

THE PERCEPTIONS OF STUDENT CONSULTANTS TOWARDS THE INITIAL ASSESSMENT AND CONSULTATION (IAC) MODEL OF ASSESSMENT

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A research project submitted in partial fulfilment of the requirements for the degree of
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DECLARATION

I, Bianca Warburton, declare that this research report is my own, unaided work. It is being submitted for the degree of Masters in Education (Educational Psychology) in the Faculty of Humanities, University of the Witwatersrand, Johannesburg. It has not been submitted before for any other degree or examination at this or any other university.

Bianca Warburton

April, 2009

DEDICATION

To my loving husband, Clifford

*Thank you for being my candle when the lights grew dark,
my compass when the sea was rough,
and the smile at the end of every day.*

Your belief in me has made this possible

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To my wonderful MEd class, for their friendship and laughter. Their unwavering support has been a blessing.

To my family for their unconditional love and encouragement and being my pillar of strength.

To my Lord and Saviour, Jesus Christ, who has been my hope, my comfort, my purpose, my joy, my everything.

The Initial Assessment and Consultation approach is defined as a conceptual and formal framework for the collection of multiple sources of data to provide a springboard for action

-Adelman and Taylor, 1979

ABSTRACT

In 1982, a new model of psycho-educational assessment, called the Initial Assessment and Consultation Approach (IAC), was introduced into the Education Clinic of the Division of Specialised Education at the University of the Witwatersrand (WITS). It has continued to be used in the new Emthonjeni Centre at WITS University. The IAC assessment model was developed in response to criticisms and limitations of existing assessment practices. It represents an approach that is client oriented, in that it encourages consultants and clients to arrive together at their own decisions. Key to the model is a joint problem-solving approach, where the concept of the client's control, consent and commitment are imperative.

The aim of this study was to explore student consultants' perceptions of the IAC model of assessment. More specifically, the study explored the perceptions of the effectiveness of the IAC as a tool for psycho-educational assessment; the student consultants' opinion regarding the model and lastly past students' use of the IAC approach at internship sites or places of work. The results of the study were qualitatively examined through the use of thematic content analysis, which provided rich description participants' opinions.

The sample consisted of forty respondents. Information letters were distributed to all participants and data was gathered through the use of an online questionnaire. The questionnaire was structured specifically to elicit the participants' perceptions of the IAC model of psycho-educational assessment.

The results indicate that the IAC is perceived as an effective approach to psycho-educational assessment, by student consultants at WITS University, and many of the principles of the approach are continued to be adopted by past students at their internship sites or places of work.

KEYWORDS: Psycho-educational assessment, Initial Assessment and Consultation Approach (IAC), Models of assessment, Student consultants, Client families, Assessment in the South African context

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CHAPTER ONE

INTRODUCTION

In 1982, a model of psycho-educational assessment termed the Initial Assessment and Consultation approach (IAC) was introduced to the Education Clinic of the Division of Specialised Education at the University of the Witwatersrand (WITS) by Professor Mervyn Skuy. The IAC model has continued to be used in the new Emthonjeni Community Centre at WITS University to train student consultants in psycho-educational practice. The Emthonjeni Community Centre provides multi-disciplinary community service and currently offers psychological and educational services to the public. This provides students the opportunity to work with a diverse cross-section of the population, with a wide range of presenting concerns. The IAC forms part of the students' repertoire of skills with regards to psycho-educational assessments and intervention.

In response to criticisms relating to traditional assessment, Adelman and Taylor developed the IAC approach to psycho-educational assessment in 1979 at the Fernald Institute at the Los Angeles Learning Centre of the University of California. Adelman and Taylor (1979) posit that assessment does not occur in isolation, but is based on theoretical perspectives and assumptions regarding human development and functioning. These assumptions influence how assessment is applied and how the findings are utilised in practice.

This novel approach represents a paradigm shift in psycho-educational assessment, from a medical model framework emphasising pathology and intrapersonal deficits, to a more egalitarian framework, focusing on the interaction between environmental and individual factors. In the IAC model, difficulties experienced by the child are viewed not as deficits within the child, but instead as problems that exist in the interaction between the child and his/her environment (Adelman & Taylor, 1979).

The IAC offers a more empowering, interactive option than traditional assessment, transcending the limits of the medical model, but not excluding it entirely (Amod, 2003). Furthermore, the basic principles within the IAC model of active participation, self

determination, joint decision making and a holistic, systemic framework are true to the values of transparency and democracy supported in South Africa (Amod, 2003).

Dangor (1983) explored the opinions of student consultants towards the IAC approach. The findings indicated positive responses towards the approach. In subsequent years however, there has not been any further studies relating to the students' perceptions of the model. Furthermore, in the 25 years since Dangor's study, significant political, educational and social transformation has occurred within the South African context. Consequently current research is required in order to understand students' perceptions of the model of assessment they are trained in, and how it relates to the needs of clients that they are dealing with in the present South African context.

1.1 Rationale

The advent of democracy in South Africa has resulted in significant changes in educational, socio-political and economic sectors, partly driven by a focus on human rights and equality. At the same time as this transformation, internationally there has been a shift in thinking relating to traditional models of psycho-educational assessment. This has sparked much debate around the efficacy of conventional psychological assessment practice in South Africa.

In South Africa, the provision for those with special needs has been inextricably linked to the notion of exclusion, in the sense that those who were considered unable to "function" within a mainstream setting were excluded from it and provided with alternate forms of education and treatments (Harcombe, 2001). Conventional assessment techniques in the South African context thus exclusively focused on the individual and were inclined to emphasise pathology and deficits within the child. Under the old educational dispensation in South Africa, assessment was conducted primarily for the purpose of classification in order to establish appropriate placement. The process was therefore aimed at diagnosing children based on conventional psychometric testing and specialist intervention such as remedial or speech therapy, or placement into special education was recommended (Amod, 2003; Foxcroft & Roodt, 2001).

The IAC approach represents a conceptual shift from the reductionist pathology orientation described above, towards an interactional, holistic problem-solving approach to psycho-educational assessment and intervention (Dangor, 1983). This shift is in alignment with ecosystemic theory, whereby the participation of the family and significant others, in both the assessment and intervention planning phases, is central. In South Africa a strong emphasis has been placed on human rights, as well as inclusive education and shifting how one understands learning and development. The IAC's holistic and joint problem-solving approach corresponds with these shifts in thinking, and concurrently moves beyond the conventional testing approach (Amod, 2003). Due to the fact that the IAC represents an alternative approach to conventional assessment practices, ongoing research relating to its application within the South African context is required.

The IAC approach encourages all stakeholders, particularly parents or caregivers and teachers, to develop a sense of commitment in the educational process. This is particularly relevant for the South African context and in line with current legislation which reiterates the responsibility of parents in education. The Education White Paper (No.6 of 2001), as well as the South African Schools Act (1996), support the optimal involvement of parents in the education of their children. These policy documents emphasise that parents must be involved in the processes of identifying barriers to learning and development, and in developing ways to respond to these barriers (Lazarus, Daniels & Engelbrecht, 1999).

The Education White Paper (No.6 of 2001) states that “partnerships will be established with parents so that they can, armed with information, counselling and skills, participate more effectively in the planning and implementation of inclusion activities” (pg 50). Lazarus et al. (1999) comment on the benefit of parent involvement in that it enables parents to further develop their own skills and understanding in supporting their children through their schooling. The IAC provides a valuable tool in attempting to respond to such policy initiatives. The study at hand would thus serve to explore the relevance of the approach in relation to such involvement of parents in the process of psycho-educational assessment, as perceived by student consultants.

Educational psychology students at WITS have been trained in the IAC model of psycho-educational assessment since 1982, with training in assessment forming one of the essential

components of the coursework instruction. This type of training in psycho-educational assessment forms a key constituent of most graduate programmes in educational psychology both internationally (Wilson & Reschley, 1996, as cited in Farre 1998) and locally. This is in line with the Health Professions Council of South Africa (HPCSA) which stipulates the requirements which need to be adhered to by educational psychology students in training. Part of these requirements is for assessment to form one component of the content of the internship programme, where interns are expected to conduct assessments pertaining to children and adolescents, and provide feedback to children, parents and teachers. In this way assessment constitutes ten percent of the course programme (HPCSA, 2008). Due to the fact that a large portion of an educational psychologist's training and practice entails clinical work in psycho-educational assessment, it is crucial for students and practitioners to have a sound theoretical framework and model to guide them in their approach, as well as in their interventions.

Previous research on the IAC model (Amod, 2003; Amod, Skuy, Sonderup & Fridjhon, 2000; Dangor, 1983; Manala, 2001; Skuy, Westaway & Hickson, 1986; Sonderup, 1998) has demonstrated that the model is a useful approach to psycho-educational assessment across cultural groups. Furthermore, the IAC is seen as being useful from both teachers' and parents' perspectives. Whilst all these factors are significant and essential, an aspect which needs to be further explored is students' opinions and perceptions towards the psycho-educational assessment model in which they have been trained. Given that assessment forms such a key component of an educational psychologist's training and practice, exploring their opinions regarding the models they use and have been trained in is pertinent.

This study thus serves to explore and understand student consultants' perceptions of the IAC model in terms of its effectiveness, as well as in relation to how it can be modified from a teaching frame of reference. In addition it will be useful to understand in what way the IAC has served to guide and direct the thought and practice of the students in relation to psycho-educational assessment. There are three main research questions which the study explores, specifically: is the IAC perceived by student consultants as an effective tool for Psycho-educational assessment; what are student consultant's opinions in relation to the IAC and lastly, are past students still using the principles of the IAC approach at their internship sites or in their own place of work?

CHAPTER TWO

REVIEW OF LITERATURE

In this chapter, the Initial Assessment and Consultation (IAC) approach is discussed. The definition and purpose of psycho-educational assessment is highlighted first in order to provide a general understanding of the field. This will be followed by a discussion on the developments in psycho-educational assessment from traditional approaches to assessment to the IAC approach as an alternative model. Thereafter the IAC is discussed in more detail, with specific reference to the theoretical foundations, the process of the approach as well as previous research conducted. Included in the discussion are the limitations of the IAC, as well as a discussion surrounding models of assessment currently being adopted at other Universities in South Africa.

2.1 Psycho-Educational Assessment: Definition and Purpose

An understanding of the perceptions of the effectiveness of the IAC needs to be considered within the context of recent trends and perspectives in the field of assessment, both internationally and within the South African context. In order to explore this further, a definition and purpose of psycho-educational assessment must be highlighted.

Psycho-educational assessment refers to the process of assembling information from as many sources as possible, usually by psychologists, remedial education specialists or psychometrists, with the purpose of making decisions about and/or planning programmes for learners (Adleman & Taylor, 1993; Farre, 1998; Lerner, 1993). More specifically, the information assembled relates to the child's cognitive, physical, psychosocial and scholastic functioning. Additionally, aspects relating to the child's home, school and socio-cultural milieu are equally pertinent (Amod, 2003).

Furthermore, Skuy et al. (1986, pg1) describe psychological assessment broadly as examining "scholastic performance, behavioural adjustment, motivation, emotional functioning, and family relationships". Ashman and Conway (1997) expand on this by stating that the most common purpose of assessment appears to be the determination of what individuals have, or

have not learned over a period of instruction, or over the course of their lives. With regards to learning difficulties, Lerner (1993) comments that the process of assessment includes screening, referral (for an evaluation), classification, instructional planning and monitoring the progress of the learner.

It is crucial to differentiate assessment from testing. As Adelman and Taylor (1979) point out, testing is only one aspect of the assessment process, which can include evaluations of family functioning, medical histories, functioning at school and a study of any other aspects in a child's life which are deemed relevant. In addition assessment through counselling and assessment through instruction are also mentioned as other approaches to assessment (Adelman & Taylor, 1979). Testing generally involves the administration and interpretation of tests and thereafter produces findings. Assessment however, "gives meaning to the findings within the context of the child's life situation" (Sattler, 1988, pg 34). Sattler (1982) notes that due to the continuous process of development, and the impact of life experiences, assessment can be seen as a dynamic process that constantly requires monitoring and modification.

The purpose of psycho-educational assessment is to identify and understand the patterns of interactive factors within the child's life, which may assist in explaining the difficulties confronted by the child. The types of concerns that are identified include academic functioning, physical development and behavioural and social functioning (Amod, 2003). Ashman and Conway (1997) highlight the fact that assessment may not always be aimed at finding problems or areas of concern, and may be used to determine effective programmes and interventions. This affirms Dangor's (1983) view that assessment is often seen as being separate from intervention, whereas, assessment and treatment are in fact "inextricably intertwined" (pg 1). Interventions may include joint decision making regarding possible recommendations including referral to specialised professionals such as occupational therapists and speech therapists and/or the placement of the child in educational contexts which will facilitate remediation or maximise his/her abilities (Adelman & Taylor, 1993; Lerner, 1993).

Sonderup (1998) highlights the concerns regarding psycho-educational assessment, namely the questioning of adequacy of underlying assumptions, interpretation of results and related

outcomes. In order to address these concerns, Sonderup (1998) highlights the need for psycho-educational assessment to be grounded in a workable model as a framework. Models of assessment stem from theories and assumptions regarding human development and functioning. Adelman & Taylor (1993) emphasise the importance of adopting a model for assessment by stating that a model serves to guide and direct thought and behaviour related to the phenomenon to which it is applied, for example psycho-educational assessment. Given the importance of the assessment model, two different models of psycho-educational assessment will be critically discussed.

2.2 Conventional Approaches to Psycho-Educational Assessment

Psycho-educational assessment has been an important part of the controversy surrounding standardised testing, and particularly that of intelligence testing (Farre, 1998). The controversies regarding traditional forms of intelligence tests will be critically discussed. Ultimately it will be proposed that criticisms directed towards intelligence tests, which is subsumed under a medical model framework, do not necessarily imply that such tests are insignificant or invalid. Rather, such critiques will be discussed with a view of highlighting the need for an alternative approach to psycho-educational assessment within the South African context.

Psycho-educational assessment has formed a fundamental part of traditional service delivery to children classified as having “learning disabilities” and thus has been coupled with many of the controversies and criticisms surrounding that field. Traditionally, conventional approaches based on the medical model, were used to label and categorise children as learning disabled, having Attention Deficit Hyperactivity Disorder, as being dyslexic, and so forth, highlighting internal factors, such as psychodynamic conflicts, ‘minimal brain dysfunction’, and biological antecedents (Snyder and Lopez, 2005).

These assessment practices tended to highlight terms such as symptoms, disorders, pathologies, illnesses, diagnoses, treatments, doctors, patients, clinics and clinicians, all of which emphasise abnormality, maladjustment and sickness. Through this medical model, the locus of human adjustment and maladjustment is largely viewed as being situated inside the

person. Internal factors within the child are therefore stressed, whilst wider systems such as the family, schooling environment and culture are largely ignored (Snyder and Lopez, 2005).

Furthermore, the individual seeking help is viewed as a passive victim of biological forces, in need of expert help and advice (Snyder and Lopez, 2005). From a medical model perspective, the psychologist is viewed as being an expert who diagnoses through testing and then stipulates where a child should be placed for “treatment”. This reductionist view of learning difficulties assumes the child has internal deficits, and is thus restricted to single cause and effect relationships. Adelman and Taylor (1993) underline this point by stating that the effect of this theoretical perspective was that specialists, parents and educators began to view learning differences as pathological. Such understanding and categorisation of children depended largely on intelligence testing, which has for many years been common practice in assessment.

A number of studies have been conducted globally regarding the use of intelligence testing for assessing and categorising intellectual ability (Naglieri, 2005; Pfeiffer, Reddy, Kletzel, Schmelzer & Boyer, 2000; Robinson & Harrison, 2005). When inspecting such studies it is revealed that many contextual factors that could in fact predict differences in development and learning are usually not examined. Therefore, some studies have strongly queried the usage of intelligence scores alone in determining the causes for emotional and scholastic differences (Velluntino, Scanlon, Small, Fanuele, 2006; D’Angiulli & Siegel, 2003; Donovan & Cross, 2002). These researchers argue that performance on intelligence tests alone is an ineffective predictor in the identification of learning and developmental difficulties and thus support aforementioned research.

A large body of research (Adelman & Taylor, 1979; Feuerstein, Rand & Hoffmann, 1979; Haywood, 2001; Messick, 1980; Sewell, 1987) criticised the practice of traditional forms of intelligence testing. The primary criticism relating to the practice of standardised testing has been that children from disadvantaged backgrounds cannot perform adequately in relation to children from advantaged backgrounds, due to reduced opportunities for learning experiences and deprived social conditions (Messick, 1980; Sewell, 1987). Salvia and Ysseldyke (1988) comment that the more an individual’s background is incongruous from the norming population of a given intelligence instrument, the more likely an individual’s performance

will be discordant with his/her potential and therefore result in unsubstantial educational decisions.

Furthermore, researchers (Adelman & Taylor, 1979; Feuerstein, 1979) remark that reliance on traditional methods of assessments for various learning difficulties, presented by children from divergent backgrounds, is considered not only as inadequate but also as an unsound basis for decisions on psycho-educational intervention to address such difficulties (Seabi, 2007).

According to Ysseldyke (1983) studies conducted by the University of Minnesota's Institute for Research on Learning Disabilities, indicated that much of the information collected during assessment was irrelevant to decision-making with regards to placement and intervention. It was found that decisions regarding classifications were low in validity, partially due to the lack of definitional clarity regarding the concept of learning difficulties. Additionally, assessors made use of large numbers of psychometric tools which did not yield an increase in the validity of classification conclusions (Ysseldyke, 1983; Farre, 1998).

Additional studies (Coffey & Orbringer, 2000; Gunderson & Siegel, 2001; Shuttleworth-Edwards, Kemp, Rust, Murihead, Hartman & Radloff, 2004;) highlight other causes of learning and developmental difficulties, such as inadequate learning opportunities and motivation for learning, as stronger predictors of learning and developmental problems than Intelligence Quotient scores. Furthermore, Fagan (2000) and Espy (2001) argue that factors such as parental income, education and other indicators of socio-economic status, predict academic achievement as well as intelligence scores. This affirms the suggestion that using intelligence test scores alone can be limiting.

Importantly, criticism directed towards traditional forms of intelligence tests do not necessarily imply that such tests are insignificant or invalid. When the aim of the tester is to obtain current cognitive functioning level, such tests provide immediate results, as they require less time to administer and interpret (Seabi, 2007). However, it appears essential that when they are used, the tester be aware of their associated limitations. Additionally, it is crucial that he/she is cautious in the interpretation of the results. Since factors of language,

socio-economic status and education are moderators of performance on intelligence tests, it seems essential that they be considered when interpreting test results.

Wedell (2003) argues that children within a category are just as similar as they are different, and need to be treated individually. Research (Snyder & Lopez, 2005) highlights that current overreliance on test findings frequently results in unreliable and invalid data being used in decision making and support delivery.

