-being, and functional personal growth.

5.4.4 Relatedness

Based on the analysis of the quantitative test results reported on in Chapter 4,²³ the qualitative data sources,²⁴ as well as the literature control carried out and reviewed in Chapter 5, the researcher can declare that the life-design counselling sessions, which were provided in a group context, appear to contribute to an enhanced level of comfort with others in the group situation, and an increased sense of gratitude with regard to the opportunity to benefit from the group life design sessions. Participants' responses indicate that the comfort that they experienced in the group allowed them to share their life stories and experiences openly, and allowed them to experience the benefits of group sessions as described by researchers like Greenfield et al. (2014), Hamm et al. (2016), and Wood et al. (2017). The results of the qualitative data generated presumably confirm the benefits of group interaction in relation to the participants.²⁵

Although many authors have already acknowledged the effectiveness and positive impact of group counselling techniques (Noceti & Odone, 2014; Patel, Misra, Raj, & Balasubramanyam, 2017; Ryan, 2013) and social interaction (Guichard, 2009), it is encouraging to report that the results of the present study correspond with the findings of previous researchers.

5.5 Synopsis of results

A visual synopsis of the correlation between the quantitative and qualitative research results can be seen in Table 5.3.

²² See "The benefits of group activities" under section 5.3.1.3

²³ See Table 4.6

²⁴ See Chapters 4 and 5

²⁵ See section 5.3.1.4

Efficacy of a group based life design programme for adolescent peer supporters

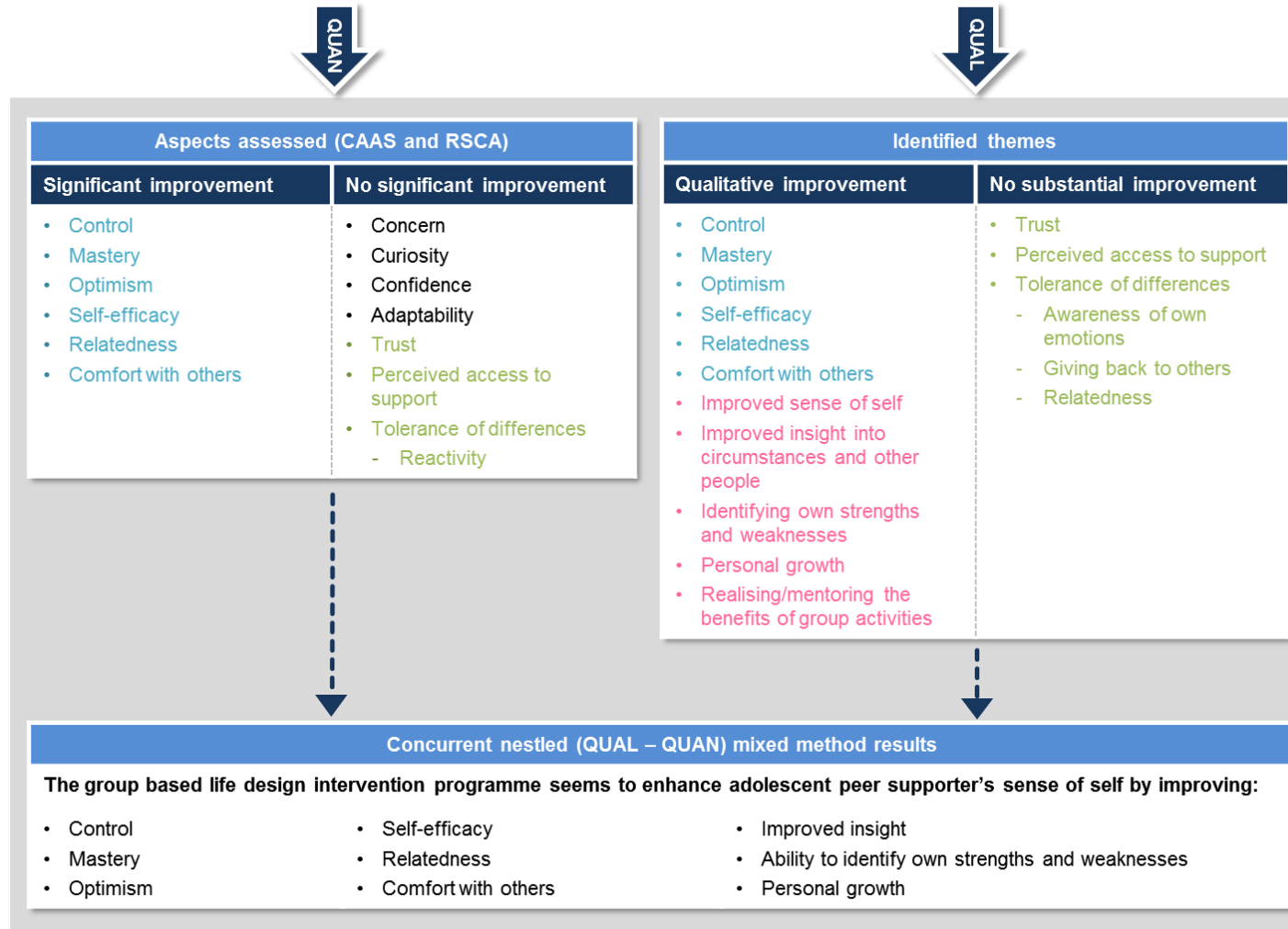


Figure 5. 1: Efficacy of a group-based life design programme for adolescent peer supporters (different colours used to indicate consistency or inconsistency of themes across paradigms)

5.6 Conclusions

In Chapter 5, the researcher aimed to present the findings and knowledge derived from the mixed method research study in a clear and comprehensive manner. In Chapter 6 the research question will be reviewed, and the researcher will also look critically at ethical considerations and limitations of the study, but also at positive aspects of the research project. Chapter 6 will conclude with a discussion of the final findings and recommendations.

CHAPTER 6

FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

“I am not what happened to me, I am who I choose to become.”

-Carl Gustav Jung-

6.1. Introduction

In this chapter, the preceding five chapters will briefly be reviewed in the synopsis, after which the researcher will strive to answer the research questions. This will be followed by an explanation of the ethical considerations to which the researcher adhered, and a discussion of the limitations of the study.

The researcher will provide a summary of her introspection in terms of what could have been done differently and more effectively, followed by recommendations for improved practice, further research, theory building in Educational Psychology, and future policies. The chapter will conclude with a personal reflection by the researcher.

