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Working Collaboratively to Support Learners who experience Barriers to Learning: Perspectives of Social Workers, Teachers and School-based Support Team members at selected Primary Schools in Tshwane

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Working Collaboratively to Support Learners who experience Barriers to Learning: Perspectives of Social Workers, Teachers and School-based Support Team members at selected Primary Schools in Tshwane

A report on a research project presented to

The Department of Social Work

School of Human and Community Development

Faculty of Humanities

University of the Witwatersrand

In partial fulfilment of the requirements

for the degree Master of Arts in the field of Social Development

by

NKAMOGELENG KGOMOTSO MMALESIBA NTLATLENG

September 2024

Declaration

I, Nkamogeleng Kgomotso Mmalesiba Ntlatleng, hereby declare the research titled "Working Collaboratively to Support Learners who experience Barriers to Learning: Perspectives of Social Workers, Teachers and School-based Support Team members at selected Primary Schools in Tshwane" is my work and that all the sources and quotes utilised have been acknowledged in adherence to referencing conventions.



September 2024

SIGNATURE **DATE**

Dedication

I would like to dedicate this research report to every child inside and outside of the education system who is hoping that someone will one day come to their rescue.

Acknowledgements

I would like to thank the everlasting God, the LORD, Emmanuel (*God with Me*), for clothing me with strength to finish this research project triumphantly.

I wish to show my gratitude to:

My research supervisor, Dr Priscilla Gerrand for working tirelessly to ensure that I produced quality work. She played a tremendous role in sharpening my research skills, and I will forever be grateful for having been placed under her supervision.

My mother and siblings who have always believed in my dreams and have been incredibly supportive in my academic endeavours.

My fiancé, pastor and friends for their unwavering support throughout my research journey.

Bana ba Mmane and *Bana ba Rakgadi* for always believing in their aunt.

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My esteemed participants, Teachers and School-based Support Team members from the Gauteng Department of Basic Education's selected primary schools in Tshwane, School Principals and the District overseeing the respective schools for supporting my research project.

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The Gauteng Department of Social Development's personnel within the School Social Work Programme for your support, the Human Resources department for ensuring that funding for my studies was always administered timeously, the Research department and my former Social Work Supervisors for your support in my research journey.

List of Abbreviations

Abbreviations	Full text
CPD	Continuing Professional Development
CSTL	Care and Support for Teaching and Learning
DBE	Department of Basic Education
DBST	District-Based Support Team
DE	Department of Education
DSD	Department of Social Development
EHWP	Employee Health and Wellness Programme
GDBE	Gauteng Department of Basic Education
GDSD	Gauteng Department of Social Development
HOD	Heads of Department
LSA	Learner Support Agent
MOU	Memorandum of Understanding
NASW	National Association of Social Workers
NCESS	National Committee for Education Support Services
NCSNET	National Commission on Special Needs in Education and Training
SACSSP	South African Council for Social Service Professions
SBST	School-based Support Team
SGB	School Governing Body
SIAS	Screening, Identification, Assessment and Support
SMT	School Management Teams

SNA	Support Needs Assessment
SSWAA	School Social Work Association of America
SUD	Substance Use Disorder
SW	Social Worker
UNICEF	United Nations Children's Fund

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Chapter One

Introduction

Introduction

Many learners in South Africa are faced with various intrinsic, systemic and societal barriers to learning (Department of Basic Education [DBE], 2020). The DBE clearly stipulated that psychosocial support is one of the priority areas to deal with the various intrinsic and extrinsic barriers that learners experience on a primary and secondary school level (DBE, 2020). The DBE provides guidelines in this regard based on their Care and Support for Teaching and Learning (CSTL) Programme as well as the Policy on Screening, Identification, Assessment and Support (SIAS). In this guideline, DBE pointed out that to create a healthy psychosocial learning environment, collaboration with relevant stakeholders is critical in this process (DBE, 2020, p. 7).

Mpya and Marubini (2023), who conducted research focusing on the school environment in South Africa also emphasised that collaboration and partnership among various stakeholders contributes to academic success of learners who experience barriers to learning. Some key stakeholders involved in the process of providing psychosocial support to learners faced with barriers to learning are social workers, members of the school-based support team (SBST) and teachers.

Background

In terms of Section 29 of the Bill of Rights in the South African Constitution, all children have the right to education (Constitution of the Republic of South Africa, 1996). Landsberg et al. (2019, summary) aptly pointed out that the "… main objective of any education system in a democratic society is to provide quality education for all learners; including those with physical,

mental and socio-economic challenges; so that they will be able to reach their full potential and contribute meaningfully to society throughout their lives". However, achieving this objective has been difficult because many learners in South Africa experience barriers to learning. Further, Mavuso (2020) found that some learning barriers are complex and require collaboration to address them.

Hence, the Department of Education [DE] (1997) and the Minister appointed the National Commission on Special Needs in Education and Training (NCSNET) and the National Committee for Education Support Services (NCESS) who debunked the historical belief that there are two distinct types of learners in South Africa. These two types of learners were the majority who have 'normal needs' and the small minority who have 'special needs' and are able to engage in some kind of learning through supportive and specialised interventions. This premise informed the nature and structure of the South African education system prior to 1994. As such, the NCSNET and NCESS were deployed to investigate how the education system can be transformed to ensure that it responds to the multifaceted needs of all learners (DE, 1997).

It is initiatives such as those undertaken by the NCSNET and NCESS that introduced the phenomenon of inclusive education, described by Mpu and Adu (2021, abstract) as "an education system in which all learners are accepted and fully included, educationally and socially".

In 2001, the Cabinet approved the 'Education White Paper 6: Special Needs Education – Building an Inclusive Education and Training System'.

Subsequently, the DE implemented various key strategies to meet all learners' rights to education, particularly vulnerable children. One of the key elements of addressing the main components of an inclusive education system is the National Strategy on SIAS policy which was gazetted in 2014 (DBE, 2014; Kemp, 2014; Matolo & Rambuda, 2022).

The SIAS policy aims to respond to the needs of all learners in South Africa, particularly those who are vulnerable and faced with barriers to learning. The SIAS policy also provides important guidelines regarding the process of inclusion and the provision of psychological and social support to learners faced with barriers to learning.

Research by Joubert and Jacobs (2024) has shown that South African schools are plagued by various psychosocial challenges. Boboyi (2024) found that violence is pronounced within South African schools. Further, Mtumane and Mojapelo (2022) highlighted bullying as another social problem that is rife within school contexts. In addition, Sibise and Mathebula (2023) found that poverty has a negative impact on learners' development and mental health. Moreover, literature has shown that changing family structures such as grandparent-headed households, alternative care families, nuclear families, Mtumane and Mojapelo (2022), and single-parent families, same-sex families and child-headed households (Shokane et al., 2023), have an influence on the manifestation of social ills affecting children, Ndagurwa (2013 as cited in Mtumane & Mojapelo, 2022).

These social ills affecting children are exacerbated by the longstanding effects of the triple challenge of unemployment, poverty and social inequality (Mamokhere, 2019).

A 'Guide for Learner Support Agents and Schools on Providing Psychosocial Support to Learners' was published in 2020 by the DBE. In this publication, the DBE highlighted three main barriers to learning learners face:

Intrinsic barriers: largely affecting the individual child at an intrapersonal level, such as physical, mental and health related problems.

Systemic barriers: involving inadequate infrastructure in schools, inappropriate teaching methods or materials, poorly trained teachers, insufficient support for teachers, and policy and

curriculum issues.

Societal barriers: including severe poverty, unemployment, inadequate care-giving, child labour, violence against children, and HIV and AIDS.

The SIAS policy is expected to be carried out by all schools, in conjunction with external sources of support, including social workers from the Department of Social Development [DSD] (DBE, 2014; Matolo & Rambuda, 2022). However, cooperation and coordination appeared to be a complex and slow process within the two departments (Pretorius, 2020).

The DBE identified ten priority areas of the CSTL. One of the priority areas was to deal with the various barriers to learning by providing learners with *psychosocial support* (DBE, 2020).

Problem statement and Rationale for research

The Departments of Social Work and Education are viewed as complementary. However, the integration of school social workers has been sporadic within the South African educational context (Pretorius, 2020). Measures taken in Gauteng, South Africa to integrate social workers into educational systems involve the joint efforts of the Gauteng Department of Social Development (GDSD) and Gauteng Department of Basic Education (GDBE) who solidified their partnership through a three-year memorandum of understanding (MOU) that was finalised in 2018 (Pretorius, 2020).

Social workers employed by the DSD, teachers, and members of the SBST, who fall under the mandate of the DBE, play an important role in rendering psychosocial support services to learners in need of support. Social workers should work collaboratively with teachers and members of the SBST to ensure that effective psychosocial support services are provided to learners. However, I have observed that these key role players often did not adopt a collaborative

approach. Ideally, multi-disciplinary teams of professionals should work collaboratively to help address barriers to learning and support learners to excel in schools (Mavuso, 2020).

The recognition of the importance of integrating social workers within psychosocial support teams made of professionals from diverse disciplines can be traced back to the brink of democracy in 1994 when policies were developed by the DBE (Kemp, 2014). The National Planning Commission (2011) acknowledged the value of social service professions (including social workers) in understanding and addressing South Africa's challenges within the educational sphere.

They recognised social workers as fundamental role players in delivering psychosocial support services to learners. Social workers play an important role in psychosocial support teams for learners because they have unique knowledge and professional skills (Van Sittert, 2016; Van Sittert & Wilson, 2018). Huxtable, (2022, abstract) pointed out that "school social workers support learners' educational success, especially those marginalised by poverty, oppression, disability, and other personal or social problems".

According to SIAS policy, every public school must have established a SBST (DBE, 2014). One of the primary responsibilities of the SBST is to be involved centrally in identifying 'at-risk' learners and addressing barriers to learning. The core members of the SBST are representatives of the School Management Team (SMT), the SBST coordinator, and representatives from each grade or phase.

However, additional people who can make valuable contributions can be included in the SBST. For example, teachers with specialised skills and knowledge in areas including learning support, life skills, guidance or counselling. If individual support needs are being considered, the learner, his/her parents or caregiver, and the learner's teacher should be included in the meeting

organised by the SBST (DBE, 2014).

Collaborative consultation relies on the complementary expertise of education stakeholders [social workers] who work together to develop a "shared vision, a shared framework, and shared strategies" to achieve learner-centred goals (Cloninger, 2017, p. 20). A key defining aspect of this model is the sharing of knowledge and information across team members to ensure support strategies, including those accommodating the needs of learners with disabilities, are consistent across school, individual therapy and home environments (Vlcek et al., 2020), enabling a holistic and learner-centred approach.

Previous research has shown that collaborative consultation positively impacts learners' educational outcomes. This results in greater acquisition of skills across different environments, learner participation in the classroom, and implementation of reasonable adjustments (Asher & Nichols, 2016).

Research by Pretorius (2020) held a strong view that South Africa has frameworks with the capacity to provide support services in schools through collaborative efforts of social workers providing services to schools, teachers, and key members within SBSTs as identifiers of vulnerable learners according to the SIAS policy (DBE, 2014). Ntseto et al. (2021) recommended the inclusion of social work services in schools because of the incremental role social workers play in addressing social issues (Sibise & Mathebula, 2023).

I am a former Social Worker employed within the area in which my study was conducted. While in practice, I observed that school staff members generally lacked awareness of social workers employed by the GDSD who are rendering social work services at the district level. Therefore, I sought to embark on a research project to explore the perspectives of social workers employed by the GDSD, and teachers and SBST members (employed by the GDBE) regarding

working collaboratively to provide psychosocial support to learners with barriers to learning.

The collaboration of key role players within SIAS policy had not been investigated in detail, particularly those established through the partnership of the GDSD and GDBE within Tshwane primary schools.

Definition of keywords and concepts

I define the following keywords and concepts used in my report:

Screening, Identification, Assessment, and Support

SIAS is defined as a national "policy framework for the standardisation of the procedures to identify, assess and provide programmes for all learners who require additional support to enhance their participation and inclusion in school" (DBE, 2014, p.1).Therefore, SIAS guides the processes of screening and identifying learners presenting with barriers to learning, their assessment and the provision of psychosocial support to promote inclusivity and access to equitable education.

Psychosocial Support

According to the CSTL handbook, psychosocial support is described as "the provision of care and support in response to the emotional, mental, and social needs of learners resulting from traumatic experiences sustained in their lives" (DBE, 2014, pp. 38, 95). Psychosocial support, therefore, responds to the impact of traumatic incidents that infringe on learners' rights, well-being, optimal functioning, and development.

Barriers to Learning

The SIAS policy described barriers to learning as challenges presenting within the school environment, the site where learning occurs, and or within the learner which impedes learning

and development (DBE, 2014). Within my study's context, barriers to learning referred to factors that hamper the learning process.

Collaboration

Collaboration is defined as a relationship that is mutually beneficial and well-defined which is entered into by two or more organisations to achieve goals common to both parties (Mattessich & Johnson, 2018). These authors maintained that such a collaborative relationship is characterised by commitment towards the mutual relationship and collaborative goals, a joint structure developed in consultation with each other and shared accountability; and shared authority for success and sharing of rewards and resources (Mattessich & Johnson, 2018). In the context of this study, collaboration referred to the relationship made up of teachers and SBST members as well as the integration of social workers as part of the school's support system (Hess, 2020).

Social Workers

Internationally, particularly in the United States, school social workers are described as professionals who address mental health and behavioural problems, provide support in positive behaviour, classroom, and academic terrains, and offer consultation and counselling services (School Social Work Association of America [SSWAA], 2017).

The National Association of Social Workers (NASW) Standards for Social Work indicated that school social workers play an active role in school settings to meet expectations of national and local mandates to promote equal learning opportunity, social justice, and the eradication of barriers to learning (NASW, 2012).

Within my study, the term 'social workers' referred to social workers who are DSD-employed, stationed at the Tshwane district offices of the DBE and render psychosocial support

to schools (Kemp, 2014; Pretorius, 2020).

At the district level, they provided direct social work services to either learners, their parents or caregivers, and school personnel including teachers, SBSTs and School Governing Bodies [SGB] (Vergottini & Weyers, 2020).

School-based Support Teams

SIAS policy referred to SBSTs as groups formed by schools. SBSTs play a supportive function within the school system by implementing organised support systems for learners, teachers, and the school. SBSTs are developed under the auspices of school principals or their 'designates' (DBE, 2020, p.1), known as SBST coordinators.

The SIAS policy likened SBSTs to "institution-level support teams" (DBE, 2014). This means that these support teams were responsible for identifying vulnerable learners at school, addressing learning barriers, and providing supportive interventions (DBE, 2020).

Teachers

According to DBE, teachers can be seen as individuals "… playing a significant role in the upliftment and transformation of our society, particularly in school settings. They bear the weight and responsibility of teaching and are the main source of knowledge and values for children in schools" (DBE, 2014). Thus, teachers play a fundamental role in shaping learners' cognitive development and moral standards.

Within my study, teachers' responsibilities included implementing the SIAS policy (DBE, 2014; Matolo & Rambuda, 2022). This means that teachers that participated in this study assumed the role of a case manager, providing support to learners after they have been identified to be presenting with learning barriers (DBE, 2014; Matolo & Rambuda, 2022).

Primary Schools

Primary schools constitute the first phase of the South African education system. The primary school phase is characterised by law with the premise that children should spend one year in Grade R/0, which is currently part of the primary schooling system. Afterwards, children should reach Grade 1 by age seven, and spend eight years in primary school, which ends in Grade 7 (Statistics South Africa, 2017). In my study, primary schools referred to schools admitting children from Grade R/0 to Grade 7 and are based in Tshwane.

Learner

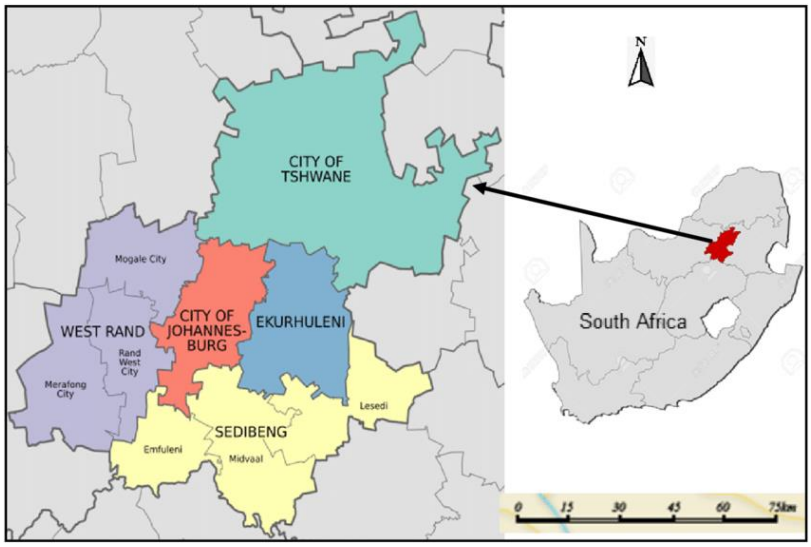
According to the South African Schools Act (No. 84 of 1996) a learner is defined as "any person receiving education or obligated to receive education in terms of this Act". In my study, the term 'learner' was used interchangeably with the terms 'child' and 'student'.

Tshwane

Tshwane is a city in the Gauteng Province in South Africa where my study was conducted. "Tshwane stretches almost 121 km from east to west and 108 km from north to south, making it the third-largest city in the world. It also makes up more than 30% of Gauteng, which is 19 055 km² in extent" (City of Tshwane, 2024). Therefore, my study's physical boundaries were within the City of Tshwane. Figure 1 below indicates the location of the study.

Figure 1

Location of study



(Nhamo et al., 2021)

Aim and Objectives

The main aim of the study

The study aimed to explore the perspectives of social workers, SBST members and teachers regarding working collaboratively to provide psychosocial support to learners who experience barriers to learning in selected Tshwane primary schools.

Objectives of the study

The following objectives were pursued to meet the aim of the study:

1. To explore social workers', SBST members' and teachers' knowledge of SIAS policy and how it should be implemented in primary schools.
2. To explore the perspectives of social workers, SBST members and teachers concerning factors that hamper the provision of psychosocial support to learners with barriers to learning.

3. To probe the perspectives of social workers, SBST members and teachers regarding factors that can enhance providing psychosocial support to learners with barriers to learning.
4. To explore and describe what social workers, SBST members, and teachers think should be done to facilitate a collaborative approach to provide psychosocial support to learners who experience barriers to learning.

Overview of Research Methodology

In my study, I adopted a qualitative approach because I focused on gaining an in-depth understanding of the perspectives of social workers, SBST members, and teachers concerning working collaboratively to provide psychosocial support to learners experiencing barriers to learning.

I selected an intrinsic case study research design because it was a qualitative research design with which I could obtain in-depth data regarding a phenomenon being researched.

I purposively selected a sample consisting of DSD-employed social workers providing psychosocial support to selected primary schools in Tshwane, and SBST members and teachers facilitating teaching and learning processes in selected primary schools in Tshwane.

I gathered data from participants using personal semi-structured interviews and online interviews when necessary. I also used interview guides to help me cover relevant issues directly related to the aim and objectives of my study.

Limitations and Delimitations

Challenges experienced with online interviews entailed network connectivity issues because of load-shedding. In some instances, critical information being shared by the participants was not recorded. To avoid disrupting the flow of the interview, I made notes of the questions

and issues I overlooked and asked for clarity at the end of the participant's responses, or in some cases, when summarising the participants' views for clarity.

The interview guides were written in English although it was not the home language for most participants. However, I invited them to respond in their home languages (usually Setswana or Sesotho) if feeling the need to do so. Also, if they did not fully understand the questions I asked them, I provided clarity for them in their home language. In instances where no challenges were experienced, to maintain flow during the interview, I used both Setswana and English during the interview. This enabled me to obtain in-depth information by removing language barriers as I noted during interviews that some words are best described in one's mother tongue.

My heightened self-awareness and self-management skills assisted me in taking caution against biases that stemmed from pre-existing relationships with school staff and social workers, in general, owing to the nature of my former work as a social worker who worked in the same area where I conducted the research.

Although I had been exposed to some of the views within the area of inquiry from general engagements during work, this was advantageous in that the participants felt that they were being heard and that there was someone who understood their views. I tried to listen to responses objectively rather than highlighting my perspective or reinforcing their points of view.

Sometimes the inability to generalise findings from a qualitative research study is regarded as a limitation. However, this is not the purpose of research adopting a qualitative approach. Instead, I tried to enhance the trustworthiness of the study.

This study's strict selection criteria and potential participants' work demands meant that potential participants were not readily available, which led to a small sample size.

Structure of the Research Report

This research report is divided into five chapters, following the sequence below:

In **Chapter 1**, I introduce the reader to the study by providing an overview of the type of barriers to learning many learners face, and their need for psychosocial support in terms of SIAS policy. I present my rationale for conducting the study based on existing problem circumstances. I also emphasise the need to integrate social workers into the school-based support system because social workers are key role players in providing psychosocial support in school settings. I define important words and concepts for readers so they can specifically understand what they mean. The aim and objectives of the study are outlined, as well as my research methods. Finally, I set out the limitations and delimitations of the study.

Chapter 2 sets out the theoretical framework that underpin my study, namely the model for interdisciplinary collaboration designed by Bronstein (2003). It also provides a comprehensive literature review of information relevant to my research. For example, I contextualise learning barriers, the purpose and position of SIAS policy, and associated SIAS phases that guide SIAS implementers in addressing barriers to learning. Further, I provide an overview of school social work from global and local perspectives. In addition, I focus on the roles of SIAS policy implementers at a grassroots level including social workers, teachers and SBST members. Finally, the South African Constitution, Children's Act 38 of 2005 (as amended), and the CSTL legislative framework from which SIAS policy was founded are discussed.

Chapter 3 describes the research methodology in detail. Important information I cover include: the research paradigm underpinning my study, the research approach and design I adopted, my sample of participants, as well as the method of data collection and analysis. The

four paradigms of trustworthiness, namely credibility, transferability, dependability, and confirmability, are delineated. I also focus on ethical issues I took into consideration when conducting this research. At the end of the chapter, I explain what ethical principles I put into practice when I conducted the study.

In **Chapter 4** I summarise the profiles of each research participant and then present my findings based on a thematic analysis process. I also provide a critical discussion of each theme that emerged from the analysis process.

Chapter 5 is the final chapter of my research report. In this chapter, I summarise my research findings, the conclusions I reached, and the recommendations I made based on my research findings.

Chapter Two

Theoretical Framework and Literature Review

Introduction

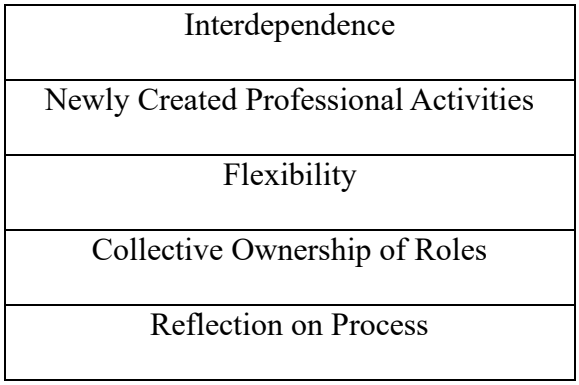
Van der Waldt (2024) indicated that theoretical frameworks are important for deepening understanding of human behaviour and society, as well as the complexities and dynamic nature thereof. The author further stated that theoretical frameworks provide social science researchers with a structured lens through which they can make meaning of the complex and multifaceted social phenomenon. In this chapter, I discuss Bronstein's (2003) model for interdisciplinary collaboration as the theoretical framework that underpinned this study. I then cover relevant literature to bring about a good understanding of the topic I researched and also acknowledge and give credit to previous research (Chilisa, 2020).

Theoretical Framework

The theoretical framework that underpinned my study is the model for interdisciplinary collaboration designed by Bronstein (2003). Bronstein (2003) stated that her rationale for developing an interdisciplinary collaboration model is that although social workers have worked with colleagues from other disciplines from the outset of the profession, they were without a clear model to guide interdisciplinary work. This researcher based her model on reviewing multi-disciplinary theoretical literature, and social work research and concepts to support the development of her model. Figure 2 below reflects the main components of Bronstein's (2003) model.

Figure 2

Model of Interdisciplinary Collaboration



Bronstein (2003) based the design of her model on four theories, namely, a multidisciplinary theory of collaboration, services integration, role theory, and ecological systems theory. In my study, I focused on the disciplines of social work and teaching, or more specifically I researched the nature of the collaboration between teachers on a primary school level who are supported by members of the SBST, and social workers in respect of managing problems concerning learners who are experiencing barriers to learning.

Bronstein (2003) indicated that the component '*interdependence*' refers to the occurrence of and reliance on interactions among professionals whereby each is dependent on the other to accomplish his or her goals and tasks. To function interdependently, professionals must have a clear understanding of the distinction between their own and their collaborating professionals' role and use them appropriately. Characteristics of interdependence include formal and informal time spent together, oral and written communication among professional colleagues, and respect for colleagues' professional opinions and input.