Furthermore, labelling or categorising may send a message to the individual that he or she is inferior, and this in turn can adversely affect the individual's self-esteem (Ormrod, 2006). This is particularly pertinent to children and adolescents who are trying to form their own self identity. As Donald, Lazarus and Lolwana (2002) point out, the label begins to become part of the individual, and significant people within the child/adolescent's life may begin to treat him or her in ways which may be detrimental to his or her development.

Ultimately, the literature is in agreement that when adopting traditional approaches, such as the medical model to underpin assessment, the effects of the environment and the social context within which the child lives, are largely overlooked. Although social and environmental factors are acknowledged within the medical model, they do not become the primary focus in understanding an individual's current concerns. The social context as a whole, and the interaction between the different levels of the systems that the child is part of, have much to do with how individual differences are viewed and experienced and ultimately how they should be addressed, and thus can be seen as limiting if overlooked (Adelman & Taylor, 1979).

South Africa is a multicultural and multilingual society, and thus, as Reiff (1997) points out, there is need for adaption of assessment measures. Within the South African context, a multitude of factors can be seen to impact test performance, such as language, education, trauma and violence as well as socio-economic status (Amod, 2003, Reiff 1997). Amod et al. (2000) underline the importance of a paradigm shift in assessment within the South African context. A traditional medical model approach, which focuses on symptoms and deficits within the child, tends to ignore broader societal issues. Given the socio-economic, political and educational conditions, which prevailed in South Africa under the apartheid regime,

which still continues under the current government, it has been suggested that application of traditional assessment to individuals from different backgrounds may be unfair to certain groups of people (Seabi, 2007). Consequently, alternative models to psycho-educational assessment, which takes into consideration such aforementioned factors as language, culture, education and socio-economic status, are necessary and pertinent to the South African context.

2.3 The IAC Model as an Alternative Approach to Psycho-Educational Assessment

As a result of the limitations and criticisms found with prevailing assessment practices, the IAC model was developed. The IAC model de-emphasises the medical model in favour of an ecosystemic approach, which perceives an individual in a holistic manner; taking into consideration not only how he/she is functioning, but also the context of his/her living. According to Amod (2003, pg 121), the IAC is based upon a transactional view which suggests that “individuals need to be considered in the light of their context, which includes a consideration of ecological and cultural factors, language and educational experience, and socio-economic opportunity”. Importantly, the IAC transcends the bounds of the medical model, but does not entirely exclude it (Amod, 2003). Thus it must be noted that the IAC model does not reject or entirely rule out the medical model and traditional assessment practices. Instead, the IAC seeks to address the limitations and criticisms of such models by examining reciprocal relationships between personal and environmental variables (Adelman & Taylor, 1979; Skuy et al., 1986). The aim of this section is to highlight why the IAC is considered as a suitable alternative approach to psycho-educational assessment.

The basic underlying premise of the IAC is that educational difficulties are not diseases that can be cured or individual deficits requiring correcting, but instead should be viewed as problems existing in the interaction between the child and his/her environment (Skuy et al., 1986). According to Skuy et al. (1986) the IAC model of assessment proves to be more egalitarian and emphasises reciprocal involvement of the child, parents and the consultants.

For many years, particularly during the apartheid regime, psychologists were seen to perpetuate state policies through the exclusion of marginalised individuals. In the democratic South Africa however, both the Education White Paper (No.6 of 2001) and the National

Curriculum Statement, now call for assessment practice that is “less expert-driven, non-deficit focused, accessible to all learners and linked to curriculum support” (Amod, 2003, pg 44). The IAC model of assessment can be seen as an approach to encompass and address such aims. As proposed by Amod (2003) psycho-educational practice should have, at its core, a focus on collaboration with educators and parents, with the purpose of facilitating learning and empowering the individual learner.

In contrast to traditional assessment approaches, the IAC process can be described as “shared problem solving” (Adelman & Taylor, 1979, pg 58). Whilst most professional assessment and consultation can be conceptualised as problem solving, such activity may or may not be “shared” (Adelman & Taylor, 1979). The essence of the IAC is that it actively engages the child and significant others in his/her life in the assessment, decision-making and intervention processes. In this way it can be seen as a shared assessment process which emphasises the notion that the clients will be working together with the consultant, instead of the consultant being viewed as an “expert”. This approach attempts to empower the individual and significant others by advocating their involvement and being active participants in the assessment process (Sonderup, 1998).

In addition, resources within the family and school systems which can assist the child, are considered under the IAC approach. The utilisation of various sources of information requires a team effort including teachers, other relevant professionals as well as parents. Swanson in Adelman and Taylor (1993) proposes the expansion of assessment perspectives to include aspects such as social skills, temperament, cognitive styles and metacognitive variables. In light of this, Adelman and Taylor (1993) advocate that assessment models should consider individual physical, social and psycho-emotional factors whilst additionally also focusing on contextual and situational aspects. The IAC approach examines the transactional and reciprocal relationships between personal and environmental variables (Adelman & Taylor, 1979; Skuy et al., 1986) and thus provides a broader scope of inquiry and understanding by permitting an investigation into intrapersonal, interpersonal and environmental factors.

Models of assessment seen to include the above aspects are described as transactional, in that they focus on the reciprocal interaction between the individual and situation or context.

Instead of primarily focusing on the child's individual characteristics as done within the medical model, the IAC approach emphasises that assessment activity should be seen as the generation and evaluation of alternatives (Adelman and Taylor, 1979). Once the interacting systems have been carefully understood, solutions to problems can be identified.

It can thus be inferred from the aforementioned discussion that the IAC process exemplifies a shift away from a conventional testing approach, and is harmonious with the vision of education to meet the needs of learners in an inclusive education system. The IAC model additionally promotes a sense of empowerment for the clients concerned. As Manala (2001) points out, empowerment is a fairly new concept when one reviews the history of psycho-educational practice, which for a long period of time focused predominantly on testing. "The recent global human rights perspective and the Children's Rights Charter of the late 1980's have influenced the empowerment view's origin and its incorporation into psycho-educational assessment" (Manala, 2001, pg 2). Amod (2003) refers to Smith, Moy and Pedro's (1995) comment as to the need in any assessment process to sensitise psychologists regarding the enablement and empowerment of families to form an integral part of assessment and intervention.

In summary, the IAC can be seen as an interactional model that recognises the role of broader environmental factors in influencing development and behaviour, and in this way represents a shift away from the medical model approach which largely assumes the problem to be located within the child. Following this aforementioned discussion regarding the applicability of the IAC model as an alternate approach to psycho-educational assessment, the philosophical and theoretical foundations of the model will be discussed in detail, to further provide a comprehensive understanding of the approach.

2.4 The Philosophical and Theoretical Foundations of the Initial Assessment and Consultation (IAC) Approach to Psycho-Educational Assessment

In order to provide a comprehensive account of the IAC problem-solving approach to psycho-educational assessment, the various principles and tenets underlying the model will be explored.

The IAC approach presents a fundamental shift away from the belief that assessment and intervention are discrete clinical procedures (Amod, 2003). Adelman and Taylor's (1983) view is that assessment, in practice, is an integral part of the treatment plan, it is the first intervention that emphasises the existence and definition of a problem. It is this particular aspect of the intervention process which directs decision-making around the concerns presented by the family and significant others in the child's life.

Adelman and Taylor (1979) emphasise two central ideas in their development of the IAC; namely an optimal accommodative match, and a valid contract. An optimal accommodative match refers to the requirement that the process and content are not too dissimilar from the client's current way of understanding his or her world. Amod (2003) also points out that decisions made in the IAC process must also be based on the mutual understanding between the consultant and the clients.

The second idea is that of a valid contract. This involves an active and mutual commitment from all parties involved to the achievement of the objectives which have been set out. Adelman & Taylor (1979) underline the importance of individuals being involved in decision-making that affects them. The dynamic participation of clients in the IAC process assists self-determination and a sense of "ownership" related to the intervention and decision-making process (Adelman & Taylor, 1979). The notion of a "valid contract" has been highlighted by Kriegler and Skuy (1996) to eradicate the authoritarian dichotomy evident in traditional models of assessment where the consultant is seen as the "expert". Furthermore, it examines the child's interaction with his/her environment and thus does not have pre-existing ideas regarding the locus of the problem.

According to Amod (2003), the quest of an “accommodative match” legitimises the client’s understanding of his/her problem. Within the South African context it is also particularly important that aspects such as limited resources of parents, schools and communities are taken into account when generating alternatives for intervention from the assessment. Human and Teglas (1993) conducted a study where the importance of understanding parents’ perspectives in psycho-educational work was highlighted. Furthermore, the necessity of practical and feasible recommendations was emphasised.

The clients involved in the IAC process can be various significant others in the child’s life; the child in question, the parents, guardians, siblings, extended family members, the teacher or relevant professionals who have information concerning the child’s functioning. Clients are helped to arrive at their own decisions and therefore own these decisions, as opposed to merely adopting a professional’s recommendations, whereby the psychologist is seen as being the expert. This assists the implementation of the decisions which have been jointly reached (Sonderup, 1998). It is however important to note that this does not imply that the consultant brings no knowledge or understanding to the child concerned. The training received by the consultant helps him or her to interpret how all the aspects and components fit together to gain a holistic view of the child’s difficulties and strengths. Training in interpreting and facilitating the assessment process equips the consultant with tools to gain understanding of the child.

Involving families in the assessment process reflects respect for the family’s unique contributions and emphasises the importance of family relationships. The increased scope of information obtained from the family or significant others is, according to Carnahan and Simeonsson (1992), crucial and fundamental. Carnahan and Simeonsson (1992) also emphasise that the goal of involving families in assessment is to benefit from the unique perspectives which families bring, based on their experiences and relationships with the child. In this way the parents and family are thus seen as the “experts” in understanding and knowing the child. Gaughan (1995) contributes to this by highlighting that if individuals and environments interact in mutually deterministic manners, then it is vital for one to assess the contributions of each of these components to the presenting problems.

In a study by Freundl, Compas, Nelson, Adelman & Taylor (1982) it was found that working with the family as a unit was highly effective. Family participation was seen to result in children feeling more self-determining, competent, and committed to decisions that were made. This outcome, according to Freundl et al. (1982) can be attributed to the family's public sharing of a process that stresses children's competence to participate as an equal member, as well as the open communication of the family members. Therefore, there is recognition that involving the family in assessments is a constructive and valuable notion, thus implying that the IAC's principle of collaboration is positive. In summary, the principles of the IAC approach appear to be in line with an ecosystemic framework which is applicable to psycho-educational assessment. A description of the IAC procedure will be highlighted in the following section.

2.5 A Description of the Initial Assessment and Consultation (IAC) Procedure

Emphasised in the description which follows is the view of the IAC as a shared problem-solving approach, where clients work together with the consultant to gather and interpret data and to establish alternatives for intervention. Figure 1 presents a diagrammatic representation of the procedure used at the Emthonjeni Centre at the University of the Witwatersrand.

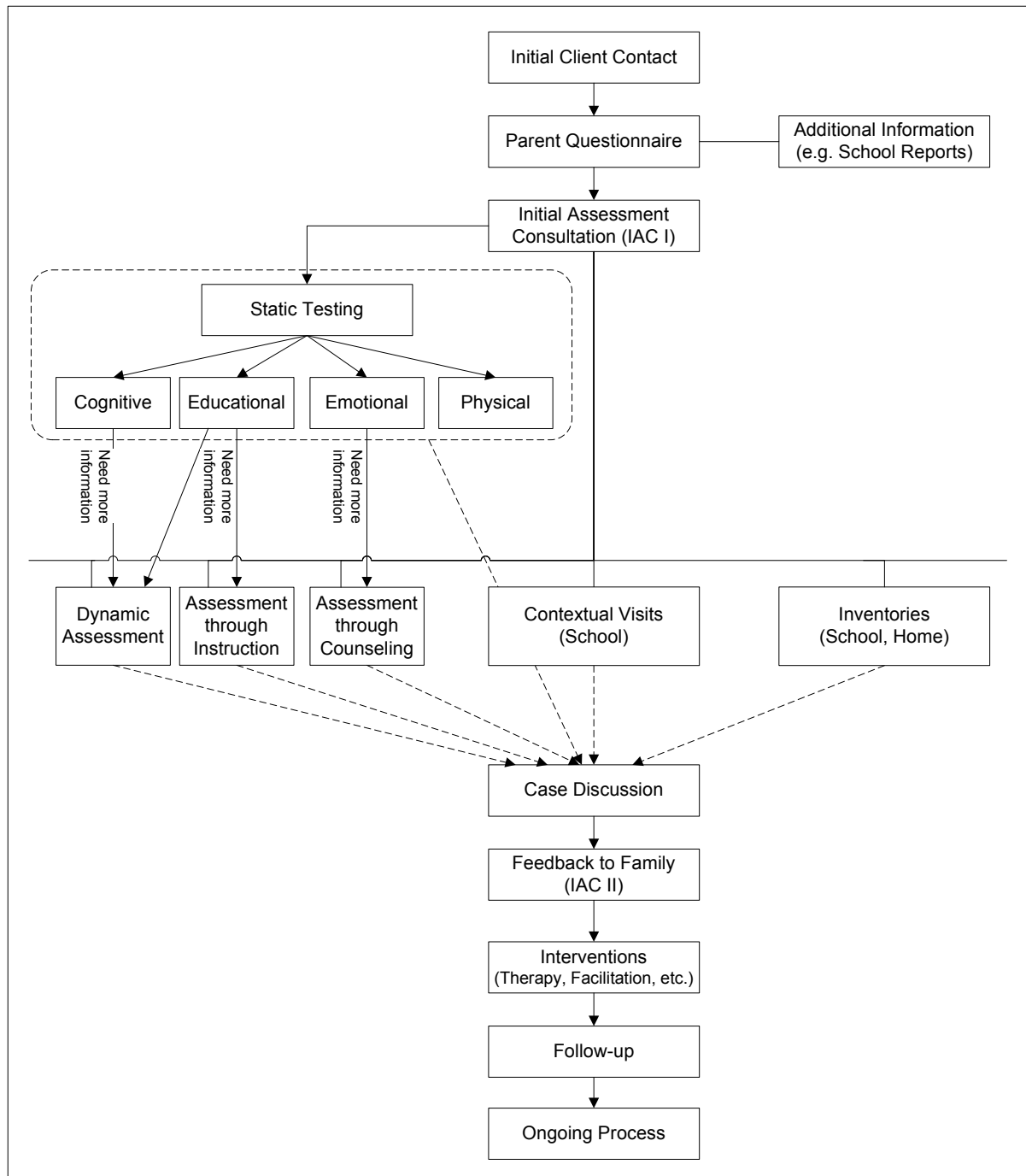


Figure 2.1: A Summary of the Initial Assessment and Consultation (IAC) Procedure

The IAC process begins with a client family contacting the clinic. A questionnaire (please refer to Appendix C) is mailed to the family who complete it and mail it back. As Amod (2003) points out, this immediately involves the parents as active participants, as it emphasises the parents' perceptions and understanding of current concerns and difficulties. Once the questionnaire is returned, the case is allocated to a student consultant and

supervisor. The student contacts the family and arranges an initial consultation session with the family, and if appropriate, significant others can also attend. The student consultant also requests that the parents provide any additional information such as past records and school reports of the child, to aid in the process of developing a detailed and holistic understanding of the child concerned.

The first interview with the family is termed the IAC I. During this session, the student consultant meets the child and family concerned. All practical work is conducted under the supervision of a registered educational psychologist. The underlying rationale of the IAC approach is explained, whereby a holistic understanding of the child will be the focus, through shared problem solving with the family. The student consultant elicits an agreement from the family that they are comfortable with using the approach. The discussion in the IAC I is structured around aspects such as short and long-term goals in relation to the child; the child's strengths and interests; the concerns relating to the child; an understanding of these concerns; and lastly the alternatives and decision making related to the intervention. The emphasis of the discussion is on the child's physical, emotional, cognitive and social functioning within the context of his/her environment. In this way, a broad understanding of the child is attained. The perceptions of the child and all those closely involved in his or her life, which are highlighted during the discussions, adds to the richness of the understanding of these various dimensions.

The student consultant receives supervision regarding the case, and if it appears appropriate, the student consultant will then conduct the static testing through a battery of cognitive, emotional and educational tests, with a clear rationale for each of the tests. If necessary a physical assessment may be conducted. Assessment is tailored specifically to meet the needs of the child within which he/she functions, and therefore assessment is seen in a broad way. The IAC framework allows for the use of various assessment techniques such as dynamic assessment, assessment through instruction and assessment through counselling. Dynamic assessment is used in conjunction with traditional methods of assessment to assess the child's cognitive potential and not just his/her current level of functioning. Assessment through instruction is conducted through a series of carefully planned educational instruction sessions. Likewise, assessment through counselling can be applied to instances where the necessary information can be better obtained through a series of counselling sessions.

In addition to these aforementioned aspects, contextual visits, such as school visits can also be conducted. By visiting the child's school and acquiring both teacher and other school personnel perceptions as well as observing the child in the classroom situation, one gains a richer and more detailed understanding of the child's experiences in the school environment. Inventories are also used to gain further understanding of the child, if appropriate. This is in the form of rating scales such as temperament questionnaires, which are given to the child's teacher or parents. These inventories and contextual visits add more detailed information in gaining a holistic understanding of the child. Furthermore it facilitates the involvement of the teacher in the assessment process.

Referral and multidisciplinary interaction are key aspects and often necessary with assessment. In an IAC approach, the liaison between other professionals such as speech therapists, occupational therapists and paediatricians, is crucial. One can thus infer that adopting solely a testing or conventional approach to assessment may be limiting. The IAC overcomes this limitation by considering and exploring various aspects and how they pertain to the child concerned.

Upon collection of all the necessary data as mentioned above, the student consultant engages in a case discussion regarding the child and the information gathered. This discussion is held with the supervisor and often a team of fellow student trainees, to formulate an enriched understanding of the case.

Following this process, the student consultant meets with the child and family again, to share feedback on the information gathered during the assessment process, which is termed the IAC II. During this session the family and consultant discuss all the data that was collected and share their perceptions on alternatives for action which would guide the decision making. All of these aspects as well as the next steps to be taken are generated jointly, whereby everyone is involved in the decision-making. Other interventions such as play therapy, learning support or counselling are also discussed and decided upon, in further addressing the areas of concern. Moreover, interventions in the form of strategies for parents and teachers as well as environmental changes and modifications are discussed. Recommendations for the parents and the teacher to assist the child in the home situation and classroom respectively are suggested. Where appropriate, other resources such as language therapy or occupational

therapy can be suggested, whilst taking into account aspects such as location, transport and finance.