6.2 Synopsis

6.2.1 Chapter 1

Chapter 1 covers the introduction to and background of the group-based life design study conducted with Grade 11 adolescent peer supporters from a private girls' school. The researcher has outlined the rationale for the study and how her interest in effectively assisting and enabling more adolescent girls from different cultures, on their journey towards identity-development, grew and developed. The concept of the sense of self being enhanced through participation in a well-structured peer support initiative, built mainly on constructivism and positive psychological principles, was proposed.

The main research question was stated as follows: How does group-based life design counselling influence the sense of self of peer supporters in an independent school for girls? The main research question resulted in five secondary research questions, formulated according to assumptions made by the researcher regarding the possible effectiveness and outcomes of the research programme. The secondary research questions that were asked to assist the researcher in answering the main research question were:

- What are peer supporters' self-esteem and self-identity needs?
- What are the essential aspects of group-based life design counselling, as seen and experienced by peer supporters?
- How does peer supporter participation in life design group intervention promote self-construction, and influence the development of a clearer sense of self and an improved self-esteem?
- How can life design counselling techniques be incorporated successfully in a group setting?
- What are the values and limitations of the newly developed group-based life design intervention programme?

Thereafter, the researcher clarified applicable terminology, explained the research design and methodology that would be used, and clarified her own role as researcher and psychologist. Anticipated contributions and limitations were then discussed, followed by ethical considerations.

6.2.2 Chapter 2

In Chapter 2, a literature review was undertaken, which considered the theoretical framework and theoretical concepts perceived as important for understanding the underlying notions regarding the evaluation of the theory-driven group-based intervention research study. Special emphasis was placed on the neuro-developmental aspects of the adolescence phase. The different life design techniques used during the intervention phase were also discussed, after which the researcher's insight on the conceptual framework was communicated to illustrate how key concepts were linked. This was followed by an illustration of the paradigmatic perspective. The researcher concluded Chapter 2 by providing a critical overview of the literature review.

6.2.3 Chapter 3

Chapter 3 commences with a discussion and visual representation of the mixed method research design used in the study. The chapter further contains information regarding the two different tests used pre- and post-intervention to evaluate the efficacy of life design techniques on the enhancement of specific aspects related to the personal development of the participants. The intervention strategy followed, along with a section containing information related to the gathering of quantitative, as well as qualitative, data. Steps taken to analyse and interpret the data were also addressed in this chapter. The steps taken to assure the quality of the research were then outlined and discussed.

6.3.4 Chapter 4

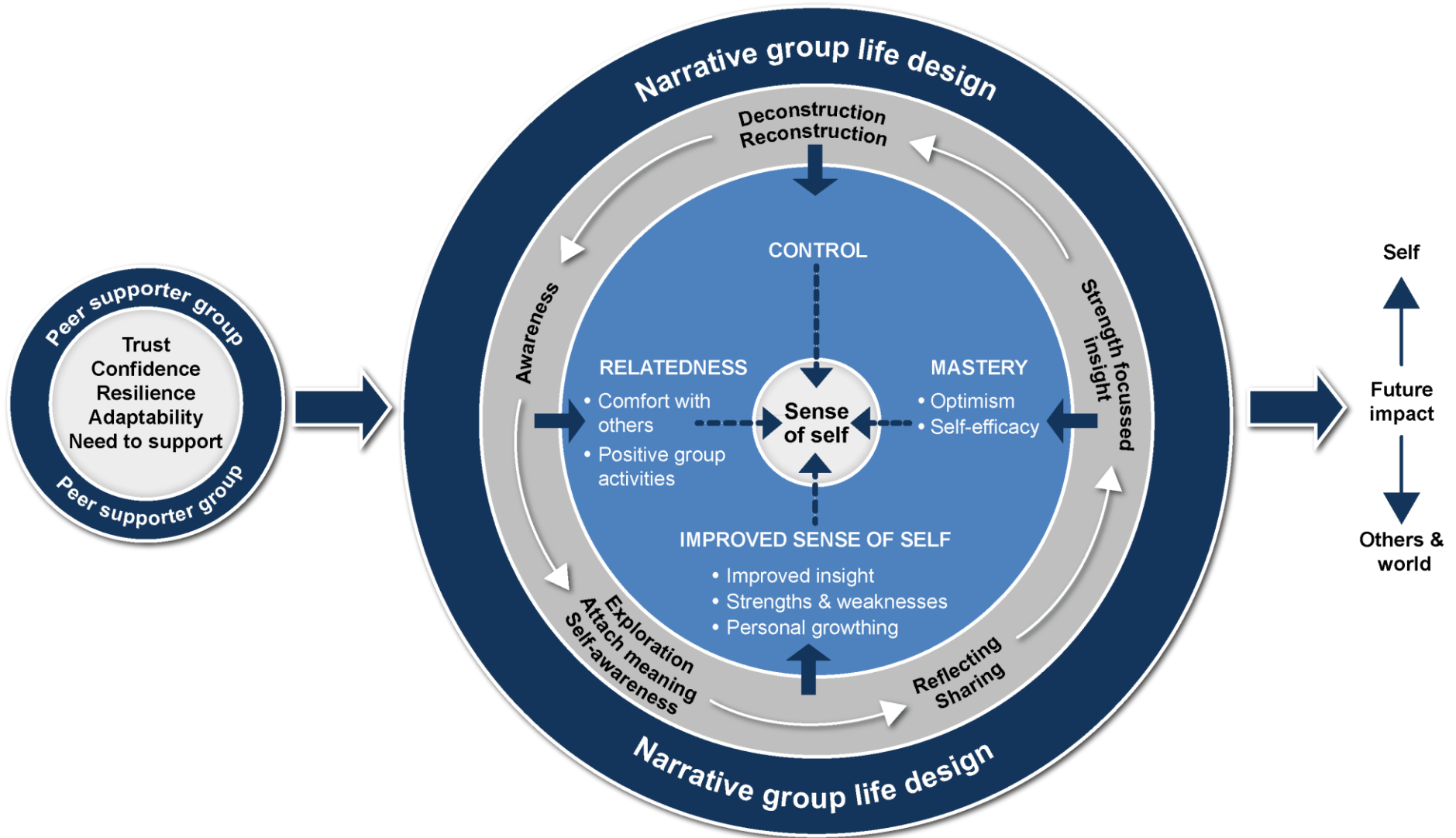
Chapter 4 presents an account of the quantitative, qualitative, as well as integrated findings of the group life design intervention programme. Theory- and research-driven tests, namely The *Career Adapt-Abilities Scale (CAAS)* and the *Resiliency Scales for Children and Adolescents (RSCA)* were administered pre- and post-intervention, in order to reach a quantitative understanding of the efficacy of life design techniques in a group setting with regard to enhancing the sense of self of adolescent female peer supporters in an independent school for girls. Pre- and post-intervention interviews and journal entries were used to collect qualitative data.