To effectively meet the needs of a child experiencing learning barriers related to problems inside and outside the school context, teachers, SBST members, and social workers need to adopt

an interdependent approach. Patel (2015) asserted how complex challenges that learners experience are addressed is dependent upon integrated service delivery. In the case of my research study, to implement the SIAS policy effectively to ensure that learners with barriers to learning receive psychosocial support, social workers, SBST members and teachers needed to be mindful that they share the same goals. As such, to reach these goals, they needed to work together. Of course, all goals needed to focus on the best interests of the child concerned.

According to a study by Sitshange (2014), the literature supported the idea that failure to communicate essential information among partners hampers collaboration, and that diminished trust, lack of tangible results, conflicting goals and lack of leadership capabilities are stumbling blocks of effective collaborative efforts. However, the presence of a cross-section among partners enhances collaboration.

A second factor that facilitated interdisciplinary collaboration is *newly created professional activities.* Bronstein (2003, p. 300) explained that newly created professional activities refer to collaborative acts, programmes, and structures that can achieve more than could be achieved by the same professionals acting independently. These activities maximise the expertise of each collaborator.

When commencing this study, I was not aware of any existing programmes in this regard and assumed that the implementation of SIAS policy could encourage the creation of meaningful opportunities and structures to facilitate collaboration.

A third factor affecting interdisciplinary collaboration is *flexibility.* Bronstein (2003) stated that flexibility includes reaching productive compromises in the face of disagreement. In terms of my study, I anticipated flexibility coming into play because all participants were role players in meeting the needs of the child and sometimes these services could overlap.

A fourth factor that facilitates interdisciplinary collaboration is *collective ownership of roles.* Bronstein (2003, p. 301) pointed out that collective ownership of roles refers to shared responsibility in the entire process of reaching goals, including joint design, definition, development, and achievement of goals. This includes a commitment to client-centred (in my study also referred to as child-centred) care whereby professionals from different disciplines, and clients and their families were all active in the process. They need to openly share their knowledge, skills and experiences when they strive for collaboration.

Finally, the fifth factor has to do with *reflection on the process*. Bronstein (2003, p.302) explained that the "reflection on process refers to collaborators' attention to their process of working together. These include collaborators thinking and talking about their working relationship and process and incorporating feedback to strengthen collaboration".

The main focus of this study was on the collaboration between key role players that support learners experiencing barriers to learning, namely, teachers, members of the SBST and social workers. The chosen theoretical framework was the most suitable because collaboration is fundamental in addressing barriers to learning (Adelman & Taylor, 2017). Mavuso (2020) found that some learning barriers are complex and require collaboration to address them. The chosen theoretical framework also provided a guideline concerning the steps needed to be followed regarding how successful collaboration can be achieved.

Literature Review

In this section of the chapter, I provide a description and summary of the works pertinent to the phenomenon I researched. Based on a rigorous literature review, I have categorised literature under headings and evaluated the contributions previous researchers have made to the topic I

explored. Although I highlighted relevant research literature on an international and regional basis, my main focus was on South Africa.

Contextualisation and Conceptualisation of Barriers to Learning

For a broad understanding of interdisciplinary collaboration, this section of the literature review contextualises and conceptualises barriers to learning by providing global, regional and local views of barriers to learning with reference to the United States, Uganda and South Africa, briefly describing the key population affected by barriers to learning. Thereafter, a definition of vulnerability is explored.

An international viewpoint sets the tone for viewing barriers to learning within the context of my study. Adelman and Taylor (2017, p. 6) opined that "another way to discuss why children have problems at school is to think in terms of barriers to learning". The authors further stated that this view attributes the causes of human behaviour to external factors rather than internal factors. Adelman and Taylor (2017) found that barriers can be instigated by three factors, the environment, person, and interactions and transaction between the person and environment. Examples of each of the factors are elaborated as follows:

> Environmental factors include:
>
> Prolonged periods in impoverished environments; deprivation of learning opportunities at home or school such as lack of play and practice situations and poor instruction; inadequate diet; overly demanding home, school, or work experiences, such as overwhelming pressure to achieve and contradictory expectations; overcrowding; medical practices, especially at birth, leading to physiological impairment; contaminated environments; conflict in home, school, workplace; faulty child-rearing practices, such as long-standing abuse and rejection; dysfunctional family; migratory family; language used is a second language; social prejudices related to race, sex, age, physical characteristics, and behaviour (Adelman & Taylor, 2017, p.7).

Person factors include:

> …Illness affecting brain or sensory functioning; genes which limit, slow down, or lead to any atypical development, lack of knowledge or skills such as basic cognitive strategies; lack of ability to cope effectively with emotions, such as low self-esteem; visual, auditory, or motoric deficits; excessive or reduced sensitivity to stimuli; easily fatigued; factors such as race, sex, age, or unusual appearance that produce stereotypical responses; performance problems, such as excessive performance errors; high or low levels of activity (Adelman & Taylor, 2017, p.7).

Factors including interactions and transactions between the environment and person involve:

> Person with extremely slow development in a highly demanding environment-all of which simultaneously and equally instigate the problem; person with minimal disorders in auditory perceptual ability trying to do auditory-loaded tasks; very active person forced into situations at home, school, or work that do not tolerate this level of activity, person is in the minority racially or culturally and is not participating in many social activities because he or she thinks others may be unreceptive (Adelman & Taylor, 2017, p.7).

In Africa, Uganda specifically, Hattie (2009 as cited in Hungi et al., 2017) found that there are five factors that contribute to barriers to learning among Grade 6 primary school learners. The five factors include: learner, home, school, curricula, teacher, and teaching approach. According to Hungi et al. (2017), the first two factors, learner and home are classified as learning barriers experienced on an individual-level, while the rest of the factors, school, curricula, teacher, and teaching approach are classified as barriers experienced on a school-level.

In South Africa, the DSD's Service Delivery Model maintained that children under the age of 18 years who are exposed to abuse, neglect, orphaned and or are deemed to be living in difficult conditions are classified amongst vulnerable populations (DSD, 2005).

DBE's conceptual framework for CSTL defined a vulnerable child as a child whose survival, care, protection, or development may be compromised due to a particular situation or circumstance such as exposure to violence and other adverse life conditions or physiological or psychological conditions, which prevent the fulfilment of their rights (DBE, 2024).

In addition, Louw and Louw (2014) stated that there is a strong connection between academic performance and socio-economic factors. As such, children who are exposed to poverty, living with someone who was either living with a disability, injury, HIV/AIDS or an illness or susceptible to violence and abuse at home or school are said to be vulnerable. Other factors that constitute a state of vulnerability are poor access to services and poor infrastructures at schools, such as deficiencies in the supply of water and sanitation, and inadequate classrooms (DBE, 2014). The CSTL framework further stated that vulnerability is not constant; it changes as the child's circumstances change and no child is immune to potential vulnerability.

Children may be considered vulnerable when they:

> Have no surviving parent or alternate caregiver to care for him/her; Live in a child-headed household; Live in households with many children who are orphaned/abandoned and often experience increased poverty as a result; Live with a parent or primary caregiver who is terminally ill, especially when the child may be the main caregiver for the terminally ill person; Live with adults and/or youth who are addicted to alcohol and/or drugs and affecting the children; Experience domestic violence and/or bullying in school or the community; Experience treatment that is harmful to their emotional, physical or mental wellbeing (this includes punishment, violent behaviour, and labour/heavy chores that are not appropriate for their age); Are chronically and/or terminally ill and have no adult to support them with their treatment; Have a mental and/or physical disability; When their safety is threatened (DBE, n.d., p.1).

The views captured in the CSTL programme maintained that children who are traumatically exposed are susceptible to withdrawal, depression and behavioural issues which frequently lead to chronic absenteeism and poor academic performance. This will, therefore, have an impact on their learning and general growth (DBE, 2014).

Researchers maintained that there are still a lot of school-going children who live in abject poverty, and orphaned children who are in need of care and protection reported to be residing in youth-headed households, DBE (2014, as cited in Vergottini & Weyers, 2020). Children remain susceptible to "social problems such as violence, alcoholism and drug use, different types of abuse and rejection, as well as issues such as teenage pregnancy and living with step-, single or foster-parents" (Van Wyk, 1989 as cited in Vergottini & Weyers, 2020). As a result, learners' developmental processes and daily functioning are impeded because of social issues they find themselves in.

As such, SIAS policy identifies the following factors to be attributive to barriers to learning:

> Socio-economic aspects (such as lack of access to basic services, poverty and under-development); factors that place learners at risk, for example, physical, emotional, and sexual abuse, political violence, HIV and AIDS and other chronic health conditions; inflexible curriculum implementation at schools; language and communication; inaccessible and unsafe structural environments; inappropriate and inadequate provision of support services; lack of parental recognition and involvement; disability; lack of human resource development strategies; unavailability of accessible learning and teaching support materials and assistive technology (DBE, 2014, p.6).

These various factors conscientises us of the need to eradicate barriers to learning from a collaborative approach. If SIAS policy is to be implemented effectively, the relevant role players

such as social workers, SBST members and teachers will need to collaborate.

Overview of School Social Work

Global Perspective

The importance of social workers in schools has been acknowledged for a long time within global contexts (Sittert & Wilson, 2018). In America, school social workers are appointed to address barriers to learning created by insufficient health care, violence in neighbourhoods, and poverty. Support services focus on vulnerable groups at risk of absenteeism and school drop-out, and cases such as those of homelessness, foster care, migration, children affiliated with the juvenile justice system, children exposed to domestic violence or facilitation of the integration of children from rehabilitation centres into the school system vice versa (SSWAA, 2017).

Local Perspective

This sub-section provides a brief overview of school social workers deployed by provincial departments of the South African basic education as delegated by the national DBE. I also focus on Vergottini and Weyers' (2020) discussion of the collaboration that has been cultivated between the GDBE and GDSD.

Nationally, school social workers are employed under various legislative and policy frameworks such as the Public Service Act 103 of 1994, where school social workers are placed in special schools. Some school social workers are employed under the Employment of Educators Act 76 of 1998, and they are based at district offices. In some provinces, there are school social workers whose presence is qualified by mainstream and special schools. Most of these school social workers' jobs are covered under the Basic Conditions Act of 1997 (Vergottini & Weyers, 2020).

By 2017, 430 school social workers were employed within provincial education

departments of the Western Cape, Free State, Kwa-Zulu Natal, Limpopo, and Gauteng provinces in South Africa (Vergottini & Weyers, 2020, as cited in Kemp, 2014; NACOSSWEP, 2015; SACSSP, 2017; Vergottini, 2019). Priorities of the GDSD, "inter alia; accelerated social protection interventions to improve educational outcomes" acknowledged school social work as one of their vehicles for change (Gauteng Provincial Government, 2024, p.33).

According to GDSD's Annual Performance Plan 2022-2023, a MOU on school social work was signed by GDSD and GDBE. Its purpose was to identify at-risk children or children who present with barriers to learning (Gauteng Provincial Government, 2024; Madella, 2021; Pretorius, 2020).

The National Strategy for SIAS acknowledged the role that social workers play within SIAS implementation:

> DSD services include social workers working within local communities and providing support to families and communities. In the case of children with disabilities, Care Dependency Grants are allocated through the DSD. These allocations are made after a medical examination to determine the level of intensity of the support needed with the financial status of the family. Other social welfare grants are available to families affected by unemployment and poverty (National Strategy for SIAS, 2008).

Nationally, several milestones that build up to efforts directed at the formalisation of school social work in South Africa have been achieved. As such, the significance of school social work in fostering learner development and conducive learning environments through early identification and supportive interventions that address psychosocial barriers is acknowledged, and the employment of school social workers has steadily gained momentum (Vergottini & Weyers, 2020).

As in the context of this study, social work services to schools can be provided at a district level where school social workers render psychosocial support to learners identified to be experiencing barriers to learning, their caregivers and parents, and school-support teams such as SBSTs, SGBs and SMTs.

Within the South African context, the SIAS policy, and legislative framework undergirding this study was developed in 2014 (DBE, 2014). According to Inclusive Education South Africa (2019), the policy aimed to enhance the quality of life of learners with barriers to learning, in mainstream and special schools alike. Barriers that make children susceptible to vulnerabilities include family-based disruptions, language challenges, and the effects of poverty, learning challenges, disability, overcrowding, and inflexible educational curricula. As such, based on the barriers outlined above, social workers from the DSD providing services to schools have been deployed in the Tshwane district to intervene at the micro, meso, and macro levels using a variety of social work methods and approaches to bring about change (Pretorius, 2020).

South Africa has made great strides in the employment of school social workers through efforts of some of the basic education's provincial sectors. However, there is a paucity of research that seeks to explore collaboration, especially among social workers deployed by DSD who provide services to schools. Research indicated that SIAS policy is not being integrated effectively by teachers in primary and secondary schools (Matolo & Rambuda, 2022). As such, this study needed to investigate how the policy is being implemented in primary schools to promote psychosocial support, especially in this study's unique case of collaboration between the GDBE and GDSD.

Phases of SIAS Policy

The SIAS policy was adopted in 2014, DBE (2014), and acts as a build-up on the CSTL programme. The SIAS policy's favourable character is that it sets out strategic processes and procedures to be undertaken to facilitate the provision of psychosocial services within an integrated approach in a comprehensive manner. The SIAS policy encompasses the following four phases of screening, identification, assessment, and support, DBE (2014, pp.24-26) in ensuring that psychosocial services are rendered to learners with barriers to learning.

This sub-section discusses the phases within the SIAS policy, namely, the screening, identification, assessment, and support of learners presenting with barriers to learning and development issues. These phases are interdependent processes, carried out by teachers, SBST members and District-based Support Team (DBST) members uniquely and successively.

Screening Phase

The SIAS policy maintained that this phase is characterised by the screening of all learners upon admission and at the commencement of each school phase by teachers. Matolo and Rambuda (2022) defined screening as a method for scanning for the existence or non-existence of a barrier to learning. This is where information is captured and updated in the learner profile form which is used as a tool to facilitate screening processes (DBE, 2014; Matolo & Rambuda, 2022).

Identification Phase

The identification phase is informed by the previous screening process where during screening, teachers identify vulnerable or at-risk learners. Matolo and Rambuda (2022) suggested that the term 'identify' as a doing word denotes the pinpointing of a learning barrier that impedes effective learning from taking place. Following the identification of learning

barriers, teachers are to facilitate helping processes to support the identified learners. Moreover, teachers also have the responsibility of liaising with parents of the identified learners to devise individual support plans with the assistance of the Support Needs Assessment [SNA]1 form (DBE, 2008; DBE, 2014; Matolo & Rambuda, 2022). The identification phase is also characterised by an element of support from teachers at a grassroots level as teachers need to develop a plan to support learners to remedy the identified barriers.

Thus, this study needed to explore views of teachers as key role players in the SIAS implementation, particularly in the second phase of identification as it is a determinant of whether a learner receives care and support owing to early identification of a learning barrier or if the learner falls through the cracks and remains susceptible to vulnerability.

Assessment Phase

The assessment phase is not limited to the examination of a learner's mastery of the curriculum; however, assessments are undertaken by teachers, the school, and or the school system to evaluate the intensity of the learning barrier. In instances where a teacher's intervention strategy yields no results, the case is escalated to the SBST which revises the intervention plan and makes an informed decision to implement further intervention plans using in-house resources. In providing care and support, a direct referral can be made by the SBST members to safeguard and ensure the security of learners (DBE, 2014). As such, the SIAS policy recognised social workers as professionals who have the capacity to "address the issues of child rights, safety and protection" (DBE, 2014, p.31).

This might mean that there are limits to the implementation of intervention strategies developed by teachers and SBST members as it is social workers who have statutory powers to address cases of child neglect, abandonment, and abuse.

Support Phase

If in-house solutions of SBST members prove ineffective, cases of learners with barriers to learning are referred to DBST members, signifying the support phase of the SIAS policy undertaken by teachers, SBST members, external resources of support or multi-disciplinary team members and DBST members. To what degree these role players get involved in the provision of care and support to vulnerable learners is dependent on the intensity of learning barriers. The process undertaken by SBST members to escalate the matter of learners experiencing barriers to learning not solved at the school level is reported to be guided by SNA2 form (DBE, 2014).

At this point, further support of learners who present with barriers to learning is overseen by DBST members.

Role Players Providing Psychosocial Support to Learners with Barriers to Learning

This sub-section of the report aims to provide a brief outline of role players expected to promote the screening, identification, assessment, care and support of learners with learning barriers as highlighted by the SIAS policy. Only role players instrumental in implementing SIAS policy applicable to the study are discussed granularly.

The following role players are mandated to implement the SIAS policy to ensure effective screening, identification, assessment, and support of learners presenting with learning barriers.

The Role of SBSTs

According to the CSTL programme, "coordination of implementation of care and support activities in the ten priority action areas remain the responsibility of the SBSTs" (DBE, 2014, p.75). In addition, Tsotetsi and Omodan (2020) stated that teachers in rural schools carry the brunt of establishing SBSTs which proves fruitless owing to incompetencies.

The SIAS policy maintained that SBSTs are responsible for the "identification of at-risk

learners and addressing barriers to learning" with in-house resources before help is sought externally. In addition, SBST members are mandated to "identify barriers to learning and school needs at teacher, learner and curriculum levels" (DBE, 2014, p. 28). As such, the assumption is that SBST members are eligible to report on teacher, learner, and curriculum related needs.

The Role of Social Workers

According to Vergottini and Weyers (2020), the National Committee for School Social Work Education and Practice positioned social workers at a district level where their role entails providing supportive interventions on a school level, and to parents alike. In support, S. Madella (personal communication, March 4-6, 2020) asserted that social workers are mandated to provide psychosocial support services in schools to promote a conducive and safe environment for learners with barriers to learning to enhance their well-being. In other words, improving their learning environment. The basket of services rendered by social workers emphasises the need to address the socio-economic, cultural, health and academic spheres. Issues addressed by social workers include behavioural problems, teenage pregnancy, child-headed households, substance abuse, child abuse and neglect, poverty, mental health, and crime prevention amongst others.

In Tshwane, the city within which the study took place, 30 social workers providing services to schools have been absorbed since the MOU between GDBE and GDSD came into effect in 2018 (S. Madella, personal communication, March 4-6, 2020). Since early 2022, 31 social workers providing services to schools in Tshwane District are noted (F. Moatshe, personal communication, February 18, 2022).

The Role of Teachers

The SIAS policy was established to enhance access to education and promote the phenomenon of transformative and inclusive education. Therefore, the process of inclusive

education is expected to be enhanced and sustained by teachers. It is reported that vulnerable learners' access to education can be promoted when teachers are knowledgeable about barriers to learning (DBE, 2014). However, there seemed to be a lack of knowledge and understanding in the identification of learners with barriers to learning owing to a deficiency in training received by teachers in the SIAS policy implementation (Ntseto et al., 2021), and generally, the implementation of the SIAS policy by teachers (Matolo & Rambuda, 2022).

Supporting Legislative Frameworks and Policies

The following legislative and policy frameworks echo the need to safeguard children and promote access to services. These services are aimed at enhancing their social functioning and well-being and providing support strategies that promote inclusivity.

The South African Constitution

One of the pertinent legislations that marked the dawn of democratic transformation for South Africa is the Bill of Rights in Chapter 2 of the South African Constitution where the rights of children are outlined and should be promoted by every social service provider who renders services to children. The Constitution insists that every child has the right to belong to a family system, parental care or alternative placement when removed from their own family. Every child has the right to housing, key nutrition, and access to social and health services.

Moreover, children have the right to be safeguarded from neglect, maltreatment, exposure to abuse and poverty, and to be protected from labour practices that exploit them. Further, children have the right not to be subjected to inappropriate working conditions or conditions that violate their physical, mental, educational, spiritual, moral or social development well-being; not be detained, if so as a last resort or for a shortened time, separately from people above 18 years and treated properly. Moreover, children have the right to be allocated a legal practitioner

representative in civil proceedings, the right to be protected from armed conflict, and for the best interest principle to be applied in dealing with children (Constitution of the Republic of South Africa, 1996).

At various intervals within the SIAS policy, teachers, SBSTs, and social workers have the responsibility to safeguard children's rights and provide support that addresses situations that violate these rights.

The Children's Act 38 of 2005 (as amended)

The South African Children's Act 38 of 2005 (as amended) forms the basis from which social workers render protective services to children in South Africa. Section 150 of the said Act depicts conditions that warrant children as vulnerable and in need of protection:

> Has been abandoned or orphaned and does not have the ability to support himself or herself and such inability is readily apparent; Displays behaviour which cannot be controlled by the child's parent or caregiver; Lives in or works on the streets or begs for a living; Is addicted to a dependence-producing substance and is without any support to obtain treatment for such dependency; Lives in or is exposed to circumstances which may seriously harm that child's physical, mental or social well-being; May be at risk if returned to the custody of the parent, guardian or caregiver of the child as there is reason to believe that he or she will live in or be exposed to circumstances which may seriously harm their physical, mental or social well-being; In a state of physical or mental neglect, or Is being maltreated, abused, deliberately neglected or degraded by a parent, a caregiver, a person who has parental responsibilities and rights or a family member of the child or by a person under whose control the child is, as outlined in the Children's Act 38 of 2005 (Republic of South Africa, 2018).

The above encompasses some of the markers within the South African Children's Act that conscientises us to vulnerabilities that contribute to barriers to learning which teachers, SBST

teams and schools can address with the support of social workers.

Care and Support for Teaching and Learning Programme

The CSTL programme, asserted that it is impossible to address learners' barriers to learning without acknowledging the phenomenon of psychosocial support which is reported to be a relatively new concept within schooling systems (DBE, 2014). Thus, in 2014, psychosocial support was identified among the 10 Priority Action Areas in the CSTL programme implementation given that "the provision of care and support in response to the emotional, mental, and social needs of learners and educators was necessary for creating safe and supportive learning environments" (DBE, 2014).

The Priority Action Area in the CSTL Programme indicated that "… the coordination of implementation of the care and support activities in the 10 Priority Action Areas remains the responsibility of the SBST" (DBE, 2014).

Summary

In this chapter, the concepts, theoretical framework and literature review were introduced and defined. This was followed by a comprehensive discussion of the model of interdisciplinary collaboration as a theoretical framework that underpinned this study and its five main components of interdependence, newly created professional activities, flexibility, collective ownership of roles, and reflection on process. Thereafter, I provided an in-depth review of works pertinent to my study. The literature was categorised under headings, namely, contextualisation and conceptualisation of barriers to learning, an overview of school social work informed by global and local perspectives. Furthermore, the four phases (screening, identification, assessment and support) of the SIAS policy were each thoroughly discussed, as well as the role players (including SBST members, social workers and teachers) providing psychosocial support to

learners with barriers to learning. In addition, relevant supportive legislative frameworks and policies that promote the safety and well-being of children have been discussed in detail.

Chapter Three

Research Methodology

Introduction

This chapter describes the research process and the study's methodological underpinnings. The matters covered include the aims and objectives of my study, the recruitment and sampling process, the tool used to gather data and why it was pre-tested. I also discuss the data analysis procedure. Further, the steps I took to enhance the trustworthiness of this study, and the ethical issues I took into consideration are covered. Fouché and Schurink (2011) stressed the importance of ensuring compatibility between the research questions, design, and methods, which my study achieved.

Main Research Question, Aim and Objectives

This study sought to answer the following research question: "What are the perspectives of social workers, SBST members and teachers regarding working collaboratively to provide psychosocial support to learners who experience barriers to learning in selected Tshwane primary schools?". Based on this research question, the main aim of the study was to:

Explore the perspectives of social workers, SBST members and teachers regarding working collaboratively to provide psychosocial support to learners who experience barriers to learning in selected Tshwane primary schools.

The objectives of the study were as follows:

- To explore social workers', SBST members' and teachers' knowledge of SIAS policy and how it should be implemented in primary schools.
- To explore the perspectives of social workers, SBST members and teachers regarding factors hampering the provision of psychosocial support to learners with barriers to

learning.

- To probe the perspectives of social workers, SBST members and teachers regarding factors that can enhance the provision of psychosocial support to learners with barriers to learning.
- To explore and describe what social workers, SBST members and teachers think should be done to facilitate a collaborative approach to provide psychosocial support to learners who experience barriers to learning.

Research Paradigm and Approach

This study adopted an interpretivist paradigm to understand the subjective world of experiences of social workers, SBST members and teachers regarding collaboration of their services to ensure that effective psychosocial support was provided to learners with barriers to learning. The interpretivist paradigm is characterised by individualised experiences of participants about a phenomenon. Interpretivism assumed that reality was subjective, multiple and socially constructed. In other words, Interpretivists assumed that access to reality happened through social constructions such as language, consciousness, shared meanings, and instruments (Myers, 2008).