Thereafter, the findings and decisions are incorporated into a typed report, which is given to the child's family. The format of the report reflects the principles of the IAC approach in the sense that the parents would have had an opportunity to discuss the conclusions and related decisions of the assessment, and therefore they would be familiar with the report contents. In this way the report is not seen as a list of "recommendations" being given by an "expert", but rather the decisions would be relevant and jointly agreed upon by the family (Amod, 2003).

Approximately eight weeks after the IAC II there is a telephonic follow-up with the family to assess progress specifically in relation to the implementation of the decisions which were made. The telephonic contact will determine if any further action or intervention is required by the family. Thus, from an IAC approach, psycho-educational assessment is seen as a broad, ongoing process.

2.6 Research on the Initial Assessment and Consultation (IAC) Approach to Psycho-Educational Assessment

Studies conducted on the IAC by Adelman and Taylor (1979) and those conducted in South Africa (Amod, 2003; Amod et al., 2000; Dangor, 1983; Manala, 2001; Skuy et al., 1986; Sonderup, 1998) have explored client satisfaction with services rendered. Amod (2003) commented that client satisfaction with professional services is an understandable aspect of the quality of service delivery as well as a relevant outcome measure.

Initial research done by Adelman and Taylor (1979) indicated positive results relating to the process as well as the outcomes of the IAC approach. They concluded that the IAC approach was a practical alternative to existing assessment practices, and that it is also valuable in generating decisions about which psycho-educational services are required.

There is limited amount of research pertaining to psycho-educational models of assessment in South Africa. Several pilot studies have been conducted on the IAC within the South African

context. Dangor (1983) undertook a study assessing the effectiveness of the IAC by means of family perceptions, as well as to evaluate the perceptions of student consultants in relation to the IAC. The findings indicated a high degree of client family (child and family members) satisfaction with the IAC model, favouring the continued use of the IAC. Client families endorsed the joint decision-making process between the consultants and themselves as being highly positive, and regarded decisions deriving from the IAC as being very worthwhile. All client families experienced the consultants as being interested and helpful with regard to their concerns. Dangor (1983) did briefly look at student consultants' opinions of the IAC, and found that the structure of the IAC and the emphasis on the child's strengths was seen as being constructive and helpful. According to Dangor (1983), no discrepancy was found between family and students' perceptions of the IAC.

Findings by Dangor (1983) as well as those ascertained in the United States by Adelman and Taylor (1979) were supported by a further study conducted by Skuy et al. (1986). The comparability of the South African results with those of the American studies at that stage indicated the relevance of the IAC approach beyond the specific nature of the American culture where it was derived (Skuy et al., 1986). The findings of this study indicated positive attitudes to the IAC approach, as measured by a) clients' satisfaction with the process, b) their perceived ability to participate in the process and c) the efficacy of the shared problem-solving approach in ensuring a link between assessment and intervention (Amod, 2003).

A further study conducted by Amod et al., (2000) found the IAC to be an effective psycho-educational approach across cultural groups, within the client population of the Education Clinic, at the University of the Witwatersrand. This study suggested that clients were highly satisfied with the IAC and their involvement in the process, as well as with the effectiveness of the shared problem-solving approach in ensuring a connection between assessment and intervention. The results supported the findings of Adelman and Taylor (1979) as well as those of Skuy et al., (1986).

A comparative survey of parents' views on two approaches to assessment was conducted by Manala (2001). The IAC as used at the Educational Clinic of the University of the Witwatersrand was the one approach studied, and the other a psychodynamic-social model used at the Johannesburg Parent and Child Counselling Centre (JPCCC). The latter approach

to assessment begins with an initial intake interview, attended by only the parents, and has a psychodynamic focus. The psychosocial history of the child and family is recorded and thereafter the intake interview is discussed amongst a therapeutic team, where suggestions for interventions are explored. Interventions may include play therapy, parent counselling, emotional assessment and/or psycho-educational assessment. Testing is not always advocated (Manala, 2001).

Manala (2001) found that both approaches to assessment were rated as being highly satisfying by respondents. The ratings for JPCCC were reportedly higher based on percentages, however the statistical significance of the difference in ratings was not ascertained in the study. Generally it seems that at JPCCC clients were being seen within a period of two weeks after the initial contact, whilst at the Education Clinic individuals may be expected to wait for up to six months in some instances. This was therefore seen to affect client perception of services rendered (Amod, 2003). On the basis of the study, Manala (2001) proposes an integrated assessment model which incorporates cognitive and psychodynamic insights and involves the entire family in the assessment.

More recently, a study by Amod (2003) assessed the IAC from the perspective of parents, teachers and children. The findings indicated that the IAC is well suited to meeting the needs of psycho-educational assessment and intervention in the South African context.

It can be inferred from the above research conducted on the IAC, that overall there appears to be client satisfaction with the process. However, there seems to be a lack of research pertaining specifically to the student consultants' perception of the effectiveness of the IAC. Furthermore, it is significant to note that over the years and as a result of research, the IAC approach has been adapted. Thus by exploring students' perceptions of the practical application and effectiveness of the model, it can be further adapted and developed with reference to training and teaching of students. In spite of the many advantages of the IAC as highlighted so far in this paper, the approach has not escaped criticisms. The following section discusses critics directed against this approach.

2.7 Limitations of the Initial Assessment and Consultation (IAC) Approach to Psycho-Educational Assessment

Although the IAC attempts to address some of the criticisms of psycho-educational practice, such as an over-emphasis on deficits located within the child, there are also limitations of the approach.

Adelman and Taylor (1979) raise a concern highlighting that some clients tend to rely on the experts for diagnoses and prescriptions, and are frustrated when they are not provided with definite answers. This is to say that clients want professionals to give a battery of tests that will provide definitive answers, and in addition to that they also want decisions made for them. These individuals often are a product of the negative side effects of professional practices that mystify consumers and make them feel totally dependent on professionals. Dangor (1983) found that 10 out of 30 client families seen at the University of the Witwatersrand Education Clinic, would have favoured the consultant to take on a greater role in decision-making.

Sonderup (1998) points out that South Africans have historically lived in an authoritarian society, and have become accustomed to accepting decisions of those in authority, especially those individuals who were disempowered by the Apartheid system. However, the process of democracy in South Africa encourages people to become empowered and to seek information and participation. In this way, the effectiveness of the IAC may possibly be enhanced.

Furthermore, Dangor (1983) highlights that there is an implicit assumption in the IAC that clients are openly able to share their concerns in the presence of family members and consultants, and in certain South African sub-cultures, this may not be the case. Adelman and Taylor (1979) note that the voicing and sharing of perceptions or opinions in front of the family members, particularly when young children are involved, is a further area of concern pertaining to the IAC. However, a study by Freundl et al. (1982) found that the sharing of perceptions in front of family members or significant others, did not impact negatively on the process.

Amod (2003) points to an area of concern with regards to the ability of younger children and those with severe problems to participate meaningfully in the IAC process. In a study by Freundl et al. (1982) it was found that consultants indicated a higher level of satisfaction when working with older children as compared to working with younger children. Older children were able to identify more problems with less probing. However, it was also found that the age of the child did not appear to affect the reported satisfaction with the IAC process or on the follow-through of decisions taken. Although younger children may require more facilitation, children of all ages were found to participate effectively in the family consultation process as shown in a study conducted by Amod (2003).

An additional area of concern in implementing the IAC process at the University of the Witwatersrand, as noted by Sonderup (1998), is the lack of suitable follow-up referral sources in Gauteng. These factors impact on the effectiveness of interventions that are carried out resulting from decisions made at the IAC. This, however is not exclusively limited to the IAC model, but to restricted community-based resources in relation to specialised services required by these individuals experiencing financial constraints.

In order to contextualise the IAC model in relation to the current study it is relevant to consider what models are being used at other Universities in South Africa as part of the training of Educational Psychology students.

2.8 Models of Psycho-Educational Assessment Training and Practice at Four South African Universities

A study conducted by Dangor (1983) highlighted the lack of research on psycho-educational and child guidance clinics. It can therefore be considered useful to explore what models are currently being adopted at various institutions in order to guide their practice and training of educational psychology masters students in psycho-educational assessment. Moreover, it is useful to gain an understanding of the trends in training student educational psychologists in the field of psycho-educational assessment.

Four Universities in South Africa became the focus for this exploration, in particular: Rhodes University; University of Johannesburg; Stellenbosch University and the University of Pretoria. Additionally, the discussion will include the Fernald Institute, University of California. Attempts were made to involve the University of KwaZulu-Natal (Pitermaritzburg) in this exploration, however, unfortunately the relevant person could not be contacted. As a result of time constraints, the University in question could not be further pursued.

The model adopted by the specific institutions appeared to be influenced by the type of service offered, as well as the psychologists who staffed the clinic and co-ordinated the training offered by the university in question. The psychology student consultants were the case facilitators in all the services. It appeared that there were both similarities and differences in both practice and principles, relating to the IAC model, as will be discussed below.

As indicated earlier in this research report, the IAC approach was developed at the Fernald Institute at the Los Angeles Learning Centre of the University of California. According to personal correspondence (2008), 29 years after the model was developed, the Fernald Institute still continues to incorporate the ideas and principles of the IAC approach.

The University of Johannesburg (UJ) employs the principles and bio-ecological theory of Bronfenbrenner as the overarching theoretical underpinning to guide their psycho-educational assessment teaching and practice (Personal Correspondence, 2008). Basic to Bronfenbrenner's model are four interacting dimensions which are considered in order to understand a child. These are namely person factors (for example, the temperament of the child or parent); process factors (for example, the forms of interaction occurring within a family); contexts (families, schools, local communities) and time (changes over the time in the child or environment) (Donald et al., 2002). In this way, Bronfenbrenner stressed the importance of understanding how children's development is shaped by their social contexts.

Bronfenbrenner viewed child development as occurring within four nested systems, the microsystem, the mesosystem, the exosystem and the macrosystem. The microsystem refers to the systems such as the family, the school and the peer group in which children are closely

involved in continuous “face-to-face” interactions (Donald et al., 2002). The mesosystem refers to the level of the peer-group, school and family systems which interact with one another. Thus, the mesosystem is a set of Microsystems associated with one another. The exosystem refers to other systems in which a child is not directly involved, but which may influence, or be influenced by, the people who have close relationships with the child in his/her Microsystems. Finally, the macrosystem involves social structures as well as beliefs and values that influence or may be influenced by all the other levels of system (Donald, et al., 2002). Thus, it is evident that adopting the theoretical underpinnings of Bronfenbrenner, there are numerous aspects to consider when trying to understand a child, and the social context is seen as fundamental. The IAC approach advocates a broad, holistic understanding of the child, whereby the child’s interactions with his/her dimensions of the environment, such as family and school systems, are viewed as crucial. This can be seen to be in line with the bio-ecological approach of Bronfenbrenner adopted at UJ.

According to personal correspondence (2008) with the Psychology Masters co-ordinator at Rhodes University, a clinical and neurological model towards assessment is adopted. It can therefore be inferred that a more medical model approach is adopted by this University in question, whereby the focus centres on testing. The practical training at Rhodes University is conducted within a clinic setting.

The University of Pretoria (UP) apply an asset-based approach rooted in positive psychology, as a framework in training students in psycho-educational assessment (Personal Correspondence, 2008). Positive Psychology and an asset-based approach are reflective of a worldwide movement in Psychology towards wellness, well-being and a search for the positive constructs that constitute effective psychological functioning. In this way, during the assessment process, the child’s positive traits become the focus as well as contextual factors which may be interacting positively within the child’s systems. Students conduct psycho-educational assessments at a training facility on the University campus. The facility offers a pre-referral phase in that after the intake interview is conducted and with the permission of the parents, consultation with other professionals will be recommended if the case requires it. Furthermore, if deemed necessary, and as part of the pre-referral phase, a consultation with the child’s teacher is conducted mostly via telephonic contact.

Stellenbosch University, according to personal correspondence (2008), adopts an ecosystemic approach to psycho-educational assessment training and practice. This approach forms the theoretical underpinning for the IAC model whereby the focus shifts from a problem or deficit being within the child, to a barrier to learning and development being viewed as stemming from environmental interactions. However, as pointed out in this research report, the IAC model additionally focuses on key aspects such as problem-solving and joint decision making processes; active participation and collaboration of the child and all parties concerned as well as de-mystifying the assessment procedures to be seen as a more equitable problem-solving approach. Stellenbosch University does have a clinic or “unit” as it was referred to, where psycho-educational assessments are conducted by student consultants. Assessments are thus conducted at community interaction sites. Furthermore, teacher consultations are also implemented as a “pre-referral phase” tool. Ysseldyke in Dangor (1983) recommended that the focus of assessment should be on pre-referral interventions, such as teacher consultations.

Lerner (1993), mentions the Individualised Education Program which highlights how the teacher is helped to analyse the child’s present concern and implement some remedial measures prior to a referral for a formal assessment. Thus, psycho-educational assessment does not automatically follow referral. The rationale for such a measure is to reduce the possibility of anxiety and stress on a child through the extensive cognitive, educational and emotional assessment, and thus, unnecessary testing is minimised.

Through the exploration of the Universities concerned, it is evident that pre-referral phase interventions are not seen as common practice and is not implemented by many Universities. It is clear that there are both similarities and differences amongst the Universities in question with regards to the model or approach used to guide the practice of psycho-educational assessment. Some of the aforementioned principles and practices can be linked to the IAC approach. The assessment module is seen as an important aspect of the student’s training at each respective University mentioned, once again reiterating the importance for establishing an effective, applicable model for training and practice of psycho-educational assessment.

2.9 Conclusion

The IAC model exemplifies an ecosystemic and holistic approach to assessment and intervention, which can be seen as an appropriate framework within the South African context. The IAC approach proposes a more interactive and empowering option than traditional assessment models. Whereby the medical model focuses on symptoms and deficits within the child, the IAC model underlines the dynamic interaction between the individual and environmental variables. This holistic approach is consistent with the shifts in South African educational policies to meet the needs of learners in an inclusive education system. Furthermore the approach can be seen as being consistent with South Africa's strong endorsement of human rights and sensitive cross-cultural issues. Studies conducted relating to the IAC, (Amod, 2003; Amod et al., 2000; Dangor, 1983; Manala, 2001; Skuy et al., 1986; Sonderup, 1998) all conclude that the IAC is an effective approach to psycho-educational assessment. However a gap exists specifically with regards to student consultant perceptions of the approach, and the focus of the study therefore addresses this.

CHAPTER THREE

THE STUDY

3.1 Aims of the Study

The general aim of the study is to establish the perceptions of student consultants towards the Initial Assessment and Consultation (IAC) model of assessment.

Specifically the aims are:

- To identify whether the IAC is perceived by student consultants as an effective tool for Psycho-educational assessment.
- To establish the student consultant's opinions of the IAC.
- To ascertain whether past students are still using the principles of the IAC approach at their internships site or in their own place of work.

3.2 Research Questions

The research questions are as follows:

- 1 Is the IAC perceived by student consultants as an effective tool for Psycho-educational assessment?
- 2 What are student consultant's opinions in relation to the IAC?
- 3 Are past students still using the principles of the IAC approach at their internship sites or in their own place of work?

3.3 Research Design

The focus of this study aims to capture the student consultants' perceptions towards the IAC model of psycho-educational assessment. Due to the fact that the research remained specifically in the participants' words, their personal experiences and meanings, a qualitative research methodology was chosen. Qualitative research seeks to "examine people's words and actions in narrative or descriptive ways more closely representing the situation as experienced by the participants" (De Vos, Strydom, Fouche, Poggenpoel, Schurink & Schurink, 1998, pg 40).

Specifically, the study employed a non-experimental, exploratory design. It is non-experimental in nature since it does not "involve control and manipulation of any independent variable by the investigator" (Potter, 1995, pg 110). A survey approach, composed of predominantly open-ended questions, was used for the study. This type of research design was appropriate for the descriptive, qualitative nature of the study.

Harvey (1997) highlights that feedback from surveys can be used positively to determine planning and delivery of services. This can be seen as being useful in further understanding the effectiveness of the IAC as a model for training students in assessment. On the other hand a main limitation of surveys, as mentioned by Manala (2001), is the difficulty in interpreting negative information and neutral responses. This difficulty can be seen to have been addressed through the use of predominantly open-ended questions in the questionnaire, in order to gain more detailed information.

3.3.1 Sampling Procedures

For this study, a non-probability sampling method of purposive sampling was used. It was a purposive sample as the student consultants were able to provide information that was relevant to the purpose of the study (Potter, 1995). The sample included 84 students from 2000 to 2008, from the University of the Witwatersrand who have completed, or are completing either the Bachelor of Education Honours degree in Educational Psychology (BEd Honours Ed Psych), or the Masters in Education (Educational Psychology) degree (MEd). Contact details for the sample concerned were obtained from departmental records.

3.3.2 Participants

Of the total number of 84 students who were invited to participate in the study, 40 responded, indicating a return rate of 48%. Although the response rate, according to Mouton (2001), is at an acceptable level for a qualitative study, more responses were hoped for. Participants in the study ranged between 20 and over 50 years of age. The distribution of the age ranges is illustrated below in Figure 3.1: *Age range of the sample*.

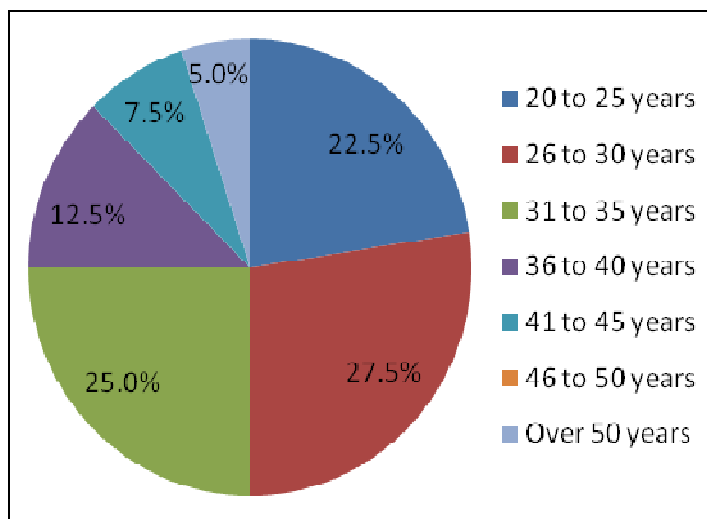


Figure 3.1: Age range of the sample (n=40)

The participants included both current and past students from the University of the Witwatersrand between the years 2000 and 2008. It must be noted that there were only four males on the departmental records, resulting in very few males as part of the target group for this study. Even though the four male individuals were invited to participate in the study, none responded, resulting in the sample consisting solely of female participants. Furthermore it must be added that the contact details on the departmental records for many of the past students had changed since leaving the University. Thus there was some difficulty in establishing contact with many of the past students, accounting for the smaller sample size as well as the majority of participants being either current students, or interns.