The results of quantitative data analysis for the 24 participants for both tests were summarised by means of descriptive statistics, and *Wilcoxon signed rank tests* were performed, to highlight the means and standard deviations for pre- and post-intervention test results, so as to test the hypothesis that the intervention resulted in a change. The quantitative findings indicated that the intervention sessions significantly enhanced the peer supporters' control, mastery, optimism, self-efficacy and comfort with others.

The qualitative findings demonstrated that the indicators that most often emerged in the participants' reflective journals and during the post-intervention interviews, were (in addition to the above-mentioned aspects) an improved sense of self, improved insight, an ability to identify their own strengths and weaknesses, personal growth, and the benefits of group interaction. A list of data sources and an explanation of the coding system can also be found in Chapter 5, followed by inclusion and exclusion criteria. The researcher added examples of journal entries and interview answers and concluded the chapter by presenting a summary of the integrated qualitative and quantitative data findings.

6.3.5 Chapter 5

In Chapter 5, the quantitative and qualitative results are presented, discussed, and connected with the theoretical framework and reviewed literature, as described in Chapter 2. Descriptive statistics are provided in terms of p-values and effect sizes, and the results connected to the research question. The discussions revolve around the identified themes, and are aimed at concluding the triangulation process and the summary of results.



6.3 Revisiting the research questions

The main research question that directed this research project, and which predicated the rationale of the project, is stated as: How does group-based life design counselling influence the sense of self of peer supporters in an independent school for girls? In an attempt to derive to a comprehensive and clear answer, the following secondary research questions guided my research efforts:

- What are peer supporters' self-esteem and self-identity needs?
- What are the essential aspects of group-based life design counselling, as seen and experienced by peer supporters?
- How does peer supporter participation in life design group intervention promote self-construction and influence the development of a clearer sense of self and an improved self-esteem?
- How can life design counselling techniques be incorporated successfully in a group setting?
- What are the values and limitations of the group-based life design intervention programme?

The main purpose of the research study was therefore to explore the possible significance and limitations of group based life-design counselling as a means of facilitating adolescents' sense of self, but also to explore further needs of adolescent peer supporters, as well as possible additional benefits of participation in the programme. The researcher will attempt to answer the research questions from a constructivist/interpretivist paradigm, since she agrees that meaning is made through direct experience, as well as through social interaction. The study incorporated and integrated quantitative and qualitative data.

6.3.1 What are peer supporters' self-esteem and self-identity needs?

Identity development is a multi-domain and complex task, closely linked to the adolescent developmental phase (Hill, Bromell, Tyson, & Flynt, 2007). Constructing an identity involves a questioning and discovery process aimed at defining who you are, what your values are, and what direction you wish to pursue in life (Bester & Quinn, 2010). Identity development happens most effectively during social interaction, which causes reflective cognitive reactions when people start thinking about possible outcomes (Shakurova, 2016).

With this in mind, and based on the comprehensive literature review (as discussed in Chapter 2) on self-esteem and identity development during adolescence, the researcher

decided to give the peer supporter participants an opportunity to, through a process of questioning and discovery, narrate their personal life stories and discover who they are, what they like and prefer, what their strengths and weaknesses are, and to value their own individuality. The peer supporter participants were encouraged to actively engage in, and reflect on, exploratory life design activities. They were challenged to become the authors of their personal life stories and to be resilient in dealing with life challenges.

In acquiring self-knowledge through authentic self-reflection (thinking about and reflecting on past experiences), reflexivity (thinking about possibilities for the future based on reflections on past experiences) and interactive dialogue in peer groups, the participants seemed to develop a clearer sense of who they are, including their own strengths and weaknesses (see section 5.3.1.3). The meaning-making process has apparently helped them gain confidence, to grow as individuals, and hopefully to attain an improved self-esteem and clearer self-identity. The positive feedback regarding the group intervention process (see section 5.3.1.3) confirms that the life design intervention process is what the adolescent participants felt that they needed at this period of their lives. The qualitative findings were confirmed by the results of the comparison between pre- and post-intervention quantitative data, suggesting significant improvement in the aspects of Mastery, Optimism and Self-efficacy (see Table 4.4, Table 4.14 and section 5.3.1.2).

6.3.2 What are the essential aspects of group-based life design counselling, as seen and experienced by peer supporters?

Within the constructivist epistemology, which was derived from a contextual worldview, interaction within one's own social and environmental context is viewed as very important in order for individuals to construct new realities through a process of thinking and processing (Patton & McMahon, 2016). Individuals are seen as open systems in constant interaction with the environment, while seeking stability and insight through on-going change (Patton & McMahan, 2016).

The group-based approach, inherent in the present intervention programme, was seen as the ideal opportunity for peer supporters to co-construct their subjective realities through dialogue and interaction with other peer supporters. As the group of peer supporters showed a willingness to support younger learners at the same school, the researcher predicted that some of the characteristics that are important within the context of a successful counselling relationship would already exist, or could be developed among group members. Granvold (1996) has described acceptance, understanding, trust, and caring as critical aspects in a

counselling relationship, while Rogers (1951) has emphasised genuineness, unconditional regard, and empathetic understanding. More recent authors emphasise the importance of engagement, interaction and encouragement, as well as aspects like being heard and validated (Savickas, 2011; Taylor et al., 2016; Ulmanen, Soini, Pietarinen, & Pyhältö, 2016).

The above-mentioned aspects seemed to have resonated with the peer supporter participants, as many of the participants mentioned that they had to first trust and feel comfortable with the other group members, before they were able to open up and share their stories and insight. Based on participants' responses regarding comfort with others (see Table 4.6, Table 4.14 and section 5.3.1.4), it would appear as if group-based life-design counselling has had a positive effect on the participants' sense of relatedness (or safer and healthier relationships), which is recognised as an important result, together with sisterhood, catharsis, self-acceptance, and gaining a voice, of group-based counselling (Machtinger et al., 2015). The participating peer supporters seemed to have recognised the power of an audience to help them identify aspects that resonated with their core selves (see comments made by the participants about the benefits of group intervention, in terms of improved sense of self, as discussed under sections 5.3.1.3 and 5.3.1.4) within a group context, meeting the criteria for a successful counselling atmosphere, as described above.

6.3.3 How does peer supporter participation in life design group intervention promote self-construction and influence the development of a clearer sense of self and an improved self-esteem?