Based on the main aim of my study, I chose a qualitative research approach, grounded in the premise that my investigation sought to obtain an in-depth understanding of real-world prodigies (Chalmers & Cowdell, 2021). Complementing the views of Babbie (2021), Fouché and Schurink (2011) suggested that qualitative enquiries are characteristic of rich and detailed information and enable the researcher to craft interpretations from the participants' viewpoints.

Despite the disadvantage of low credibility to findings that emanate from a qualitative investigation (Chilisa, 2020), qualitative approaches are advantageous for many reasons.

Leedy and Ormrod (2013) asserted that the use of qualitative enquiry enabled me to answer the research question that my study aimed to achieve regarding the complex nature of collaboration among social workers, teachers and SBST members in addressing barriers experienced by learners in school settings. In addition, using a qualitative approach enabled me to understand and describe the phenomenon from the participants' point of view (Leedy & Ormrod, 2013). Adopting a qualitative approach to my study allowed me to gain insight into the meaning participants attached to their experiences of working collaboratively with each other to address barriers to learning experienced by learners in the school environment (Fouché, 2021). The use of qualitative approach ensured that diverse perceptions, meanings and experiences were accommodated, and that direct engagement with participants was maintained (Rahman, 2017).

Further, Fouché (2021) opined that the strength of qualitative approach lies in its ability to produce descriptive data informed by participants' written and verbal data. As such, applying a qualitative approach enabled participants to express their views regarding their knowledge of the SIAS policy, for me to delve into the factors that teachers, SBST members and social workers thought hampered and enhanced the provision of psychosocial support, and to gain insight into factors the participants thought could enhance collaboration among them to enhance the provision of effective psychosocial services to learners experiencing barriers to learning.

Research Design

An intrinsic case study research design was applied because its nature allowed me to describe, examine and interpret the phenomenon in question (Fouché & Schurink, 2011). I implemented a case study research design to explore the perspectives of social workers, SBST members and teachers regarding the collaboration of their services to ensure effective psychosocial support is provided to learners with barriers to learning.

Algozzine and Hancock (2017), and Rubin and Babbie (2016) described a case as an individual, family, set of people, institution, society, community, activities, events, or experiences. As such, this study's 'case' was a set of people, namely social workers, SBST members' and teachers' perspectives of rendering collaborative services to learners facing learning challenges.

Creswell (2007) defined a case study as an exploration of a phenomenon or a case within a 'bounded system'. As such, this study was bound by context and place, where the study was undertaken within the parameters of primary schools within Tshwane and only those participants that were considered key role players in the SIAS process, and enablers of collaboration within the context thereof, were included in the study.

Yin (2018) emphasised that a case study research design should be based on 'how' questions that yield in-depth and extensive data. Through the chosen research design, I was able to achieve the study's objectives as the study explored 'how' participants thought the SIAS policy should be implemented in primary schools, 'what' barriers learners experienced that negatively impacted on learning, 'how' the provision of psychosocial support was hampered and enhanced, and 'how' a collaborative approach to SIAS implementation could be harnessed.

Case studies are reported to have strengths and limitations (Yin, 2018). Salkind (2012, p.217) maintained that case studies are favourable because they allow close examination of a case or cases and the "collection of a great deal of detailed data". As such, I collected in-depth data on a single social phenomenon that pertained to enhancing the collaborative provision of psychosocial support to learners facing barriers to learning.

Fouché and Schurink (2011) claimed that case studies tend to be time-consuming. In this study, two participants were interviewed for approximately 35 minutes, five participants for 40-

46 minutes, one participant for 60 minutes, and another one participant for 120 minutes. Because interviews were audio-recorded, I transcribed the interviews verbatim which was time-consuming, particularly because some interviews integrated English and Setswana or Sesotho.

Another shortfall in the case study research design was the inability to generalise findings (Salkind, 2012). Polit and Beck (2010) asserted that while it was difficult to extrapolate findings to justify generalisation, other researchers argued that rich, high-level and insightful findings were appropriate for extrapolation.

Population, Sample, and Sampling Procedure

Babbie (2021) defined 'population' as a set of people that a particular study draws inferences from. Salkind (2012), referred to a study population as participants from whom generalised outcomes of the study can be inferred.

Salkind (2012) further maintained that at the heart of a good sampling procedure lies its ability to achieve the greatest degree of representation of the population from the selected group that take part in the research study.

There were three categories of population groups in my study. They were social workers who render services to schools in Tshwane, teachers who work in primary schools in Tshwane, and SBST members who render services to learners at primary schools in Tshwane.

Leedy and Ormrod (2013) defined sampling as a process that a researcher follows to select a specific group for investigation, known as a sample.

In this study, I applied judgement in choosing the sample that formed part of my study (Rubin & Babbie, 2016), therefore, employing a non-probability, purposive sampling. Non-probability sampling was applied because of its favourable, cost-effective nature (Parvathi, 2024).

The use of purposive sampling in my study was advantageous as it allowed for the selection of participants that deepened understanding of the study's research problem in a meaningful way (Creswell, 2007), and produced rich information (Leedy & Ormrod, 2013; Rubin & Babbie, 2016). As such, I selected participants I perceived to be instrumental in deepening insights into the study's phenomenon to achieve the study's objectives.

At the outset of my study, I wanted to recruit 12 participants in total, the first category of participants being made up of three social workers. The reason for this is that the total number of social workers who were employed by the GDSD in Tshwane during the time in which I was recruiting participants was 31, and less than 10 were rendering social work services in schools within the area (district) in which my study took place. Considering less than 10 (population) social work participants were located within the geographical borders of my study, three social workers were viewed as a reasonable sample size.

Furthermore, I had envisioned recruiting six SBST members, two from each of the three primary schools that participated in my study. The reason for this is that SBSTs are generally made up of various stakeholders, and this would have enabled me to gather data from a diverse set of SBST members. Three SBST members from two schools took part in my study.

My study had also envisioned recruiting the third category of three teachers whose target was met, each from the primary schools that participated in this study.

The sample size was small, nine in total. An important reason I had a small sample size is because potential participants were not readily available. This is because my study had strict selection criteria. Also, potential participants were all facing work demands and thus, were not available to participate in the research, especially the SBST members.

These nine participants were made up of three participants from each of three sets or

categories of participants who met specific selection criteria:

The first category was social work participants who met the following selection criteria:

- Social workers who were employed by the GDSD providing services to schools in Tshwane (under having rendered awareness presentations, or facilitated case referrals through informal procedures, or standardised procedures such as the SIAS system).
- Men or women above the age of 18 years.
- Social workers with at least five years of experience because social workers with too little experience were perceived to have a likelihood of eliciting poor data.

The second category of participants was made up of SBST members who met the following selection criteria:

- Teachers or principals, or social workers employed privately by SGBs, or social workers employed by the DBE or LSAs depending on their availability in the respective schools.

The study also included a third category, namely teachers who met the following selection criteria:

- Teachers who were not part of SBSTs.
- Teachers with five (or more) years of experience working in one of the three primary schools.
- Demographically, women or men above 18 years.

Before recruiting social workers, I obtained written permission from the GDSD research unit to conduct research. I then liaised with the relevant GDSD social work supervisor in the Tshwane district. Initially, an online meeting was held with the social workers because it was a means of speaking to them all at once, and not too time-consuming for me and them.

I shared the Participant Information Sheet online and carefully explained to them the

purpose of the study, and what the study methods entailed (See Appendix A). Later in the week, I left hard copies of the Participant Information Sheet and Consent Forms at their workplaces for social workers to examine more closely.

I began recruiting teachers and SBST members after I had obtained permission from the GDBE, and the relevant district Director who oversaw the three primary schools where the study was conducted. Subsequently, these three primary schools were approached individually, and permission was sought through one-on-one meetings with two principals and one deputy principal, followed by a meeting with some staff members who expressed an interest in the planned study.

At one of the primary schools, after a meeting with the principal, I was invited to a staff meeting to pitch the study. Hard copies of Participant Information Sheets and Consent Forms were delivered at the respective schools, and consequently, fetched with accompanying permission letters.

Three DSD-employed social workers providing services to schools participated in the study as envisioned. Despite the study's inability to obtain two SBST representatives from each school, a total of six, three SBST representatives from two schools participated in the study, and three teachers (one from each school) participated in the study.

The SIAS policy asserted that it was the responsibility of principals to establish SBSTs in schools (DBE, 2014). Although I hoped to recruit at least one school principal who was a member of the SBST to participate in the study, none of the principals volunteered to participate in the study. A total sample size of 12 participants was expected to take part in the study. However, only nine participants formed part of the study.

Research Tool

I used three different interview guides when gathering information; each was specially formulated for each category of participants. An interview guide is defined by Greeff (2011) as a qualitative instrument that outlines a sequential format of the questions that the researcher intends to ask when collecting data to ensure that similar questions are being asked to all participants.

The interview guides contained open-ended and semi-structured questions (refer to Appendices C, D and E), and they were all prepared in English. Babbie (2013) pointed out that because of the nature of gathering in-depth data, qualitative interviewers rely heavily on the use of open-ended questions. In this study, I emailed the interview guides to participants so that they could familiarise themselves with the questions and help them center their thoughts around the study subject.

Pre-testing of Interview Guides

Strydom and Delport (2011) stated that a pre-test should be carried out the same way the main study would be conducted. The authors also advised that a pre-test is informal and involves a few participants possessing the same characteristics as the participants of the main investigation to ascertain whether data relevant to the study can be obtained from participants (Strydom & Delport, 2011). I pre-tested the relevant interview guides by interviewing a social worker and a teacher who met the selection criteria. The interview guide for the SBST members and teachers was endorsed during the pre-test undertaken with a teacher from one of the selected schools. She indicated that she used to be part of the SBST. She stated that the questions were relevant and understandable. As such, no changes were made to the teacher and SBST interview guides based on the positive outcome of the pre-test.

The social worker also gave me positive feedback with suggestions on how a certain question could be phrased for clarity, so the guide did not need any major amendments. I tested the interview guides in English, and all questions were well understood; therefore, the interview guides did not need to be translated into any other language.

Data Collection Method

Given the exploratory nature of this study, it was favourable to utilise semi-structured face-to-face interviews when collecting data (Creswell & Poth, 2018).

Although this study did not take place during Covid-19, the GDBE prohibited the collection of face-to-face data at schools based on their departmental restrictions for undertaking research in schools. During the time in which I sought permission to interview teachers and SBST members physically in schools, the GDBE had not released communication to allow face-to-face interviews in schools which was why initially, I was granted permission to conduct online interviews.

Roughly two months after I had received the first permission letter to conduct the research online, I requested the revision of the permission letter as the GDBE had loosened their restrictions for undertaking research, making it permissible to conduct face-to-face interviews.

This made it possible for me to gather data by conducting in-person interviews with participants. However, owing to the challenges I encountered with securing interview times with participants, the use of one-on-one online interviews became popular in this study.

Six interviews were conducted virtually through Zoom and Microsoft Teams. I provided participants with one gigabyte of data so they could access the above-mentioned virtual platforms at no cost. Only three in-person interviews were carried out, namely with two teachers and one social worker at their workplaces.

Both data-gathering options utilised the same interview guides irrespective of where and how the interviews were conducted. As mentioned, each category of participants had specific interview guides.

During the interviews, I created an informal atmosphere to cultivate a natural flow of open-ended questions when conducting interviews. Rubin and Babbie (2016) pointed out that the advantages of semi-structured interviews (used in this study) lie within the participants' answers and are not limited to predetermined questions.

I was flexible when conducting interviews, as Greeff (2011) advised, and allowed participants to converse in a language they felt comfortable communicating in. According to Rubin and Babbie (2016, p.63), "… in-depth qualitative interviews by bilingual and culturally competent interviewers, probing into the perceptions of participants can enhance the accumulation of rich data collection". As such, the participants and I conversed in English, Setswana and Sesotho, using these languages as participants saw fit to allow expression of themselves accurately.

Before the interviews commenced, I once again went through the contents of the Participant Information Sheet to make sure participants understood it. I also explained the Consent Form to them and invited them to sign the form if they were willing to participate in the study. When interviews were to be conducted online, I made sure that participants had voluntarily signed a hard copy of the Consent Form which I hand-delivered to their workplaces.

Consent to participate in this study, and to audio-record the interviews, was granted by all participants (Refer to Appendix B). I used my mobile phone to audio-record interviews. Creswell and Creswell (2018) highlighted that recording interviews facilitates a true reflection of the participants' answers when transcribing data. Owing to some interviews being conducted online,

the participants were not hesitant to participate further as suggested by (Holstein & Gubrium, 1995). Rather, participants were happy to participate online as it was convenient and helped mitigate participants' time pressures that made it difficult to engage personally.

Data saturation was a criterion that accounted for the discontinuation of data collection because participants did not share any new information (Saunders et al., 2018). In this study, I reached saturation after analysing data gathered from the nine participants.

Method of Data Analysis

In the context of this study, data was thematically analysed. Thematic analysis is defined as a technique used to come up with, create and translate patterns throughout a qualitative dataset. This approach followed a methodical process of coding data and coming up with themes, which are the basis for engaging in the data analysis process (Braun & Clarke, 2022). Creswell and Creswell (2018) described data analysis as a process characterised by successive steps, involving multiple layers of analysis. Data collected in my study was analysed applying Yin's (2016) thematic analysis method.

The method was comprised of a "five-phased cycle of compiling, disassembling, reassembling (and arraying), interpreting and concluding" (Yin, 2016, p.185) as explained below:

Phase 1: Compiling

Yin (2016) indicated that the first phase begins during the data collection process, emphasising the revision of notes after every interview. In the study, informal analysis, as Yin described it, took place immediately after data had been collected, through transcribing recorded interviews. Yin added that this phase is characterised by assembling data in a formal usable fashion. The finished product of assembling is considered a database (Yin, 2016).

The database compilation of this study stemmed from audio-recordings that had been typed on Microsoft Word, word for word.

Phase 2: Disassembling

During the second stage, compiled data extracted from the database was broken into smaller parts. At this point, I undertook a disassembling procedure. At this stage, new labels or codes were assigned to the smaller parts that have been disassembled (Yin, 2016).

Labelling and re-labelling were expected to occur in this phase (Yin, 2016). I applied the disassembling procedure by dividing interview notes and placing labelled smaller parts into separate divisions using coloured pens found in Microsoft Word features. At this stage, I continued isolating data into tables. As suggested by Creswell and Creswell (2018), I read and looked at the data and made notes using the 'add comments' feature on Microsoft Word.

Phase 3: Reassembling

Yin (2016) explained that reassembling can be done by taking the broken-up data that had been labelled and presenting it in a table or list. Creswell and Creswell (2018) also maintained that this stage entails coding of data, which they described as a process of taking the data gathered and placing the divided texts, sentences or paragraphs into categories, and labelling the categories as guided by participants' language. On a separate Word document, I reassembled and compiled data and presented them in table format.

Phase 4: Interpreting

This phase was characterised by the creation of meaning to data that had been reassembled in the previous phase. In this phase, interpretive competencies were comprised of critical segments, as well as in-depth meanings. According to Yin (2016), the interpretation should be holistic, inclusive of specific data that has 'patterns or themes' that form the foundation for the

study (Yin, 2016, pp.220-221).

Creswell and Creswell (2018) asserted that themes generated in this phase appear as key findings and are usually used as headings in the write-up of the findings section of a research report. Chapter Four of my report evaluated and discussed themes that emerged from the findings of my study.

Phase 5: Concluding

Yin (2016, p.235) indicated that the concluding phase covers the broader significance of the study, including concepts such as 'lessons learned' and 'implications for research, although they do not need to appear as concluding statements. At the end of my research report, I made recommendations to relevant role-players based on the conclusions I reached.

Trustworthiness of the Study

The main concern with undertaking a qualitative study entails confidence in the procedures used in data collection, analysis, and interpretation processes (Chilisa, 2020). As such, to ensure trustworthiness, Schurink et al. (2011) explained that in 1985 Guba and Lincoin proposed the four criteria of trustworthiness, namely credibility, transferability, dependability, and conformability (this is based on the model initiated by Lincoln and Guba in 1985). Below is a discussion on how I sought to improve the trustworthiness of my study.

Credibility

Prolonged engagement, as described by Schurink et al. (2011) is one strategy used to facilitate the credibility of a study. I spent adequate time with the participants to build rapport and understand their perspectives deeply. According to Chalmers and Cowdell (2021, p. 47), qualitative interviews last between 30 to 90 minutes. In the context of my study, both online and in-person, one-on-one interviews lasted for more than 30 minutes, the shortest interview lasted

for roughly 34 minutes and the longest interview lasted 120 minutes. I think this is indicative of not having merely run through the interview questions, but the length of the interviews is indicative of in-depth engagements that were aimed at understanding the case.

I used open-ended, in-depth questions in both online and in-person interviews, and used probes to ensure I fully understood what participants expressed.

The interviews were also audio-recorded. Rubin and Babbie (2016) pointed out that audio-recording interviews help to ensure that the information participants share during interviews is being captured accurately.

I also used reflexivity in my study. “Being aware of one's own biases ensures that researchers can bracket these biases and maintain a more objective stance during data collection, analysis, and interpretation” (Ahmed, 2024, para. 10, Table1).

The fact that I interviewed participants from the fields of social work and education, and focused on the same phenomenon can also be viewed as a strategy (a form of triangulation) to enhance trustworthiness.

In many respects I used triangulation, that is, I interviewed three categories of participants concerning the same phenomenon.

Transferability

Schurink et al. (2011) asserted that transferability can be evaluated by the ability of the researcher to transfer findings from one case or context to another. The SIAS policy is a tool prescribed to all South African schools and is meant to guide the implementation of support structures and enforce inclusivity in schools (DBE, 2014).

As such, I acknowledge that while there might be deficiencies in transferability because of participants’ unique personalities and attitudes, I provided thick descriptions of findings to the

fore as proposed by (Chilisa, 2020).

I also described the "…background information about the research participants, research context, and setting, from which the reader can determine if there are common settings to which the study's findings can be fitting or transferable as suggested by (Ahmed, 2024).

Dependability

Amankwaa (2016) stated that dependability is demonstrated through the consistency of research findings, where the author suggests that such findings should yield similar results if repeated. In this study, I think that the pre-planned interview guides were dependable. However, how an external interviewer would interpret the data given is an inevitable downside of the subjective and biased nature of the qualitative research approach.

Dependability cannot be fully guaranteed as dependability rests on the context in which the study is being repeated. For instance, behaviour, moods, and other emotional factors can dictate the answers provided.

The place and manner in which interviews take place can also hamper dependability. However, Connelly (2016) believed that writing process notes is another way of enhancing dependability; a technique which was employed in this study and its implementation was carried out by audio recording interviews, which were written verbatim.

Confirmability

This construct speaks to the confirmability of my findings by another researcher (Schurink et al., 2011). Cope (2014, p.49) suggested the use of 'rich quotes' when reporting findings to ensure confirmability. The audio recordings of interviews and verbatim transcripts captured this component and will not be destroyed for five years unless I publish my findings. They will then be destroyed after two years.

Other researchers are welcome to review this data only if the identifying particulars of the participants are not visible to them. They can analyse data to see if they can reach similar findings.

Ethical Considerations

Before commencing my study, I obtained an ethical clearance certificate from the Departmental Human Research Ethics Council (non-medical). This is critical because all researchers engaging in research that involve human subjects have to be cognisant of broad ethical agreements about what is permissible and prohibited when undertaking a scientific investigation (Babbie, 2021).

In support, research studies in social sciences present multifaceted ethical issues that researchers need to be acquainted with as research studies should not expose participants to harm (Strydom, 2011). As such, I adhered to the following ethical aspects when conducting my study.

Informed Consent

According to Anabo et al. (2019), traditionally consent was sought in a written manner. Therefore, in this study, I first provided potential participants with the Participant Information Sheet (Refer to Appendix A) and explained the contents thereof. This sheet contained information about the study, including the purpose of the study, the study's objectives, methods to be adopted, participants' freedom to withdraw participation, potential risks, and benefits associated with my study.

The consent for participation and audio-recording form were explained in an online meeting with social workers. I subsequently delivered hard copies of the Consent Form to their workplace.

In the case of SBST members and teachers, the above Consent Form was explained in

person at meetings where I had been granted permission to be a part of pitching my research project. Hard copies were left at the respective schools, and I collected them upon completion.

The Completed Consent Forms for participation and audio recording, and typed transcripts were saved on my password-protected Google Drive, which is safe to store confidential data as my laptop had a password only known to me as a security measure.

The participants all completed and signed their Consent Form. They understood the content and willingly agreed to sign the forms.

Confidentiality, Privacy and Anonymity

Confidentiality is defined as the recognition of a specific participant's text; however, vowing not to make the text recognisable by the public (Babbie, 2021). Strydom (2011) held the notion that confidentiality speaks to the private way in which the researcher handles participants' information. This speaks to the storage and safeguarding of data.

Initially, I considered naming the specific district within Tshwane where the study was conducted. However, I decided to locate my study within a broader physical context, namely the city of Tshwane, to ensure that participants were not easily identifiable (Refer to Chapter One, heading "concepts and keywords" for a geographic description).

Moreover, confidentiality ensured anonymity of participants as it enabled me to report data without exposing identifiable particulars of participants (Saunders et al., 2015). Babbie (2021) defined anonymity as the absence of a correlation between a text and a particular participant. I have thus used pseudonyms when writing this report. For example, verbatim quotes from participants captured in Chapter Four, follow the naming convention: for social workers, SW 1; for teachers, teacher 1; and SBST members, SBST 1. This naming convention did not position any teacher or SBST member at any school, nor did it position any social worker at any

particular district in Tshwane.

I am expected to report on research findings to the GDBE and GDSD. In cases where my research findings can be used for academic purposes (including books, journals, and conference proceedings), pseudonyms will be utilised to ensure that the data presented cannot be linked to participants.

A risk that was foreseeable in my study included identification risk; particularly relating to personal information provided by participants. Lobe et al. (2020, p.6) suggested that how researchers store their data has to do with "deidentifying the data and making use of password protection and data encryption".

This means that a security-tight data storage instrument has the ability to enhance confidentiality and promote anonymity.

A mitigation strategy that was employed during the data analysis includes the following. Since my mobile phone was used to audio-record interviews, I ensured that my mobile phone's screen lock required my fingerprint to unlock, and I had a backup password that was only known to me.

Moreover, I had three mobile phones, and the one used for audio-record research interviews was one that I did not utilise for day-to-day communication. Therefore, no one had access to audio recordings recorded during interviews. Recordings were then transferred to and stored on my password-protected Google Drive and deleted from my mobile phone after being transcribed. Logging into my Gmail required verification to ensure the security and safeguarding of participants' confidentiality.

Researchers are mandated by the Protection of Personal Information Act No. 4 of 2013 to promote and protect people's right to privacy (Republic of South Africa, 2013). In my study, only

my research supervisor and I had access to the data collected.

The six interviews conducted virtually took place in a private room where no one could hear the discussions, and participants were encouraged to do the same.

The same applied to interviews that I conducted face-to-face. The interviews took place at the participants' workplaces in an office offering privacy.

Voluntary Participation

Strydom (2011) asserted that participants have self-determination capabilities. This means that participants that engaged in my study could choose whether they wanted to give informed consent or not, and they also had the right to withdraw participation at any time without experiencing retaliation (World Medical Association, 2001).

In this study, a clause involving the ability of participants to withdraw participation was included in the Participant Information Sheet (Refer to Appendix A) where it was highlighted that there would be no negative ramifications associated with a decision to do so.

Avoidance of Harm

Babbie (2021) maintained that participants are susceptible of exposure to psychological harm when social research is undertaken, therefore, suggested that researchers should look for the most minimal risks and devise ways to mitigate them.

This study acknowledged its exposure to minimal psychological risk owing to the nature of questions in the interview guides which were not very sensitive.

Near the end of an interview with one participant, minimal psychological risks were triggered by questions related to the needs and challenges within the interdisciplinary setting. I sensed this by the tone of her voice.

I asked the participant if she wanted to undergo a debriefing session provided by the

Employee Health and Wellness Programme (EHWP) within her respective department.

The participant indicated that she was okay and did not need to be referred for counselling.

Debriefing

Debriefing is described as the correction of any problems emanating as a result of involvement in a research study (Babbie, 2021). The following were details of the EHWP of the GDSD and GDBE. The GDSD had an EHWP with a 24/7 toll-free number: 0800 444 360 and the GDBE's number was 0800 611 169. These telephone numbers could be accessed by participants during this study, but the need did not arise.

Summary

In summation, this study employed a qualitative research approach, and an intrinsic case study research design was applied to understand the intricacies of the phenomenon. The study's population involved social workers employed by the GDSD, SBST members, and teachers in primary schools located in Tshwane.

Non-probability, purposive sampling was applied to this study during the recruitment stage. The sample consisted of nine participants: three DSD-employed social workers rendering services at schools in Tshwane, three SBST members and three teachers recruited across three primary schools in Tshwane. Semi-structured interviews took place both virtually and in person. Data were collected using interview guides designed for each category of participants. The interview guides were pre-tested. I provided internet data bundles to participants who preferred to be interviewed online. Written consent, including permission to audio-tape interviews, was obtained from all participants.