Figure 3.2 illustrates a breakdown of degrees completed by respondents. The majority of respondents had completed the Bachelor in Education Honours (Educational Psychology) degree.

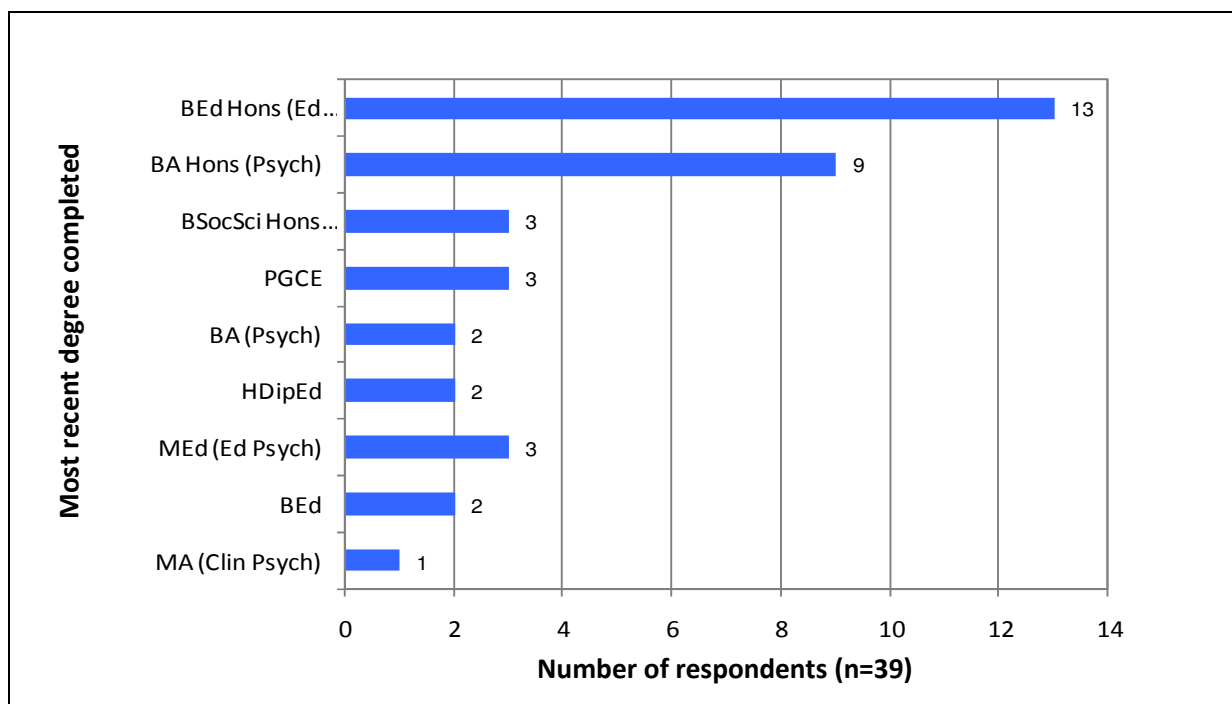


Figure 3.2: Most recent degree completed

Figure 3.3 provides an overview of the number of years the respondents have been working and training for. The majority of respondents have been working for between one and two years, which is consistent with the majority of respondents training for the same number of years.

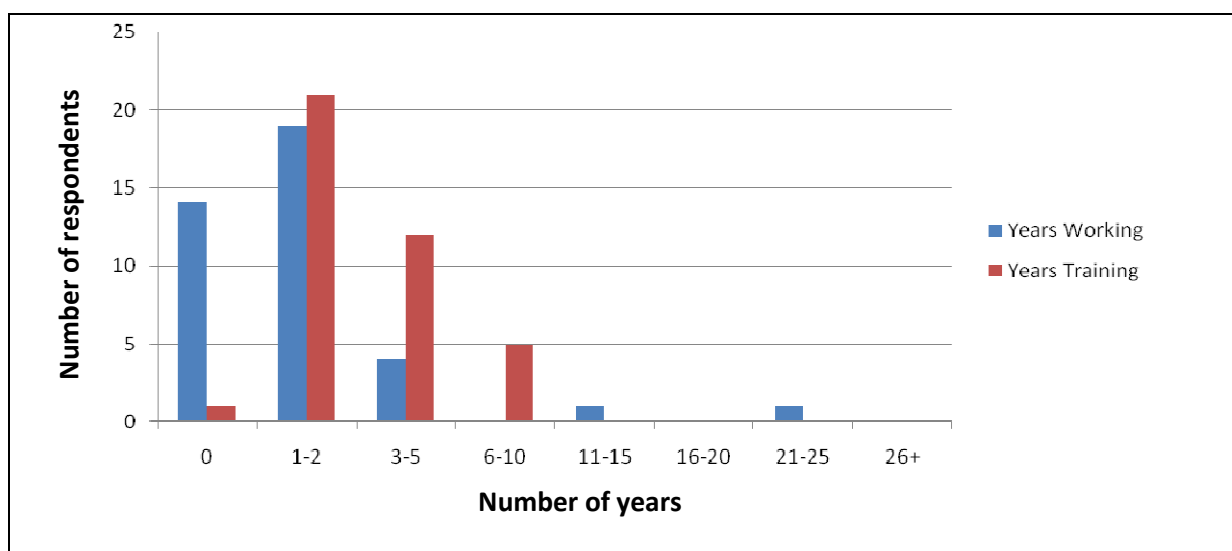


Figure 3.3: The period of time that respondents have been working or training (n=40)

3.4 Instrumentation

A self-designed questionnaire consisting of 23 questions was used for the study (Please refer to Appendix B). The questionnaire was piloted on a representative sample. This included two current students from the Masters in Education (Educational Psychology) class; two students from the Bachelor of Education Honours in Educational Psychology class; and one practicing Educational Psychologist. The questionnaire was piloted in order to ensure that the specific questions were understood (Breakwell, Hammond & Fife-Shaw, 2000).

Following the pilot study it was ascertained that the questionnaire did not need to be modified as it was clearly understood by the participants in the pilot sample.

The majority of the questions were open-ended to allow for rich, descriptive data which suits the exploratory design of the study. Questions 1, 2, 3, 4 and 5 were closed-ended questions to provide demographic information required for the study.

Research question 1 which addressed if the student consultants view the IAC as an effective tool for psycho-educational assessment, was looked at in questions 9, 10, 11, 16, 17, 18, 19, 21, 22 of the questionnaire. Research question 2 which looked at the student consultants' opinions in relation to the IAC, was addressed in questions 8, 10, 11, 13, 14, 15, 20, of the questionnaire. Research question 3 which looked at whether past students are still using the principles of the IAC approach at internship sites or in their working environment, was addressed in question 7, 8, 9, 10, 12, 15 of the questionnaire.

3.5 Procedure

After ethical approval for this study was obtained, from the Faculty of Humanities (please refer to Appendix D), the questionnaire was piloted, which involved five individuals representative of the sample. Following this, the participant information letter (please refer to Appendix A) was e-mailed to the various individuals in the sample stating the procedure they were required to follow if they agreed to take part in the study. The individuals were required to log onto the online website to complete the questionnaire. Thereafter, the anonymous questionnaire responses were collated from the online site. In total, forty

questionnaires were completed and collated. The responses were analysed using thematic content analysis.

3.6 Ethical Clearance

Ethical clearance was applied for and obtained from the Faculty of Humanities. The University of the Witwatersrand's Ethics committee guidelines for conducting research with human subjects were adhered to. Steps were taken to ensure the anonymity of participants. The questionnaire was web-based, where the individual was required to connect to the site given on the information sheet, complete the questionnaire and submit it online. In this way no identifying information was given, and anonymity was upheld. Completion of the questionnaire online was taken as consent to participate in the study. Furthermore, all information remained confidential and no identifying information was included in the study. These factors were highlighted in the participant information letter sent to all individuals in the sample group.

CHAPTER FOUR

RESULTS

4.1 Data Analysis

Thematic content analysis was used to identify the main categories and themes that emerged. Content analysis consists of “burrowing through written records in order to discover their characteristics” (Rosnow & Rosenthal, 1996, pg. 81). In order for it to be effective, categories which are relevant to the research questions must be selected. In this study the categories for analysis were based on the aims and research questions of the study as well as on the theory of the IAC model. The themes identified were based on the responses given by the participants. Because of this type of analysis, it is vital, according to TerreBlanche and Kelly (1999), to stay close to the data in order to provide an accurate portrayal of the meaning associated with the area of study. Therefore it is crucial to use participants’ own words, and in this way provide “thick” description of the data. Thick descriptions, according to Denzin (2001) capture the meanings and experiences that have occurred in specific situations, creating the conditions for understanding. Denzin (2001) terms this method of analysis “interpretive interactionism” whereby interpretation is understood to refer to the attempt to explain meaning; “the act of interpreting gives meaning to the experience” (pg 119). This meaning is constructed in the descriptions people tell about their experiences and through the theoretical interpretive repertoire the researcher brings to bear.

Thematic content analysis systematically transforms nonquantified material into quantitative data (Stark & Roberts, 2002). Thus the descriptive information in the study is represented, not only through the exploration of emergent themes, but additionally through the use of tables in the form of frequencies. These will be linked to the research questions being asked.

4.2 Overview of the Results

The results of this study are presented in four main sections. The first section provides an overview of the sample in terms of the range of clients seen by the participants, and the assessment models they have used and been trained in. Thereafter the data is structured

according to the three research questions which were asked in this study. Under each research question common themes are identified and reported, with various descriptive quotes from the data. In addition content analysis has been used to further understand the data collected.

4.3 Overview of the closed question responses relating to the sample

The range of clients the participants mostly work with or anticipate working with is represented in Figure 4.1.

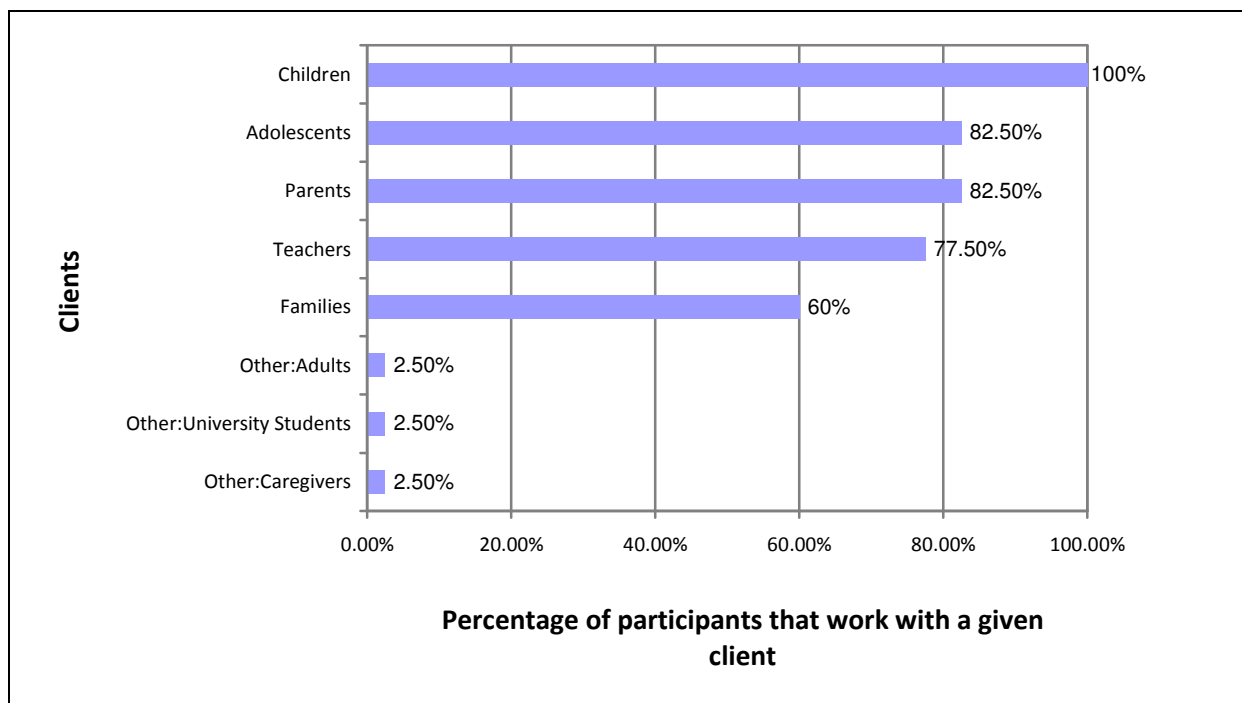


Figure 4.1: Range of clients seen by respondents

It can be noted from the above figure that all of the respondents indicated that they work with, or anticipate working with, children. Furthermore, a large number of respondents emphasised parents (82.5%) and teachers (77.5%) as current or future clients. In addition to this, more than half the respondents (60%) specified that they work with, or anticipate working with, families as clients.

Table 4.1 represents the various assessment models which the participants have been trained in, as well as the models that they use. The majority of respondents (87,5%) have been trained in the IAC model, corresponding with the majority of respondents (85,0%) using the same model. Other models which were mentioned were the medical model, the systemic model, dynamic assessment and the parent interview.

Table 4.1: Assessment Models

Model	Trained		Use	
	n=40	%	n=40	%
IAC	35	87.5%	34	85.0%
Medical Model	4	10.0%	5	12.5%
Systemic	4	10.0%	4	10.0%
Dynamic Assessment	4	10.0%	1	2.5%
Parent Interview	0	0.0%	3	7.5%

4.4 Discussion of responses

In order to structure the presentation of the responses of the participants, themes will be highlighted and classified under each of the three research questions which focused on exploring:

- 1 Perceptions of the effectiveness of the IAC as a tool for psycho-educational assessment
- 2 Student consultants' opinions regarding the IAC model of assessment
- 3 Past students' use of the IAC principles and approach at internship sites or places of work

4.4.1 Perceptions of the effectiveness of the IAC as a tool for psycho-educational assessment

In order to understand effectiveness, requirements must be understood first in order to objectively assess how the model meets these. The first aspect in understanding requirements for a model of assessment involves understanding some of the perceived advantages and disadvantages of psycho-educational assessment.

Advantages and disadvantages of psycho-educational assessment

Advantages

The following advantages were identified:

The majority of respondents (70%) indicated that psycho-educational assessment provides the means for a more in-depth and holistic understanding of the child, whilst taking into account their baseline levels of functioning, and strengths and weaknesses.

One respondent (2.5%) however noted that while greater understanding of the client is achieved, it would be problematic to use the assessment to measure or predict the future.

Furthermore, a few respondents (12.5%) viewed an advantage of psycho-educational assessment to be that it allows for parental participation and provides necessary support for them, while they in turn, support the child.

Disadvantages

The following disadvantages were identified:

Almost half of the respondents (47.5%) felt that psycho-educational assessment creates a negative stereotype of the therapist and therapeutic process, whereby there is a negative

expectation or feeling of being assessed which can be distressing for the client. Furthermore, there is also the risk of labelling the child.

A minority of respondents (12.5%) noted socio-economic disadvantages as a problem with psycho-educational assessment. Limited resources imply some parents cannot afford necessary referrals and do not have the resources to implement recommendations, including time required away from work to attend the sessions.

In addition, a small number of respondents (10%) felt that unrealistic expectations of relationships within the therapeutic process or of the process itself exist. All information and observations need to be interpreted within context. Current circumstances were seen to have an influence on the child's test performance.

Potential challenges relating to the practice of psycho-educational assessment

In addition to the advantages and disadvantages, a number of potential challenges were reported or anticipated when considering the practice of psycho-educational assessment. The responses were analysed using content analysis, where six main challenges were noted. Table 4.2 summarises the six main challenges which were noted.

Table 4.2: Challenges relating to the practice of psycho-educational assessment

Key challenges	n	% of total
Family participation Difficulties included the family setting aside the time for the initial consultation, inability or lack of willingness to support the child during the process or take responsibility for their own issues, and lack of cooperation in terms of carrying out recommendations.	10	30.3%
Cultural difficulties Cultural issues include language barriers, which affect communication within the assessment, test administration and interpretation, especially when the family concerned is not communicating in their first language.	7	21.2%
Availability of relevant resources for families Financial constraints tend to be a significant problem for South African families, who cannot afford assessment costs, or costs of referrals or educational placements that are recommended to them.	6	18.2%
Child participation Some children have low levels of motivation, are stressed, and anxious. Moreover, it becomes difficult for the child when sensitive issues about that child are raised in front of them.	5	15.2%
Role as assessor/consultant Of concern is the assessor's ability to remain objective throughout the process, and not be biased by feedback obtained from parents and teachers. Moreover, they have to adopt a non-judgemental approach and not be predisposed to labelling a child.	4	12.1%
Time constraints Time constraints that could limit the thoroughness of the evaluation were mentioned.	1	3%

From the above table it can be seen that the dominant challenge reported was the difficulty with family participation. Other notable challenges included cultural differences, availability of resources for families, child participation in the process, and the role of the consultant. A single response highlighted time constraints as a challenge affecting the thoroughness of the assessment.

A model/framework is necessary for assessment

The majority of respondents (94%) felt that a model/framework is necessary for assessment. Respondents substantiated this with four key reasons why a model is deemed necessary. These reasons are analysed in Table 4.3.

Table 4.3: Reasons that a model for psycho-educational assessment is necessary

Reason	n	% of total
A model allows for structure and guidance A model or framework provides guidelines and a structure for assessment as well as direction for interventions.	20	58.8%
Ability to gather information about the client By gathering information about a client one is better able to understand the client, their family dynamics and context. In addition, a consultant may make informed decisions regarding interventions for the client.	8	23.5%
A holistic approach A model facilitates a holistic understanding of a client, their family and their environment. A holistic approach allows a consultant to better understand factors that influence or attribute to behaviour.	5	14.7%
Building client and family understanding A model provides the client and family with a better understanding of the process and the areas of concern. Furthermore it facilitates their involvement in the intervention process.	3	8.8%

Table 4.3 illustrates that over half of the respondents (58.8%) felt that a model is necessary since it allows for structure and guidance. Almost a quarter of respondents (23.5%) indicated that a model facilitates the gathering of information about a client. In addition a smaller number of respondents mentioned that a model is required to facilitate both a holistic approach and build an understanding of the client and the family.

Notably, two respondents (6%) viewed a model as not necessary for psycho-educational assessment and mentioned that although one needs to gather information such as history from

a client, using a specific model was not necessary to achieve this. The respondent's statement follows:

It is necessary to get as much history and collateral information before doing an assessment but a specific model is not necessary.

Given that the majority of respondents feel a model is necessary for psycho-educational assessment, it is useful to identify what qualities are requirements for a model to be effective. From the responses five main themes were identified as qualities which are required for an effective psycho-educational assessment model. Each quality is discussed below.

i. Client/family centred

Almost a third of the respondents felt that a model of psycho-educational assessment should be client and family centred (32.4%). Respondents mentioned that a model of assessment needs to be one that centres on the well-being and needs of the client and the family and must focus on empowering the client. Some of the responses given included:

I feel that an assessment's purpose is not only to assess the child but to provide a supportive intervention for the people in the child's life.