The present study aimed at creating a helping (holding) environment, in which the psychologist could encourage healing conversations, but would only function as a facilitator in the counselling process, as encouraged by Castillo et al. (2016). Peer supporters were encouraged to be actively involved in the co-construction process, by being mutually understanding of the difficulties that other group members face and by showing respect and taking shared responsibility as encouraged by Barlow et al. (2010) and Peavy (1998). Each individual peer supporter was encouraged to engage in a process of reflexivity and to share her own narrative with the group, as this is seen as a means by which individuals can construct their own identities (Carvalho-Malekane, 2015; Maree, 2016; Nota, Ginevra, & Santilli, 2015; Savickas, 2011; Savickas, Editor, Guichard, & Editor, 2016) through a “conversational partnership” (White, 2007, p. 263). Stories became instruments through which themes, which have the potential to become the foundation of future stories during the self-construction process, were identified (Gilling, 2016; Savickas, 2011..).

As self-esteem is seen as the recognition of one's own strengths and abilities, as well as a striving to reach personal goals (Ferrari, Sgaramella, & Soresi, 2015), peer supporters' participation in the life design group intervention process proved to be effective in improving their self-esteem (see discussion of qualitative results in Chapter 4: theme 2, as well as section 5.3.1.3) and assisting in creating a clearer sense of self. The programme they participated in was predicated on the following qualities as described by McMahon, Adam, and Lim (2002), as well as Banyard, Hamby and Grych (2016):

- They were active participants in the constructivist counselling process.
- They were respectful listeners, interested in the stories and growth of their peers.
- They were collaborative during the interactive process of life design counselling.
- Feelings, as well as facts, were valued during sharing of stories and the meaning-making, co-construction process.
- Emphasis was placed on the process by means of interactive dialogue.
- The participants engaged in written narratives and journal reflections.

6.3.4 How can life design counselling techniques be incorporated successfully in a group setting?

The peer supporter group who participated in the present study consisted of 24 members. The general introduction, which took place before they participated in different life design counselling activities, was conducted by the researcher with the whole group. After the introductory talk, the group divided into three smaller groups of eight participants each. Each group was attended by a psychologist, who kept a low profile, but facilitated the process. Group members were encouraged to participate in dialogical stories (McIlveen, 2012) during the self-construction and co-construction process (Savickas, 2012) in the group setting. Before the intervention process was initiated by the researcher, the peer supporters were trained in basic reflective listening skills (Deblinger et al., 2016) or active listening skills (Carvalho-Malekane, 2015). These skills, together with the fact that they all applied to be peer supporters and therefore are probably caring people, seemed to be enough to support change and growth within the group, with minimal support from the psychologists.

The aforementioned findings are significant in the researcher's quest to find ways to help and support more people effectively in the process towards identity development, an improved self-esteem, and an enhanced sense of self, as recommended by Nota, Santilli, and Soresi (2016) and Soresi, Nota, Sgaramella, Ferrari, Giannini, Ginevra, and Santilli (2014). Life design techniques seem to be effective, useful, and applicable for use in group

settings as well, when people trained in life design counselling can plan, supervise and guide the process.

6.3.5 What are the values and limitations of the newly developed group-based life design intervention programme?

The importance of both peer relationships and social connectedness become particularly prominent in adolescence (Bolland et al., 2016; Brock, Biggs, Carter, Cattet, & Raley, 2015). Carter et al. (2016), Ellis, Marsh, and Craven (2009) and Steinbeck (2014) describe the effectiveness of peer support programmes with adolescents. Research reveals increased interactions with peers, increased academic engagement and performance, more progress in terms of individualised social goals, increased social participation, as well as a greater number of new friendships that lasted, when they compared the outcomes of students who experienced peer support with those students who received adult-delivered support exclusively (Carter et al., 2016). Unfortunately, in spite of the positive effect of peer support programmes, such programmes are limited (Wroblewski, Walker, Jarus-Hakak, & Suto, 2015).

The life design programme has proved to be effective with peer supporters in a group setting (see discussion of results in Chapter 5). The main values of this study (according to the researcher) are, firstly, that it can be easily duplicated in other school settings; and secondly, that such a programme will not only benefit the group members (as was found by other researchers as described above), but also the volunteer peer supporters. People trained in life design techniques can start their own adolescent peer support groups, apply the techniques and implement the programme in small groups, and, through the implementation of such a programme, reach more young people in their quest towards social interaction with peers, enhancing their sense of self, self-esteem, as well as general well-being.

The fact that the members of the group came from different cultures, different countries of origin, different home language scenarios, and different home support systems, can be seen as adding more value to the intervention programme. Adolescents from a variety of different cultures and circumstances should therefore benefit from participation in such a life design programme. The fact that the positive results of the present research study are only applicable to female peer supporters from an affluent private girls' school, may be limiting in terms of the predicted application of a similar project undertaken with boys, adolescents in a government school, boys and girls from a dual-medium school, as well as with participants who are not members of a peer support group.

6.4 Ethical considerations

The following ethical considerations, listed in Chapter 1, were adhered to during the course of the research study:

- Ensured transparency. All role players were informed of the purpose of the project, the procedures to be followed, and their rights in terms of their participation. The voluntary nature of participation was emphasised and participants were told verbally and in writing that they were free to withdraw from the study at any time, should they wish to do so.
- Written, informed assent and consent. Written, informed assent was obtained from the participants (see Annexure F), and written, informed consent was obtained from the parents or guardians (see Annexure E), and the headmaster and governing body of the private school (of which the participants were learners) (see Annexure D) to conduct the research.
- Confidentiality. Confidentiality was maintained by the researcher, who ensured that data cannot be linked to individual participants by name.
- Verification of results. Results and interpretations were communicated to the participants for verification purposes, to avoid misinterpretations of the research findings.
- Counselling services. Counselling services were available to individuals who wished to receive support, or who manifested certain behaviours and emotions in response to their participation in the intervention programme. Arrangements in this regard were made with two fellow psychologists to ensure that the role of the researcher was not integrated and confused with the researcher's professional role as psychologist.
- Adherence to ethical guidelines. Ethical guidelines, as specified in the Ethics and Research Statement of the Faculty of Education of the University of Pretoria and The Professional Board for Psychology, were adhered to.

6.5 The strengths of the study

The following can be seen as possible strengths of the research project:

A mixed-method approach was used to increase the trustworthiness, triangulation, crystallisation and credibility of the study (Clark & Creswell, 2011; Maree, 2012; Maree & Van der Westhuizen, 2009; Nieuwenhuis, 2010). Traditional quantitative instruments are, according to Rehfuss and Di Fabio (2012), limited in terms of their capacity to measure and understand the nature of qualitative changes in individuals' self-narratives. A qualitative

approach is therefore often used to explore and understand participants' experiences with central phenomenon (Ivankova, Creswell, & Clark, 2012; Wertz et al., 2011). The mixed-method approach offers different lenses to capture the varied dimensions of experiences and the effects of the intervention sessions on the participants (Fassinger & Morrow, 2013; Taghizadeh, 2013). Qualitative data about aspects not included in quantitative test results could also be gathered, to add to the comprehensiveness of results.