Furthermore, the data collected were thematically analysed using Yin's (2016) five-step data analysis process.

The trustworthiness of this study was measured against the four components of credibility, transferability, dependability, and conformability.

This study adhered to several ethical aspects including informed consent, confidentiality, privacy, anonymity, voluntary participation, avoidance of harm, and debriefing as a mitigation strategy was instrumental in safeguarding participants from harm during the research experience.

Chapter Four

Presentation and Discussion of Research Findings

Introduction

In this chapter, I present my empirical findings based on a thematic analysis of data gathered. The findings align with my study's objectives. I also engage in a critical discussion related to research findings.

Profile of Participants

In Table 1 below I present the profiles of the participants.

Table 1

Profile of Participants (N=9)

Demographic Factors	Sub-category	No. of Participants
Gender	Male	1
	Female	8
Category	SBST members	3
	Social workers	3
	Teachers	3
Place of employment for SBST members and teachers	Primary School 1	2
	Primary School 2	3
	Primary School 3	1
Place of employment for social workers	GDBE District Office	3
Years of work experience	2-5 years	3
	6-15 years	4
	16-30 years	2

Table 1 shows that the study was made up of nine participants, one male and eight females. The table also shows that the study comprised three categories of participants, namely, SBST members, teachers and social workers who provide services to schools. The social workers are not included in the category of participating schools as they are employed by the GDSD and stationed in the GDBE's district offices, not at schools. In other words, they are not school-based but district-based. Most of the participants have between 6-15 years of work experience.

Themes and Sub-themes

Table 2 on this page and following pages summarises the themes and sub-themes that emerged based on data analysis.

Table 2

Summary of Themes and Sub-themes

Themes	Sub-themes
Theme 1: Different levels of knowledge of SIAS Policy	The comprehensiveness and frequency of training received
Theme 2: Teachers and SBST Members are familiar with their roles and responsibilities regarding SIAS Policy, whereas Social Workers are not	
Theme 3: There is a close working relationship between Teachers and members of the SBST	
Theme 4: Common social ills in schools that need to be addressed by Teachers, SBST members, and Social Workers	Orphaned and Neglected Children
	Abuse
	Bullying
	Dysfunctional Families
	Learners abuse illegal substances

	Poverty	
Theme 5: Factors contributing to the lack of provision of psychosocial support for learners	Lack of Parental Involvement	
	Denial attitudes of parents whose children present with barriers to learning	*Grandmothers who foster their grandchildren find it difficult to become engaged*
	Awareness of the availability of Social Workers	
	The lack of visibility of Social Workers	
	High workloads	*Shortage of transportation*
Theme 6: Poor collaboration concerning referral procedures	Teachers and SBST Members do not refer cases to social workers using the correct Procedures	
	Gauteng Department of Social Development's 'New' Referral Procedure	
	Not all Teachers are aware of the New Referral Procedures	
Theme 7: Factors Hampering the Provision of Psychosocial Support	Overcrowding in Classrooms	
	A paucity of Social Workers and Psychologists	
	Time Constraints	
	Teachers do not Cooperate well with Social Workers	
	Selected SBST members do not have the time and capability to fulfil the expected responsibilities	
	There is a paucity of Psychologists, so Learners do not receive Services for a lengthy period after the Referral has been made	

Theme 8: Strategies to address Factors that Hamper the provision of Psychosocial Support	Reintroduce the remedial classrooms
	Teachers need training and tools to conduct assessments and monitor learner progress
	Teachers and SBST members need to understand the role of Social Workers regarding the Implementation of SIAS policy
	Social Workers require adequate transportation
Theme 9: Strategies for Enhancing Collaboration	Employment of more Social Workers to make them Visible in Schools
	Social Workers should engage in the provision of Preventative Intervention in schools
	Establishment of Case Meetings

Theme 1: Different levels of knowledge of SIAS Policy

The findings of this study indicated that there is one main factor that affects participants' knowledge of the SIAS policy, namely, the comprehensiveness and frequency of training received.

The comprehensiveness and frequency of training received

SIAS policy referred to SIAS training as training on the use of the policy. The policy showed that the extent of training is determined by the "level and nature of support provision" (DBE, 2014, p.22). On the low level, training is reported to be brief or once-off (less than ten sessions) "for management and staff on issues of support implementation".

Training on moderate provision of support involve brief (less than ten sessions) to long-term (over ten sessions) "training and outreach programmes for management and teachers on issues of support (i.e. nature and strategies), awareness programmes and policy implementation provided by the school's network of stakeholders or specialists outside the Department" (DBE,

2014, p.22).

Training for high level of support involved “intensive induction programmes for staff to master competencies that are required in the programme, on-going specialist mentoring and training of staff needed. Training programmes are sourced within departmental structures or externally” (DBE, 2014, p.23).

Most SBST members and teachers informed me that they had undergone comprehensive training on SIAS policy over the years, although the comprehensiveness and frequency of training received is not the same. This inconsistency in the comprehensiveness and frequency of training received by teachers and SBST members can be attributable to the diverse levels and nature of support provision outlined in the SIAS policy.

According to the policy, the training is to be provided to “all teachers, managers, and provincial and district officials” (DBE, 2014, p.14). However, because the SIAS policy does not explicitly conceptualise the term “district officials”, the interpretation thereof, can be two-fold, alluding to DBE-employed officials working within district offices, meanwhile, “district officials” can also allude to district-based personnel who are not employed by DBE such as the social work participants who participated in my study.

Social work participants shared that their training on SIAS policy was neither frequent nor in detail. This can be attributable to the training provider and the content coverage thereof, as the social workers’ training was received from the University of the Witwatersrand [Wits], a South African university that offers a Master of Arts in Social Work by Coursework and Research Report in the field of School Social Work (Wits, 2024). The GDSD’s Annual Report 2021/2022 confirms this, “a cohort of 20 school social workers were enrolled at Wits for a specialist School Social Work course between April-July 2021” (GDSD, 2022, p.41).

As far as teacher participants are concerned, two of them confirmed that they received quite extensive training regarding SIAS policy. For example, **Teacher 1** stated that:

> I used to attend workshops… as a teacher, you are compelled to understand screening, identification, assessment and support policy because it is designed to identify, assess, and provide programmes for all learners who require additional support and hence their participation and inclusion in a normal classroom setup.

Similarly, **Teacher 2** responded:

> Yes, in 2018 and then uh, I think I only underwent training for two years, two separate years, yes. In 2018 and then uh, again in 2020, yes, because uh, at times we were invited to attend some workshops so that's when I attended the training and the reason being, I was an SBST member.

In contrast, there was a teacher participant who expressed the need for further training on SIAS as the one received seemed to not have been adequate. **Teacher 3** remarked: "You see, I wish they [trainings] can be renewed every two years, and you see, a weekend thing is not similar to a course…a one-year course or six months course…".

The SBST members also received regular training. However, **SBST 1** expressed that although she had received SIAS training, they found it difficult to implement the SIAS policy effectively:

> We have [received training], but it was a while when they started implementing it in schools. Though for me, it was not that effective…if that training was effective, we would not be facing the challenges that we are facing now. We would be able for every teacher to be able to identify the child, is able to screen the child, the processes, but some of them…we are learning on our own, but the training was carried out. For how long did we go? …let's say it was four weeks.

The social work participants implied that their training on SIAS policy was brief.

For instance, **SW 1** pointed out:

> …Wits, [the university that presents the Master of arts degree in School Social Work] was

not specially for SIAS. It was on school social work, so it had different themes or topics…there was a part on SIAS if I remember well. I think one lecture was on the policy itself.

Similarly, **SW 3** explained: *"*I attended that training that taught us about school social work and then in there, they included SIAS policy but it's for one day only, for them to train us on how SIAS works".

A recent study by Maree et al. (2023) drew similar findings to my study. The teachers the authors interviewed also commented that they received quite extensive training on the SIAS policy. However, an imbalance in the training on SIAS policy is observed in a recent study by Msane et al. (2023) that took place in the King Cetshayo district in Kwa-Zulu Natal Province, South Africa. They conclude that while teachers in some schools received training, some schools did not receive training. Msane et al. (2023) explained that the imbalance is attributable to the King Cetshwayo district's inability to accommodate every school's personnel owing to fiscal, logistical and human resource issues.

My findings reinforce those of Maree et al. (2023) because some teacher participants in both our studies highlighted that training on SIAS policy was inadequate, commenting particularly on the implementation of the policy.

Research by Msane et al. (2023) further found that teachers did not implement the SIAS policy because of a paucity of skills that are necessary for implementing it. To yield positive results in schools, SIAS policy needs to be implemented well (Msane et al., 2023).

The training milestones outlined in the SIAS policy are primarily focused on school-based implementers of the policy (DBE, 2014). Unlike teachers and SBST members, social work participants in this study reported having received training on the SIAS policy for only one day and just one lecture.

I am of the view that perhaps the paucity in regular and comprehensive training of social workers on SIAS policy could be attributable to not being school-based. If they were school-based, they would be able to attend the same training workshops as teachers and SBST members.

Theme 2: Teachers and SBST Members are familiar with their roles and responsibilities regarding SIAS Policy, whereas Social Workers are not

Once again, I note that it is teachers and SBST members that had a clear understanding of how the SIAS policy is implemented in schools; as shown through their description of the referral process, and the procedures and steps to be followed when dealing with a child presenting with learning barriers.

I assume this is related to the fact that they received comprehensive training, and they usually have frequent contact with the learners in the school setting.

Teacher 2 implied that at the training sessions she attended she became familiar with the process followed in terms of SIAS policy:

> … learners with barriers to learning, or children who are struggling psychologically, and children that have problems at home… they show us, uh, how we supposed to handle such children and then, and the process of identification...which procedures need to be followed...

SBST 1 described the practical steps one has to take when concerned that a learner is experiencing barriers to learning:

> …you have to complete those SNA forms. The first one you complete as an educator who teaches the child you have identified, you complete SNA Form 1. There, you state what problems you identified about your child, and you state the kind of support that you are going to provide.

One social work participant, although aware of SIAS policy, did not seem to fully understand how SIAS policy is practically implemented in the school setting. **SW 1** made this

point clear when stating:

> To tell you the truth, I know it's [SIAS policy] just a framework that assists vulnerable children, whether in mainstream or special schools. Obviously, that is where some of us come into play, to say, okay, vulnerable children, barriers, and…but implementation part of it, I think there has to be a certain structure … it must guide us properly.

Similar to my findings, literature has shown that teachers know that the SIAS policy is a tool that is used to identify and support learners with barriers to learning. Further, research has shown that teachers are familiar with the processes of applying SIAS including identifying learners, communicating with their parents and referring them to the DBST for further supportive intervention in cases that the schools cannot handle (Msane et al., 2023).

Research by Mpanza and Govender (2022) has shown that SBST members within Kwa-Zulu Natal Province, also offer support to learners presenting with learning barriers at a school level, while other learners' cases can only be addressed at a district level. Although Mpanza and Govender's (2022) study took place in a different province from my study, SBST members in both studies, positioned within primary school settings seem to be applying their supportive function as mandated by the SIAS policy.

While there is a lot of research on inclusive education and the provision of psychosocial support, as well as the role that social workers play broadly within the educational system, there is a paucity of literature that explicitly addresses the roles and responsibilities of social workers in the implementation of the SIAS policy. However, research on educational policies in India, for example, has shown that to successfully implement these policies, social workers need to be part of the stakeholders driving reform because of their expertise in counselling, advocacy, community engagement and support services (Patel, 2023).

Theme 3: There is a close working relationship between Teachers and members of the SBST

According to Manolakelli (2022), the close working relationship between teachers and members of the SBST can be classified as intradisciplinary collaboration, indicating that participants work together in the same discipline. The teacher participants emphasised that they have the responsibility of identifying vulnerable learners because they have direct contact with the learners daily. They initially strive to address the problem situation themselves, but if further intervention is required, they contact the SBST. For example, **Teacher 3** remarked: "Yes, for the severe ones, I refer them to the school's SBST".

Teacher 2 explained how she tried to resolve a presenting problem regarding learners facing barriers to learning:

> So, the support that we give them is that we come up with different strategies; we come up with intervention strategies, you see, from there, where will we be going, then we go to the parent. And then if we see that the child is struggling, we will be doing…we will be engaging SBST's services…

The information shared by the teachers and members of the SBST implies that they worked closely with one another. If concerns about the learner cannot be resolved by the teacher concerned, they take the next step by contacting the SBST for assistance.

SBST 3 described the procedures in detail:

> After the teachers have identified they would take uh, their, that report to me [SBST coordinator] and then I with the necessary documentation of course being the individual support plans, their observation books, and once the child has been identified as having the serious challenges, we have the SNA forms that we complete. And then once the SNA forms have been completed with the permission of the parents for psychosocial support, that's where the SNA forms can be taken to the DBST…I will populate documentation from the teachers, come up with improvement strategies, advise where there is a need and then where there are behavioural issues, straight forward, take the matter to the DBST for

the DBST to intervene in that regard.

Ntseto (2019) suggested that SIAS implementers require certain competencies to be able to implement the policy successfully; including displaying competencies in information gathering and identifying learners who are at risk of not meeting learning outcomes and essentially at risk of dropping out of school.

While my study's findings indicated that teachers and SBST members had the knowledge and understanding of their roles and responsibilities regarding the implementation of SIAS policy, this is in contrast with Hess' (2020) research findings. Hess (2020) found that teacher participants within the North-West Province, South Africa, displayed incompetence owing to poor knowledge and understanding of processes enshrined in the SIAS policy.

Theme 4: Common social ills in schools that need to be addressed by Teachers, SBST members, and Social Workers

The findings of my study showed that six major social ills are common in primary school settings, including orphaned, neglected, and abused children, bullying, dysfunctional families, learners' abuse of illegal substances, and poverty. As part of their responsibilities, teachers, SBST members, and social workers have to address these social ills because they can be interpreted as barriers to learning and development in SIAS policy. Each of the six social ills is elaborated in the sub-themes below:

Orphaned and Neglected Children

According to Hesselink and Dastile (2018), the high number of orphaned children in South Africa is attributable to abandoned babies and children. All three categories of participants pointed out that some learners who face barriers to learning are orphaned, being raised in child-headed households and others neglected.

Teacher 2 made it clear that she is aware that many learners face these challenges:

> Yes, let me start with child-headed households. You find that there are children heading their families, neh, either because the child's parents are no longer there; the child is an orphan or there is a child taking care of other siblings...

Teacher 3 focused on orphaned and neglected learners:

> And then most of the school's children are orphans, sometimes both parents are no more or sometimes one parent is not there, and then mainly a mother is not there…their social problems include being neglected, they are not taken care of, they are not given parental love...

SBST 1 also highlighted the issue of neglect:

> …You find the child is being neglected. The child is able to come to school on an empty stomach, and the child's uniform is not washed. And then some are those that do not have…they are being raised by grandmothers, their mothers passed away…

Literature by Mwoma and Pillay (2016) suggested that the educational trajectory of orphaned children differs from those of their counterparts as orphaned children face daily challenges. Further, another study conducted by Pillay (2016) highlighted the existence of child-headed households within South African walls including the Gauteng Province in which this study is positioned. Perspectives of South Africans captured by Ndoma and Siachiwena (2023) pointed out that child abuse and neglect account for 39% of social ills.

Abuse

The phenomenon of domestic violence is rife in South Africa and children who find themselves in such situations are forced to observe violent acts between their caregivers (Hesselink & Dastile, 2018). These authors are of the view that this has adverse effects on children, including "severe cognitive and emotional damage, intimacy, relationship and behavioural problems, and a distorted idea of what love means, and may develop when a child is frequently exposed to domestic violence" (Hesselink & Dastile, 2018, p. 8). Participants pointed out that some learners have been sexually abused, and in some cases, incest had taken place.

SBST 1 commented: “Rape as well; rape is one of them. We have a hand full of children who experienced rape from home. We have such cases.*”*

Two social work participants also identified different types of abuse learners experience:

SW 1: *“*In school honestly speaking, it’s abuse; physical, sexual...”

SW 3: “Social issues we find in schools are abuse, neh, abuse, differently, physically, emotionally and sexually.”

One of the teachers referred to domestic violence. Learners observing domestic violence usually experience emotional abuse. **Teacher 2** pointed this out: *“*And sometimes you find that its domestic violence; you see, there is no peace at home”.

Khemthong and Chutiphongdech (2021, citing Lloyd, 2018; Weithorn et al., 1999) highlighted that domestic violence is detrimental to children in many respects, including their learning and development at school. For example, their interest in education can decline, and attending school can become stressful and exhausting. They frequently manifest adverse behaviour and sometimes become withdrawn.

The Department of Science and Innovation, Human Sciences Research Council and United Nations Children's Fund [UNICEF] (2022) reported that physical abuse perpetuated by primary caregivers is 56% and 35% of children are victims of child sexual abuse in South Africa, and that 878 South African children were killed in 2020. Even more children are being affected by physical abuse where 34% of children experience physical abuse comparable to the global average of 23%. Children are still vulnerable to harm and need protection.

Intervention strategies need to be put in place in schools since most violent crimes committed at home are not always reported to the police or social workers (Department of Women, Children and People with Disabilities & UNICEF, 2013), meaning children remain

vulnerable.

Having social workers rendering services in schools can aid in the early identification of children exposed to abuse.

Bullying

In South Africa, the issue of bullying in schools is a contentious and pertinent topic (Hesselink & Dastile, 2018). Participants emphasised that bullying is one of the biggest challenges learners face in primary school settings.

SBST 3 stated:

> Our school has a very serious challenge of bullying. It's one of the highest cases that we see. It's rough, actually, 70% I can say… 70% of our cases it's bullying wherein parents are complaining and we've had a situation wherein we have suspended and followed our disciplinary procedures from school, suspended other learners, but it's a challenge.

Similarly**, SBST 2** commented: "…the problems we come across generally in school is bullying; bullying starts from Grade R to Grade seven. Every day we are dealing with cases; disciplinary committee; every day we engage with the issue of bullying."

Social work participants also emphasised that bullying is rife in schools:

SW 2: "…most cases we come across in schools are bullying cases…".

SW 3: "What else is there, uh? …and often bullying, yes, often bullying".

SW 1: "…bullying now is a problem…".

Literature by Manuel et al. (2021) aimed to explore the prevalence of bullying and victimisation among primary school children in South Africa and the study found that Gauteng has the highest percentage of 33.59% of school-going children who experience bullying in the form of being 'left out' or excluded. Nationally, more than 30% of children experience all three intersecting forms of bullying victimisation which include being hit, being left out, and being

called unkind names.

Dysfunctional Families

"Given how important the family is, it has become increasingly clear that the state of family well-being in South Africa is affected by changes in the economic, social, political and technological environment" (Roman et al., 2015). One of the teachers focused on family functioning. She highlighted factors that contribute to this poor functioning and the negative effects this has on the learner. **Teacher 2** explained:

> In some cases, the child comes from a dysfunctional family, you see them, those where there is no order; the father is an alcoholic; the mother is…it's those things. And these children, in some cases you find that this child does not come to school. The child does not receive support from parents, especially with homework; the parent is not available during that time [to assist].

Dysfunctional families are characterised by conflict, inappropriate behaviour, instability, abuse, and or neglect (Brown, 2021). Education as an important social determinant of health is associated with income, employment, and career opportunities that have significant implications across one's passage of life. As such, people in the helping profession as well as policy-makers need to be cognisant of the relationship between child adversity and accompanying poor or lower academic outcomes (Stewart-Tufescu et al., 2022).

Learners abuse illegal substances

Drug use is a widespread phenomenon affecting a lot of people (Dykes & Carelse, 2013). The social work participants stressed that substance abuse is a big challenge in the school setting: For instance, **SW 3** stated "…and then substance cases, that children are using crystal, and already addicted to crystal".

Similarly**, SW 2** emphasised "…and drugs, drug issue is at its peak. Yes, drug issues now, it's an issue that is very common".

A study by Vergottini and Weyers (2020) asserted that substance abuse is an environmental issue that exposes learners to learning barriers. Issues such as neglect and maltreatment of children, socio-economic inequalities, poor academic performance, problems stemming from the school, deprivation of social environment, association with destructive peers, parental substance use disorder (SUD), early behavioural problems, mental disorders as well as unhealthy parent-child relationships are some of the identified factors that can lead to SUD.

A study by Mkhize and Shembe (2022) suggested that substance use among learners has social, physical and academic implications, and recommend the deployment of counsellors within school settings to monitor this challenge, and subsequently, provide supportive intervention.

Poverty

Hesselink and Dastile (2018 as cited in DSD, Department of Women, Children and People with Disabilities & UNICEF, n.d.) are of the view that poverty has a direct and indirect impact on children as poverty can be stressful and frustrating for caregivers, which may cause them to be abusive and neglect children. The findings of my study suggested that many learners live in poverty, and this is a definite barrier to learning that learners are grappling with. Further, Child Support Grants and financial assistance from extended family members are inadequate to meet the needs of learners.

Teacher 2 captured this point well:

> …you can see that these children are not well taken care of. The means to support them are not enough, even though you find that there are grants that help in the house, but you find that it's not enough… or the children's parents are unemployed which leads us to the thing of affordability being a problem, you see. …most of the families of our children are extended families, and that help that they get from relatives is not doing enough.

Similar comments were voiced by the SBST member and social work participant:

SBST 1: "Hmmm, okay, firstly, Ma'am, it is poverty, you learn that our children come from…they are poor, most of them are children who are poor…".

SW 1: "In school, honestly speaking, it's…poverty…".

Literature by Vergottini and Weyers (2020) positions learners as a vulnerable population mostly affected by poverty, exhibited physically, cognitively and/or developmentally (Matolo & Rambuda, 2022).

Theme 5: Factors contributing to the lack of provision of Psychosocial Support for Learners

The term psychosocial support is defined by Hlalele (2012) as a continuous and holistic process of meeting the emotional, spiritual, social and mental needs of learners; all of which benchmark meaningful and positive human development. The following sub-themes emerged as factors contributing to the lack of provision of psychosocial support for learners: poor parental involvement; unsuitable foster care placements; denial attitudes of parents whose children present with barriers to learning, and the lack of awareness of the availability of social workers.

Poor Parental Involvement

The South African Schools Act 84 of 1996 described the term parent as:

(a) the biological or adoptive parent or legal guardian of a learner,

(b) the person legally entitled to the custody of a learner.

(c) or the person who undertakes to fulfil the obligations of a person referred to in (a) and (b) towards the learner's education at school (South African Government, 1996).

Van den Berg (2020) remarked that parental consent is a pre-requisite before therapeutic interventions can be provided until the child turns eighteen years old.

My findings showed that SBST members and teachers held similar perceptions wherein they acknowledge the importance of involving learners' parents after they have identified at-risk

learners who present with barriers to learning, and consequently in need of supportive intervention.

According to participants, the extent to which psychosocial support can be provided to the learners relies heavily on parental engagement, cooperation, and support. My findings conscientises us to the two-fold responsibility of supporting the learners with barriers to learning at home in conjunction with teachers' supportive plans.

Parents need to grant written consent for their children to be referred to appropriate resources to enable interventions to commence at the district-level, and for subsequent interventions to be undertaken. An SBST participant indicated that if parents refuse to consent for cases to be referred to social workers for intervention, even though the participant knows social workers as the relevant service providers, they cannot be utilised.

Teacher 2 explained:

> So, it starts with uh, interaction with the parent, and you tell that we have a situation, and we are asking to engage you as a parent because we can only help to remedy the situation if you as the parent are fully involved. So, we support by calling the parents, and at the same time, we ask parents to assist the child at home. Once we have identified that a child has a problem, you as a parent as well, you have to play a role.

SBST 3 also emphasised poor parental involvement:

> First of all, any procedure…we have to get the consent from the parents so that is the biggest struggle. There's forms we are expected to send to parents wherein parents must give consent that there is going to be another form of intervention that is escalated at the level of the district. Now in most situations, we find that parents are very much hesitant to escalate uh, those kind of forms. For us to escalate those forms to the district support team, uh, it becomes a challenge.

SBST 2 highlighted the same issue:

> Yes, okay, uh, we call them [parents] once a term neh, we call parents of learners at

> risk…we pick them up after a schedule has been done, right, we will know that we have children who are struggling. The schedule as SA-SAMS reflects their marks, divides children, those that have failed, children that are totally struggling. It shows that those are the ones going to SBST, right.

SBST 2 further explained the subsequent process after identifying learners who experience barriers to learning that warrant teacher-parent collaboration:

> So now... we call only parents of those children, right. Our parents as you know them, especially because we would have called parents of those children that are struggling, they do not come through, only few of them come…I do not know if they feel that they are…they feel discriminated somehow…when we call parents of such children they do not come, and we would be emphasising that we want to help them as these children have a problem how can we assist each other…it does not work for us when pertaining to such issues.