It must be able to integrate all aspects of concern for the client.

ii. Holistic/ecosystemic approach

A second theme which was identified by a relatively large number of respondents (41%) was that a model of assessment needed to be based on a holistic and ecosystemic approach. Respondents emphasised that through the use of such an approach, consultants were able to view all aspects of a client and all systems in which the client interacts in a holistic manner. Furthermore such an approach allows for a framework in which suitable interventions can be sought and includes the client and their family in doing so. Some applicable responses given by the respondents included:

It must be holistic, emphasise both the child's strengths and areas for growth, it must emphasise the importance of working together with the family in finding ways to better support the child. A model of assessment should also provide an eco-systemic framework for understanding the child and for intervention.

The model should be able to look at the child holistically. It should be able to take all aspects of the child's life into consideration. This will help to see where the difficulties are and what is causing them.

iii. Contextualising and understanding the client

More than a third of the respondents (35.2%) highlighted that a model for psycho-educational assessment must allow for one to gather relevant comprehensive information about a client. Respondents mentioned that gathering information allows one to form a baseline of current functioning of a client.

A response provided by one of the respondents highlights the need for a comprehensive, contextual understanding of the client:

The model must be comprehensive and allow one to gain as much information about the person as possible with regards to their current context.

iv. A model that is practical and flexible for assessment

Just under half of the respondents (44%) emphasised the need for a model to be practical, flexible and simple. Furthermore, it was identified that the practicality and flexibility of a model is required in order to meet varying requirements such as:

- The usefulness of the model in the diverse South African context;
- The model should be valuable in terms of saving time and costs;
- It must be accommodative and sensitive to client and family needs; and
- The model must be easily applicable.

Responses given included:

A model of assessment should also be flexible enough to accommodate different families' needs within a South African context.

Flexibility, user-friendly, ability to complete the process in a reasonable amount of time.

v. A model that is collaborative and interactive

It was identified that under a third of the respondents (29.4%) felt that a model or framework needed to encourage collaboration and interaction with all the individuals involved within the assessment process. Some of the responses given included:

A model of assessment that is inclusive and qualitative in nature, interactive

Something that gets all the important people (parents, family, child, teachers, etc) involved and provides support for all concerned

This concludes the final theme identified for the required qualities of a model of psycho-educational assessment. From the aforementioned themes it is evident that the predominant sought after quality was the need for a model of psycho-educational assessment to be practical and flexible.

There is evident consistency between the qualities required for an effective model of psycho-educational assessment and the reason why a model was deemed necessary. For example; respondents mentioned one of the reasons why a model was seen as essential was that it facilitates a holistic understanding of the client and the situation. Similarly, one of the qualities stipulated by respondents, required for an effective model of psycho-educational assessment, was that it should be holistic and ecosystemic in its approach. Furthermore, respondents commented that a model serves to involve the client and the family in the process of psycho-educational assessment, which is consistent with the desired quality that a model must be client and family centred. Additionally, respondents highlighted that a model provides a collaborative and interactive framework, which is consistent with the respondents'

desired quality for a model to involve the family in the process of psycho-educational assessment. Lastly, respondents commented that a model was seen to provide a means for gathering information about a client and his/her context. This can be linked to the desired quality of contextualising the client, which arose from the responses. The above examples serve to reinforce that the identified qualities are consistent to the end pursuit of enhancing the psycho-educational assessment of clients.

The effectiveness of the IAC model in meeting the respondents' requirements for a model of psycho-educational assessment

In order to address the research question, “perceptions of the effectiveness of the IAC as a tool for psycho-educational assessment”, it is critical to understand how the IAC fulfils the aforementioned qualities. The participants presented the following perspectives of the IAC model in relation to the desired qualities for a model for psycho-educational assessment. It should be noted that the responses given relate to an open-ended question, hence the data provides a view regarding the participants' own requirements for a model for psycho-educational assessment.

Table 4.4 illustrates the participants' perceptions as to how the IAC meets the aforementioned qualities required in a model of psycho-educational assessment. It is evident that the majority of respondents felt that the IAC satisfied each desired quality.

Table 4.4: The effectiveness of the IAC in meeting the respondents' required qualities

Quality	Total Number of responses per quality	IAC satisfied quality			IAC did not satisfy quality		
		n	% of response per quality	% of total (n=34)	n	% of response per quality	% of total (n=34)
Client/family centred	7	5	71.4%	14.7%	2	28.6%	5.9%
Holistic/ecosystemic approach	13	12	92.3%	35.3%	1	7.7%	2.9%
Contextualising the client	8	8	100%	23.5%	0	0%	0%
Practical and flexible	13	12	92.3%	35.3%	1	7.7%	2.9%
Collaborative and interactive	6	6	100%	17.6%	0	0%	0%

Since the effectiveness of the IAC model in meeting the respondents' required qualities addresses a key question of this study, the following section provides descriptive discussion learned from the responses to reveal additional insight into the IACs effectiveness.

i. Client/family centred

The majority of respondents (71.4%) highlighted that the IAC model is client/family centred. Whilst it was mentioned that the model focuses on the needs of the client and the family, the emphasis made by respondents was more in terms of contextualising the client, rather than on empowering the client.

Moreover, there was minimal criticism (28.6%) that in having the child present at the meetings, the model tends to encourage a view of seeing the child as a problem. The response given by the respondent was:

If a child is with you in the intake and feedback- the approach is often vague and fuzzy to protect child from feeling that they are or have a problem.

ii. Holistic/ecosystemic approach

An overwhelming majority of respondents (92.3%) reported that the IAC model provides a holistic system in which to understand the child, and highlights the impact of experiences on individual functioning. One of the responses which illustrated this was:

The IAC gives a broader perspective of the client than just a single parent's view or the child's view and in this way also gives a sense of the impact that the child has on other members of the family and what impact the members of the family have on the child. This is helpful in understanding the child within a system. It can also reveal the child, siblings' or parents' ways of coping in the system.

One respondent however, felt that the interview places too much emphasis on the child, with limited input from parents and teachers. Thus, it is cautioned that this can negatively impede on the acquisition of a holistic understanding.

iii. Contextualising and understanding the client

All of the respondents perceived the IAC model to both facilitate understanding and focusing on the positive aspects of the child. The approach was generally viewed to be non-judgemental, taking into account the client's strengths and weaknesses. In addition the participants found that the model allows one to gather necessary information in order to help obtain a complete understanding of the child within his/her context, whilst looking at all aspects of the child. The following questionnaire response highlights this aspect clearly:

It provides a specific structure and is very useful in obtaining a complete understanding of the client's strengths and concerns.

There were no contradictory comments given by respondents relating to the IAC being a model which contextualises the client.

iv. A model that is practical and flexible for assessment

It was widely-held by most of the respondents (92.3%) that the structure of the IAC model was flexible and simplistic. The structure of the IAC was seen to be clear and less rigid than other models. Its stepwise approach was seen to be both easy to follow for all involved and time efficient. Some responses given by respondents included:

It is very simple to use, as it provides a specific structure and is very useful in obtaining a complete understanding of the client's strengths and concerns.

The IAC approach allows for flexibility and adaptation

Only one respondent disagreed with this quality in mentioning that the IAC approach can be time consuming. This was however a minority viewpoint (2.9%) in context of all the respondents, thus emphasising the finding that the majority viewed the IAC as being practical and flexible.

v. A model that is collaborative and interactive

All of the respondents emphasised the point that the IAC model is collaborative. Responses expanded that it was collaborative in such a way that the opinions of both parent and child were taken into account. Furthermore the family as a whole becomes part of the process, and an interactive approach helps all the parties understand the concerns at hand. An example of a response given was:

It is collaborative and looks for the positive qualities in a client which is good

Again, there were no negative or contradictory responses given relating to the IAC being a collaborative and interactive model, thus emphasising the positive perceptions of the overwhelming majority of respondents relating to the effectiveness of the IAC.

In summary, Figure 4.2 serves to consolidate the respondents' responses regarding the effectiveness of the IAC in terms of their desired qualities for a model for psycho-educational

assessment. The figure illustrates that the majority of respondents felt that the IAC model satisfied their desired qualities.

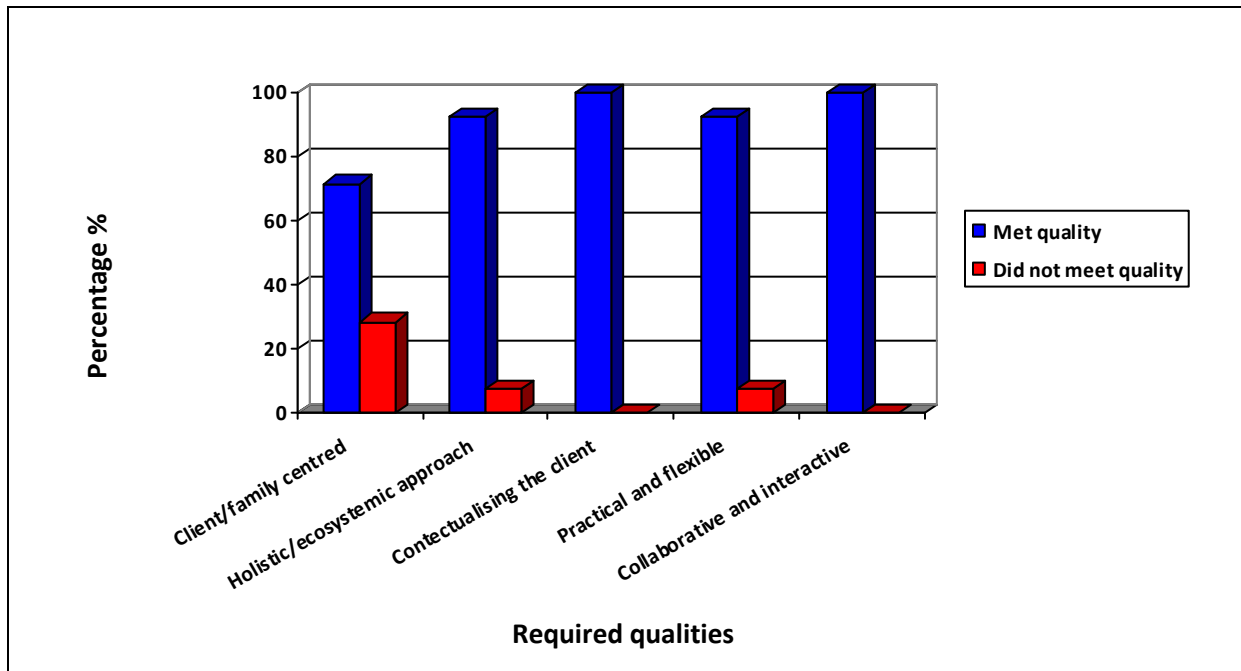


Figure 4.2: The effectiveness of the IAC in meeting the respondents' required qualities

The perceived effectiveness of the IAC model in meeting the theoretical premises of the approach

The theoretical foundation of the IAC model encompasses key premises relating to the practical application of the model. It is thus pertinent to determine whether the participants perceived the model to be effective when applying such premises, with the aim of understanding the effectiveness of the model in meeting theoretical objectives. Particularly, three main assumptions underpinning the IAC approach as mentioned by Adelman and Taylor (1979) will be considered, namely; the IAC model emphasising client motivation; the active participation of clients; and examining the strengths and weaknesses of the client. The perceived effectiveness of whether the IAC fulfils these three aspects will be discussed below.

Client motivation in carrying out jointly made decisions

The IAC model of psycho-educational assessment advocates client mobilisation in terms of carrying out decisions that are jointly made during the assessment process. The majority of respondents (76.5%) perceived clients to be sufficiently motivated to carry out joint decisions made during the assessment process. Their reasons are classified within two main themes:

- Firstly, it was noted that family participation is motivating for carrying out decisions as the family feels empowered, and is being made part of the therapeutic process, allowing them to feel that they are playing a role in joint decision making.
- Secondly, formulation of concrete and direct recommendations are motivating for clients. This would include step-by-step information, as well as detailed referrals and contact information for other therapists.

Less than a quarter of the respondents (23.5%) indicated that clients sometimes lacked motivation to carry out joint decisions made during the assessment. This was perceived to be due to a number of reasons, including:

- Firstly, despite all good intentions, there is still non-compliance from clients/families.
- Secondly, there are often unchanging patterns of behaviour within dysfunctional families.
- Lastly, resources pose a serious problem to compliance, especially in terms of the financial costs of the recommended interventions such as speech therapy, learning support, occupational therapy and so forth.

Active participation of clients

In the IAC approach, clients are expected to be active participants in the problem-solving and decision-making processes. Just under half of the respondents (42.4%) felt that there were a number of advantages to clients being active participants. Fewer respondents (24.2%)

indicated that there were disadvantages to active participation, whilst 33.3% identified both advantages and disadvantages. Within these responses, the following four predominant themes were identified:

- The respondents felt that clients respond well to being active participants as they feel empowered while obtaining necessary support and understanding. Only one respondent raised an issue of caution in that many clients may feel unable to make decisions, thereby preventing them from being active in the process resulting in them feeling disempowered by comparison.
- The second common theme was that of possible reluctance of the family to actively participate. It was suggested that some of the clients feel reluctant to share experiences due to difficult family dynamics, such as situations where parents are divorced. One respondent however argued that families open to a systemic approach, experience no real disadvantage.
- The third common theme related to the experiences of the child within the IAC framework. The child experiences the process as either empowering, or by comparison, a difficult experience. Some children will find it to be an empowering experience through their participation in the decision-making process. However, at the same time it can be difficult for the child to be active and participate. One of the reasons noted being due to hostile family members, which may make the setting uncomfortable for the child. This in turn can become anxiety provoking for the child.
- Lastly, it was highlighted that clients may not be able to actively participate due to a lack of confidence in their own abilities which in turn may impact on the therapeutic process. It was stressed that such clients will need the guidance of the trained consultant in the situation. Again, other respondents highlighted the idea that families open to a more systemic approach will not experience these disadvantages and can be encouraged not to rely too heavily on the consultant during the process.

In addition, other respondents noted that active participation was an advantage in the problem-solving and decision-making processes without providing further qualifying statements. Overall it can be deciphered that although there are some areas of concern

relating to clients being active participants in the process, the majority of respondents view this aspect of the IAC model as advantageous for clients.

Strengths and weaknesses of the client

Since the IAC approach is in line with ecosystemic theory, it is deemed crucial to explore both the strengths and weaknesses of the client. Three quarters of respondents (75%) felt that this process of examining both the client's strengths and weaknesses during the assessment was advantageous for the following reasons:

- Firstly, it provides a holistic picture of the child;
- Secondly, it provides an alternative, positive perspective of the child, instead of only focusing on the current problem; and
- A third reason is that it provides awareness, direction and motivation for both the consultant and the client and family involved.

Only two of the respondents responded negatively to this aspect of the model, stating that the examination of clients' strengths and weaknesses were contrived as well as time consuming. Furthermore, only one respondent noted that depending on the consultant's presentation of a child's weaknesses, the child may be compromised by negative feedback.

4.4.2 Student consultants' opinions regarding the IAC model of assessment

Whilst the prior analysis concentrates on the effectiveness of the IAC model, understanding the student consultants' opinions towards the IAC model is deemed important since this will impact acceptance and use of the model in practice.

In order to understand the student consultants' opinions, this section looks at what they deem as positive and negative aspects of the IAC model; what different cases the IAC is most applicable to; and how psycho-educational assessment should be taught.

Positive and negative aspects of the IAC model

Table 4.5 and Table 4.6 provide an overview of the reported positive and negative aspects of the IAC model mentioned by the respondents.

Table 4.5: Positive responses of the IAC model

Positive themes of the IAC model	n	% of total
Collaborative process It involves many families members instead of only the therapist and client, and different perspectives are offered.	22	66.6%
Structured and relevant information Allows for a greater and clearer understanding of the concerns and ensures feedback is more concrete and easier to understand.	12	36.4%
Holistic and ecosystemic approach The child is seen holistically and less emphasis is placed on test scores.	7	21.2%
Non-threatening and empowering The approach to the child's concerns become less clinical and the child and family are empowered by being part of the process.	5	15.2%
Shift from "problem-finding" to resolutions This promotes active participation in the shift towards resolution and encourages different points of view.	4	12.1%
Examines family dynamics Emphasis is on the family participation in the process and the opportunity to observe and understand various family dynamics.	2	6.1%

From Table 4.5 it can be identified that there is some consistency between the positive opinions of the IAC model and the qualities which are desired from a psycho-educational assessment model. Thus many of the positive aspects identified by respondents relate to what they see as being necessary in a model for psycho-educational assessment. Parallels were identified amongst the aspects of collaborative; holistic and ecosystemic; client/family centred and practical and flexible.

In contrast to the positive responses mentioned above, Table 4.6 outlines the negative responses of the IAC model using content analysis.

Table 4.6: Negative responses of the IAC model

Negative themes of the IAC model	n	% of total
Time consuming The approach needs to be conducted thoroughly and thus can become time consuming as it is rather complex.	14	41.2%
Too structured The model tends to be too rigid and there tends to be a “school-like” feel to the process.	12	35.3%
The presence of the child is problematic Parents can find it hard to speak openly in front of their children, while children are uncomfortable in front of their parents.	6	17.6%
Lack of parental co-operation and input Parents may not be available for relevant sessions making the IAC impractical. The therapist still retains a position of control, limiting the amount of parental input.	5	14.7%
Limited availability of parents and teachers Family members and teachers have to be willing to commit to the process and it’s not always possible for everyone to be available.	4	11.8%
Financial Constraints	2	5.9%

Interestingly, the opinions given, as highlighted in the above table, can be seen to relate to the potential challenges which were identified by respondents, relating to the practice of psycho-educational assessment in general. Parallels were identified between aspects namely; time restrictions; the presence of the child as problematic; limited family participation and lastly financial constraints.

Student consultants' opinions regarding the applicability of client cases to the IAC model

Related to the opinions of student consultants' regarding the IAC model, as highlighted in Table 4.5 and Table 4.6, is what client cases are seen to correspond best with the application of the IAC model. A content analysis of responses given is depicted in Table 4.7.