In the quantitative part of the research, the researcher made use of two tests, namely the *Career Adapt-Abilities Scale (CAAS)* (Savickas & Porfeli, 2012), and the *Resiliency Scales for Children and Adolescents (RSCA)* (Prince-Embury, 2007). Both these tests had been validated and standardised, and were found to be reliable assessment techniques in the context of the present study²⁶

Regarding the qualitative part of the research, all the participants had a pre- and post-intervention interview with the researcher. Furthermore, participants had to write in their reflective journals after each activity in which life design techniques had been used. The qualitative sources of data available to the researcher were therefore very comprehensive and detailed.

Another aspect that can be seen as a strength, is the fact that the researcher only facilitated the group sessions, and took a supplementary role during the group discussions. The researcher also had two other psychologists who assisted her during these sessions. The group members rotated, so that the group members within each of the three groups were different for all activities, in which alternative techniques were used. The possibility of potential influence, due to the researcher's presence, in terms of what was said or written in the diaries, was therefore minimised.

The researcher has had extensive engagement for seven years with different groups of peer supporters at the same school. Through a process of subjective evaluation, the programme was shaped and improved through the years.²⁷ The school also supports the project and makes money available for training manuals and reflective journals for each participant. The participants are allowed to attend a training camp in a beautiful nature reserve at the beginning of each year. The necessary means, to make it an experience that the Grade 11s

²⁶ See section 3.2.5.1

²⁷ See addendum ***

want to be part of, are therefore in place. To be a member of the peer support group has become somewhat of a status symbol at the school. This has helped the researcher in finding adolescents who are committed to the process, and willing to apply themselves to become effective peer supporters. All the participants in the study applied to be peer supporters and were chosen by the previous group to be members. Most of them are high achievers in different areas.²⁸ The level of insight and participation was high, as most of the participants are highly motivated individuals. All the participants attended all the intervention sessions over a period of three months.

The participants represented a multi-cultural group from different countries, with different home languages and different home circumstances (some of them are boarders).

This study was conducted with adolescents. As adolescence is seen as a challenging stage in terms of discovering one's own identity (Breet et al., 2010; Ruiz-Casares et al., 2014), implementation of the life design intervention programme in groups may be useful in assisting more adolescents during this developmental stage, with both their self-identity and sense of self-exploration, and may possibly enhance their well-being.

6.6 Limitations of the study

The limitations of this study can be perceived as follows:

- The subjective nature of self-reporting questionnaires and journal entries lends itself to questioning the validity of the answers given by the participants. The participants may, for instance, try to please the researcher, or may want to portray themselves in a better light. In this regard, it helped to have a qualitative aspect that could reinforce the research data.
- Although the size of the sample in the present study allowed for valid statistical inferences, it only included 24 girls from a specific socio-economic background.
- The study was limited to one affluent private girls' school with a specific group of participants, namely peer supporters, and does therefore not represent the broader South African population.

6.7. A personal reflection on the study

²⁸ See section 5.1

The researcher's reflections on the study are incorporated in the following discussion covering the anticipated findings, surprising findings, findings that were disappointing, as well as findings that were not expected, and thoughts pertaining to the personal meaning of the study to the researcher.

6.7.1. Findings that were anticipated

Responses from the participants confirmed the researcher's expectation that the intervention programme, based on life design techniques, can be successfully used with groups of participants. The results further confirmed, as anticipated, a positive growth in self-identity, improved insight, and an enhanced sense of self. The intervention programme based on life design principles and techniques seems to have assisted the participants in using their own stories to organise their lives, construct their identities, and make sense of their problems (Savickas, 2015), and by being actively involved in the process, participants have added purpose, meaning and usefulness to their own lives (Savickas & Lara, 2016).

6.7.2. Surprising findings

The researcher was pleasantly surprised by the way participants embraced the various intervention techniques. They surprised the researcher further, by the effective and empathetic way in which they patiently listened to and supported one another, in spite of cultural and home language differences. This may be indicative of the possible effective application of life design techniques in other African group contexts as well. The group setting will hopefully assist in simultaneously enhancing self-knowledge and acceptance of more people, as well as providing an environment in which "people-matching", a term used by Savickas in his interview with Collin (2001), can take place. Participants will have the opportunity to interact and connect with people who are similar (in some respects) to themselves.

Another surprising aspect was each single peer supporter's willingness to share own experiences, joyful as well as painful, with the other group members, in an honest and open manner. Post-modernism, post-structuralism and the narrative approach challenge the older so called science-consultant model of working. A more construction-insight model of intervention is recommended. According to the results of the present study, this approach seems to be helpful and effective – even when used in a small-group setting. The openness of the participants when using narrative interactions in group settings made the researcher realise why she prefers a narrative model where the focus is not on specific words and texts, but on their meaning within the constructed story told in a caring and accepting

environment. The nature of the narrative approach encourages openness, honesty, and a willingness to share personal experiences.

The focus in the narrative approach is not on the way group members orient to or take up set utterances to clarify meaning, but on the meaning-making process of the person communicating the narrative. The participant is therefore seen as the author of her own life story, and capable of solving her own problems within a caring and supportive group setting. This should enhance greater feelings of control and self-efficacy.

6.7.3. Disappointing findings

The researcher feels grateful that the positive impact of the life design group intervention programme was confirmed by both the quantitative as well as the qualitative research results. In general, she feels satisfied, but she is disappointed by the fact that not all the participants showed an improvement in the post-intervention quantitative scores. A further disappointment evolved from the fact that the four learners experiencing trauma during the intervention phase did not show the resilience that was hoped for by the researcher. Their post-intervention scores on some of the subscales were lower than the pre-intervention scores.

Although the programme did not focus specifically on careers, the researcher found it disappointing that the difference between the pre- and post-intervention quantitative results did not show a significant improvement in career adaptability (as measured by the CAAS) after participating in the generalised life design group intervention programme. Seemingly, the intervention programme did not improve participants to negotiate career-related transitions meaningfully by improving aspects like Concern, Curiosity or Confidence, as would be expected with an improved sense of self.