SBST 3 captured this perspective well: "Like I have indicated if the parents are not agreeing for this kind of interaction, it becomes very difficult to utilise them [SWs]".

Research has established that parental support is needed by SBST members to enhance their functionality to provide support in primary schools (Mpanza & Govender, 2022). Further, Mpanza's and Govender's (2022) study has shown that SBST members reported parents to be uncooperative which becomes a barrier to the provision of supportive intervention to learners presenting with learning barriers.

The Education White Paper (2001) and the SIAS policy (2014) positions parents and teachers at the heart of driving inclusive practices through the provision of support to learners with barriers to learning. However, school participants, teachers and SBST members alike, still face challenges associated with poor parental involvement as displayed by parents' hesitance to respond to concerns raised about their children expressed by teachers, and demonstrate disengaged behaviours.

Furthermore, literature has shown that “resistance is the most significant barrier to engaging involuntary clients” (Bukhari et al., 2021, p. 3). These parents can be seen as involuntary clients according to Bukhari et al. (2021) on the basis that they are requested to schools because of barriers to learning that have been identified, and the National Strategy for SIAS (2008) emphasised that “parent participation is not a choice”. Parental engagement will, however, require building trust with parents who display resistance and reluctance (Bukhari et al., 2021).

Xweso et al. (2023) views the well-being of learners as a priority for school social work practice highlighting the significance of the role of social workers in working with children and their families, schools and communities. For this reason, social workers should be involved in engaging with parents to encourage them to cooperate when school staff wants to discuss the well-being of their children with them.

Further research by Ding et al. (2023) acknowledged the pivotal role of school social workers in advancing interdisciplinary efforts and improving parental involvement to enhance learner well-being and improve school performance. In addition, my findings have shown that there is paucity in teachers and SBST members’ knowledge about safeguarding children who are presenting with learning difficulties as a result of being “exposed to circumstances that may seriously harm the children’s physical, mental or social well-being” (South African Children’s Act 38, 2005, p.147).

While it is ideal to acquire parental consent, supportive interventions cannot be withheld at the detriment of children’s physical, mental or social well-being.

Denial attitudes of parents whose children present with barriers to learning

This sub-theme is closely related to the sub-theme above. While parental involvement and support are key to the provision of psychosocial support services that are aimed at eradicating learning barriers, my findings have found that some parents initially deny the presenting learning barriers that teachers or SBST members have identified and assessed. This in turn can lead to a lack of parental involvement.

Findings also showed that sometimes parents' non-disclosure of their knowledge of their children's learning barriers can be attributed to feelings of embarrassment or anxiety about the implications of their children presenting with barriers to learning. The following verbatim quotes substantiate my line of thinking:

SBST 2 stated "…remember with other children, the problem is that the parent starts off being in denial, refusing for the child to be referred".

Similarly**, SBST 1** pointed out:

> Other times, it is parents' denial, because when you call parents and tell them your child is like this and that, they deny, when you say, take, come and complete the form, because those forms sometimes, they will not go if they are not signed by the parent.

Teacher 1 also emphasised the attitude of denial:

> Sometimes, you get an in-denial parent; they differ. Those are the type of parents we come across. Sometimes it is a parent that is unavailable because it needs a parent, so you find that this parent is nowhere to be found. When we call, the parent is unavailable. We are stuck with this situation, right, and there is nothing you can do.

Teacher 2 reiterated this challenge: *"...*parents sometimes do not disclose, you see, maybe the parent is scared of you as an educator…*"*.

Cherry (2023) stated that denial is a coping mechanism marked by avoidance of anxiety-inducing situations. Jacobsen (2013) believes that through engagement, parents in denial can be

encouraged to actively participate in the process of supporting their children who have been identified to be presenting with barriers to learning. Social workers providing services to schools are suitable for engaging with such parents. This, for example, highlights the significant role social workers play in education settings (Sittert, 2016).

Grandmothers who foster their grandchildren find it difficult to become engaged

According to the following participants, some children with learning barriers have been placed in the foster care of their grandparents. Many grandmothers are old and face personal challenges, such as physical disabilities, which make it difficult for them to make their way to school.

Teacher 2 highlighted this point:

> …children who stay with their elders; grandmothers; they are being taken care of by their grandmothers, you find that in some cases, the grandmother is disabled, you see, that's when we call them to school, there is no one to represent the child because of the problem; maybe the person is disabled or an elderly person, old enough to can walk a long distance from home to school, you see, so it's such problems.

Cejesse (2024) indicated that the role of a social worker in foster care is pertinent, especially in the context of this study's findings of children who receive a lack of support from related foster parents. Further, Cejesse (2024) mentioned that it is very important to ensure that children are matched with related foster parents (family members) or placed within the foster care system with foster parents who can meet their needs.

Furthermore, social workers are responsible for monitoring foster care placements to ensure that foster families are still suitable to care for and support children in their care. Cejesse (2024) admitted that while it is important to place children with extended family members, it should not be to the detriment of the children and that if placing children with related family members is not in the best interest of the child, alternative care placement should be considered.

The responsibility of placing children in foster care placements and the monitoring thereof, is the responsibility of social workers (Children's Act 38, 2005). This means that by ensuring that children are placed with suitable foster parents, parental involvement can be improved, therefore, enabling learners access to the support that they require.

Awareness of the availability of Social Workers

This sub-theme is another factor that my findings suggest contributes to the poor provision of psychosocial support to learners with barriers to learning. Of the three SBST members who participated in my study, only two knew their designated social worker, i.e., the social worker who is responsible for rendering social work services to their school.

Moreover, of the three teachers who participated in this study, only one of them reported awareness of the availability of social workers providing services to schools. Furthermore, one SBST member and teacher mentioned that their knowledge of their designated social workers came about through word of mouth, through which working relationships were formed and led to collaboration in facilitating an anti-bullying campaign.

SBST 2 stressed:

> …uh, how we found out that we have SWs from Social Development? We found out when the SW from the service point came pertaining to another child's case. Then we asked them, because you came pertaining to another child's case, tell us, who are our social workers? Your SWs are at the district. Why have we not seen them since?

Contrary, **SBST 1** pointed out: "…we do not have social workers… we do not have that relationship with them."

Teacher 1 expressed that she too was unaware of the social worker responsible for overseeing the school she is employed at:

> Let me just say I do not know the social worker. There are some things they call 'stoep' talk, I remember there was this thing that a social worker is coming, you see…it just

travelled that a social worker is coming, and the parent has not come and, you see such things, so I have never received it in a meeting.

Teacher 3 reiterated this point: "I do not know our social worker; I will be telling you lies".

Literature by Hess (2020) considered collaboration to be of importance in educational settings. Hess (2020) added that collaboration involves the integration of expert professionals inclusive of social workers as part of the school's support system. This ideology is mandated by the SIAS policy to support learners with learning barriers (DBE, 2014). This means that the absence of social workers in schools is problematic hence the GDSD and GDBE formed a partnership to integrate the GDSD social workers into schools to render social work services.

The absence of social workers in schools also violated SIAS milestones of collaborating with essential departments to ensure that learners with barriers to learning receive the support they need (DBE, 2014).

The lack of visibility of Social Workers

This sub-theme relates to the second factor that contributes to the poor provision of psychosocial support for learners facing barriers to learning. According to the findings of this study, participants described the visibility of social workers as 'once in a blue moon' and 'seldom' while other participants indicated that social workers' visibility is seen in incidents where schools have severe cases. Some participants assert that social workers' visibility in schools is invitation-driven and not driven by a response to a case that has been reported.

Also, participants expressed a desire for social workers to be more visible, and they added that their visibility could be more organised with a plan in place that outlines when they visit schools.

For example, **Teacher 2** explained:

Normally, they come upon invitation. I don't remember, uh, any moment where the SW just came to ask what problems are being experienced. Mostly, it will be that we have identified a problem that needs a SW's intervention, that's when we will invite them to come and assist, you see.

SBST 2 also stressed this scenario:

So, those [social workers] that are stationed at the district, we do not know when they attend to us. We did a bullying campaign, and I invited the social workers. Three of them came and so they played their role. But now, you understand that it is once in a blue moon. Yes, because we do not know when they come... I wish they had their plan on when schools will be visited…and follow-up; things like that, right? Yes, that side [psychosocial] is not effective. I do not know what we can do for them to attend to us because they are the ones that can delve deep into social ills stemming from home, those of abuse, right?

SBST 3 also emphasised this problem:

…we are stuck with those kinds of situations wherein year in and year out you can see that this child cannot perform academically…there are serious challenges from home and there isn't that kind of proper intervention from the psychosocial support. Only on severe cases where maybe there is rape or there is serious abuse or neglect, that's where you see the intervention; it's very quick. But on a normal situation, the intervention is not that quick.

Teacher 3 had a similar perspective:

I do not want to lie. Unless the SBST Coordinator has called the SW in a hurry, that is when we would have seen the SW. That is why I am saying that there has never been a memo that was released indicating how SWs work; at what point we call them. We just hear that school SWs are available, but as to how they work, we don't know. You see, the SW seldom comes, maybe two times a year, I can say.

Literature has shown that there is a lack of visibility of social workers in schools (Pretorius, 2020). Social work participants explained many reasons for their lack of visibility in the school setting. Two reasons were emphasised, including high workloads and shortage of transportation (Lesesa, 2021). These reasons will, therefore, be elaborated below.

High workloads

This study's findings have shown that the lack of visibility of social workers in schools is as a result of high workloads that social workers have to manage. The SIAS policy framework was adopted in 2014 with expectations of being implemented in primary schools as one of the identified settings (DBE, 2014; Matolo & Rambuda, 2022). The following table provides an overview of the number of schools that each social work participant has the responsibility of rendering services to.

Table 3

Number of Schools Allocated to Social Workers

Participants	Sub-category	Number
SW 1	Primary schools	10
	High schools	4
	Special schools	2
	Total	**16**
SW 2	Primary schools	*Couldn't provide specific*
	High schools	*number for each*
		schools
	Total	**24**
SW 3	Primary schools	9
	High schools	12
	Special schools	2
	Total	**23**

Table 3 above indicates that social workers who participated in this study rendered social work services in different contexts, including primary schools, high schools, and special schools. Further, the table shows the number of schools allocated to each social worker. In addition, the

table shows that SW 2 only disclosed the overall number of schools allocated as well as their type (primary and high schools) and did not specify the number of primary and high schools allocated.

However, it is clear that they have to manage high workloads. For example**, SW 1** complained that their workload is overwhelming, similar to social workers that participated in Lesesa's (2021) study, and this results in failure to establish good working relationships and makes it difficult for social workers to be visible in schools:

> …the number of schools that we have honestly speaking makes it difficult to provide quality services, you understand. You have sixteen schools, let's say many or some of them are referring, you have to go from there to there… In reality, we are reactive, but we are not proactive. We are always running around, that is the challenge.

This point of view was endorsed by **SW 3**:

> Uh, it's still too much, neh, because with previous schools, there were some schools I had not conducted school visits at all, neh. So now, I was not doing visits, but there were people who were referring, it was still too much.

The NASW (2012) encourages the establishment of school social worker-to-student ratios to ensure that the workloads allocated to school social workers are manageable. The NASW Standards for School Social Work further states that:

> School social work services should be provided at a ratio of one school social worker to each school building serving up to 250 general education students, or a ratio of 1:250 students. When a school social worker is providing services to students with intensive needs, a lower ratio, such as 1:50, is suggested (NASW, 2012).

It is, however, important to note that while the NASW is a United States based organisation, it can be assumed that the proposed school social worker-to-student ratios might not be contextually relevant to this study that was undertaken within a developing country facing additional challenges.

According to the South Africa National Human Development Report, South Africa is plagued by the triple challenges of slow development, deep poverty and inequalities, as well as high levels of unemployment, albeit the long legacy of colonisation and apartheid (United Nations Development Programme & Government of South Africa, 2022).

The NASW's (2012) school social worker-to-student ratios have been included in this study as the available literature addressing the standards for school social work services given the paucity of such literature in South Africa that particularly focuses on workload management.

As such, the NASW's Standards for School Social Work Services were useful in this study for gaining an overview of school social worker-to-student ratios of participants.

To maintain consistency in the use of the term 'learner', despite having conceptualised that the terms 'learner', child' and 'student' will be used interchangeably, this study examined the NASW's (2012) school social worker-to-student ratios but will refer to social worker-to-learner ratios in the table and discussions below. As such, the NASW's (2012) school social worker-to learner ratios were examined within the context of this study, and the results are presented below:

Table 4

Number of Learners served by Social Work Participants

Participants	**No. of learners in mainstream schools serviced by the DSD social work participants** SW-to-learner ratio recommended by NASW (2012): 1:250.	**No. of learners in special schools serviced by the DSD social work participants** SW-to-learner ratio recommended by NASW (2012): 1:50.
SW 1	No. of learners serviced by this social work participant: 3500.	No. of learners serviced by this social work participant: 100.

SW 2	No. of learners serviced by this social work participant: 6000.	The participant does not render services to any special schools.
SW 3	No. of learners serviced by this social work participant: 5250.	No. of learners serviced by this social work participant: 100.

This study applied the NASW's (2012) ratio of 1:250 students within mainstream schools and 1:50 students for special schools. As such, the table above demonstrates that three social workers providing social work services in mainstream schools rendered services to approximately 3500 to 6000 learners. Furthermore, the table shows that within special schools, an estimated 200 learners received social work services from two social workers. Altogether, three social workers who participated in this study provided psychosocial services to approximately 14 950 learners across primary schools, high schools, and special schools.

Based on the above data, the number of schools each social worker has, and the number of learners estimated, makes it difficult to visit schools regularly to increase visibility and render effective services.

Pretorius (2019) has found that the social work profession's shift to adopt the social development approach, and the declaration of social work as a scarce skill, Pretorius (2019 as cited by the Republic of South Africa), has put pressure and high demand on social workers and affects social work practice in the following ways: the high workloads affects the frequency and quality of services rendered to service users, multiplying administrative duties leading to social worker ineffectiveness and inefficiency. Further, the author indicated that the nature and complexity of statutory social work leads to stress and burnout (Pretorius, 2019 as cited in Dickinson & Perry, 2002; Webber et al., 2005). This might explain why the social work participant in this study mentioned that she felt overwhelmed by the workload allocated to her.

In addition, Pretorius' (2019) view that high workloads have a negative impact on the frequency and quality of services, could account for social work participants' lack of visibility in schools.

Hence, workload management as a social work task is imperative. In South Africa, the Framework for Social Welfare Services (2013, p.24) provides guidelines for social work workload ratios, and outlines five scenarios to illustrate these ratios.

Firstly, if a social worker's casework allocation is 80%, the social worker should be managing 61 cases monthly and 224 cases annually.

Secondly, within the 80% parameters with influencing factors such as travelling and nature of beneficiaries, in this category, social workers are expected to manage 44 cases monthly and 60 cases annually.

The third scenario indicates that if a social worker's caseload is 80% with influencing factors being court work and travelling, the expectation is for the social worker to manage 19 cases monthly and 134 cases annually.

The fourth scenario integrates casework (50%) and group work (30%) as methods accounting for 80% of the workload allocation. The expectation here is for the social worker to manage 37 cases monthly and to render services to 160 beneficiaries through group work monthly.

The last scenario integrates all social work methods of casework (50%), group work (10%), and community work (20%) where social workers in this category are expected to manage 37 cases monthly, 35 cases annually, to provide group work sessions to 40 beneficiaries monthly and 75 beneficiaries annually, where the number of beneficiaries reached through community work is determined by the size of the community that is being targeted.

Since the Framework for Social Welfare Services was adopted in 2013, the GDSD might have to examine the feasibility of the different social work workload scenarios within the context of school social work with consideration of the complexities within this field of specialisation. It is important to note that in South Africa, the formalisation of school social work as a specialty within Social Work is still underway (Kemp, 2014).

Moreover, literature suggested that management can benefit from understanding the interconnectedness of school social work caseload size to the provision of effective social work services in school settings (Richard et al., 2019).

Huxtable (2022) acknowledged social workers as partners with schools who have a pertinent role to play in ensuring that children's intellectual, emotional and social domains are developed to harness optimal functioning. Therefore, positioning school social workers as essential role players in multi-disciplinary workforces in school settings is important (Xweso et al., 2023; Dağ, 2019).

There have been developments in the integration of social workers in schools. In South Africa, Gauteng Province in particular, a MOU was endorsed where one of the GDSD' and GDBE' responsibilities include participation in multi-disciplinary teams, including participation in SBSTs for the sole purpose of supporting learners with barriers to learning with psychosocial support, to provide supportive interventions, and enhance integrated service delivery to vulnerable children and their families (GDSD & GDE, 2018).

It is evident that social workers' high workloads directly impact on the quality of social work services provided to schools, their visibility because they are unable to make a reasonable number of school visits, as well as their ability to meet MOU requirements of engaging with SBSTs and providing direct social work services to learners and their families.

Shortage of transportation

Findings indicated that the second factor that influences the visibility of social workers in schools is the lack of transportation available at the GDSD. The social work participants mentioned that there are nine of them in their office and they have to share two cars among themselves. Given the shortage of transportation, participants reported that they are forced to prioritise crisis cases.

SW 2 highlighted this issue:

> … we lack cars. For example, there's nine of us in the office and we only have two cars so, we always have to prioritize crisis cases. Remember, when we are nine, and I have two crisis cases, and the other colleague has two crisis cases, and the other two crisis cases, it means that in that week, these two cars will run around working on crisis cases and we end up focusing on crisis cases and other cases fall behind. Then, when the time comes to solve some of the cases that fell behind, another crisis cases emerges, then it means that cars to go work and attend to crisis cases.

SW 1 captured this issue by stating: "….resources are a problem, that's number one, car shortage."

The provision of psychosocial services to schools relies heavily on the availability of transportation as social work participants are district-based, and the lack of resources has an impact on their visibility in schools, impeding their ability to provide efficient and effective psychosocial services.

The shortage of transportation also infringes the GDSD's deliverables that are outlined in the MOU where an agreement was made to "provide transportation and required resources/tools for trade for the social workers" (GDSD & GDE, 2018). This shows that the social work participants' visibility in schools is directly affected by their employer's failure to provide the necessary resources.

Recent literature reported lack of service delivery infrastructure as a barrier to school social work practice (Binks et al., 2024). As with caseloads that are too high, the shortage of transportation prevents social workers from rendering quality services and ensuring that they are visible in schools which undermines collaborative efforts.

Theme 6: Poor Collaboration concerning Referral Procedures

Adelman and Taylor (2017) set the tone for the discussion of Theme 6, indicating that the referral for specialised services is not without its challenges. These authors highlighted the following concerns associated with undertaking referrals to support learners with special educational needs:

> …providing all stakeholders with information clarifying available assistance and how to access help, facilitating requests for assistance, identifying and assessing problems, triaging in making referrals, planning and providing direct services, monitoring and managing care, managing resources, and interfacing with community outreach to fill gaps. The work also involves ongoing formative evaluations designed to improve quality, effectiveness, and efficiency. With specific respect to severe and chronic problems and students mandated for special education programmes, special assistance includes connecting what the school offers with whatever is available in the community and facilitating access. In implementing the activity, emphasis is on enhancing a "system of care" and ensuring the special assistance is integrated with the other facets of the comprehensive system of learning support. Processes related to problem identification, triage, referral to and management of specialised service require systematic connections (Adelman & Taylor, 2017, pp. 21-22).

The referral of a child experiencing barriers to learning for support should be a straightforward process. However, my data analysis revealed that challenges are experienced in this regard. The following sub-themes cover these concerns.

Teachers and SBST members do not refer cases to Social Workers using the correct Procedures

Findings indicated that social work participants have received training regarding how teachers and SBST members should refer cases to them using SNA forms. SNA is defined as a process of assessing additional supportive intervention needed using the SNA form (DBE, 2014). However, instead of following this expected referral procedure, teachers and SBST members referred cases to social workers telephonically and/or using WhatsApp. The adoption of such an approach is reported to be driven by the frustration of having to complete SNA forms which are time-consuming because they consist of many pages.

SW 3 made this point clear:

> ...when we attended that training, it was indicated SNA 1 is the one that has to assist SWs. Teachers were supposed to do a referral using SNA 1, but just because it has lots and lots and lots of information; it's pages in there. So, teachers will not be able to complete that SNA for each and every child that they have to refer.

Findings further showed that the referral of cases telephonically had a negative impact on social workers' delivery of services. Social work participants pointed out that sometimes they were called to attend to cases that teachers and SBST members perceived to be critical, however, upon their assessment of the cases, they perceived the cases not to be critical. Focusing attention on these types of referred cases was at the expense of the serious cases they were working on. If SNA forms had been completed by teachers, social workers would be able to evaluate whether urgent intervention was necessary.

SW 3 continued highlighting this issue:

> Teachers do not want to complete referrals, they want just to call wherever you would be. You would have to run and go…so sometimes they call you, but they exaggerate a case… when you assess, you find that there is no crisis.

Similar to my study's findings, research by Matolo and Rambuda (2022) has shown that teachers did not complete the SNA 1 form.

Literature by Msane et al. (2023) found that cascaded training was provided by the respective schools to SMTs and teachers through the feedback method that was implemented to guide teachers with the completion of SNA forms which enabled teachers to refer learners with learning barriers.

Further, research by Maree et al. (2023) has shown that teachers' reluctancy to complete SNA forms emanated from the number of learners in mainstream classrooms, that is 40 to 45 learners per classroom which made the administrative task of completing SNA forms impossible given that teachers were already overloaded.

Gauteng Department of Social Development's 'New' Referral Procedure

In 2021, the GDSD modified its internal referral form to suit the school context.

According to the Procedure Manual for the Revised Generic Intervention Processes Tools, the internal referral form being referred to by social work participants is a form named CW 04A and it "can be used to refer clients to existing specialised programmes within the organisation. It can also be used to refer a client from social work services to community development services or group work programme, or alternatively to transfer a case to another DSD service point" (DSD, 2019, p.42).

Participants described the form as shorter and more user-friendly, and thus, its completion was expected to be standard practice across all schools in the referral of cases. Teachers and SBST members were expected to complete the form and then email it to the social work supervisor who then reviewed the nature of the referred case and allocated it to the relevant social worker. It was further mentioned that if the nature of the case referred was something that

could be attended to telephonically, the social workers' supervisor assisted.

SW 3 explained that the new form was created to mitigate the challenges school staff experienced when using the SNA form:

> …our referral [form] is very short; it requires the child's details, problem and intervention needed as a school. You sign and that's it, but that one [SNA form] is like, you have to complete so many things that is why we ended up asking to use our own departmental template because it is very short and has all the details of the child.

SW 3 also explained why the new referral form was created and implemented:

> … all along they were not doing the referral in writing, they were just phoning the school SW then we attended the case without the referral...so, we come up with this thing of cases being first screened by the supervisor before they are allocated...and the supervisor can handle it [crisis cases] telephonically while I am not there attending to another crisis...

SW 2 clarified this matter:

> Mmm, now the system has changed, neh… I think this thing started I think last year [2021] in April… So, there was uh, a new criterion that is being used, in schools now, they refer a case using internal referral from the school; the supervisor is the one that is going to allocate the case to the relevant SW to whom the school is for. Now, we no longer receive SNA forms.

SW1 highlighted the advantages of using the 'new' referral process:

> So, we come up with this thing of cases being first screened by the supervisor before they are allocated, and maybe if you have one crisis case at school, the supervisor can handle it telephonically while I am not there attending to another crisis...

Unfortunately, findings indicated that even the new internal referral form was not being received well by some schools that still preferred referring cases through WhatsApp and calls because that was a procedure they were accustomed to.

SW 1 pointed out:

> … the transition of reporting a case to me to reporting a case to the supervisor hindered a

> lot of relationships I had…. At first, it was convenient that they can easily call or WhatsApp me. So now I have to go back to the schools and say, no, you cannot report to me. It's like, we are teachers we are busy, we don't have time to write and scan and… and … and …. Even that, I think is another reason why others are hesitant to actually send the referrals because they were used to that. There are others that still WhatsApp me...

Not All Teachers are Aware of the New Referral Procedures

Data analysis also revealed there was a teacher who did not know of the new internal referral form. This became apparent when the teacher suggested that social workers develop a questionnaire where teachers could complete client data. For instance, **Teacher 3** said: "I don't know what the social worker wants, so, maybe if the social worker comes with some kind of form that I complete that will give the social worker enough information to work with this child."

Teacher 3's response once again indicated that when new developments took place, this was not clearly communicated to all schools.

The Framework for Social Welfare Services (2013) posited that for inter-departmental and inter-sectoral collaboration to be effective, there should be mechanisms in place. One of the key elements or mechanisms articulated by the Framework for Social Welfare Services (2013) entailed the need for appropriate referral procedures to ensure that service users were being referred timeously and to the relevant service providers.