Table 4.7: Most suitable cases for the IAC model

Cases most suitable	n	% of total
Children and adolescents requiring psycho-educational assessments	9	35.6%
Family willing to participate and be involved	5	19.2%
Children with learning difficulties specifically and low self-esteem	4	15.4%
Where the family do not allow for a space for everyone to share their opinions	4	15.4%
Where the family has limited understanding of causes of concern	3	11.5%
For most cases	3	11.5%

Table 4.8: Least suitable cases for the IAC model

Cases least suitable	n	% of total
Families unwilling to participate	6	31.6%
Parental / family discord	5	26.3%
Children from orphanages due to limited support after assessment	4	21.1%
Children with ADHD; Oppositional Defiant Disorder and mood disorders	2	10.5%
Children and adolescents who are aggressive	2	10.5%
Second language English speakers	1	5.3%
None	2	10.5%

Table 4.7 highlights that the respondents view children and adolescents requiring psycho-educational assessments as the most applicable cases for the IAC model. Additionally, from Table 4.8 it is clear that families who are unwilling to participate in the assessment are seen as the case least suitable to the IAC model.

In light of the aforementioned aspects relating to the IAC model, further ideas were presented by the respondents in relation to how psycho-educational assessment should be taught. This proves useful for further training in the IAC model and will be discussed in the section to follow.

Teaching psycho-educational assessment

A number of ideas were provided by the respondents with regards to their opinions on how psycho-educational assessment should be taught. These opinions will be displayed and summarised through the use of content analysis as reflected in Table 4.9.

Table 4.9: Opinions regarding the teaching of psycho-educational assessment

Ideas regarding how psycho-educational assessment should be taught	n	% of total
Strong practical approach This includes necessary practical experience, observation of skilled consultants and completion of case studies.	14	43.8%
Theoretical and practical components A solid theoretical knowledge, including assessment, report writing and a practical component with practice sessions.	10	31.3%
Constructive supervision Supervision should include practice sessions and role plays, discussions surrounding test administration and report writing skills.	8	25%
Multi-disciplinary approach Input from other therapists such as speech, remedial and occupational therapists.	5	15.6%
Exposure to variety of approaches Students should be exposed to different approaches especially when focusing on the administration and interpretation of results, the facilitation of the IAC and different styles of report writing should be allowed.	5	15.6%
Focus on test selection, administration and interpretation Familiarity with test selection, administration and interpretation procedures.	4	12.5%

From the above table it can be seen that the majority of respondents feel that psycho-educational assessment should be taught practically, which involves observations and hands-on practice.

Following the above discussions relating to the effectiveness and opinions regarding the IAC model of psycho-educational assessment, it proves useful to explore what principles of the model are being applied by past students, in order to address the final research question.

4.4.3 Past students' use of the IAC principles and approach at internship sites or places of work

Relating to this question which explores what principles of the IAC approach are being used, is what assessment models the participants prefer to use. This will be examined through content analysis of the responses, which is represented in Table 4.10

Table 4.10: Preferred models of assessment

Preferred models	n	% of total
The IAC model	22	55%
Combination of IAC and personal adaptations Some aspects of the IAC are used in combination with personal adaptations such as more detailed history taking, and no chart , and child not present at intake and feedback.	8	20%
Systemic approach	4	10%
Traditional approach Focus is mostly on testing and scores.	3	7.5%

From the responses it was noted that some respondents (15%) commented that they had only been trained in the IAC model, hence that was the preferred approach. There appears to be some consistency which exists between the model the participants have been trained in and what they prefer to use.

Furthermore, there appeared to be some confusion with regards to what constitutes a “model” as three respondents (7.5%) mentioned cognitive and educational tests as models.

In order to explore this research question further, namely the past students' use of the IAC principles and approach at their internship sites or places of work, an analysis follows of the responses relating to what aspects of the IAC are currently being used. The analyses of responses indicated that only one respondent does not use the IAC model or aspects of the

IAC model, in practice. Therefore it can be inferred that the overwhelming majority (97%) of respondents accept and adopt the principles of the IAC model and thus view it as being applicable and relevant for psycho-educational assessment.

It was found that 29.4% of respondents indicated that they followed the IAC model in its entirety and included all of the various components. The remaining respondents (67.6%) were found to use specific aspects of the model. These aspects are represented in Table 4.11. Since the IAC model includes all the aspects mentioned in Table 4.11, the respondents who use the model in its entirety have been counted as using the individual aspect.

Table 4.11: Aspects of the IAC currently in use by students

Aspects of the IAC in use	n	% of total
Joint problem-solving The family is included in the problem-solving and decision-making processes. The child's strengths and areas of concern are addressed under this aspect.	20	58.9%
Intake and/or feedback meetings Important to obtain detailed history and collateral from family and other professionals such as healthcare professionals. Relevant feedback, suggestions for alleviating concerns and suggested interventions form part of the process.	20	58.9%
Parent and school questionnaire Such questionnaires are used in order to gain a more in-depth understanding of the client.	14	41.2%
Collaborative aspect Involving the client and family as well as other individuals such as the teacher, in the assessment process.	18	52.3%
Testing Batteries Cognitive, educational and projective tests.	12	35.3%

It must be noted, however that the above table includes all participants who responded which can be seen to include current students. In order to address the research question, it is necessary to examine the responses of past students exclusively. In order to achieve this, students currently studying were excluded from the sample.

Within this sample group, it was found that 16.7% use the IAC model in its entirety. Only one respondent does not use the IAC model at all. Thus, the remaining majority (80%) are found to still be using aspects of the IAC model at internship sites or places of work.

Table 4.12 below illustrates the content analysis of aspects of the IAC currently being used by past students exclusively.

Table 4.12: Aspects of the IAC currently in use by past students

Aspects of the IAC in use	n	% of total
Joint problem-solving The family is included in the problem-solving and decision-making processes. The child's strengths and areas of concern are addressed under this aspect.	15	50%
Intake and/or feedback meetings Important to obtain detailed history and collateral from family and other professionals such as healthcare professionals. Relevant feedback, suggestions for alleviating concerns and suggested interventions form part of the process.	11	36.7%
Parent and school questionnaire Such questionnaires are used in order to gain a more in-depth understanding of the client.	8	26.7%
Collaborative aspect Involving the client and family as well as other individuals such as the teacher, in the assessment process.	13	43.3%
Testing Batteries Cognitive, educational and projective tests.	7	23.3%

There is consistency in the findings reflected in Tables 4.11 and 4.12 in that the aspect of the IAC most commonly used is the joint problem-solving aspect, where clients and families are involved in the process of understanding the client's strengths and areas of concern.

This chapter has served to display the findings using frequencies and content analysis as well as respondents' quotes. In the chapter which follows, the data presented will be discussed in more detail and will be linked to the theoretical understanding of the IAC model of psycho-educational assessment as well as previous research conducted on the model.

CHAPTER FIVE

DISCUSSION

This chapter provides an interpretation of the results of the study. This discussion will similarly be structured according to the main research questions of the study and will be linked to the theoretical underpinnings as well as previous research conducted on the IAC model. The limitations, applicability and relevance of this study are discussed and recommendations for future research are made. Additionally, suggestions for student training in the IAC model will be specified.

5.1 Interpretation of Findings

5.1.1 Perceptions of the effectiveness of the IAC as a tool for psycho-educational assessment

In order to explore the participants' perceptions of the effectiveness of the IAC model it was important to ascertain what they viewed to be advantages and disadvantages of a model for psycho-educational assessment in general.

The vast support regarding the benefits of psycho-educational assessment suggests it is seen to provide a means for more in-depth and holistic understanding of a child. Furthermore it is seen to allow for parental participation and in turn provides support for both the parents and the child. This point is consistent with the ecosystemic theory of the IAC model, which stresses the importance of family participation and the participation of significant others in the child's life, in both the assessment and intervention planning phases. Furthermore, this aspect corresponds with current legislation in South Africa, which reiterates the responsibility of parents in education. The Education White Paper (No.6 of 2001), as well as the South African Schools Act (1996), support the optimal involvement of parents in the education of their children. Therefore, the evident support in the study for psycho-educational assessment, which includes parental participation, is congruent with such educational policies.

However, it was noted by almost half of the respondents that psycho-educational assessment could be distressing for the child in that there is a negative expectation when having to be assessed, and furthermore there is a potential risk of labelling the child. Such responses are congruous with the limitations of assessment, where traditionally assessment was used to label and categorise children. This is consistent with the limitation of assessment raised by Snyder and Lopez (2005) where, from a medical model framework, the locus of human adjustment and maladjustment is largely viewed as being caused by characteristics inside the person, thus excluding environmental factors. Thus it can be inferred that such critiques of assessment as emphasised in the literature surrounding traditional assessment, are still viewed as concerns and disadvantages of psycho-educational assessment currently.

Additionally, various potential challenges were highlighted relating to the practice of psycho-educational assessment. Amod (2003) points to the criticism that standardised intelligence tests do not allow for variations in relation to culture, language, values, cognitive styles and life background. Responses in this study, relating to the challenges of psycho-educational assessment, indicated that cultural differences are viewed as a potential challenge by less than a third of respondents, specifically with regards to test administration and interpretation as well as communicating with the family concerned. This challenge can be linked to the aforementioned critique of testing procedures, mentioned by Amod (2003).

Furthermore, a third of respondents highlighted family participation as a challenge relating to the practice of psycho-educational assessment. Aspects such as a lack of willingness to support the child in the process of the assessment as well as a lack of cooperation in carrying out recommendations were mentioned as challenges.

A possible explanation for this restricted family participation could relate to the concern mentioned by Adelman and Taylor (1979) regarding the inclination for some clients to rely on experts for diagnoses, and thus the family in turn do not want to be involved.

Furthermore, Skuy et al., (1986) comment that South Africans in particular have lived in an authoritarian society, where they have been conditioned to accept already-made decisions. In addition, it was highlighted that financial constraints tend to be a significant problem for South African families, and thus the availability of relevant resources such as referrals or educational placements poses a challenge for psycho-educational practice in relation to

recommendations and interventions for families. This challenge corroborates Sonderup's (1998) concern regarding the lack of suitable referral sources and restricted community-based resources required by financially needy individuals.

A model/framework for assessment

The results from the study support the point raised by Adleman & Taylor (1979) and Sonderup (1998) in that assessment should be grounded in a workable model. An overwhelming majority of respondents felt that a model is necessary for assessment. Reasons given included the points that a model facilitates the gathering of information about the client; allows for structure and guidance; builds client and family understanding of the process and areas of concern; and provides a holistic approach in understanding the client.

Two respondents felt that a model for assessment was not necessary. This could be accounted for by the fact that both participants have been working for a few years and thus may have possibly developed their own way in carrying out assessments, where they felt a specific model was not implemented. This can be linked with the premise of the IAC model to be flexible, whereby assessment is seen in a very broad sense and tailored according to the needs of the specific client and the context in which he/she functions (Amod, 2003).

From the study, five main themes were identified as qualities which are required for a model of psycho-educational assessment to be seen as effective. These five themes will be discussed relating to a general view on models of psycho-educational assessment as well as relating to the IAC model specifically.

i. Client / family centred

Almost a third of the respondents commented that models of psycho-educational assessment should centre on the well-being and needs of the client and the family concerned, and must focus on empowering the client. With regards to the IAC model, most of the respondents saw the IAC to be client or family centred. This corresponds with the literature on the IAC (Adelman & Taylor, 1979; Amod, 2003; Manala, 2001) which advocates that the approach encourages a sense of empowerment for the clients concerned. This underscores the need for

psychologists to empower families to form a fundamental part of the assessment process. The IAC can therefore be seen to meet such a need.

Minor criticism relating to this aspect of the IAC model centered on having the child present at the meetings during the assessment process. Some respondents reported this to be difficult as the child may be viewed as having a problem and thus may feel victimised. This is consistent with the limitation of the IAC highlighted by Adelman and Taylor (1979) in voicing and sharing opinions and experiences with the child present. However, Freundl et al. (1982) challenged this view based on their study, where this notion was not seen to negatively impede the process. It appears that the idea of having the child present at the meetings remains an area of personal choice and points to the need for sensitivity and perceptiveness of the consultant. Based on the findings of the current study, only two respondents viewed this aspect as problematic, indicating that the majority of participants did not find this to be a concern in the assessment process.

ii. A holistic/ecosystemic approach

Just under half of the respondents felt that a model of assessment needed to be based on a holistic, ecosystemic approach. The IAC approach offers a broad scope of understanding by allowing an investigation into intrapersonal, interpersonal and environment factors (Harcombe, 2001). A large majority of respondents agreed with this aspect of the IAC, emphasising that the model provides a holistic way to understand the child.

Therefore, there is overwhelming support that the IAC examines the reciprocal relationships between personal and environmental variables and is thus consistent with literature (Adelman & Taylor, 1979, Skuy et al., 1986). In this way the IAC can be seen to transcend the limits of a medical model approach which focuses predominantly on symptoms in the child, and instead considers the dynamic interaction between the client and environmental variables, which is emphasised by Amod (2003) as being crucial within the South African context.

iii. Contextualising and understanding the client

Several respondents highlighted the need for a model to facilitate the gathering of information of a client. All of the respondents noted the IAC to be suitable in meeting this need. Importantly, the approach is seen as being non-judgemental and takes into account the strengths and weaknesses of the client concerned.

Reiff (1997) underlined contextual factors such as language, violence, education and trauma, to play a vital role in understanding a client. It is viewed that the client must thus be understood within his or her context. The findings indicate that the IAC fulfils such requirements.

This aspect of contextualising the client can be related to the positive research findings by Amod et al. (2000) indicating the IAC to be effective across cultural groups within the client population of the Education Clinic of the University of the Witwatersrand. The research by Amod et al. (2000) revealed that clients were understood contextually. The responses given in this study support such positive research findings, in that the IAC was again viewed favourably with regards to considering various contextual factors when understanding a client.

iv. A practical and flexible model for assessment

Just under half of the respondents indicated that a model for assessment must be practical and flexible. In relation to this, the IAC was viewed by almost all respondents as being clear, simplistic and flexible.

As a basic premise, the IAC approach encourages a broad view of assessment, which is tailored according to the needs of the child and the context in which he/she functions. The framework for assessment used at the Emthonjeni Centre allows for the use of various assessment techniques such as the use of information processing models of assessment, assessment through counselling, contextual visits – for example to the school, and the use of inventories and questionnaires. In this way the IAC can be seen as being flexible, in that the

assessment is tailored according to the needs of the client. The majority of respondents support this view of the approach.

However, it was noted by one respondent that the IAC approach can be time consuming. This response may be accounted for by the fact that the respondent is currently training and therefore may not have adapted the IAC to meet her unique needs.

v. A collaborative and interactive model

Under a third of respondents stated the requirement of a model to be collaborative and interactive. All of the respondents agreed that the IAC is a collaborative approach, and there were no contradictory responses given. This alludes to the fact that student consultants view the IAC as an interactive and collaborative model, which corresponds with the philosophical and theoretical foundations of the approach.

The IAC approach encourages all stakeholders, predominantly parents/caregivers and teachers, in developing a sense of commitment in the educational process. The positive responses highlighted in this study are consistent with findings in previous studies (Carnahan and Simeonsson, 1992; Dangor, 1983; Freundl et al., 1982; Skuy et al., 1986; Sonderup, 1998) emphasising the opinion that involving such stakeholders in the assessment process is seen to be favourable.

This is in accordance with the literature on the IAC, specifically the idea of a valid contract, as discussed in Chapter Two of the study. The results support research (Adelman & Taylor, 1979) stressing the importance of people being involved in decision-making that affects them.

Furthermore, the positive perceptions regarding the collaborative aspect of the IAC, as evident within this study, corresponds with educational policies in South Africa, requiring the teacher and parents to be centrally involved in the assessment and intervention process (Amod, 2003).

This aspect relates specifically to the pre-referral phase discussed in Chapter Two. Pre-referral intervention, as a feasible alternative to more general special education delivery practice has been documented in literature (Adelman & Taylor, 1998, 2000; Amod, 2003). The University of Pretoria as well as Stellenbosch University incorporate the pre-referral phase as a tool in the psycho-educational process. As yet, WITS has not incorporated such a tool.

Overall, the findings indicate that the majority of student consultants view the IAC approach as positive in meeting the required qualities in a model for psycho-educational assessment. Furthermore, in establishing the effectiveness of the IAC model, as perceived by student consultants, it is useful to discuss three key aspects relating to the IAC approach in meeting theoretical objectives. Three pertinent aspects will be discussed.

Client motivation in carrying out jointly made decisions

Previous research (Sonderup, 1998; Adelman & Taylor, 1979; Skuy et al., 1986) indicated a high degree of consistency with regard to client implementation of decisions taken in the IAC. Findings showed that 94% had implemented decisions in the Sonderup (1998) study while 93% had done so in the Skuy et al. (1986) study. Within the current study 76.5% of respondents perceived clients to be sufficiently motivated to carry out decisions made. The lower percentage of the current study when compared to previous studies may be accounted for by the fact that this study is exploring student consultants' perceptions, whereas the previous studies explored the opinions of clients themselves. Thus, the consultants' may have a more cautious view.

Few respondents in this study felt that clients sometimes lacked motivation to carry out decisions. The reasons for this included the fact that non-compliance from clients or families, or dysfunctional families, poses a challenge with regards to implementation of decisions. This aspect of family dynamics was additionally mentioned in the Sonderup (1998) study as a possible limitation. Furthermore, the aspect of limited resources was again mentioned as families could often not afford recommended interventions such as speech therapy, play therapy and so forth. This point supports research conducted by Human and Teglas (1993) which stressed the necessity of practical and feasible recommendations for families, and the

need for professionals to understand the limits of parent's resources when making recommendations for intervention. This study corroborates this aspect.

Active participation of clients

A key aspect of the IAC approach is that assessment is viewed as a joint-problem solving approach and thus requires active participation of clients in the problem-solving and decision-making processes. Previous research (Adelman & Taylor, 1979; Dangor, 1983; Skuy et al., 1986; Sonderup, 1998) has highlighted positive findings with regards to clients being active participants in the assessment process. Within the current study just under half of the respondents indicated advantages to clients being active participants, whilst less than a quarter indicated disadvantages, and a third stipulated both advantages and disadvantages.

Respondents highlighted the point that if clients feel empowered whilst obtaining necessary support and understanding, they will actively participate in the joint-problem solving and decision-making processes. The IAC approach specifically seeks to address the lack of empowerment caused by apartheid policies in the past, by the involvement of parents and learners as active partners in the process of assessment (Amod, 2003). The results of the study are seen to substantiate this principle of the IAC.

However, it was mentioned that some clients may wish the consultant to make decisions for the family, and thus they will have difficulty in being active participants. This is consistent with the concern raised by Adelman and Taylor (1979) in that some clients tend to rely on experts for diagnoses and prescriptions, and are frustrated when they are not provided with definite answers. Furthermore, it was highlighted that family dynamics may restrict the family to participate actively due to a possible reluctance to share. This aspect was mentioned in relation to parental or family discord, and how this may negatively impact on the process of active participation. Freundl et al. (1982) studied family participation in assessment and suggested that family involvement in decision-making was highly effective. The findings in this study appear to contest those of Freundl et al. (1982). However it must be noted that the study by Freundl et al. (1982) was conducted many years previous to the current study, and thus may not necessarily fully apply to current practices.