6.7.4. Unexpected findings

Although the peer supporters were seen as optimistic, confident and visionary young ladies even before they participated in the programme, aspects like Control, Mastery, Optimism and Self-efficacy showed quantitative as well as qualitative improvement. The group results also showed convincing qualitative evidence of improvement in personal growth and comfort with others. The group members found it easier to express themselves in front of a group of

people and to relate to others²⁹. This effect was not expected, and confirms the value of post-modern life design programmes for adolescents when used in group settings – even with emotionally strong and capable participants.

This finding is encouraging, as the programme may perhaps even have broader import or application potential, even in leadership development programmes with potential school leaders. If so, the research affirm the latest leadership reviews in different paradigms, such as post-positivist, social constructionist, and postmodern, found in different countries (e.g., in the U.S., European and Australasian countries) as reported on by Fairhurst and Fairhurst (2014). These authors report that the latest literature on leadership development tends to place communication at the centre of leadership studies. The improvement of personal development aspects as found in the present study (Control, Mastery, Optimism, Self-efficacy, Personal growth and Comfort with others) may add value to leadership programmes in schools, not only in South Africa, but also in the global context. This may be possible because the life design techniques are not associated with a specific ethnic group or a specific culture (Tien, 2015).

6.7.5. The personal meaning of the study to the researcher.

The researcher sees self-knowledge and self-acceptance as a measure of the connectedness to who people are, what they have, and what they wish to achieve. The better people know and accept themselves and the more honest they are about their own strengths and weaknesses, the more easily and authentically they can be who they are meant to be, and the easier they can accept other people for who they are. The researcher was pleasantly surprised by the extent to which participants' participation advanced her (the researcher's) own life design journey. Their honesty, and the strength and wisdom expressed in their narratives, continually reminded the researcher of one of the inherent principles of the life design framework, namely that learning is a lifelong process. As the researcher's dream has always been to support people and to help them realise and celebrate their own uniqueness, she appreciated the impact of participants' input during group intervention sessions, not only on each other, but on each of the facilitators as well.

The researcher was impressed with the potential for narrative interaction to impact on all involved (participants as well as facilitators) in the process of re-authoring life stories. By

²⁹ See figure 6.2 for a summary of the findings.

showing respect and tolerance, and listening to and reflecting on others' stories, and by assisting them in exploring alternative stories, the 'giver' may receive more than those sharing their personal accounts. As mutually connected and interdependent human beings, people may play not only a part in re-designing their own lives and the lives of those with whom they interact: they can also play a part in building a successful and thriving society. One changed individual life may spread out to impact on many others; as a solitary pebble creates ripples in a lake, the group potential for greatness is far greater than the sum of the individual parts.

6.8 In retrospect – what would the researcher have done differently?

The researcher could have included a follow-up quantitative assessment, as well as follow-up interviews at the end of the year, as the peer supporters were exposed to more life design activities throughout the year in which they served as peer supporters. They also had the opportunity to support and build within the lives of other girls attending the same school.

More data could have further enhanced the validity of the study with regard to the question of sustainability of the newly-gained sense of self due to participation in the life design programme. In retrospect, the researcher may have included a different scale/measure to assess the changes that had taken place in the participants. Although results derived from the CAAS are valuable, the scale was developed specifically with a focus on career counselling. A scale like the *Locus of Control Inventory (LCI)*, which assesses internal locus of control, external locus of control, as well as autonomy, may have added additional value to the research project if it had been included. Although this scale has not been used with life design counselling, one of its applications is to measure the effect of coaching or intervention. The locus of control gives an indication of the extent to which individuals believe that they are in control of their lives – an aspect that affects an array of important issues, such as attitude, emotional health, and academic success. Including the internal locus of control in the study would have allowed for a better indication of participants' core evaluations, based on their internal beliefs (Judge & Bono, 2001).

6.9 Recommendations

Having implemented the intervention programme in a private school with 24 female adolescent peer supporters, and, after reflecting on the possible benefits and negative aspects of the study, the following recommendations are made:

6.9.1. Recommendations for the improvement of practice

In terms of the improvement of practice, it is recommended that life design intervention programmes with groups of learners should be started in Grade 9. Learners will be supported while exploring themselves and their own identities, so that this process can become more focused and effective. They will probably build stronger social relationships, become more accommodating regarding diversity, and become more confident in sharing and discussing their own narratives. The life design techniques will further assist them in making more informed decisions about their futures and future careers.

One of the participants expressed the need for individual sessions with the psychologist in addition to the group intervention sessions. This may be beneficial and will make provision for enhancing achieved insight to an even greater extent.

6.9.2. Recommendations for further research

Ebersöhn, 2017; Mendoza, Dmitrieva, Perreira, Hurwich-reiss, and Watamura (2017) and Shams (2016) emphasise the importance of the improvement of psychological and social well-being, as well as an improvement in future aspirations (Hill, 2003) in poverty-associated risk areas. Research should therefore evaluate the effectiveness and value of this life design group intervention programme in economically disadvantaged areas. Students from different spheres of life and from resource-restrained contexts, as recommended by Ferrari et al. (2015), Maree, (2015a) and Maree (2015b), should therefore be included in future research studies.

As boys are less willing to express their emotions and painful memories openly (Artz et al., 2016), and are more concerned with the impression they make on other people based on what they say or reveal (Clark, 2011), it will be interesting to see if the same results apply to boys being exposed to the same life design programme. A mixed group of boys and girls will have an influence on the group dynamics and may also influence the results and effectiveness of such a programme. Further research with diverse groups, with regard to gender, is needed.

The results of studies by De Gouveia (2015), Guichard, Pouyaud, De Calan, and Dumora (2012) and Unsworth, Palicki and Lustig (2016) report on the positive effect of spending time in nature, and person-nature-connectedness, with regard to participants' well-being. As the first part of intervention during the present study took place in nature over a weekend, peer supporter participants who formed part of this study were exposed to this additional benefit

during the intervention process. Research looking deeper into the incorporation of nature in the life design intervention process can be used to make the programme even more effective.

A recent study by Van Niekerk (2016) confirms the importance of family relationships and strong family bonds for adolescents' emotional and subjective well-being, as found by other researchers (Abubakar et al., 2013), in spite of the growing individuation in relationships with parents, as well as the decrease in disclosure to parents during adolescence (Becht et al., 2016). Research on adapted ways of using life design and narrative techniques systemically in families, to improve insight, and to reduce attachment difficulties and relational problems, should be investigated.