Moreover, one of the key responsibilities of school principals, SMTs and SBSTs entailed establishing a referral network with DSD and social workers as key role players in the provision of psychosocial support to learners (DBE, 2020).

Theme 7: Factors Hampering the Provision of Psychosocial Support

This theme addresses factors that were identified by participants to be hampering the provision of psychosocial support. Sub-themes include overcrowding in classrooms, paucity of social workers and psychologists, time constraints, teachers not cooperating well with social workers, selected SBST members not having the time and capability to fulfil SIAS expected responsibilities, and the paucity of psychologists, so learners do not receive services for a lengthy period after the referral has been made.

Overcrowding in Classrooms

Findings indicated that teachers and SBST members were faced with challenges of overcrowding in classrooms. As a result, they were unable to provide learners with the necessary attention to ensure the provision of care and support to eliminate barriers to learning. One SBST participant indicated that despite the overcrowding, the district office required them to provide personalised supportive services to learners faced with barriers to learning.

Teacher 2 pointed out the challenge of overcrowding in classrooms:

> ... our classes are overcrowded. We cannot provide individual attention to learners, you see, so the whole process does not get enough attention because of that because if you look closely, it is not all learners that we are able to reach…

SBST 2 reiterated the issue:

> The challenge is that in class, there is an overcrowding problem even though they refuse to hear it out, they [the district office] push the issue of seeing to it that you give the child work compatible to the child's level.

Teacher 3 also pointed out: "I have to go back and teach the children, teach the 49 children, that is why I am saying that we do not have time".

Research by Hess (2020) and Malahlela (2017) in support of Mpanza and Govender's (2022) study, echoed the same problem of overcrowding in classrooms.

Teachers in all three studies reported issues of overcrowding wherein learners with barriers to learning were unable to receive individual attention. Overcrowding was also a challenge reported within the selected primary schools investigated by my study.

A paucity of Social Workers and Psychologists

The following participants highlighted the issue of professional manpower being a major obstacle to the provision of support services, referring to paucity of social workers and psychologists.

Teacher 3 stressed the issue:

> So, manpower is not enough, we are still going to encounter this. Social workers now can do their jobs as we recommend. Things will get stuck in process, following that. You see, it becomes another deadlock because psychologists are not enough still...if there is no manpower, our children are going to suffer.

SW 1 emphasised the issue:

> Sometimes you leave schools, you say they are not referring. You are not going there because they are not referring, but maybe if there is manpower. I'd have time to say, let me check those schools and check if there are no issues, there is no school that does not have issues, so maybe some really do not know that there are school SWs but because of time, we don't have that luxury to say, guys, I'm here.

The 2023/24 Annual Performance Plan acknowledged the lack of manpower within the education system and concluded that "due to the limited number of professionals, such as social workers and psychologists in the sector, the Department will continue to build the capacity of LSAs" (DBE, 2024, p.85) to advance efforts directed at the provision of psychosocial support in schools. The gap identified by the DBE coincides with the findings reported in my study regarding the paucity of social workers and psychologists.

Time Constraints

An additional factor that was discovered to hamper the provision of support services is time constraints. Some participants were of the view that the contact time that they had with the learners in schools was not sufficient to fully support learners with barriers to learning. It was also reported that due to time constraints, teachers were unable to follow-up on cases of learners in need of psychosocial support services. Furthermore, the findings have shown that time constraints not only affected teachers' ability to follow-up on psychosocial cases but also created threats to collaboration as a social work participant indicated that very little time was allocated to them by schools when they went to present awareness programmes. As a result, social workers and schools did not have enough time to nurture their collaboration.

Teacher 3 pointed out the issue:

> You know to tell you the truth, our contact time with children does not allow us so much [time] for one to go in-depth with a child who is struggling, that's the problem with inclusive education. Because my timetable is swamped... these children who are struggling are within the cracks if we are being honest in inclusive schools...

SBST 3 reiterated the issue:

> In terms of the attention for those kind of learners, neh, once the teachers have filled in the forms, the individual support forms and the educator has done the interview with the parent, there isn't follow-up engagement with the family from the side of the teachers...there isn't enough time that they have to be focusing on following up on the psychosocial support.

SW 2 added:

> …sometimes when we have to do presentations; sometimes we go out and do presentations on teenage pregnancy, drug awareness, and whatsoever presentations; teaches are not comfortable with us utilising their time; you find they give you 10 minutes or 15 minutes, and within 10 minutes or 15 minutes, you cannot do much.

Time limitations and high workloads of teachers deterred them from engaging in tasks that expected them to explore learner problems, Lesesa (2021 as cited in Mishana et al., 2012). If collaboration is to be achieved between schools and social workers, schools need to create time for social workers to render services to eradicate learners' barriers to learning.

Teachers do not Cooperate well with Social Workers

Findings suggested that teachers were not cooperative in preparing learners for social workers timeously. Even though teachers knew a social worker was managing a case of a learner and would be coming to the school to interview the learner, they usually took a long time to prepare the child for the social worker's visit and have the child ready when the social worker arrived at the school.

SW 1 pointed out:

> …we have issues at schools, getting there again and attending to cases is another issue on its own, you get there you got a case you will wait for about two hours waiting, an hour or two, you are not prioritised I can say….

Similarly, **SW 3** expressed:

> …you would be waiting a lot of time at school waiting for the teacher to call the child and whilst when leaving the office you called the teacher...when you sit down with that child, it means you will not attend the other schools…. like, if ever I had reported for the child to be prepared, even if the child is fetched by somebody from reception, even if the teacher is not taken out of class, the teacher just leaves the child's name only, the SW is coming, when the SW comes, call this child from class, and then office, show the SW an office here…

Literature has shown that schools are liable for the provision of workspaces that enable social workers to practice efficiently. Further, school social workers require basic resources that can drive delivery of their work including clerical support (NASW, 2012). This means that

schools can leverage their secretarial resources to assist in the preparation of learners for social workers to eliminate time wastage.

Selected SBST members do not have the time and capability to fulfil the expected responsibilities

The findings of this study indicated that to effectively implement the SIAS policy, the people spearheading its implementation, such as SBST members, should be people who have sufficient time and capability to fulfil their responsibilities. For example, some participants thought that Heads of Department (HOD), who also headed SBSTs, found it difficult to effectively fulfil both roles and responsibilities because both were very demanding.

Moreover, some participants were of the view that “one rotten potato spoils the whole bag". This means that if all members of the SBST do not cooperate and contribute to the team, other members of the SBST will end up losing interest and momentum. The following issues emerged concerning the structure of SBSTs: selection of school personnel whose workload detracts focus on SBST related issues, and lack of participation from other external SBST members.

Teacher 3 pointed out the issue:

> …my HOD and is also SBST head at work, because if she was to show you her timetable, you will be shocked as to on what basis this person is an HOD. The person does not have any time, you see …the problem is that I don’t know, government likes to throw responsibilities at persons not suitable to head such things.

SBST 3 stressed the issue:

> …since I have been the SBST member, we have not seen any form of participation coming from the psychosocial, meaning those police, communities and the psychologist. Yah! They are only there on paper but there isn’t uh participation on their part…it becomes very difficult for us as the educators to drive the interest and the support if we don’t see

participation and interest coming from the psychosocial members of the SBST.

The following participant reinforced the need to evaluate and assess the criteria for the selection of SBST coordinators. The same participant was of the view that the workload of SBSTs hampered the efficient provision of psychosocial support services.

Teacher 3 reinforced the issue: "That is why I am saying, the coordinator will not be capable [to run the SBST] truly speaking. Mhmm, you see, so when there is no consistency, no."

Similar to my study's findings, research conducted by Mpanza and Govender (2022) has shown that the functionality of SBSTs was a challenge particularly because some members of the SBST did not have time to fulfil their duties.

There is a paucity of Psychologists, so Learners do not receive Services for a lengthy period after the Referral has been made

Concerning referrals made to the district office, two teachers and three SBST members who participated in my study claimed that they experienced challenges because of the shortage of educational psychologists in the district. This negatively affected learners with barriers to learning because they were placed on a long waiting list. As a result, learners sometimes had to wait for years before their challenges were addressed.

Teacher 3 stressed this point:

> We complete SNA forms, and the psychologist from the department can come until they say they are waiting for the number for the child to be placed in…We would be waiting until the child even leaves the school. When they get to high school, it's just severe problems. They get frustrated to an extent where some of them drop out and to get placement for these children is yes. Ask the psychologist, it's a burden.

Teacher 1 reiterated the issue:

> …another big one, slow system of the district. You could call them in January, they come January of the following year. That is one of the most painful ones. Teachers sometimes

identify it; they'll wait for psychologists for the whole year.

SBST 1 also reinforced the issue and highlighted the lack of support received from the district:

> …we do not have support from the district, even if you can report the case there. It is a problem because you can identify the child as from Grade 1 or wherever, and then they will not come and assist you. These children…you find it's a child who just completed a phase at Grade 7 even with the same problem...

SBST 3 added:

> And they take time to refer, we've got cases of learners who are not suitable for the school, but they are not referring easily. It's not easy for educators to start now seeing and taking them seriously because we are sitting with cases, I mean learners can stay in our school for five to six years without being referred...nothing is happening.

SBST 2 stressed this point:

> …what is missing that we need is the one of referrals that are not moving. I do not know how they are sorting themselves out that side [district] for children. For example, if you look at our special schools, they do not have children…because children are in mainstream school. If referrals were being done children would be there and they would see how they can help the children at those different schools... But because they are not being referred, that is our problem that we need help with... So, uh, referral procedures…because the psychologist is overseeing the entire district, the psychologist ends up not being able to refer quickly…

Similarly, a study conducted by Mpanza and Govender (2022) found that DBST's intervention process was slow in the selected primary schools that participated in their research.

Further, Mpanza and Govender (2022) asserted that processes of responding to referrals, assessments and placement of learners took too long. The district delayed in placing learners with barriers to learning. This was reported to be a challenge for both schools and the district itself because of capacity issues.

Health professionals are reported to be playing an important role in the SIAS process.

Psychologists are responsible for providing support to learners with special educational needs by conducting more formal assessments which consequently inform the level of support required (DBE, 2014; Rottaro, 2022).

Literature has shown that few educational psychologists are trained in educational psychology courses and suggested the deployment of educational psychologist interns to alleviate the workload of educational psychologists in the DBE to mitigate the issue of delayed placement of learners in special schools (Mampane, 2023).

Mprah et al. (2015) indicated that the placement of and support of children with special educational is pertinent in driving inclusive efforts in schools that are adversely affected by a lack of resources. The Directorate for Inclusion and Special Schools acknowledged the lack of resources faced by GDBE with challenges related to admission demands for learners with high support needs requiring placement in special schools (Gauteng Provincial Government, 2020).

If the referrals of cases are not managed collaboratively and strategically, the helping process can be impacted negatively and the best interests of the children concerned can be undermined.

For example, the long waiting periods according to the findings of my study in support of Mpanza and Govender's (2022) study, led to frustration and learners dropping out of school because they were to remain in mainstream schools while awaiting placement (DBE, 2014).

According to the SIAS policy, support to be rendered by DBST in such cases as covered by this sub-theme encompasses Outreach Programmes from Full-Service Schools and Special School Resource Centres as well as consideration of outplacement of learners to an alternative setting to access specialised support programmes (DBE, 2014). However, this was seemingly not happening successfully within the respective primary schools included in this study.

According to the following participants, parents, although not included as participants in this study's sample, were also affected by the district's prolonged learner placements in special schools. The study's findings showed that delayed learner placements harmed teacher-parent relationships because parents began mistrusting teachers and perceived them not to be prioritising the needs of their children.

Teacher 3 pointed out:

> Parents come to school to insult us, yes, because you would have since made the parents complete forms, piles on piles. Every year you promise the parent that the child will be taken [placed] but the child is growing and nothing is happening. No, but you understand it is a parent's frustration, you see, and I am within the system, and I should know what to do, and I unfortunately, I don't know what to do. You see, so if a system promises the parent that if a child is struggling complete forms, bring one two three, they submit, the Psychologist comes to assess the child then nothing happens. And even those forms, he/she says they are lost, He/she does not know where they are; says that we are a lot.

SBST 2 highlighted the issue within the context of a particular case:

> Now, with this child's case, the mother has been on her feet, always at the gate asking to come in, [the mother] would ask you, where did we stop because at the end of the day. We completed the health questionnaire, we completed everything, SNAs have been completed and then the child is not referred [to the school that meets the child's special educational needs].

Teacher-parent relationships are essential as key channels for driving supportive interventions for learners from the time a learner has been identified to be presenting with barriers to learning up to the last SIAS phase of supporting learners by endorsing, through provision of parental consent, the referral of the child to the relevant support resources, and parents are also identified by the SIAS policy as key members of SBSTs (DBE, 2014).

Theme 8: Strategies to address Factors that hamper the provision of Psychosocial Support

Some participants suggested strategies for addressing factors that hampered the provision of psychosocial services. The strategies include reintroducing remedial classrooms, providing teacher training and tools to conduct assessments and monitor learner progress, practicalising the role of social workers in SIAS implementation, as well as providing social workers with adequate transportation.

Reintroduce the Remedial Classrooms

The reintroduction of remedial classrooms was supported as a mitigation strategy against prolonged placement of learners with barriers to learning. Participants suggested having a specialised teacher on the ground at the school level.

Teacher 1 highlighted this point:

> …we need remedial classes. I take the child for a week and say, go and learn Setswana in there [remedial class] because it does not help when the child is there (pace-wise) and we [mainstream class] are there, so the child needs some remedial teacher who will take them, you see, that is another way to support the teacher, because other schools have remedial classes, some have special classes... LSEN classes that I used to teach when I joined the school.

Teacher 3 added: "…if we had a specialised teacher who works with uh, remedial at the school… I think that person could better handle SBST".

SBST 2 also stressed this viewpoint: "The plan could be better if we have an inclusive classroom, you see, there should be an inclusive teacher… some change is at least evident while they are awaiting to be referred to the relevant schools".

International literature by Balkan and Küçüktepe (2021) explored the implementation of remedial programmes within primary school settings which coincides with the context of my study.

The remedial programme was undertaken to identify the learners who struggled to meet the outcomes of the curriculum that was implemented in mainstream classrooms, and to assist those learners to overcome their barriers and enable them to catch up with the curriculum that was running in mainstream classrooms. Teachers who evaluated the programme recommended the running of the remedial programme continuously.

Research asserted that it is helpful to have measures in place that are strategically implemented to address learners' barriers (Balkan & Küçüktepe, 2021). As such, the reintroduction of remedial classes as a school-level, early-intervention strategy is thus proposed by the findings of my study.

Teachers need training and tools to conduct assessments and monitor learner progress

Participants stressed the need for more SIAS training that could focus on the practical application of SIAS, especially addressing topics such as child assessment and support because some teacher participants mentioned that they did not have the necessary tools that they could use to assess and intervene to address barriers to learning.

SBST participants indicated that the training received in 2018 was not sufficient to equip teachers with the practical tools that they required to support learners facing barriers to learning.

Teacher 1 highlighted the challenge that warrants training customised to meet the current requirements to implement SIAS: "Children with barriers mostly…the challenge that is still prevalent is that we do not know how to assess that child".

SBST 3 highlighted more gaps in the application of SIAS:

> …we see educators from the ground level. There is expectation from the department for these kinds of educators to support these learners. That is why we will forever have learners who are going to be going out of school because there wasn't support from the primary level.

Teacher 3, despite having been trained and having mastered the identification phase of SIAS, stressed the need to be trained in the tools they can use to address learning barriers. Further, the participant highlighted the need for learner evaluation tools to be put in place that they can use to assess learners' responses to teachers' supportive interventions.

Teacher 3 captured the issues related to the support given to learners:

> I think our job as teachers, ...is to identify a child…we do not know if the assistance you give to the child will it help really...or if it will bore the person and the person will leave it or do it for the sake of not being shouted at… the problem is moving forward; how to help the child, that is the problem. You see, so because we are not trained…you do not know the child will gain from the activity, is it challenging for him/her or…the department does not give us any complete things so that we can assist these children with.

In some respects, my findings support studies conducted approximately four to five years ago in the Western Cape and Free State provinces in South Africa. One of my key findings showed that teachers were somewhat struggling with the demands of implementing SIAS policy, particularly regarding the assessment and support phases of the policy. The studies conducted by Hess (2020) and Ntseto (2019), drew similar findings.

Mncube and Lehoba (2019) also elicited the same findings where they identified the training and development of teachers as a means for implementing inclusive education. Research suggested that training should be held quarterly as opposed to yearly to get a better understanding of developments affecting the functions of role players in the implementation of SIAS (Van Sittert, 2016).

Teachers and SBST members need to understand the role of Social Workers regarding the Implementation of SIAS policy

This sub-theme emerged as participants expressed the need to understand social workers' scope of practice within SIAS context. Both social workers and teachers reported that they

needed to know the parameters in which social workers render services in schools, and a teacher expressed the need to know the role of social workers.

SW 1 pointed this out: "I think there has to be a certain structure or a certain role, it must guide us properly…

SW 3 reiterated this point:

> I would need a lot of clarity regarding my scope of work because sometimes you work things that are supposed to go to the psychologist but because it was shifted to you, you run around with a case that should be moved by psychologists. On the other hand, it's behaviour, on the other child is struggling in class, they bring it to you, SW, like, the case becomes stuck and stagnant…sometimes they involve you in a disciplinary hearing.

Teacher 3 also highlighted this issue: "So, the SW, we do not know how you work, honestly, we do not know. What is the SW's role in schools, that's the problem. If we can know their roles in schools maybe we can have understanding."

To bridge the gap identified in this sub-theme, a social work participant proposed joint stakeholder training. The social work participant indicated that although SIAS was meant to harness integrated service delivery, responses to learners' issues were seemingly being addressed disjointedly.

According to **SW 2**:

> …It can be a training where we [SWs] are there, SBST, and teachers are there, I don't know if you understand me, so that we can have an understanding of where I come in, where you come in and how we help each other.

According to Reyneke (2020), school social work viewed as a "relatively new development in the modern South African education system. Thus, the roles and tasks of the school social workers are still not apparent to their employers and the broader education system" which can sometimes create confusion for the DBE, SGB, principals, and school social workers alike

(Reyneke, 2020). The findings of my study showed that the lack of knowledge of the role and function of social workers was unknown within and beyond social wokers' walls.

Social Workers require adequate transportation

The fourth strategy that emanated from my study includes the provision of resources, particularly adequate transportation for social workers. Xavier and Thanmpi (2024) recognised that crises were inevitable within school settings. Hence, school social workers were prone to crisis interventions.

As such, SBST members and teachers relied on social workers to fulfil their obligations to respond to and address cases that had been referred by schools. However, social work participants' shortage of transportation counteracted the SIAS mandate of promoting collaboration between DBE and other sources of support including DSD (DBE, 2014). **SW 1** pointed out: *"*Remember we go to the children, they don't come to us, so I need to have a car to be able to do my work".

SW 2 stressed this:

> At least if they said uh, 3-1, they find us another car and they become three and then you find it being shared amongst three of us. Or they bring two extra cars, where we have a car or two cars specifically for crisis cases and then others working in normal circumstances...

SW 3 added: **"…**the support we need from the employer, from DSD they must help with resources… they must give us support…they must help with cars". Essentially, the lack of transportation has negative implications on working collaboratively to advance SIAS implementation within a multidisciplinary, collaborative approach.

This means that for social workers to provide support and services to learners, and for them to be visible in schools to maintain partnerships, adequate transportation has to be prioritised by the GDSD.

Theme 9: Strategies for Enhancing Collaboration

All three categories of participants recognised the need for collaboration and suggested strategies that can be implemented to facilitate the process including: the employment of more social workers to make them visible in schools, social workers' engagement in the provision of preventative intervention in schools, and the establishment of case meetings.

Employment of more Social Workers to make them Visible in Schools

Findings suggested that the employment of more social workers, Vergottini and Weyers (2022) could be a strategy that can be implemented to enhance the collaboration and visibility of social workers in schools.

Social workers suggested that more social workers rendering services to schools could be employed by the DSD. There was a participant that suggested allocating five schools to one social worker and stationing the social worker at one of the schools where they could be easily accessible. Participants also highlighted the value of employing additional social workers to enable them to contribute more to schools by providing workshops and training and being interactive in case discussions about learner cases that were being referred to them.

SW 1 highlighted this point*:*

> Honestly, it's visibility. I think that is maybe an issue again that the schools have against us [SWs]. I can't paint schools as bad people, it also goes back to us, you understand, it goes back to visibility. I think maybe not knowing us, claiming not to know us, is because of, remember sixteen schools, I cannot go to one school every day, or every week, if it was possible, we were going to do it, but if our visibility improves at schools, you understand. We try, but we cannot reach all schools, you understand. Yes, it depends on how schools refer. If we had time or the resources to be visible, we were going to do so. It goes back to the fact that we as school social workers, we need manpower...

Similarly, **SW 2** emphasised:

> Uh, I think that if maybe, since well we are nine; talking on behalf of our field, if we can get three more social workers; and at least be twelve; and reduce the number of schools from 24 to 15 or 12; it will be a lot easier for us to be able to manage our schools.

SW 3 also stressed this point: "… if ever the Department [DSD] or the DBE makes sure that there are more social workers at least one social worker works with five or six schools, I think it could be manageable".

Teachers and members of the SBST drew visibility closer to the school context.

Teacher 3 added: "So, for me, I don't know, at school, we need a permanent psychologist or SW, something like that". **SBST 1** remarked: "…that's what I am hoping for us to have a school-based SW."

Although it would be ideal to have a social worker based at each school, the following participants conscientised us to the harsh reality of the feasibility of such an endeavour but suggested a reduced number of schools allocated to each social worker providing services to schools.

SBST 2 highlighted:

> According to me, being based at the district, them spending most of their time at the district is not working for us. By right, they [DSD SWs] should have been in schools. Maybe if they say one is given four or five schools at least let the SW be stationed in one of those schools where when we need the SW, we run to get the SW from that school. We are not saying…we know that government cannot afford for each school to have that SW.

Teacher 2 remarked:

> Yes, I should think that SWs should not only come to school when invited. Maybe there should be a programme where they say we visit schools, they frequent schools maybe let me say twice, just a programme where we know SWs come to schools, help us with referrals where needed. For them to be accessible...SWs are the ones that play a very important role and then if there is a need for a child to be referred, let that process be sped up; fast-tracked, because there more it is delayed, the more they don't act fast, the child's

progress is being delayed.

SBST 3 added to this point:

> …educators are not trained for psychosocial support, so, if we don't see activity happening from the psychosocial department, which is the social workers supporting and maybe in a form of workshopping educators about their campaigns and how to handle certain cases, it becomes very difficult...

SBST 3 suggested: "…we can interact with the district social workers coming at schools during meetings, following up on the cases, providing support in terms of training, what are other forms of campaigns like, for the SBST to be actively involved".

The role played by social workers in school settings has been deemed incremental (Reyneke, 2020; Van Sittert, 2016; Van Sittert & Wilson, 2018).

Studies by Van Sittert (2016), and Van Sittert and Wilson (2018) identified the following three responsibilities of school social workers: networking and engaging in collaborative efforts within multidisciplinary teams, developing prevention programmes as well as empowering and training teachers.

One of the school social worker's responsibilities identified by Van Sittert (2016) was the cornerstone of my study, focusing attention specifically on collaboration between essential SIAS implementers, namely, teachers, social workers and SBST members.

More recent research has shown that the integration of social services in schools is helpful for the following reasons: facilitating access to social service assistance and financial aid for children and their families, safeguarding children from abuse and neglect, linking children to health services, and applying a holistic approach to meet the diverse needs of children (Reyneke, 2024).

Social Workers should engage in the provision of Preventative Intervention in Schools

Participants expressed the need to drive collaboration by implementing preventative interventions, such as awareness programmes. Awareness programmes by social workers to parents at parent meetings could be one way of implementing the proposed collaborative strategy.

In addition, participants thought that parents would be more likely to endorse psychosocial interventions facilitated by social workers.

Participants also highlighted that awareness programmes could also focus on channels to follow when teachers encounter challenges in schools and on how social workers can be accessed.

Further, participants proposed that awareness programmes are critical to both learners and teachers.

SBST 3 pointed out:

> I think there is a need for awareness, especially during parent meetings. They [social workers] should be invited to come and provide that kind of information to parents so that parents should just allow and ease up on letting uh, social workers to be intervening in more serious cases.

Teacher 2 stressed this point:

> There is a need for social workers to come and do awareness presentations to empower us on like, the channels to go through when we encounter problems with our learners. Sometimes, you find that you are stuck, and you don't know what to do if you come across a problem of a particular nature...and you find that the only people who can help to correct the situation are SWs. But you find that the teacher does not really know exactly which SW responsible for their school is, how do I contact that person, and then like, which procedures would I need to follow you see, so the SWs are needed a lot.

SW 2 added:

> Uh, I think uh, awareness campaigns are needed in schools neh, because there are some schools that are not aware that there are SWs that work under the DBE rendering services to schools; why I am saying that; the schools are still referring cases to service points instead of referring cases to us, neh.