Strengths and weaknesses of the client

Snyder and Lopez (2005) comment that traditional assessment approaches, such as those incorporated under a medical model, emphasise aspects such as pathology, illness, disorders and symptoms, thereby accentuating a representation of sickness and abnormality. The IAC model, however, stresses the importance of looking at both the child's strengths and weaknesses. From the study it was evident a large number of respondents perceived this aspect as beneficial in providing a holistic understanding of the child; in providing a positive perspective of the child and not only focusing on problems; and providing direction and motivation for the consultant and clients.

A contradictory response was highlighted in that this aspect was seen to be too time consuming. This notion of time can be linked to the previous critique raised regarding the flexibility of the IAC model in that it was seen as being time consuming. This concern regarding time constraints was raised by the same respondent, indicating that the aspect of time is crucial for the individual concerned, yet cannot be generalised to be an aspect of concern regarding the model, due to the low response rate.

With regards to the research question; "perceptions of the effectiveness of the IAC as a tool for psycho-educational assessment", it can be proposed that, although there were some concerns and challenges relating to the IAC model, generally it appears to be perceived by student consultants as an effective tool for psycho-educational assessment.

5.1.2 Student consultants' opinions regarding the IAC model of assessment

The importance of understanding student consultants' opinions regarding the IAC model is crucial since this will impact on the use of the model in practice. Under this research question the positive and negative aspects of the IAC, as expressed by the participants, will be discussed as well as opinions relating to client cases most and least suitable to the IAC model. The findings of the study indicated a great deal of repetition and overlap between the reasons why the IAC is seen to be effective and alternatively ineffective, and the positive and negative opinions of the IAC. Due to this, the opinions which follow will be discussed briefly, as many such points have been discussed under the previous research question.

Positive aspects of the IAC model

Two thirds of the respondents identified the IAC to be a collaborative process, which is in line with the desired quality for a model of psycho-educational assessment. Over a quarter of respondents indicated that a model should be collaborative and all of the respondents indicated the IAC to meet this requirement favourably. Therefore, the principle of involving all stakeholders in the process of assessment is seen to be positive from the perspective of most student consultants.

Another significant, positive aspect of the IAC, which was stipulated by just over a third of the respondents, was that the model is structured and allows for a clear understanding of the client. Furthermore, it was expressed by under a quarter of respondents that a positive aspect of the IAC is the fact that it is a holistic, ecosystemic approach, where the child is seen as “a whole” and less emphasis is placed on test scores or results from an assessment battery.

In addition to these points mentioned above, two more important positive aspects were mentioned. Some respondents felt that the IAC is non-threatening and empowering. Furthermore, a small number of respondents commented that the IAC shifts from “problem-finding” within the child towards resolution of the problem and encourages a different “view” of the problem. This point corroborates the purpose of the development of the IAC model in addressing the criticism of traditional assessment which focused on internal factors within a person as the locus of human maladjustment (Snyder & Lopez, 2005). As an alternative, the IAC model views assessment “as addressing not primarily the child-with-a-problem, but encompassing the major dimensions of the environment such as the family and school system, and its interaction with the child/learner” (Amod, 2003, pg102). The findings thus support this proposition of the IAC model.

Interestingly, only one respondent reported the IAC to have no positive aspects. This emphasises that an overwhelming majority of student consultants view the IAC to encompass positive aspects. Such positive aspects highlighted above correspond with the principles and theoretical foundations of the IAC approach. Research supports the importance of people being involved in decision-making that affects them (Adelman and Taylor, 1979) and thus the IAC recasts the assessment process into a more equitable problem-solving approach (Skuy et

al., 1986). Furthermore, the ecosystemic principles of the IAC have been highlighted by student consultants as being positive in that one is able to gain a holistic understanding which is seen to be essential by most participants in this study.

Negative aspects of the IAC model

Importantly, some negative opinions regarding the IAC model were expressed by the student consultants in this study. The most common negative aspect mentioned by under half of respondents was that the IAC is time consuming. Interestingly, this aspect has not been highlighted in previous research on the IAC, however did arise in various responses in this study, which have been highlighted earlier in this chapter.

A possible reason for this opinion may be that the majority of participants in the study are still students, and thus may not have had the opportunity as yet to try and adapt the IAC to suit their specific needs, with regards to time constraints.

Over a third of respondents felt the IAC was too structured, and at times tended to be “school-like” in the process. This may indicate some misunderstandings in the way the IAC is taught to student consultants, where the notion of flexibility has not been sufficiently understood by the students. This highlights a possible area for future training which could be addressed.

Additionally, the concern relating to the presence of the child in meetings was again raised as a negative aspect of the IAC approach. Less than a quarter of respondents felt that parents may find it difficult to speak openly in front of the child, and additionally a child may feel uncomfortable talking in front of his/her parents. This point can be linked to the aforementioned concern relating to psycho-educational models of assessment, highlighted in this discussion. It is evident therefore that some participants in this study feel that having the child present at meetings is problematic.

An additional negative aspect of the IAC which was mentioned included the difficulty associated with parental co-operation and input as well as the limited availability of parents and teachers. This point was also mentioned under the challenges associated with psycho-

educational assessment in general, and thus may not only be limited to the IAC model. However, because the IAC model stresses the involvement of stakeholders as a key aspect to the approach (Adelman & Taylor, 1979), it can be seen to be problematic when this does not occur. Furthermore, two respondents highlighted financial constraints as a negative aspect of the IAC approach, which again corresponds with challenges relating to the practice of psycho-educational assessment in general.

The applicability of client cases to the IAC model

Relating to the above aspects are the opinions of student consultants' regarding which cases the IAC is most suitable and least suitable for. It appears that children and adolescents requiring psycho-educational assessments are seen to be most suitable for the IAC. Furthermore, it is seen most suitable when the family is willing to be involved and participate in the process and where they family does not allow the space for everyone to share their opinions, as the IAC facilitates the inclusion of all opinions (Skuy et al., 1986). Additionally, the IAC is seen most suitable for children with low self-esteem and learning difficulties. This can be understood in that the IAC does not solely look at deficits within the child, but instead considers contextual and environmental factors when understanding the child (Adelman & Taylor, 1979).

Alternatively it was reported by the participants in this study that the IAC is least suitable where families are unwilling to participate, and there is parental or family discord. This once more highlights the central aspect in the IAC model to include the family in the assessment process, and when this does not suitably occur, it is perceived as being negative for the process. Respondents reported difficulty with the IAC model in relation to children from orphanages due to the limited support after the assessment. This was mentioned by just under a quarter of respondents. The high response could possibly be attributed to the fact that many of the participants in the study had conducted assessments with children from orphanages, and experienced challenges with regards to limited support structures for the children concerned, as well as limited financial resources.

In relation to the research question addressed in this section, specifically; "student consultants' opinions regarding the IAC model of assessment", it is clear that there are both

positive and negative opinions regarding the model. These opinions prove useful in exploring the aspects of the IAC that are employed by past students as well as with regards to the future training of student consultants in the IAC model.

5.1.3 Past students' use of the IAC principles and approach at internship sites or places of work

The IAC model is the preferred model of assessment for over half of the respondents in the study. Furthermore, just under a quarter of respondents indicated that a combination of the IAC model and personal adaptations were preferred. This indicates that three quarters of student consultants in this study prefer to use the IAC model, implying the IAC is viewed as a positive model to use for psycho-educational assessment.

Few respondents mentioned they use a systemic approach, whilst even fewer indicated a traditional approach is preferred where the focus is mainly on testing. It must be noted that under a third of respondents did indicate that they had only been trained in the IAC approach, and thus would not be able to compare the approach to another model when establishing a preferred model for assessment. However, taking this consideration into account, the IAC is still seen by the majority of student consultants as the preferred model of assessment.

Importantly, there appeared to be some confusion with regards to what was considered to be a model for assessment, as some respondents reported various cognitive and educational test batteries as a model. This indicates some possible confusion and lack of clarity during student training in the IAC model, with regards to how the model provides the overarching structure, and test batteries are subsumed as one aspect under the model.

Of those participants who are past students, the IAC is used in its entirety by under a third of respondents. The remaining majority of respondents are found to be using aspects of the approach at their internship sites or places of work. Aspects of the model which are being used are the joint problem-solving aspect; intake and/or feedback meetings; parent and school questionnaire (inventories); collaborative aspect; and lastly the testing batteries. The aspect of the IAC which appears to be most adopted by past students is the joint problem-solving

where the family is included in the problem-solving and decision-making processes and the child's strengths and areas of concern are addressed. The high percentage of respondents still using aspects of the IAC after completion of their training signifies student consultants' favour in using the approach for psycho-educational assessment.

5.2 Implications of the results

The findings corroborate the theory of the IAC model which exemplifies a broad-based ecosystemic and holistic approach to psycho-educational assessment and intervention. The perceptions of the participants in this study support the view that the IAC effectively considers individuals in the light of their context, including a consideration of ecological, educational and cultural factors as well as socio-economic opportunities. The IAC appears to be seen as an interactive and empowering approach, which provides an alternative means of understanding a client. Whilst some negative opinions of the IAC were mentioned, largely it appears that student consultants perceive the IAC as an effective model for psycho-educational assessment, and continue to employ aspects of the approach at internship sites or places of work.

5.3 Suggestions for student training in the IAC model

This study provides insight into the training of student consultants in the IAC approach. The following suggestions with regard to future training are made:

- Given that there appeared to be some confusion with regards to the meaning of “a model” for psycho-educational assessment, there is a need to clarify with student consultants what the overarching model is and what is subsumed within that model.
- The “pre-referral phase” tool appears to be used at other Universities in South Africa as well as being in line with inclusion policy. Therefore, it would be useful to include this and develop a framework for it at WITS.

- It appears that student consultants are not completely aware that the IAC model is intended to be flexible and adapted to the needs of the client. It seems necessary that this aspect is stressed, especially with regards to the concern of time constraints.
- Overall, the model appears to be perceived by student consultants as an effective approach to psycho-educational assessment and thus must continue to be used at WITS.
- Student consultants feel the model should be taught mostly through practical experience such as through observations of skilled consultants and completion of case studies. Furthermore, a solid theoretical and practical component including report writing skills and practice sessions were identified as crucial by students.
- Many student consultants felt that more constructive supervision was needed pertaining to test administration and report writing skills.
- A multi-disciplinary approach incorporating input from other therapists such as speech, remedial and occupational therapists, may be beneficial.
- An exposure to different approaches could be included in the training of students, as some student consultants highlighted the need to develop different styles and approaches to assessment which are more conducive to personal preferences.
- Some student consultants feel that there should be a greater focus on instruction regarding test selection, administration and interpretation. Thus, more of a focus on training in this arena would be useful.

5.4 Limitations of the study

Although results from the present study provide some significant avenues for training as mentioned above, there are some limitations to the current study that should be addressed.

- A limitation of the study is the small sample size, whereby there was a questionnaire return rate of 48%. This precludes generalisation to a larger population. Nonetheless, this research can provide a useful pilot study to inform future research regarding student training.
- Stark and Roberts (2002) caution against the use of surveys in that many of them are unable to arouse interest in potential respondents, thus affecting the successful completion and return of the survey. Thus, a possible limitation which could be linked to the relatively low return rate of questionnaires, was the use of a survey approach as the methodology for this study.
- Due to changes in contact details of students who were part of WITS many years ago, it was difficult to get in contact with many of the past students. Hence most of the participants in the sample are currently studying still at WITS or are currently in their internship programme. Thus there were a limited number of past students to comment on what aspects of the IAC are currently still being used.
- Due to the fact that a large portion of the sample were still currently students at WITS and had not been exposed to any other model of assessment, they may not have been able to accurately evaluate the model.

5.5 Suggestions for future research

A comparative study of student consultants' perceptions of the IAC approach as opposed to other assessment models currently in use in other institutions in South Africa would afford greater insight into the effectiveness of the IAC as a psycho-educational model of assessment for training students.

Furthermore, a more controlled, longitudinal study with a sample of student consultants will be beneficial in order to ascertain their perceptions of the IAC model over time, during significant phases such as being a student, an intern and in places of work.

5.6 Conclusion

The high degree of positive perceptions of student consultants towards the IAC approach indicates the model to be effective for psycho-educational assessment in South Africa. The results therefore favour the continued use of the IAC at the Emthonjeni Centre at the University of the Witwatersrand in training students in assessment.

The interactional, holistic, joint problem-solving approach of the IAC is seen to be in line with ecosystemic theory as well as education policy and the principles contained in National Curriculum Statement and Education White Paper (No.6 of 2001). Furthermore, it can be seen as a viable alternate to traditional models of assessment.

The current study corroborates the findings of the study by Dangor (1983) where the IAC was found to be positively perceived by student consultants. The value of the IAC would appear to be enhanced by the findings of this study, as the shifting socio-cultural climate of South Africa has not appeared to have a negative impact on the effectiveness of the IAC as viewed by student consultants. Through focusing on contextualising the client within current South African conditions, the IAC is most apt.

A response given by one of the participants in this study effectively recapitulates the IAC model; “I think the IAC is great! It gives a more human and less clinical feel to assessments”. This statement brings to focus the need for psycho-educational assessment to remain client-focused, considering contextual dimensions, and not solely test scores, when working with a client. The IAC model, devised by Adelman and Taylor (1979) can be seen as valuable in that it places the child in the context of the system of which he/she is an integral part. Accordingly the IAC can be seen to meet its objective in providing a more egalitarian alternative to traditional modes of assessment practice.

REFERENCES

- Adelman, H.S. & Taylor, L. (1979). Initial assessment and related consultation. *Learning Disability Quarterly*, 2, 52-64.
- Adelman, H.S. & Taylor, L. (1983). *Learning Disabilities in Perspective*. Glenview, Illinois: Scott, Foresman.
- Adelman, H.S. & Taylor, L. (1993). *Learning Problems and Learning Disabilities: Moving Forward*. California: Brooks/Cole.
- Adelman, H.S. & Taylor, L. (1998). Mental health in schools: moving forward. *School Psychology Review*, 27 (2), 175-190.
- Adelman, H.S. & Taylor, L. (2000). Moving prevention from the fringes into the fabric of school improvement. *Journal of Educational and Psychological Consultation*, 11 (1), 7-36.
- Amod, Z. (2003). *A Problem-Solving Psychoeducational Assessment Model for Implementation by Educators in South African Schools*. Unpublished thesis submitted for the degree of Doctor of Philosophy, University of the Witwatersrand, Johannesburg.
- Amod, Z., Skuy, M., Sonderup, L. & Fridjhon, P. (2000). Effectiveness of the initial assessment and consultation process (IAC) with different cultural groups in South Africa. *International Journal of Special Education*, 15 (1), 1-11.
- Ashman, A.F. & Conway, R.N.F. (1997). *An Introduction to Cognitive Education*. London: Routledge.

- Breakwell, G.M., Hammond, S. & Fife – Shaw, C. (Eds.), (2000). *Research Methods in Psychology*. London: Sage.
- Carnahan, S.L. & Simeonsson, R.J. (1992). Family involvement in child assessment. *International Journal of Cognitive Education and Mediated Learning*, 2 (3), 224-232.
- Coffey, K.M. & Obringer, S.J. (2000). Culturally diverse rural students at special risk for LD classification. *Rural Special Education Quarterly*, 19 (2), 15-20.
- Dangor, Z.M. (1983). *Assessment Services at a University Education Clinic*. Unpublished research dissertation submitted for the degree of Master of Education, University of the Witwatersrand, Johannesburg.
- D'Angiulli, A. & Siegel, L.S. (2003). Cognitive functioning as measured by the WISC-R. *Journal of Learning Disabilities*, 36(1), 48-59.
- Denzin, N.K. (2001). *Interpretive Interactionism* (2nd Edition). London: Sage.
- Department of Education. (1996). *South African Schools Act, No. 84 of 1996*. Pretoria: Government Printer.
- Department of Education. (2000). *A South African Curriculum for the Twenty First Century: Report of the Review Committee on Curriculum 2005*. Pretoria: Department of Education.
- Department of Education. (2001). *Education White Paper 6 Special Needs Education. Building an Inclusive Education and Training System*. Pretoria: Government Printer.
- De Vos, A.S., Strydom, H., Fouche, C.B., Poggenpoel, M., Schurink, E. & Schurink, W.J (Eds.), (1998). *Research at Grass Roots: A Primer for the Caring Professions*. Pretoria: Van Schaik.

- Donald, D., Lazarus, S., & Lolwana, P. (2002). *Educational Psychology in Social Context*. Cape Town: Oxford University Press.
- Donovan, M.S. & Cross, C.T. (2002). *Minority students in special and gifted education*. Washington DC: National Academy Press.
- Espy, K.A (2001). Effects of Environmental Measures on Intelligence in Young Children: Growth Curve Modelling of Longitudinal Data. *Merril-Palmer Quarterly*, 47(1), 42-73.
- Fagan, J.F. (2000). A theory of Intelligence as Processing: Implications for Society. *Psychology, Public Policy and Law*, 6(1), 168-179.
- Farre, B.A. (1998). *Perceived Usefulness of Psychoeducational Assessment Reports to Teachers*. Unpublished research dissertation submitted for the degree of Master of Education (Educational Psychology), University of the Witwatersrand, Johannesburg.
- Feuerstein, R. (1979). *The dynamic assessment of retarded performers: The learning potential assessment device, theory, instruments, and techniques*. Baltimore, MD: University Park Press.
- Feuerstein, R., Rand, Y., & Hoffman, M. (1979). *The Dynamic Assessment of Retarded Performers: The Learning Potential Assessment Device (LPAD)*. Baltimore, MD: University Park Press. New revised edition: Feuerstein, R. (2003). *The Dynamic Assessment of Cognitive Modifiability*. Jerusalem: ICELP Press.
- Foxcroft, C. & Roodt, G. (Eds.). (2001). *An Introduction to Psychological Assessment in the South African Context*. Cape Town: Oxford University Press.
- Freundl, P.C., Compas, B.E., Adelman, H.S. & Taylor, L. (1982). Learning and behaviour problems. *Journal of Clinical Child Psychology*, 11(3), 238-242.