Mirror neurons (located in the brain's motor cortex) are activated when we simply watch others, but are more highly activated when we imitate others (Blum, 2015; Cuevas & Paulus, 2016). Mirror neurons are the neurological building blocks of empathy. Watching other participants while sharing their narratives, and imitating them by sharing one's own stories, will therefore result in improved empathy and a more positive connection between people (Chartrand & Lakin, 2013). It is hypothesised that this will result in corresponding motor representations in the observer's brain, resulting in permanent positive change (Boyer & Bertenthal, 2016). This may have a huge impact on not only the individual adolescent and his or her parents, but also on relationships in general.

6.9.3. Recommendations for theory building in Psychology

The use of theoretical concepts is essential in the practice of psychology. Theoretical concepts direct and focus psychologists' attention, and intervention is thus aimed at prominent aspects of clients' experiences and ways of relating to the world and others (Zonzi, Barkham, Hardy, Llewelyn, & Leiman, 2014). Developing a coherent sense of self is a dynamic process, as individuals and their contexts are always changing, and is closely linked to psychological resilience and well-being (Masten, 2015). Knowledge about the improvement, or smoother development, of self-identity and the sense of self during adolescence should be part of the training of psychologists. In order to improve training effectively, it is recommended that the following theoretical building blocks should be part of the theoretical training of psychologists:

- Life design techniques, how to adapt and incorporate these techniques in groups, the importance of the interconnectedness of people, as well as the effect

thereof on the well-being of people and their positive adaptation to broad life challenges (Masten, 2015).

- Knowledge about neurology and the impact on people during different developmental phases can assist psychologists in working more scientifically with their clients.
- The importance of preventative work with learners from different age groups (based on their developmental needs) to adequately prepare learners for difficulties and transitions.
- The development of programmes to facilitate the development of confidence, resilience, group interaction, and the sharing of life experiences and stories.

6.9.4. Recommendations for future policies

It is recommended that policy makers should consider the inclusion of programmes focussing on more than just the academic, physical, and cultural development of learners. The inclusion of programmes to facilitate the development of emotional intelligence, self-identity, resilience and confidence, should be considered. By improving these skills, the learners will benefit by probably becoming more resilient, and they should be able to meet changing future demands with confidence.

6.10 Conclusion and synopsis of the key findings

In this study the effect of using group based life-design counselling to develop a clearer sense of self was explored. Based on the reported findings, and as summarised in Figures 6.1 and 6.2, group intervention based on life design techniques can be regarded as an effective means to enhance the sense of self of adolescent peer supporters. Participation in the programme allowed the peer supporters to validate their lived experiences and to navigate their life journey through a process of recreation, acceptance, appreciation and growth.

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ANNEXURE A: Pre-intervention questionnaire

Pre-intervention semi-structured open-ended questions			
Name		Age	
Questions	Prompts	Answers	
What do you know about yourself?	What are your strengths and weaknesses likes and dislikes, etc.?		
How do you feel about your future?	What do you think will happen in your future?		
What is needed for success in life?	What do you think you need to succeed?		
What does the word "success" mean to you?	What is your opinion on success?		
How does the past influence us?	Think of your own past. How does that influence you?		
What do you know about resilience?	Think of items that are described as resilient.		
Tell me about your own resilience or lack thereof.	Discuss some of your experiences of being resilient or lacking resilience.		

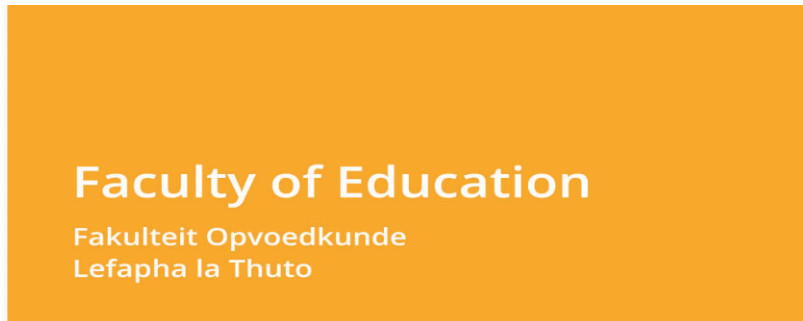
Questions	Prompts	Answers
Are you aware of things that make it difficult for you to be resilient?	When is it difficult for you to be resilient?	
What do you know about adaptability or being adaptable?	How will you recognise when somebody is adaptable?	
Tell me about your own adaptability.	Give examples of your own adaptability.	
What makes it difficult to be adaptable?	What makes it difficult for you to adapt?	
What impact will it have on a person if s/he is not adaptable?	What do you think are the disadvantages of not being adaptable?	
What do you hope to gain from your participation in the life design programme?	Do you think participation in the life design programme will help you in any way?	

ANNEXURE B: Post-intervention questionnaire

Post-intervention semi-structured open-ended questions			
Name	<input style="width: 95%;" type="text"/>	Age	<input style="width: 95%;" type="text"/>
Questions	Prompts	Answers	
What have you learned about yourself?	Have you discovered any new characteristics, likes or strengths?		
How do you feel about your future after participating in the programme?	What do you think will happen in your future?		
What do you still need to be successful in life?	What do you think success is?		
How will the knowledge that you have gained about yourself influence your success in future?	What is your opinion about what you have learned?		
What impact will your past have on your future?	Think of your own past. How will you allow it to influence you?		
What do you now know about resilience?	Discuss what you have learned about what it means to be resilient.		
Tell me about your own resilience or lack of resilience.	Discuss your experiences.		

Questions	Prompts	Answers
What still makes it difficult for you to be resilient?	When is it difficult for you to be resilient?	
What do you now know about adaptability or being adaptable?	How will you recognise when somebody is adaptable?	
Tell me about your own adaptability after being part of the programme.	Give examples of your own adaptability.	
What makes it difficult for you to be adaptable?	Has this changed for you in any way?	
What impact will the changes in adaptability have on you?	Do you have an advantage now?	
What have you gained from your participation in the life design programme?	Do you think it will help you in any way?	
What have you found helpful in the programme?	Mention anything that will help you in future.	
What about the programme should change to make it more effective?	You have been through the programme. How could it have been more effective for you?	
Any other comments?	Is there anything else you would like to say or ask?	

ANNEXURE C: CD with relevant quantitative and qualitative data



21 September 2015

Attention: The Governing Body and Headmaster

Consent for PhD research at St Mary's DSG

I am currently enrolled to complete a PhD (Educational Psychology) at the University of Pretoria. The purpose of my study is to explore the impact of group-based life design counselling on the sense of self of peer supporters in an independent school for girls.