SW 1 further stated:

> So, it must be there an awareness. I don't know how we can do it so that they can get used to it, that okay guys, we [SWs] are here, and this is how we work, if you have cases, do one two three, refer, you understand? It's definitely needed.

SW 3 also highlighted this point:

> …there is a need, not only to children but to teachers as well, neh, there is a need for them to get an awareness, that we [SWs] provide this this and this services, and then we choose like this this and this. And even teachers, when they come across cases, they don't know how to handle them, you see, so you find that they get stuck with cases that maybe should have been referred to the SW, so the SW deals with it.

In support of participants' suggested measure of enhancing collaboration, research suggested the development of prevention programmes in schools as part of school social wokrers' scope of work (Lesesa, 2021; Sittert, 2016; Sittert & Wilson, 2018).

Establishment of Case Meetings

Participants stated that collaboration could also be enhanced through regular case meetings where key role players are present. School participants pointed out that after referring cases to social workers, they required feedback on how the cases were being managed. Further, participants alluded to the need to have a system in place to track progress on cases for accountability purposes. As such, the monitoring of cases that have been referred for supportive intervention as suggested by the SBST participant, should be overseen by the DBST.

Teacher 3 stressed this point:

> …the SW to tell me who he or she will consult for this child to get help because we can put things on paper but if they are just on paper and not actioned out, they are fruitless still, right? Yes, you see, so at least give me a timeframe in terms of who I will meet, and what the next step will be when I come, the person will be doing one, two, three. For us to know what is happening. We do not see these children being helped; we just see paperwork.

SBST 3 reiterated this point:

> If we had forums that are happening at that level of the SBST, where there's follow-ups, there isn't that kind of commitment coming from the SBST. Because the psychosocial part it's there, it doesn't exist, it's there on paper, but there isn't that kind of follow-ups. So, the onus lies with the DBST to have constant meetings with the SBST, seek follow-ups on cases, you know? Those are the kinds of activities that we want to see happening from the DBST's side.

According to the NASW (2012), social workers providing services to schools should be engaging in collaborative teamwork. It is indicated that the social worker as the case manager does not work in isolation but engages in joint efforts with other professionals in a multi-disciplinary team to facilitate effective case management processes.

As such, this approach of engaging in collaborative teamwork within the context of my study is proposed to be implemented through case meetings. The SIAS policy mandated that the "final ratification, monitoring and quality assurance of the support programmes would be the responsibility of the DBST" (DBE, 2014). Therefore, the DBST plays an important role in monitoring supportive interventions as suggested by the findings of my study in alignment with the SIAS policy.

Summary

In this chapter, I presented and discussed the study's findings. Nine themes and their relevant sub-themes were presented, based on thematic data analysis.

Theme 1 focused on the different levels of knowledge of SIAS policy, the comprehensiveness and frequency of training received.

Theme 2 captured that teachers and SBST members were familiar with their roles and responsibilities regarding SIAS Policy, whereas social workers were not.

Theme 3 reflected on the close working relationship between teachers and members of the SBST.

Theme 4 identified the following six issues as the common social ills in schools that need to be addressed by teachers, SBST members, and social workers: orphaned and neglected children, abuse, bullying, dysfunctional families, learners' abuse of illegal substances as well as poverty.

Theme 5 indicated the factors contributing to the lack of provision of psychosocial support to learners including: lack of parental involvement which is reported to be exacerbated by denial attitudes of parents whose children presented with barriers to learning and grandmothers who foster their grandchildren that found it difficult to engage with schools. Awareness of the availability of social workers was identified as the second factor that contributes to the lack of psychosocial support for learners as well as the lack of visibility of social workers, which were heavily influenced by high workloads and shortage of transportation.

Theme 6 discussed the poor collaboration concerning referral procedures where my findings indicated that teachers and SBST members did not refer cases to social workers using the correct procedures and discussed the GDSD's 'new' referral procedure and reported that not

all teachers were aware of the new referral procedures.

Theme 7 identified the following six factors hampering the provision of psychosocial support: overcrowding in classrooms, a paucity of social workers and psychologists, time constraints, teachers not cooperating well with social workers, selected SBST members not having the time and capability to fulfil the expected SBST responsibilities, and a paucity of psychologists, causing leaners not to receive services for a lengthy period after the referral has been made.

Theme 8 proposed strategies to address the factors that hampered the provision of psychosocial support which include: reintroducing remedial classrooms, providing teacher training and tools to conduct assessments and monitoring of learner progress, the need for teachers and SBST members to understand the role of social workers regarding the implementation of SIAS policy, and for social workers to acquire adequate transportation.

Theme 9 reported on three main strategies for enhancing collaboration including: employment of more social workers to make them visible in schools, social workers' provision of preventative intervention in schools, and establishment of case meetings.

The final chapter, namely Chapter 5, presents a summary and conclusions drawn, and recommendations based on the main findings of my study.

Chapter Five

Summary of Main Findings, Conclusions and Recommendations

Introduction

This chapter summarises the main research findings, conclusions drawn, and recommendations based on my research findings.

Summary and Conclusions based on Main Findings

My study aimed to explore the perspectives of social workers, SBST members and teachers regarding working collaboratively to provide psychosocial support to learners who experience barriers to learning in selected Tshwane primary schools.

Objective 1: To explore social workers', SBST members' and teachers' knowledge of SIAS policy and how it should be implemented in primary schools

Teachers and SBST members had a good understanding of SIAS policy. This is because they received comprehensive training in this regard. They also understand how this policy is supposed to be implemented in primary schools.

However, they emphasised that there is a need for further training as the training received was not effective, from an implementation standpoint. The findings of my study suggest that further training could be on assessment tools required after identifying learners experiencing barriers to learning and on how to monitor such learners' progress in the school setting.

Unfortunately, findings revealed that social work participants did not understand SIAS policy well, nor how it should be implemented in primary schools. This is because they received brief training in this regard. A social work participant suggested the need for combined training of all the SIAS stakeholders (SBST members, social workers and teachers) to better understand

each other's role within the multidisciplinary team.

Reyneke (2020) opined that to provide quality education to learners, teachers and social workers providing services to schools need to work collaboratively.

Bronstein's (2003) model of interdisciplinary collaboration reinforced the need for teachers, SBST members and social workers to be interdependent. Since my findings have shown that social workers' training is inadequate, it can be assumed that it would be difficult for them to understand what their role is when working collaboratively with teachers and SBST members to address learners' barriers to learning.

As such, this interdependence can be harnessed in the following ways: by spending time together, and communication and respect for each other's professional insights (Bronstein, 2003). This study's theoretical framework further suggests that interdependence can be harnessed through case meetings which are elaborated on under key findings and conclusions related to Objective 4.

What my study is essentially implying is that in addition to Vergottini and Weyers' (2020) functions of South African school social workers, these functions should be practicalised for social workers and other role players, the implementation thereof, needs to be monitored, and the effectiveness thereof, needs to be evaluated within a multi-disciplinary context. This is important because the fundamental understanding of SIAS by all relevant role-players, especially, social workers, is compulsory because social workers' integration within schools can eradicate barriers to learning (Reyneke, 2024).

Furthermore, this study emphasises the importance of interdependence that needs to be harnessed by the various SIAS stakeholders, because if each stakeholder's role and responsibility is clearly outlined and communicated, various stakeholders can contribute meaningfully to the

eradication of barriers to learning.

Objective 2: To explore the perspectives of social workers, SBST members and Teachers regarding factors hampering the provision of psychosocial support to learners with barriers to learning

My findings indicated that factors contributing to the lack of provision of psychosocial support are multifaceted (Mavuso, 2020) and include: lack of parental involvement because parents are in denial or have challenges coming to terms with learning barriers faced by their children or practically find it difficult to maintain regular contact with the teachers. This means that the onus lies with the parents to ensure that their children have access to support. In cases where parents are in denial, the barrier is found to be prolonged.

My findings have shown that some parents have lost trust in teachers' ability to address their children's barriers to learning. This is because they waited many months, sometimes years, when their children's learning barriers needed to be assessed by educational psychologists. This problem relates to the scarcity of educational psychologists to support learners in South African schools (Mampane, 2023). This problem can also hamper parental involvement. The district's inability to place learners in special schools or refer them to suitable supportive programmes timeously might have discouraged other parents whose children have barriers to learning.

If cooperation and support are to be expected from parents in addressing barriers to learning, this means that SWs need to be integrated in schools to address challenges that impede foster care parents from being able to care for children placed in their care. Such services require the statutory intervention of SWs (Framework for Social Welfare Services, 2013).

My study suggests that there are children who have been placed in the foster care of their grandparents who did not have the capacity to fully meet their educational needs.

As such, if such a case is observed during the screening and identification processes undertaken by teachers, social workers can play a meaningful role in the assessment and implementation phase of SIAS to eradicate barriers related to foster care placements.

Social workers are trained to deal with involuntary service users, described as service users forced to be involved with social workers or other professionals, but do not wish to do so (Kirst-Ashman & Hull, 2018). Within the context of my study, involuntary service users are parents of learners with barriers to learning, for example, because they automatically need to undergo SIAS processes to address their children's presenting barriers.

Engagement is the initial step in the helping process, focusing on relationship building between the social worker and the service user (Kirst-Ashman & Hull, 2018). These authors state that service users, in this study's context, parents, need to be orientated on the regulations and conditions under which help is provided. Building on what was discussed in my key findings and conclusions of the first Objective, preventative interventions by social workers can create a platform for informing parents about inclusive education policies, and all the relevant legislative frameworks and policies guiding interventions with children. Drawing from Bronstein's (2003) model for multidisciplinary collaboration, newly created professional activities such as acts of collaboration, programmes, and systems that maximise the expertise of each SIAS role player should be tapped into for effective collaboration.

This can form part of the preventative level of intervention within which social workers render services targeted at "preventing development needs from developing into social challenges or risks" (Framework for Social Welfare Services, 2013, p. 29). Social workers can render prevention interventions to help transform parents into voluntary services users, to encourage them to report barriers to learning that they identify at home and engage in supportive

interventions recommended by the school's support staff.

While some participants had awareness of their designated social workers of whom they heard of through ‘stoep’ talk or word of mouth, there were some participants that indicated that they had no relationship with their social workers, which can be attributed to the lack of visibility of social workers in schools.

However, my study has identified that the lack of visibility is caused by high workloads and shortage of transportation. As a result, social work participants argued that the quality of services they would like to render at schools is proving difficult.

The findings of my study showed that the lack of visibility of social workers in schools is caused by the paucity of social workers, which is a pity because SBST members that participated in this study acknowledged the need for social workers in schools (Joubert & Jacobs, 2024).

While my study’s participants acknowledged the South African government’s inability to employ social workers to be based at each school, as proposed by Lesesa (2021), they however, implored the GDSD and GDBE to work collaboratively to coordinate the allocation of existing social workers to ensure effective service delivery that is not characterised solely by crisis interventions.

Gray and Lombard (2023) classified crisis-driven interventions as interventions where social workers respond to immediate crisis as opposed to problems that span over a long period of time. The findings of my study showed that this type of social work practice is precipitated by high workloads and the lack of transportation (Lesesa, 2021).

In general, overcrowding hampers teachers from providing individual attention to learners with barriers to learning. Findings have shown that public schools in South Africa are notorious for overcrowding, described as the prevalence of “too few teachers, too few

classrooms and too may learners" (Equal Education, 2021, p.25). Equal Education, a non-profit organisation, conducted a study to understand overcrowding in Gauteng's schools, a province within which my study was conducted.

My study's findings substantiate the findings made by Equal Education (2021), namely, that overcrowding leads to teachers' inability to provide individual attention to learners.

In addition, teacher participants in my study indicated that they did not have adequate time to follow up on cases of learners referred to social workers. This means that there is a likelihood of learners not being screened, identified, assessed and supported on time. To mitigate this, the GDBE could provide support to teachers by placing non-teaching personnel in schools (Equal Education, 2021) such as LSAs, or educational psychology interns.

Moreover, my study's findings have shown that another factor that hampers the provision of psychosocial support is the lack of cooperation received by social workers from teachers. Social workers complained that they usually had to wait for lengthy periods upon arrival at the schools to meet a learner whose case had been referred to them.

Further, it was indicated that teachers failed to prepare learners for the social worker's visit because of time constraints, which could account for teachers' lack of preparation of learners in readiness for the social worker's direct intervention (Hepworth et al., 2023). The NASW (2012) has implored other school staff such as clerks or secretaries to play an active role in ensuring that there is cooperation from schools for effective delivery of services.

Furthermore, findings found that there was also poor collaboration between social workers, teachers and SBST members because the latter parties do not follow correct case referral procedures. Even though the GDSD simplified the referral process, some teacher participants were unaware of this change, or simply not interested in making referrals this way.

Owing to the nature of their positions in schools, HODs, also SBST coordinators, did not have sufficient time and capacity to fulfil their SBST duties.

In some cases, these key psychosocial stakeholders were not actively involved in carrying out the mandate of the SBST.

As such, my study's theoretical framework argues that until all role players essential in the implementation of SIAS, take ownership of their roles collectively (Bronstein, 2003), it will be difficult for multi-disciplinary collaboration to be achieved. Each SIAS role player needs to take ownership of their roles, within the new referral pathway, for teachers, this means completing the GDSD's internal referral form. In cases where time constraints are hindrances to support programmes, to come up with a well-functioning administrative system (Kemp, 2014) as the delay or failure to refer learners experiencing barriers timeously and appropriately (Framework for Social Welfare Services, 2013), will intensify the barriers to learning.

Objective 3: To probe the perspectives of social workers, SBST members and Teachers regarding factors that can enhance the provision of psychosocial support to learners with barriers to learning

Understanding the role of social workers in the implementation of SIAS is one of the factors identified in my study that can enhance the provision of psychosocial support in schools.

The social work roles explained below can be used as a source for the development of guidelines that articulate the practical role of school social workers within collaborative contexts. While there is literature that provides guidelines for social work services in high-risk schools in the Gauteng Province (Lesesa, 2021), an area in which my study took place, these guidelines do not delve into multi-disciplinary collaborative practice as Lesesa's (2021) participants were all social work participants.

Linked to Objective 3, key findings and objectives related to Objective 1 suggest providing combined training to all the relevant SIAS role players, as some participants indicated that SIAS was not being implemented effectively. If teachers, SBST members as well as social workers are not well acquainted with the role of social workers in school settings, SIAS will continue to be implemented ineffectively.

Kemp (2014, p.30), and Vergottini and Weyers (2020, p.131), outline the various roles of social workers providing services to schools.

The first role entails, “screening, identification and assessment of learners in need of social work services”. This role mentioned by Vergottini and Weyers (2020), positions social workers as essential implementers of the SIAS policy from the beginning phase and is characterised by screening of at-risk learners or those who have already been experiencing barriers to learning, to the identification phase, where learners who present with barriers that need psychosocial response are identified (Kemp, 2014) for early intervention from social workers in collaboration with other role players.

The Guide for Learner Support Agents and Schools on Providing Psychosocial Support to Learners (DBE, 2019, p. 11) has indicated that one of the roles of psychosocial support within the education system is the “early identification of vulnerable children and provision of support”.

These are interventions social workers are eligible to provide according to the (Framework for Social Welfare Services, 2013).

The third phase within SIAS is the assessment phase where social workers could assess the appropriate intervention strategies and relevant stakeholders that are necessary for addressing the barriers that require psychosocial measures.

The second role of social workers, “interpretation and assessment of identified needs and problems” according to Kemp (2014, p.30), and Vergottini and Weyers (2020, p.131), acknowledged the specialised knowledge and skills possessed by social workers (Reyneke, 2024) in evaluating the presenting problems and needs of learners (Lesesa, 2021), and their ability to apply various theories, making meaning of the implications of the problems on the learner’s social functioning and well-being.

Thirdly, social workers provide direct social work practice (Kemp, 2014), described by Hepworth et al. (2023) as the face-to-face interactions that social workers have with service users including individuals and families, groups, and community members. These authors assert that these direct interventions take place within a vast range of settings and incorporate a variety of roles and apply an ever-growing body of knowledge and skills.

This means that social workers have the necessary knowledge and skills to render services in various settings, including schools, and consulting with various service users such as parents, and other SIAS role players such as teachers and SBST members, which (Vergottini &Weyers, 2020) classify as support personnel and other professionals, making up the fourth role played by social workers in school settings.

The fifth role of school social workers is to promote the involvement of parents and communities (Kemp, 2014; Lesesa, 2021, Vergottini & Weyers, 2020). The findings of my study indicated that there was poor parental involvement. As a mitigation strategy, my study implores social workers to build rapport with parents through the provision of preventative programmes (Lesesa, 2021) such as awareness programmes. These programmes could be targeted at parents during parent meetings before the commencement of the school calendar to sensitise parents to the different barriers learners experience and provide information on the relevant support staff.

The sixth role of school social workers entails engaging in collaborative and coordinated efforts with other role players to ensure delivery of services from a holistic approach (Kemp, 2014; Vergottini & Weyers, 2020). This aligns with the fourth component of my study's theoretical framework, collective ownership of roles. According to Bronstein (2003), this factor encompasses the sharing of knowledge, skills, and experiences by learners and their parents, as well as professionals (such as teachers, social workers and SBST members) as a way of showing their commitment to collaborate.

The seventh role of social workers acknowledges social workers' ability to link service users to relevant services "through liaison with resource persons within other departments and organisations" (Kemp, 2014, p.30; Vergottini & Weyers, 2020, p.131), particularly because (Hepworth et al., 2023) state that inadequate resources can contribute to difficulties encountered by service users.

Social workers are best positioned to link learners and their families to resources. This can be done in collaboration with teachers and SBST members to remedy the presenting barriers to learning in their early stage. The involvement of social workers at this stage could help address cases before they become severe.

The eight role of social workers is administrative in nature, where social workers are involved in report-writing, Vergottini and Weyers (2020, p.131) which can be "brief and targeted (such as an assessment for referral) or longer, such as a report for court or a biopsychosocial assessment" (Hepworth et al., 2023, p.186). These reports can all be useful depending on the nature of the barrier(s) faced by the learner.

"The development of inter-professional teams", Kemp (2014, p.30), and Vergottini and Weyers (2020; p.131), being the nineth role of social workers rendering social work services to

schools, was discussed under the key findings and conclusion of the first Objective in depth.

Moreover, this study suggested that social workers are predominantly known for rendering crisis interventions in schools. It also became apparent that over and above learning difficulties such as poor attention deficit disorder, learners are affected by other social ills that emerged in my study such as bullying, learners' use of illegal substances, sexual abuse (Boboyi, 2024), poverty, neglect and dysfunctional families. This therefore indicates that there is a need for social workers to render prevention, early intervention and statutory/residential/alternative care interventions (Framework for Social Welfare Services, 2013) to address the social ills that affect learners in schools.

Bronstein's (2003) model of multidisciplinary collaboration encourages collective ownership of roles. However, social workers, and SBST members cannot hold each other accountable for delays experienced in addressing learning barriers if the roles of social workers are unknown to social workers and other role players, and when there is no matrix in place that monitors and evaluates each other's collaborative efforts.

As such, to be fully operational and effective in their respective roles, it is necessary for SIAS implementers to redefine their newly professional activities (Bronstein, 2003) and associated roles. Hence, combined training for all SIAS implementers is recommended by my findings. For the collaboration between the GDSD and GDBE to be effective, reflection on the process outlined in Bronstein's (2003) model for multidisciplinary collaboration, needs to be common practice.

Objective 4: To explore and describe what social workers, SBST members, and Teachers think should be done to facilitate a collaborative approach to provide psychosocial support to learners who experience barriers to learning

Collaboration within school contexts, according to Huxtable (2022), and Reyneke (2024), should be inclusive of social workers who play a vital role in addressing barriers to learning (Mavuso, 2020). However, my study showed that given that the provision of social work services in schools is a relatively new terrain, teachers and SBST members do not fully understand what the role of a social worker is (Reyneke, 2020).

Unlike teachers or SBST members, social workers through the provision of direct social work intervention (Hepworth et al. 2023; Kemp, 2014) can conduct home visits (Kirst-Ashman & Hull, 2018).

Ochocki et al. (2024) outlined the purpose of home visits from concepts presented in Allen and Tracy (2004). Ochocki et al. (2024) are of the view that resource-focused home visits entail conducting needs assessments to determine relevant resources or referrals to support basic needs of families and provide caregivers with information on parent support groups.

This means that social workers are in the best position to interact with learners and their families in their homes, learn more about them, and learner barriers, Wasik et al. (2012 as cited in Ochocki, 2024).

Latest research concurs with the findings of my study which indicated that the "involvement of parents is imperative, and that school social workers are in a better position to develop parenting programmes" (Boboyi, 2024, p.10). The involvement of parents in SIAS processes is critical for eradicating learning barriers (DBE, 2014). A such, as a preventative measure, social workers can engage with parents on meso and macro levels.

Social workers can develop parenting programmes targeted at parents of learners who have been identified to be at-risk of experiencing barriers to learning and facilitate awareness programmes in the communities in which the schools they render services to are located.

On a micro level, social workers can engage with parents of learners who have been identified to be experiencing barriers that require psychosocial intervention to assess the presenting barriers and develop intervention plans (Lesesa, 2021; Vergottini & Weyers, 2020).

In this way, social workers can intervene in children's cases early and timeously. The Framework for Social Welfare Services (2013, p. 29) described early intervention as "services aimed at the early identification of risks, behaviour and symptoms". It is clear that social workers are important within school contexts, as such, their employment (Boboyi, 2024) is inevitable, as suggested by my findings.

Further, collaboration can be enhanced through the establishment of case meetings, what Vergottini and Weyers (2020, p.131) described as case conferences, a strategy that was suggested by my study's findings as a measure for enhanced collaboration.

Case meetings are recognised as an example of one of the roles social workers can play in school settings which can be facilitated through "the development of inter-professional teams" (Vergottini & Weyers, 2020, p.131).

Within the context of my study, suggested case meetings can be described as meetings in which all the relevant professionals are involved in a learner's case, including the interpretation of the learning barrier, objective, and intervention plan (Kirst-Ashman & Hull, 2018).

In addition, case meetings can close feedback loops among various stakeholders managing a particular case. These meetings can also be essential for quality assurance and monitoring purposes (DBE, 2014).

Recommendations based on Research Findings

This section presents recommendations based on my research findings. These recommendations are to be considered by the GDBE and GDSD, as well as recommendations for multi-disciplinary practice and future studies.

In addition, this section also encompasses a *Model for Collaboration of Social Workers with key stakeholders in terms of SIAS Policy,* which I developed based on research done by Vergottini and Weyers (2020), the Framework for Social Welfare Services (2013) as well as an integration of the findings that emanated from my study.

This model is developed to respond to issues that emerged from the key findings of my study regarding poor collaboration and the lack of provision of psychosocial support within schools.

Recommendations to be considered by the GDBE

The SIAS policy is a call for promoting inclusive education from a collaborative standpoint. My study explored factors that hampered and those that enhanced collaboration, as such, the following recommendations are proposed to the GDBE.

This study recommends the integration of more social workers into school settings to provide prevention, early intervention and statutory/residential/alternative care and reunification and aftercare services.

Problems, such as poor parental involvement, and social ills such as bullying, illegal use of substances by learners, orphaned and neglected children, dysfunctional families and poverty that hamper the provision of psychosocial support to learners, can be addressed by social workers. Furthermore, social workers need to be engaged for their expertise through case meetings (Kemp, 2014; Vergottini & Weyers, 2020). The GDBE can consider incorporating

social workers in their SBST meetings quarterly, or as guided by presenting learner problems and needs in schools.

It is imperative for the GDBE to create a conducive environment for social workers to carry out awareness programmes. To implement the SIAS policy effectively, administrative systems need to be developed, Kemp (2014), and Vergottini and Weyers (2020) to enable social workers to have easy access to learners in schools.

Lesesa (2021) has found that social workers require private rooms to interview learners for client confidentiality purposes.

In addition, it is important for teachers and SBST members to refer cases to social workers using the correct procedures to ensure that learners receive psychosocial support.

To address delayed service delivery related to learner placement or referral to relevant programmes at district-level, the GDBE could consider contracting or permanently employing educational psychology interns to assist with the backlog prevalent at the district office.

These interns could conduct preliminary assessments to gauge the severity of cases being referred to the district office, while also allowing the district to make decisions about support programmes for cases assessed by interns.

It would also be helpful for the interns to be trained on the provision of support to elevate mild to moderate learning barriers being referred to the district office by the SBST, to "alleviate the workload of educational psychologists in the DBE" (Mampane, 2023).

Moreover, remedial classrooms could be reintroduced to mitigate against the adverse impact of delayed placements of learners with barriers to learning. Remedial classrooms, as also recommended by Ntseto (2019), can be integrated into SIAS processes of assessment and support.

Upon identification of learning barriers, the learners can be referred to school-based remedial classrooms for support. These classrooms can cater for mild to moderate learning barriers for a short period where tools and techniques can be used by select teachers who would have been trained in remedial intervention methods. Schools can leverage teachers already within the school system with knowledge of remedial instruction as an interim plan with the assistance of LSAs.

The aim of the proposed remedial classrooms is for learners to be assisted in addressing barriers where their progress can be monitored, and assessments can be carried out to examine the learners' readiness to revert to mainstream to advance inclusive educational efforts.

Owing to some SBST coordinators' inability to fulfil their roles and responsibilities as discovered in my research findings, the GDBE can develop frameworks for appointing and evaluating the performance of SBST members to safeguard learners from harm caused by delayed or unmet needs.

Furthermore, SBSTs can benefit from the appointment of new or existing remedial teachers who can form part of the make-up of SBSTs to strength resources during the assessment and support phases of SIAS in schools.

Recommendations to be considered by the GDSD

Despite the factors that hamper the provision of psychosocial support services in schools, social workers that participated in my study opined that they contribute to the school environment "as their knowledge of various theoretical models, legislation and policies regarding children and also their skills enable them to render a professional service to children" (Van Sittert, 2016). As such, this section provides recommendations to the GDSD pertaining to the services rendered by social workers in schools.

The employment of more social workers (Lesesa, 2021) can reduce the workload of social workers that are already rendering social work services to schools to enable them to not only render crisis interventions but to also effect change in schools through other social work methods such as individual, group, and community work.

Furthermore, the GDSD can ensure adequate transportation for social workers to increase their visibility in schools, and to enable them to conduct home visits to learn more about learners' barriers. This can help them develop good working relationships with teachers and SBST members, and subsequently, lead to enhanced multi-disciplinary collaboration.

Social workers in their advocacy role have the capacity to advocate for learners deemed vulnerable in a case where parental consent is unreasonably denied to the detriment of the learner.

Moreover, there is a need for standardised referral forms and procedures across the Gauteng province.

To ensure effective collaboration with SBSTs, social workers need to be encouraged to engage in case meetings with teachers during the assessment and support phases of SIAS, particularly in cases that require social workers' psychosocial insights. This can ensure that learners receive timeous and appropriate supportive interventions.

Furthermore, school social work practice has gained momentum in South Africa which might create opportunities for developing a National Strategy on SIAS Implementation for School Social Workers, outlining their roles and responsibilities, and clear and comprehensive guidelines (Joubert & Jacobs, 2024; Lesesa, 2021; Van Sittert, 2016) for multi-disciplinary, collaborative practice (such as for intervening within the SIAS policy framework).

This recommendation is reinforced by the Gauteng Social Development MEC Morakane Mosupyoe who indicated that the "National DSD should consider developing the school social work programme as a national programme" (Gauteng Provincial Government, 2024, para. 11).

While some social work participants had the opportunity to attend the training on school social work from Wits, more social workers can be trained, as agreed by (Vergottini, 2019), periodically, through Continuing Professional Development (CPD) workshops that are accredited by the South African Council for Social Service Professions (SACSSP).

The SACSSP described CPD as a "planned and structured process required from every registered professional to ensure that the standards of professional practice are maintained through a range of learning activities that ongoingly enhances the knowledge, skills, attitudes and professional integrity of social workers" (SACSSP, 2024).

The CPD workshops can ensure that best practice is shared among social workers rendering services in this developing field of specialisation (school social work) in various contexts.

These diverse contexts are comprised of social workers rendering services in either private or public schools, social workers who are either district-based or school-based, or those that are DBE, DSD, or SGB-employed, or those employed by non-governmental organisations.

To standardise school social work processes across these diverse contexts, and across all provinces in South Africa, the GDSD in collaboration with the SACSSP can enforce the acquisition of CPD points, where workshops are used as a vehicle for transporting knowledge and skills.

Recommendations for Multi-disciplinary Collaborative Practice

Addressing barriers to learning experienced by learners in schools requires collaborative efforts (Mavuso, 2020) of all SIAS role players. Based on the findings of my study, and the strengths of previous research undertaken (Chilisa, 2020) on the topic of school social work, this section discusses recommendations for multi-disciplinary collaborative practice.

Working collaboratively in implementing the SIAS policy calls for clear roles and synergised processes across all four SIAS phases of screening, identification, assessment and support.

"Schools can be good sites for care and support, and ideal spaces for implementing different models of collaboration to deliver integrated services on different tiers, but with a focus on promotion, prevention, and early detection of psychosocial challenges experienced by learners" (Pretorius, 2020, para. 35).

Hence, the recommendations for multi-disciplinary practice proposed by my study are informed by the levels of intervention (prevention, early-intervention and statutory/residential/alternative care interventions) outlined in the Framework for Social Service Delivery (2013), Vergottini and Weyers' (2020) social work functions and services that can be rendered by social workers in schools (although I place them within the context of SIAS), and suggestions outlined by the findings that emanated from my study.

Previous research and findings of my study indicated that social workers could play an active role in the screening and identification (Vergottini & Weyers, 2020) phases of SIAS. This entails screening and identifying learners who have been identified to be experiencing barriers to learning that require the intervention of social workers. According to the Framework for Social Welfare Services (2013), these SIAS processes are directly related to the prevention level of

intervention for delivering social welfare services. Services that social workers could render at this level entail awareness programmes and workshops.

Social workers could also contribute meaningfully during the assessment phase of SIAS. Hepworth et al. (2023, p.143-144) provided a two-fold meaning of assessment. These authors refer to an assessment as products that are written, or another meaning, an "on-going process that occurs between a social worker and a client in which the social worker can constantly gather information and analyse and synthesise it in order to maintain an accurate picture of the client, and their needs and strengths".

In this phase, social workers could assess learner problems and needs which can be carried out through direct social work interventions, collaboration and consultation with other relevant role players (Vergottini & Weyers, 2020). This phase is also characteristic of early-intervention level (Framework for Social Welfare Services, 2013).

The last SIAS phase of support entails the provision of direct social work services (Vergottini & Weyers, 2020). The needs of learners and parents could be addressed by social workers on micro, meso, and macro levels. The statutory/residential/alternative care intervention levels can address the issues affecting children that were identified by my study which include: child abuse, orphaned and neglected children and the illegal use of substances by learners, all of which align with the GDSDs' basket of services.

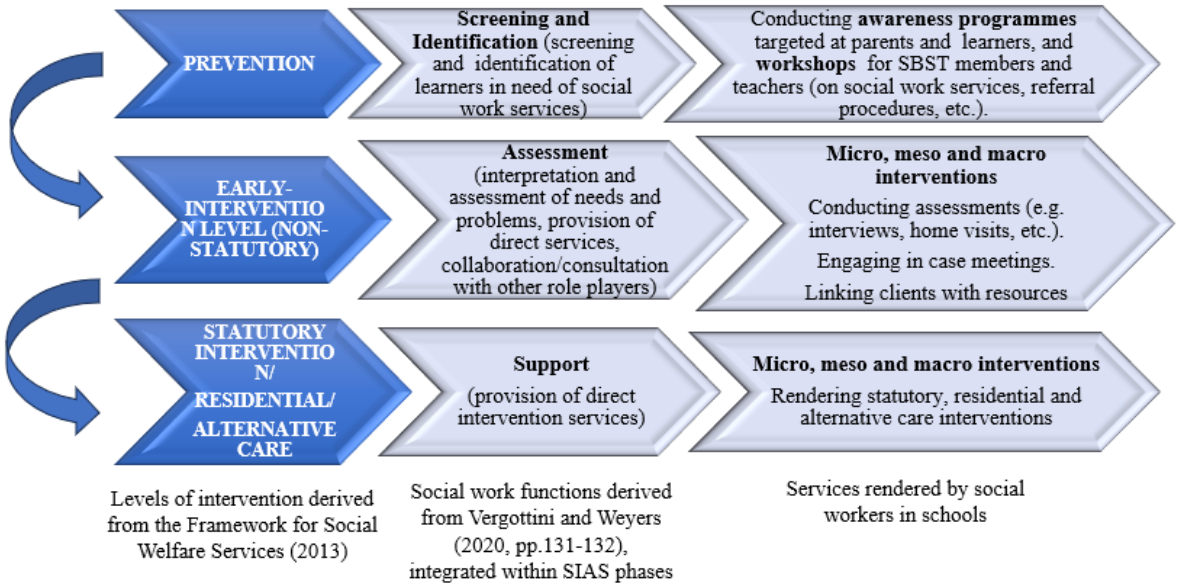
To respond to issues extracted from key findings of my study regarding poor collaboration and the lack of provision of psychosocial support within schools, I designed the *Model for Collaboration of Social Workers with key stakeholders in terms of SIAS Policy*.

The construction of the model is guided by Vergottini and Weyers' (2020) social work functions, the different intervention levels enshrined in the Framework for Social Welfare

Services (2013), and an integration of services social workers can render in schools when collaborating with key stakeholders in terms of SIAS Policy implementation to remedy barriers to learning.

Figure 3

Model for Collaboration of Social Workers with key stakeholders in terms of SIAS Policy



(Designed by NKM Ntlatleng)

Recommendations for Future Studies

Future research aiming to build up on my study's findings can focus attention on evaluating the effectiveness of SIAS policy in providing psychosocial support across all South African primary schools in the Gauteng province or nationally, from a collaborative lens, with all key stakeholders participating in the study. Other studies can explore the development of a National Strategy on SIAS Implementation for School Social Workers, as well as the design of a Framework for the appointment and performance monitoring of SBST members.

Summary

This chapter focused on the key findings, conclusions and recommendations of my study. The key findings showed that there are intersecting issues that have a knock-on effect. As such, all the four objectives of my study were discussed in light of the study's theoretical framework, model for multi-disciplinary collaboration adopted from Bronstein (2003).

For example, *Objective 1: To explore social workers', SBST members' and teachers' knowledge of SIAS policy and how it should be implemented in primary schools*, has shown that while teachers and SBST members had a good understanding of the SIAS policy, further teacher training is needed pertaining to learner assessment and monitoring tools for tracking learner progress. On the other hand, social workers did not have a good grasp of SIAS and how to implement it.

Objective 2: To explore the perspectives of social workers, SBST members and teachers regarding factors hampering the provision of psychosocial support to learners with barriers to learning, identified the various factors that hamper the provision of psychosocial support including lack of parental involvement, inconsistencies in the awareness of social workers by teachers and SBST members caused by high workloads of social workers and their shortage of transportation, which essentially, led to their lack of visibility in schools.

Other factors that hamper the provision of psychosocial services included overcrowding in classrooms, lack of cooperation received by social workers from teachers, poor collaboration between social workers, teachers and SBST members in relation to referral procedures, and the inability to fulfil SBST duties to meet the needs of learners in schools.

Objective 3: To probe the perspectives of social workers, SBST members and teachers regarding factors that can enhance the provision of psychosocial support to learners with

barriers to learning, has shown that the social workers' inability to implement SIAS effectively is attributable to inadequate training and unclear social work roles. The various social work roles drawn from Kemp (2014), as well as (Vergottini & Weyers, 2020), drove this discussion.

This objective entailed an acknowledgement of social ills that affect children in schools and suggested that social workers could work from an integrated approach to address barriers experienced by learners in schools. The application of levels of intervention, prevention, early intervention and statutory/residential/alternative care interventions (Framework for Social Welfare Services, 2013) were suggested to address social ills causing barriers to learning.

The discussion of *Objective 4: To explore and describe what social workers, SBST members, and teachers think should be done to facilitate a collaborative approach to provide psychosocial support to learners who experience barriers to learning*, was centered around the three factors that can enhance collaboration which are all social work-focused, namely, employment of social workers, provision of preventative interventions and engagement in case meetings.

This section was followed by recommendations based on research findings which include recommendations that the GDBE, GDSD and future research can consider, recommendations for multi-disciplinary practice, and a *Model for Collaboration of Social Workers with key stakeholders in terms of SIAS Policy,* which I developed in conjunction with previous research to enhance collaboration among SIAS role players to ensure effective delivery of psychosocial support to address barriers to learning.

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List of Appendices

Appendix A: Participant Information Sheet

Title of Research: Working Collaboratively to Support Learners who experience Barriers to Learning: Perspectives of Social Workers, Teachers, and School-based Support Team members at selected Primary Schools in Tshwane

Dear Sir / Madam

My name is Nkamogeleng Kgomotso Mmalesiba, Ntlatleng. I am a student enrolled for a Master of Arts by Coursework and Research Report in the field of Social Development at the University of the Witwatersrand, Johannesburg. My research supervisor is Dr. Priscilla Gerrand.

As can be seen by the title of my research, I will be contacting three 'categories' of professionals. These are social workers of the Department of Social Development who provide services to schools, School-based Support Team members, and teachers from primary schools. During the interviews, I will ask participants to share with me their points of view about working collaboratively to enhance the delivery of psychosocial services to vulnerable learners experiencing barriers to learning.

I am inviting you to take part in my study. This will involve me interviewing you, either face-to-face or online, whatever is most suitable for you. The interview will last for approximately 30 – 60 minutes. The interview will take place at a time and place that is convenient for you. With your

permission, I would like to audio-record our interview using my phone. I will then transfer the recording to my Google Drive where it will be stored safely. This data will be stored for two years following any publications, or for six years if no publications emerge from the study. The information you share with me will remain confidential. In other words, I will not tell anyone anything that you tell me during our interviews. When I compile my research report, I will use false names so people reading my research report, (or book chapters or journal articles based on my research findings), cannot identify any of the people taking part in my research. With your permission, other researchers may use the data collected from this study, but your name and any personal information will not be used or passed on.

If you decide to take part in my research study, it should be because you want to volunteer. You can also stop the interview at any time. You do not have to answer any questions if you do not want to. You will not get any direct benefits if you choose to join the research study. You will not lose any services, benefits, or rights you would normally have if you decide not to join the study. You will not be paid for participating in this research study.

You might experience minimal psychological risk during my study. What that means is that I might ask questions during the interview that make you feel sad or upset, and when that happens, with your permission, I will stop the interview and conduct the interview with you on another day or not at all. However, I will also provide support. For example, you will be referred to the Employee Health and Wellness Program's toll-free number, which is 0800 611 169, for free counselling services.

A summary of the research report will be sent to you and your respective departments. If you have any questions about this research study, feel free to contact me via email at 2467904@students.wits.ac.za. My supervisor's email address is Priscilla.Gerrand@wits.ac.za

If you have any concerns or complaints about the research study, you are welcome to contact the University Human Research Ethics Committee (Non-Medical), telephone +27(0) 11 717 1408, or email hrecnon-medical@wits.ac.za.

Yours sincerely,



Nkamogeleng Kgomotso Mmalesiba, Ntlatleng

Appendix B: Consent Form for Participation in the Study and Audio-recording



Title of project: Working Collaboratively to Support Learners who experience Barriers to Learning: Perspectives of Social Workers, Teachers, and School-based Support Team members at selected Primary Schools in Tshwane

I, _____agree to participate in this research project. I agree to the following:

(Please circle the relevant options below)

The research study was explained to me. I understand what this study is about.	YES NO
I understand that I can volunteer to take part in the research study, and I may withdraw from the study without being disadvantaged in any way.	YES NO
I agree that direct quotations from my interviews may be used by the researcher in the research report.	YES NO
I agree that my participation will remain anonymous; my name will not be used by the researcher in their research report and in cases where research findings may be used for academic purposes (including books, journals, presentations, and conference proceedings).	YES NO

I agree that other researchers may use the information I provide in my interviews (depending on their own ethics clearance being obtained) but my name, and any personal information will not be used or passed on. YES NO

_____(signature)

_____(name of participant)

_____(date)

_____(preferred virtual platform if online interviews will be conducted)

_____ (name of school - completed by teachers and school-based support team members)

Appendix C: Interview Guide for School-based Support Team Members



Title of the study: Working Collaboratively to Support Learners who experience Barriers to Learning: Perspectives of Social Workers, Teachers, and School-based Support Team members at selected Primary Schools in Tshwane

Participant information:

Name of participant: _____

Name of school: _____

Gender: _____

Preferred language of communication:

_____

Questions:

1. What is your relationship with the school? (teacher, principal, SGB member or psychologist or other; please specify: _____)
2. How did you become a member of the SBST?
3. How many members make up your SBST? Please do not mention their names. (What is their professional capacity?)
4. When was the SIAS system implemented in your school?
5. What kind of support does the SBST offer to teachers with learners vulnerable to barriers to learning?
6. Have you undergone training on the SIAS system?
7. What challenges have you experienced, or are you experiencing with regards to the implementation of the SIAS system as an SBST member?

8. How were you introduced to school social workers (from the Department of Social Development)?
9. How do you access school social workers for their intervention? (Please explain the process)
10. At what stage in the SIAS system do school social workers come into the picture?

Appendix D: Interview Guide for Social Workers



Title of the study*:* Working Collaboratively to Support Learners who experience Barriers to Learning: Perspectives of Social Workers, Teachers, and School-based Support Team members at selected Primary Schools in Tshwane

Participant information:

Name of participant: _____

Name of school: _____

Gender: _____

Preferred language of communication:

_____

Questions:

1. How many years have you been rendering school social work services at primary schools?
2. Have you undergone training on the SIAS system? (Please elaborate)
3. What challenges have you experienced, or are you experiencing with regards to the implementation of the SIAS system as a Social Worker ?
4. What need(s) can you identify that influence the implementation of the SIAS system within schools you have rendered, or are rendering social work services in?
5. Is your role in schools limited to attending to referrals made by the SBST through the SIAS system? (If not, please elaborate on your interaction(s) with the SBST)
6. At what stage of the SIAS system do you come into play? (Please elaborate on the process)
7. How are cases from schools referred to you?

8. How are you introduced to learners, teachers and the SBSTs in schools? (Please elaborate)
9. For how long are you allocated a particular school to render psychosocial services? (Please elaborate)

Appendix E: Interview Guide for Teachers



Title of the study*:* Working Collaboratively to Support Learners who experience Barriers to Learning: Perspectives of Social Workers, Teachers, and School-based Support Team members at selected Primary Schools in Tshwane

Participant information:

Name of participant: _____

Name of school: _____

Gender: _____

Preferred language of communication:

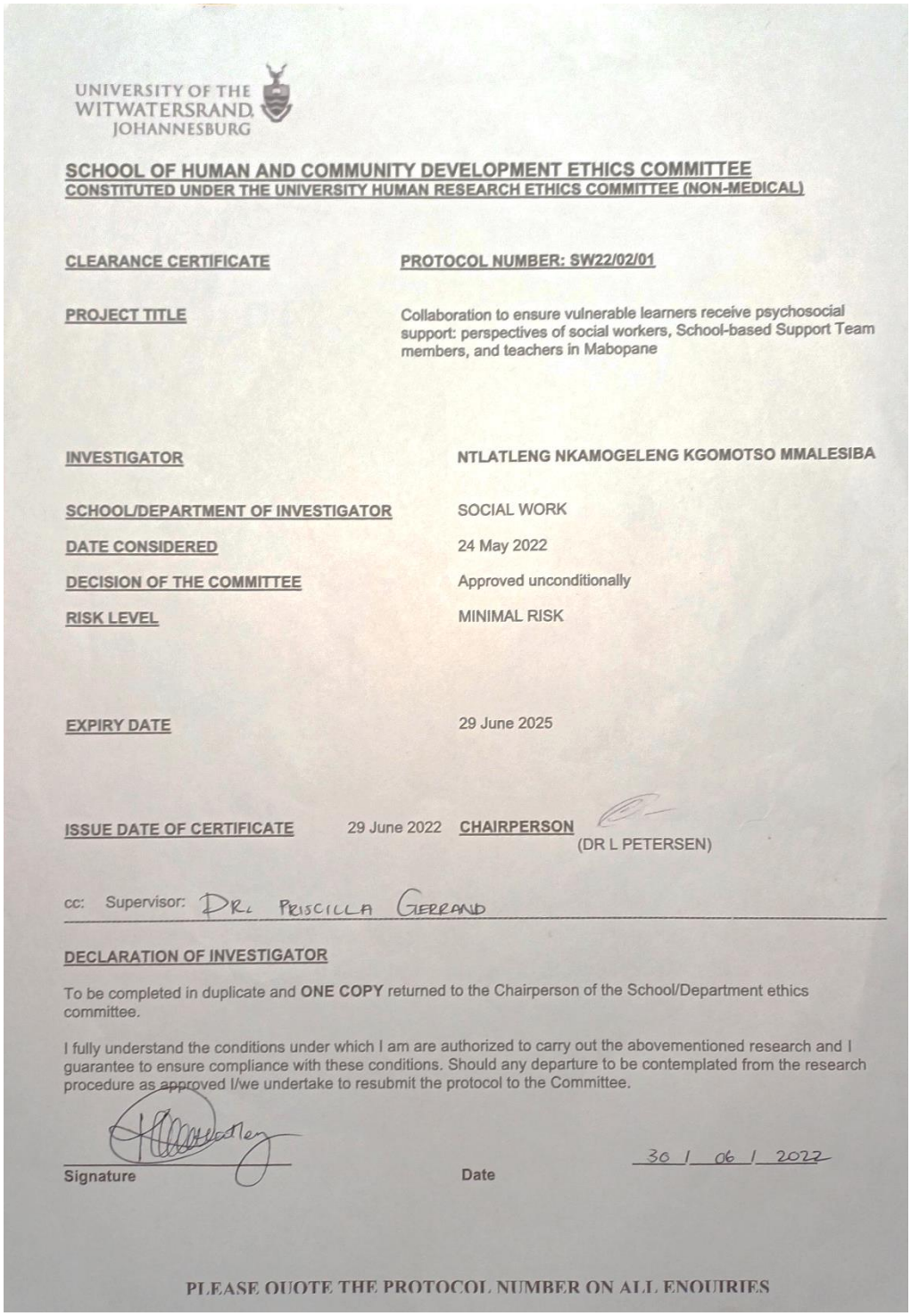
_____

Questions:

1. What do you know about the SIAS policy?
2. What do you know about School-based Support Teams?
3. What do know about social workers rendering services at schools?
4. It is important that teachers, members of the SBST, and DSD social workers collaborate with one another to ensure that vulnerable learners can receive psychosocial support. What factor do you think hinders collaboration?
5. What factors do you think can facilitate/enable collaboration?
6. What kind of support does the SBST and social workers from DSD offer to teachers with learners vulnerable to barriers to learning?
7. Have you undergone training on the SIAS system?

8. How were you introduced to school social workers (from the Department of Social Development)?
9. How do you access school social workers for their intervention? (Please explain the process)
10. At what stage in the SIAS system do school social workers come into the picture?

Appendix F: Clearance Certificate



UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

SCHOOL OF HUMAN AND COMMUNITY DEVELOPMENT ETHICS COMMITTEE
CONSTITUTED UNDER THE UNIVERSITY HUMAN RESEARCH ETHICS COMMITTEE (NON-MEDICAL)

CLEARANCE CERTIFICATE	**PROTOCOL NUMBER: SW22/02/01**
PROJECT TITLE	Collaboration to ensure vulnerable learners receive psychosocial support: perspectives of social workers, School-based Support Team members, and teachers in Mabopane
INVESTIGATOR	**NTLATLENG NKAMOGELENG KGOMOTSO MMALESIBA**
SCHOOL/DEPARTMENT OF INVESTIGATOR	SOCIAL WORK
DATE CONSIDERED	24 May 2022
DECISION OF THE COMMITTEE	Approved unconditionally
RISK LEVEL	MINIMAL RISK
EXPIRY DATE	29 June 2025

ISSUE DATE OF CERTIFICATE 29 June 2022 **CHAIRPERSON**
(DR L PETERSEN)

cc: Supervisor: DR. PRISCILLA GERRAND

DECLARATION OF INVESTIGATOR

To be completed in duplicate and **ONE COPY** returned to the Chairperson of the School/Department ethics committee.

I fully understand the conditions under which I am are authorized to carry out the abovementioned research and I guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the Committee.

Signature **Date** 30 / 06 / 2022

PLEASE QUOTE THE PROTOCOL NUMBER ON ALL ENQUIRIES

Appendix G: Plagiarism Report

University of the Witwatersrand, Johannesburg

School of Human and Community Development

SENATE PLAGIARISM POLICY

Declaration by Students

I, **Nkamogeleng Kgomotso Mmalesiba, Ntlatleng** (Student number: **2467904**) am a student registered for **Master of Arts by Coursework and Research Report in the field of Social Development** in the year **2024**. I hereby declare the following:

I am aware that plagiarism (the use of someone else's work without their permission and/or without acknowledging the original source) is wrong.

I confirm that ALL the work submitted for assessment for the above course is my own unaided work except where I have explicitly indicated otherwise.

I have followed the required conventions in referencing the thoughts and ideas of others.

I understand that the University of the Witwatersrand may take disciplinary action against me if there is a belief that this is not my own unaided work or that I have failed to acknowledge the source of the ideas or words in my writing.



26.09.2024

Signature Date