- Gaughan, E. (1995). Family assessment in psychoeducational evaluations: case studies with the Family Adaptability and Cohesion Evaluation Scales. *Journal of School Psychology*, 33 (1), 7-28.
- Gunderson, L. & Siegel, L.S. (2001). The evils of the use of IQ tests to define learning disabilities in first- and second-language learners. *Reading Teacher*, 55, 1-8.
- Harcombe, E. (2001). *Inclusion: Development and Learning Support*. University of the Witwatersrand. Johannesburg.
- Harvey, V.S. (1997). Improving readability of psychological reports. *Professional Psychology: Research and Practice*, 28, 271-274.
- Haywood, H.C. (2001). What is dynamic “testing”? A response to Sternberg and Grigorenko. *Issues in Education*, 7 (2), 201-210.
- Human, M.T. & Teglesi, H. (1993). Parents’ satisfaction and compliance with recommendations following psychoeducational assessment of children. *Journal of School Psychology*, 31, 449-467.
- Kriegler, S.M. & Skuy, M. (1996). Perspectives on psychological assessment in South African schools. In P. Engelbrecht, S.M. Kriegler & M.I. Booyesen (Eds.), *Perspectives on Learning Difficulties: International Concerns and South African Realities* (pp. 109-122). Pretoria: Van Schaik.
- Lazarus, D., Daniels, B. & Engelbrecht, L. (1999). The inclusive school. In P. Engelbrecht, L. Green, S. Naicker & L. Engelbrecht (Eds.), *Inclusive Education in Action in South Africa* (pp. 45-68). Pretoria: Van Schaik.

- Lerner, J. (1993). *Learning Disabilities: Theories, Diagnosis and Teaching Strategies*. (6th edition). Boston: Houghton-Mifflin.
- Manala, J.T. (2001). *Parents' Perceptions of Assessment Practices at two Johannesburg Clinics*. Unpublished research dissertation submitted for the degree of Master of Education (Educational Psychology), University of the Witwatersrand, Johannesburg.
- Messick, S. (1980). Test validity and the ethics of assessment. *American Psychologist*, 35 (11), 1012-1027.
- Mouton, J. (2001). *How to succeed in your Master's and Doctoral Studies: A South African Guide and Resource Book*. Pretoria: Van Schaik.
- Naglieri, J. (2005). Relationships between the WISC-III and the Cognitive Assessment System with Conners' rating scales and continuous performance tests. *Archives of Clinical Neuropsychology*, 20 (3), 385-401.
- Ormrod, J.E. (2006). *Educational Psychology: Developing Learners*. New Jersey: Pearson Education Inc.
- Pfeiffer, S.I., Reddy, L.A., Kletzel, J.E., Schmelzer, E.R. & Boyer, L.M. (2000). The practitioner's view of IQ testing and profile analysis. *School Psychology Quarterly*, 15(4), 376-385.
- Potter, C. (1995). *Advanced Research Design: Course Reader*. Johannesburg: University of the Witwatersrand.
- Reiff, J.C. (1997). Multiple Intelligences, Culture and Equitable Learning. *Childhood Education*, 12, 301-304.

- Robinson, B.R. & Harrison, P.L. (2005). WISC-III core profiles for students referred or found eligible for special education and gifted programs. *School Psychology Quarterly*, 20, 51-66.
- Rosnow, R., & Rosenthal, R. (1996). *Beginning Behavioural Research. A conceptual primer*. New Jersey: Prentice-Hall, Inc.
- Salvia, J., & Ysseldyke, J.E. (1988). *The assessment of students. Assessment* (4th edition.). Boston, MA: Houghton Mifflin.
- Sattler, J.M. (1982). *Assessment of Children's Intelligence and Special Abilities* (2nd edition). Boston: Allyn & Bacon.
- Sattler, J.M. (1988). *Assessment of Children* (3rd edition). San Diego: Author.
- Seabi, J.M. (2007). *Mediated Learning Experience as an Alternative Approach to Assessment*. Unpublished research dissertation submitted for the degree of Master of Education (Educational Psychology), University of the Witwatersrand, Johannesburg.
- Sewell, T.E. (1987). Dynamic assessment as a nondiscriminatory procedure. In C.S. Lidz (Ed.), *Dynamic assessment: An interactional approach to evaluating learning potential* (pp. 426-443). New York: Guilford.
- Shuttleworth-Edwards, A.B., Kemp, R.D., Rust, A.L., Muirhead, J.G.L., Hartman, N.P & Radloff, S.E. (2004). Cross-cultural Effects on IQ Test Performance: A Review and Preliminary Normative Indications on WAIS-III Test Performance. *Journal of Clinical and Experimental Neuropsychology*, 26(7), 903-920.

- Skuy, M., Westaway, M. & Hickson, J. (1986). Cross-cultural applications of an innovative educational assessment process. *Journal of Personality and Social Psychology*, 1(3), 411-421.
- Snyder, C.R. and Lopez, S.J. (2005). *Handbook of Positive Psychology*. New York: Oxford University Press.
- Sonderup, L. (1998). *Cross-cultural application of the initial assessment and consultation process (IAC)*. Unpublished research dissertation submitted for the degree of Master of Education (Educational Psychology), University of the Witwatersrand, Johannesburg.
- Stark, R., & Roberts, L. (2002). *Contemporary Social Research Methods* (3rd edition). Canada: Wadsworth.
- TerreBlanche, M. & Kelly, K. (1999). Interpretive methods. In M. TerreBlanche & K. Durrheim (Eds.), *Research in practice: Applied methods for the social sciences* (pp.123-146). Cape Town: University of Cape Town Press.
- Vellutino, F.R., Scanlon, D.M., Small, S. & Fanuele, D.P. (2006). Response to Intervention as a vehicle for distinguishing between children with and without reading disabilities: Evidence for the role of kindergarten and first-grade interventions. *Journal of Learning Disabilities*, 39(2), 157-169.
- Wedell, K. (2003). Points from the SENCO Forum. *British Journal of Special Education*, 30(2), 107-108.
- Ysseldyke, J.E. (1983). Current practices in making psychoeducational decisions about learning disabled students. *Journal of Learning Disabilities*, 16 (4), 226-233.

Personal Correspondence

Personal Correspondence (2008). Fernald Centre, Los Angeles Learning Centre, University of California.

Personal Correspondence (2008). Psychology Department. Rhodes University.

Personal Correspondence (2008). Psychology Department. Stellenbosch University.

Personal Correspondence (2008). Psychology Department. University of Johannesburg.

Personal Correspondence (2008). Psychology Department. University of KwaZulu-Natal (Pietermaritzburg Campus).

APPENDICES

APPENDIX A: PARTICIPANT INFORMATION LETTER



Dear Madam / Sir

My name is Bianca Warburton, and I am conducting research for the purposes of obtaining a Masters Degree in Education (Educational Psychology) at the University of the Witwatersrand. I would like to invite you to take part in this study.

The aims of the research are to explore student consultants' perceptions towards the Initial Assessment and Consultation (IAC) approach, which you have practically used during your training at the University of the Witwatersrand. I am very interested in finding out your opinions and how you feel about using this particular model when conducting assessments. Your input would further add to the understanding of the effectiveness of the IAC approach, from all perspectives and in practice.

For participation in this study you are required to complete a questionnaire. Completion of this questionnaire will take no longer than half an hour of your time. Participation in the study is entirely voluntary and no one will be advantaged or disadvantaged for choosing to participate or not. You have the right to withdraw from the study at any time. There are no foreseeable risks or benefits for participants taking part in the study. You have the right not to answer any questions in the questionnaire. Anonymity will be ensured as no identifying information is asked on the questionnaire. The completed questionnaire will only be processed by me, the researcher and my supervisor, so confidentiality is ensured. If direct quotes are used from the comments within the questionnaire, no identifying information will be provided for the quote.

If you choose to participate in the study please adhere to the following procedures. The questionnaire is situated on an online website. Please retype the URL address <http://www.onlinesurvey.com/examplesurvey> into the address bar of your internet browser. Please complete the questionnaire online and click the submit button once finished. No identifying information is required for completion, thus you will remain anonymous.

The information from the study will be written up into a final report, which will be kept at the University of the Witwatersrand, and will be available for your viewing. Results may also be reported in a journal article. Your co-operation and participation in the study will be greatly appreciated.

If you have any queries regarding the process please do not hesitate to contact me via email at bianca.warburton@gmail.com or alternatively by phone on 084 577 6352, and I will gladly answer any questions you may have.

Yours Faithfully

Bianca Warburton

APPENDIX B : QUESTIONNAIRE

Questionnaire

Instructions

- *Mark the alternative that applies in each case*

1. Which age range do you fall into?

20 to 25 ☐

26 to 30 ☐

31 to 35 ☐

36 to 40 ☐

41 to 45 ☐

46 to 50 ☐

Over 50 ☐

2. Gender

Male ☐ Female ☐

3. What degree(s) have you completed? Please also provide the year of graduation for each degree.

--

4. **For how many years have you been working [or training as an educational psychologist?]**

Years working

Years training

5. **What range of clients do you mostly work with or anticipate working with?**

(please select as many as apply)

Children ☐

Adolescents ☐

Families ☐

Parents ☐

Teachers ☐

6. **Which assessment models have you been trained in?**

7. **Which assessment models have you used?**

8. **Which assessment models do you prefer to use? [Please also briefly explain why you prefer these]**

9. Do you feel that a model / framework for assessment is necessary?

Yes ☐ No ☐

Please explain:

10. What qualities do you look for in a model of assessment when choosing to work with that model?

11. Do you think the IAC approach provides these?

Yes ☐ No ☐

Please explain:

12. What aspects, if any, of the IAC approach are you currently using? Please elaborate either way.

13. In your opinion, what are the positive aspects of the IAC?

14. In your opinion, what are the negative aspects of the IAC?

15. Please describe what type of cases you have found the IAC most suitable and least suitable for

16. Do you feel clients are sufficiently motivated to carry out the decisions that you jointly made during the assessment?

Please explain:

17. In the IAC approach, clients are expected to be active participants in their own problem-solving and decision-making process. Do you feel that this presented advantages and/or difficulties for your clients?

Please explain:

18. The IAC approach emphasises the need to examine the strengths and weaknesses of the client. Do you perceive this as being advantageous in an assessment process?

Yes ☐ No ☐

Please explain:

19. Do you perceive this as being a disadvantage in an assessment process?

Yes ☐ No ☐

Please explain:

20. How do you think psycho-educational assessment should be taught?

21. In your opinion, what are the advantages and/or disadvantages of carrying out assessments with clients?

22. What challenges do you face or think you will have to face when carrying out assessments?

23. Are there any comments you would like to add?

Thank you for your time and co-operation

APPENDIX C: PARENT QUESTIONNAIRE

EMTHONJENI CENTRE

PARENT QUESTIONNAIRE



School of Human &
Community Development

Parents Marital Status (Please tick)

Single	Married	Divorced	Separated	Widowed	Both Deceased	Parents Remarried	
						Mother	Father

School

NAME OF SCHOOL	
ADDRESS OF SCHOOL	
TELEPHONE NUMBER OF SCHOOL	
CLASS (Grade/Standard)	
School Principal's Name	

Reasons for seeking Consultation and/or Assessment

Please state person and/or organisation who made the referral (eg. school, doctor, teacher, family friend, self or others):

Please express as fully as possible how you see the problem (continue on back of questionnaire if necessary):

Please indicate the age at which the current problem began: _____

What, in your view, are the factors that caused or are causing and/or aggravating the problem?

Is (Are) the original causes) still contributing to the problem

YES	NO
-----	----

Are there any other things currently contributing to the problem?

YES	NO
-----	----

Has your child been previously assessed? (Educational or Psychological)

YES	NO
-----	----

If "YES", please specify "when" and "by whom"

Have you sort help before?

YES	NO
-----	----

(a) By a General Practitioner :

Name : _____
 Date: _____
 Findings: _____

(b) By a Paediatrician

Name: _____
 Date: _____
 Findings: _____

(c) Other specialists

EYES ☐ EARS ☐ OTHER ☐

Name: _____
 Date: _____
 Findings: _____

Has your child been involved in any accident?

YES	NO
-----	----

If "YES", please specify:

Has your child had any illnesses (eg. colic)?

YES	NO
-----	----

If "YES", please specify:

Child's School History

7

Record of schools attended:

Please indicate the schools that your child has attended including Pre-grade and Nursery schools:

YEAR (S)	GRADE/STANDARD/CLASS	NAME OF SCHOOL

Is the language medium in the current school the same as the child's home language?

YES	NO
-----	----

Please specify school's main language (if different from home language)"

Comment on significant problems at school in the past and/or presently. (Continue on back if necessary).

Comment on the school your child is currently attending:

(Please indicate what you like/don't like about the school/class).

Has your child ever repeated or is she/he currently repeating a class?

YES	NO
-----	----

Please specify

When was this first noted?

Is there a spelling problem?

YES	NO
-----	----

Please describe:

When was this first noted?

Is there a writing problem?

YES	NO
-----	----

Please describe:

When was this first noted?

Does your child ever reverse letters or words? (eg, "b" and "d" or "was" and "saw" in reading and spelling)

YES	NO
-----	----

Please describe:

When what this first noted?

Is there a behaviour problem?

YES	NO
-----	----

Please describe:

When what this first noted?

Is your child happy at school?

YES	NO
-----	----

Please describe:

When what this first noted?

Is your child interested in school?

YES	NO
-----	----

Please describe:

When what this first noted?

How does the child get to and back from school?

Who is with the child after school?

Who supervises your child's homework?

Any other comments?

Family Background

Who currently lives with the child at home?

Who currently lives with the child at home?

Has the child lived away from home for any extended length of time?

YES	NO
-----	----

If "YES" please specify:

Siblings – brothers and/or sisters (Please also indicate step siblings if any):

<u>NAME</u>	<u>SEX</u>	<u>AGE</u>	<u>GRADE/STANDARD</u>	<u>SCHOOL</u>

How important is religion/culture in your family? Please comment:

Parent's highest level of education (please tick):

	Completed Primary School	Completed Std. 8	Completed Std. 10	Completed Tertiary studies	Not applicable
Father					
Mother					

Please specify parent's Tertiary Education (eg. College, University, Qualification) where applicable or any relevant school history:

Family history of learning difficulties:

Please mention anything of significance (social/medical/developmental) that could contribute to a learning problem:

Family Background:

Please mention anything else of interest/relevance about your family (eg. achievements, composition, extended family, stressors such as finances, alcohol abuse, etcetera.):

Developmental History

Please state any significant factors in your child's physical and/or emotional development (bed-wetting, nightmares, etcetera)

Birth History:

Please tick appropriate box and comment where appropriate)

		<u>Comments</u>
Was the pregnancy planned?	☐ YES ☐ NO	_____
Was the child premature?	☐ YES ☐ NO	_____
Did you suffer from post-natal depression?	☐ YES ☐ NO	_____
Low birth weight?	☐ YES ☐ NO	_____
Need ventilator after birth?	☐ YES ☐ NO	_____
Anoxic (lack of oxygen)?	☐ YES ☐ NO	_____

Any other details or comments (eg. forceps delivery, Caesarean, etc)?

Post-Natal History:

Please indicate at approximately what age the early motor milestones were achieved. (Indicate if not known, or specify "late" or "early" or "age appropriate" development).

<u>MOTOR MILESTONES</u>	<u>AGE</u>
Sitting	
Crawling	
Walking	
Toilet Training	

<u>LANGUAGE DEVELOPMENT</u>	<u>AGE</u>
First babble	
Speak the first word	
What were they?	
Make sentences?	

Has your child ever shown signs of clumsiness?

YES	NO
-----	----

If "YES" please specify:

Child's characteristics and relationships

Describe your child:

Strengths and/or interests:

Please state the particular strengths and/or interests of your child (eg. sports, hobbies, clubs, reading, arts and crafts, etcetera).

Please describe the child's relationship with his/her parent(s)/guardian(s):

Please describe the child's relationship with her/his sibling(s) (where applicable):

Please comment on the relationship of the parents to each other (where applicable):

Social relationships:

Please indicate how your child gets on with adults (including family and friends).

Please indicate how your child gets on with children and his/her peers (including family and friends)

Please comment on anything else that may be of significance:

Child's Disciplining

Who disciplines the child?

How is discipline handled in the family?

If this effective? Please comment. If not, what would you consider to be more effective in disciplining your child?

What responsibilities/chores does your child carry out in the household?

Is your child given responsibility of handling money (such as pocket money, shopping, etc)?

What are the family rules about television?

Describe your child's bedtime routine:

How does the family spend free/leisure time/holidays together?

Expectations

What has been done about these problems until now?

What do you think should have been done in the past to prevent the problem or to deal with it in the early stages?

How did you come to realise that these corrective steps should have been taken? (eg. you observed the need; you were told by a teacher, a doctor, a psychologist or other professional). Please specify.

You may have given thought to the kind of help that is needed at this time. If so, what do you think would be most helpful?

Briefly state what you expect to accomplish through your consultation with us:

Other than parents, whom can we see to help? (eg. teacher)

Problem is [tick applicable space(s)]:

Academic

☐

Behavioural

☐

Emotional

☐

Motivational

☐

Other—please specify

☐

If Academic:

Reading

☐

Spelling

☐

Mathematics

☐

Writing

☐

Other—please specify

☐

If you have any reports or previous examinations/assessments/interventions, you may attach them to this or bring them to the first appointment, if you feel they will be of help to us. If you require us to obtain any reports, please complete the attached release form.

THANK YOU FOR YOUR CO-OPERATION

APPENDIX D: ETHICAL CLEARANCE LETTER

Faculty of Humanities - Postgraduate

Private Bag 3, Wits 2050, South Africa • Tel: +27 11 717 4002/8 • Fax: +27 11 717 4037 • E-mail: Julie.Poyser@wits.ac.za



Student Number: 0712935Y

MS B WARBURTON
25 Arlington Terrace
12 Rothesay Avenue
CRAIGHALL PARK
2196

23 May 2008

Dear Ms Warburton

FULL CANDIDATURE FOR THE DEGREE OF MASTER OF EDUCATION IN EDUCATIONAL PSYCHOLOGY

I am pleased to be able to advise you that the readers of the Graduate Studies Committee have approved your proposal entitled "*The perceptions of student consultants towards the initial assessment and consultation (IAC) model of assessment*" and you have now been admitted to full candidature. I confirm that Dr Z Amod has been appointed as your supervisor in the department of Psychology.

The research report is normally submitted to the Faculty Office by 15 February, if you have started the beginning of the year, and for mid-year the deadline is 15 August. All students are required to RE-REGISTER at the beginning of each year.

You are required to submit 2 bound copies and 2 unbound copies (loose pages) of your research report to the Faculty Office. The 2 bound copies go to the examiners and are retained by them and the 2 unbound copies are eventually sent to Archives and to the Library.

Please note that should you miss the deadline of 15 February or 15 August you will be required to submit an application for extension of time and register for the research report extension. Any candidate who misses the deadline of 15 February will be charged fees for the research report extension.

Kindly keep us informed of any changes of address during the year.

Yours, sincerely

A handwritten signature in dark ink, appearing to read "Julie Poyser".

Julie Poyser
Postgraduate Division
Faculty of Humanities
Private Bag X3
Wits, 2050
Tel: +27 11 717 4008
Fax: +27 11 717 4037

Note to all MA and PhD candidates who intend graduating shortly: All ETD requirements are to be met at least 4 weeks prior to graduation