For the purpose of my research, I will require as many Grade 11 peer supporters as possible to complete two questionnaires: the *Career Adapt Abilities Survey (CAAS)*, and the *Resiliency Scale for Children and Adolescents (RSCA)*. Both are standardised tests and will be administered immediately before and after a three month period, during which intervention sessions will take place. Furthermore, the peer supporters will be asked to take part in group intervention sessions once a week for a period of three months.

Participation in the study will be voluntary and the learners will be informed that they are allowed to withdraw from the research at any time. Informed consent will be obtained from both the learners and their parents or guardians. The learners' identities will be protected, their privacy respected and all the information will be managed confidentially. The school's name will also not be mentioned in the above study.

Your favourable consideration of my request for permission to conduct my research at St Mary's DSG will be appreciated.

Yours sincerely

.....
Marthé Pienaar
Researcher

.....
Prof. J.G. Maree
Supervisor

**ANNEXURE D:
request for informed consent from the headmaster and
governing body**


DECLARATION

I, the undersigned, hereby grant Marthé Pienaar permission to conduct her research study (as discussed and stipulated in the letter) at St. Mary's DSG.


.....

Headmaster

Date: 8/10/15


.....

Chairperson: Governing Body

Date: 8/10/15

ANNEXURE E: request for information consent from the participants' parents/guardians



UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Faculty of Education

Fakulteit Opvoedkunde
Lefapha la Thuto

21 September 2015

Dear Parent/Guardian

Informed consent

I am currently enrolled to complete a PhD (Educational Psychology) at the University of Pretoria. Your daughter is invited to participate in a research study. The following information regarding the study is provided to help you to decide if you will allow her to take part. Note that her participation is voluntary and that she may withdraw from the study at any time.

Your daughter was selected to be part of the peer supporter programme offered at the school. The purpose of my study is to explore the impact of group-based life design counselling on the sense of self of peer supporters in an independent school for girls. Should you decide to allow her to participate, she will be required to complete two questionnaires at the beginning of the year (prior to the intervention sessions) and the same two questionnaires after a three month group intervention period. The group intervention will take place on camp, as well as weekly sessions after the peer supporter's return from camp. The two questionnaires are the *Career Adapt Abilities Survey (CAAS)*, and the *Resiliency Scale for Children and Adolescents (RSCA)*. Both are standardised tests.

Possible benefits of your daughter's participation in this study include the fact that she may gain further insight about herself. Self knowledge and acceptance may enhance her sense of self, which will assist her in designing strategies to overcome the negative impact of certain life experiences, and to use individual experiences to improve her self-esteem.

The following ethical principles apply:

- Participation is voluntary.
- Your daughter is free to withdraw from the project at any stage if she wishes to do so.
- All information provided by her will be treated confidentially and anonymously.
There are no costs involved for you or your daughter.
No participants will receive any monetary compensation.
- Ethical guidelines have been followed to ensure that no participating party will be harmed or placed at risk of any kind.
There are no known risks involved in the research and I am not aware of any possible short-, medium- or long-term negative effects of participating in the research.

- Sessions will be audio-taped and will be transcribed and interpreted by the researcher.
- Your daughter will have access to the transcribed and interpreted data, and you reserve the right to access any information that has been collected about you throughout the research process at any time.
No reference will be made in my dissertation to any information that may convey any particular personal or identifiable information. Codes or descriptive names will be used.
Your daughter reserves the right to withdraw any information or data that she wishes not to be released for publication.
- The research findings might be published in an accredited research journal, but confidentiality and anonymity will be honoured.

By signing this letter of informed consent you are giving permission for the following sources of data to be released:

- The verbatim transcription of the content recorded during the intervention group interview.
- The results of the tests administered pre- and post-group intervention sessions.
- The analysis, interpretation and reporting of the data gathered during the three months of data collection.

Yours sincerely



.....
Mrs Marthé Pienaar
Researcher

.....
Prof. J.G. Maree
Supervisor

Informed consent

Having read the attached request for informed consent, declare that I am fully aware of the nature and purpose of the study to be conducted by Mrs Marthé Pienaar. I understand that all information will be treated anonymously and as strictly confidential. I further understand that all ethical considerations, as outlined in the request for consent, will be adhered to.

I hereby agree to allow my daughter to make herself available for the research. I also consent to the publication of the research findings, subject to anonymity and confidentiality.

Parent/ Guardian's name:

Signature:

Date:

ANNEXURE F: Request for informed assent from the participants



21 September 2015

Dear Participant

Informed assent

I am currently enrolled to complete a PhD (Educational Psychology) at the University of Pretoria. You are invited to participate in a research study. The following information regarding the study is provided to help you decide if you would like to take part, as your participation is voluntary. Please also note that you may withdraw from the study at any time.

The purpose of this study is to explore the impact of group-based life design counselling on the sense of self of peer supporters in an independent school for girls. Should you decide to participate, you will be required to take part in group sessions on camp, as well as weekly sessions for a period of three months. You will also be asked to complete two questionnaires at the beginning of the year (prior to the intervention sessions) and the same two questionnaires after the three month period.

The following ethical principles apply:

- Participation is voluntary.
You are free to withdraw from the project at any stage if you wish to do so.
All information provided by you will be treated confidentially and anonymously.
- There are no costs involved for you.
No participants will receive any monetary compensation.
- Ethical guidelines have been followed to ensure that no participating party will be harmed or placed at risk of any kind.
There are no known risks involved in the research and I am not aware of any possible short-, medium- or long-term negative effects of participating in the research.
- Sessions will be audio-taped and will be transcribed and interpreted by the researcher.
- You will have access to the transcribed and interpreted data, and you reserve the right to access any information that has been collected about you throughout the research process at any time.
No reference will be made in my dissertation to any information that may convey any particular personal or identifiable information. Codes or descriptive names will be used.

You reserve the right to withdraw any information or data that you wish not to be released for publication.

- The research findings might be published in an accredited research journal, but confidentiality and anonymity will be honoured.

By signing this letter of informed assent you are giving permission for the following sources of data to be released:

- The verbatim transcription of the content recorded during the intervention group interview.
- The results of the tests administered pre- and post-group intervention sessions.
- The analysis, interpretation and reporting of the data gathered during the three months of data collection.

Yours sincerely



.....
Mrs Marthé Pienaar
Researcher

.....
Prof. J.G. Maree
Supervisor

Informed assent

Having read the attached request for informed assent, I declare that I am fully aware of the nature and purpose of the study to be conducted by Mrs Marthé Pienaar. I understand that all information will be treated anonymously and as strictly confidential. I further understand that all ethical considerations, as outlined in the request for assent, will be adhered to.

I hereby agree to make myself available for the research. I also assent to the publication of the research findings, subject to anonymity and confidentiality.

Participant's name:

Signature:

Date: