

**THE PHENOMENON OF RESILIENCE AMONG ADOLESCENTS WITH
LEARNING DIFFICULTIES IN THE VAAL TRIANGLE AREA**

by

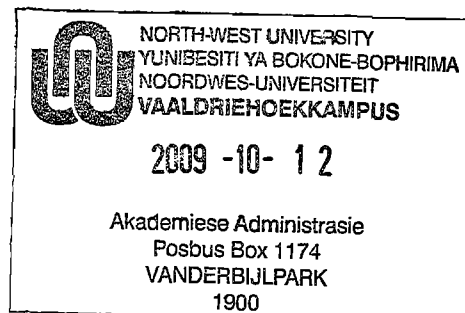
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**Dissertation submitted in fulfilment of the requirements for the degree
Master of Education at the
Vaal Triangle Campus of the North-West University**

Supervisor: Prof. L. C. Theron

May 2009



DECLARATION

I declare that this dissertation is my own work. It is submitted for the degree Masters of Education at the Vaal Triangle Campus. It has not been submitted before for any other degree or examination and it acknowledges sources used.

J. M. Palmer

Name

12/10/2009

Date

SUMMARY

The purpose of this study was to document, by means of a literature review and empirical research, the phenomenon of resilience among adolescents with learning difficulties (LD). My study was motivated by a gap in current literature. Although there are some South African studies that explore the personal antecedents of resilience in youth with LD, there were almost no studies explaining what interpersonal antecedents might contribute to resilience.

The aim of the empirical study was to investigate the phenomenon of resilience among adolescent learners coping with LD. This was done by conducting phenomenological research with ten learners who have LD and attend a school for learners with special learning needs.

The findings of the study are in accordance with previous studies that suggest that resilience is encouraged by dynamic processes that are both interpersonal and intrapersonal. This study makes a contribution to theory in that it suggests that resilience among adolescent learners with LD is also encouraged by their home environment and the positive relationship with siblings that might be brought on by parents treating all their children impartially. This has not been noted in previous studies. This study also raises questions about whether inclusion of all learners in mainstream schools are beneficial to learners with LD. Because my study identified interpersonal processes (unconditional acceptance, safe spaces, championship and pedagogical expertise) that promoted resilience among those participants who took part in my study, my study contributes to what was understood about the process of resilience in learners with LD and in so doing contributes to practice in that guidelines could be drafted for Life Orientation teachers based on the findings of this study. These guidelines can enable dedicated teachers to adapt their classroom environment so that a learner with LD can benefit.

Keywords/terms:

Adolescent; resilience; learning difficulties; protective and risk processes; and the impact learning difficulties have on adolescents.

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CHAPTER ONE
ORIENTATION OF THE STUDY

OVERVIEW OF CHAPTER 1

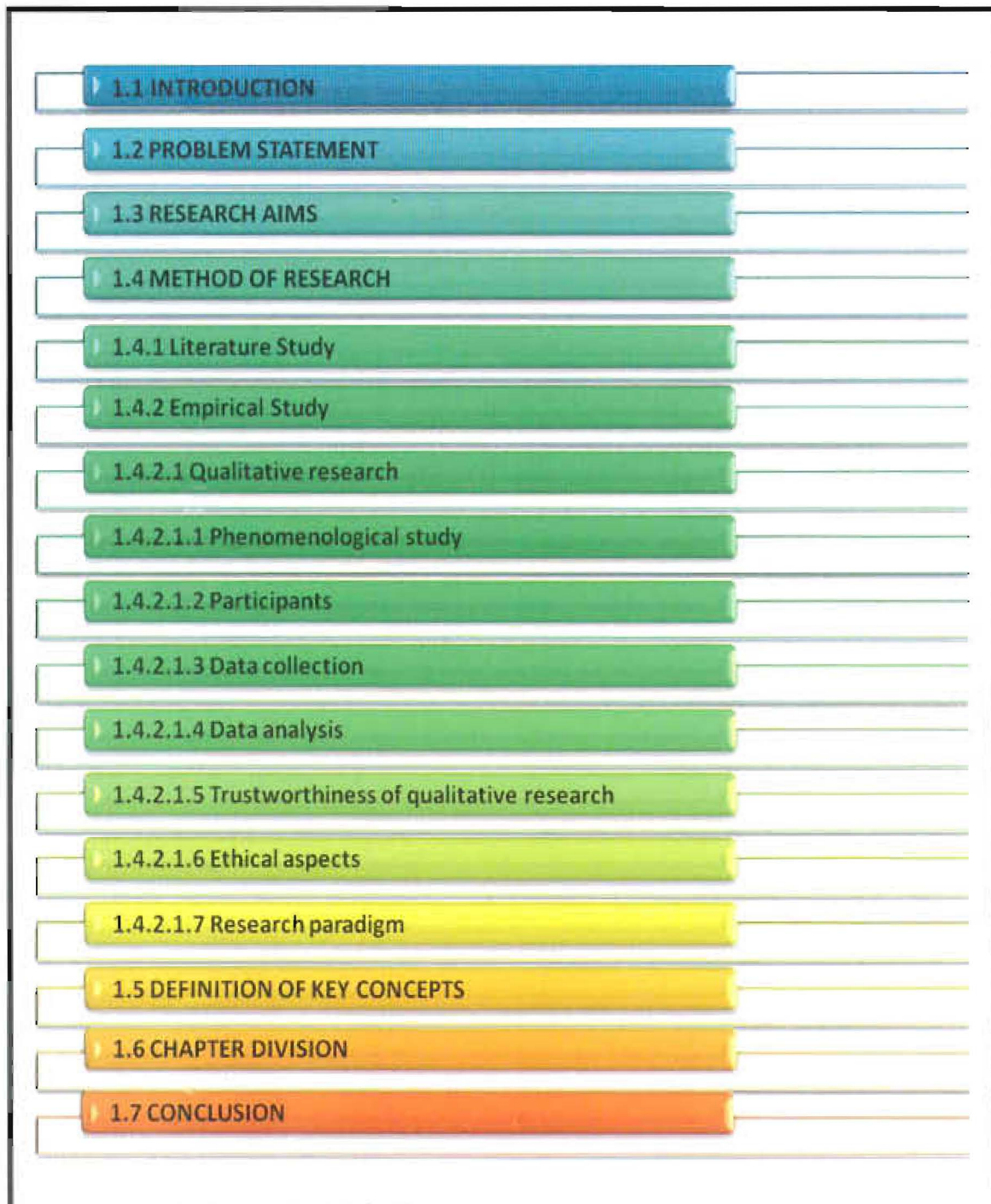


Figure 1.1: Overview of Chapter 1

1.1 INTRODUCTION

After the 1994 elections in South Africa, the country made a collaborative effort to be less discriminatory. Not only was the focus placed on recognising and accepting gender, racial and cultural differences, but the general aim was also to lessen all discrimination. This included discrimination against those with difficulties.

In February 1995, the first step was taken. *The White Paper on Education and Training in a Democratic South Africa* (SA, 2001), introduced a new system that specifically made provision for the education of learners who were struggling with any 'stumbling blocks' in learning (Landsberg, 2005:62). Part of this new approach meant that educational support for learners struggling with learning, should be part and parcel of education and should not be seen as a separate division in education (Landsberg, 2005:62; Swart, Engelbrecht, Eloff, Pettipher & Oswald, 2004:81). Basically, there was a motion towards including learners with learning difficulties in mainstream classrooms, instead of sending them to separate or special schools, or denying them an education. Learners with a learning difficulty (LD) would previously naturally have been sent to a school for learners with special needs, or labelled as being stupid or unteachable, before inclusive education became the order of the day.

Having to cope with LD can have a significant effect on an adolescent learner (Bauer, Keefe & Shea, 2001:5; Theron, 2006:199). Not all learners cope well with LD. In addition to how difficult LD makes the completion of basic scholastic tasks, learners who struggle to cope with LD are prone to display a higher rate of psychosocial adjustment problems than those learners who do not (Elbaum & Vaughn, 2003:229; Tuttle & Paquette, 1993:17). They often have a lower self-image than their peers (Tuttle & Paquette, 1993:17). In addition to these emotional and psychosocial challenges, many learners with LD struggle to socialise appropriately (Bauminger & Kimhi-Kind, 2008:315). In summary, LD contributes to a learner having to cope with a stressful life situation, both during and after school (Bauer *et al.*, 2001:5; Cordoni, 1990:4; Mash & Wolfe, 2005:335).

Having to deal with LD in addition to other life stressors can often have a profound negative outcome on the lives of adolescent learners and lead to unfavourable outcomes (Empson & Nabuzoka, 2004:155; Keogh & Weisner, 1993:4; Theron, 2006:199). Despite being surrounded by and having to cope with all these stressors, there still are learners with LD who manage to cope and adjust positively to their life circumstances and who remain resilient (Miller, 1996:265-267; Theron, 2006:200).

In this study the focus is on the impact of LD on adolescent learners and more importantly, what factors contribute to them being resilient in the face of LD.

1.2 PROBLEM STATEMENT

Adolescence in itself is a difficult period for a learner to have to deal with (Meyer, 2000:229; Williams, 2002:203). When the adolescent has to cope with LD, in addition to the challenging tasks of adolescence, the risks to adaptive functioning increase. As noted above, having to cope with LD does not only have a profound impact on a learner's academic achievement, but also can also threaten a learner's social interaction, emotional functioning as well as confidence and self-image (Bauer *et al.*, 2001:4; Keogh & Weisner, 1993:4; Theron, 2004:318).

Bauer *et al.* (2001:44); Bruner, Cole and Karmiloff-Smith (1992:9-10); Donald, Lazarus and Lolwana, (2006:308); Lerner (2003:7-9) and Theron (2004:318), state that LD includes the following difficulties regarding learning:

- Difficulty in using spoken or written language;
- difficulty in listening;
- difficulty in speaking;
- difficulty in reading;
- difficulty in writing;
- difficulty in spelling; and

- difficulty in mathematical calculations.

Due to persistent failure in any of the above-mentioned areas, a learner can often struggle to adjust emotionally as well as socially and this has often been linked to negative outcomes and less potential for resilient functioning (Empson & Nabuzoka, 2004:155; Lerner, 2003:554; Mash & Wolfe, 2005:335).

Even though LD's can have such a profound negative impact on adolescent learners, researchers were able to establish that there are in fact learners who are struggling with LD, who not only manage to cope with the LD, but also to thrive and cope successfully with the risks they face (Mash & Wolfe, 2005:334; Miller, 1996:265-267; Theron, 2004:318). These learners are described as resilient.

In my experience as a high school Life Orientation educator, I have noticed that there are some learners with LD who are able to cope resiliently. When I consulted literature based on resilience I found a lot of literature available on what enables adolescents in general to be resilient (Boyden & Mann, 2005:9; Cameron, Ungar & Liebenberg, 2007:285; Gordon Rouse, 2001:461; Greene & Conrad, 2002:33;37; Ungar, 2005:220; Ungar, Brown, Liebenberg, Cheung & Levine, 2008:2; Werner & Smith, 1992:2). However, there are limited studies that explain how adolescent learners with LD *manage* to be resilient (Theron, 2006:199). The studies that I could find focused primarily on the intrinsic factors and qualities which encourage learners with LD to be resilient (Theron, 2004:317; Theron, 2006:199-200). To the best of my knowledge, there are studies that focus on familial, social and cultural processes that develop resilience (Boyden & Mann, 2005:15; Gordon Rouse, 2001:462, Lopez, Prosser, Edwards, Magyar-Moe, Neufeld & Rasmussen, 2005:707; Schoon, 2006:80), but none specifically on how these interpersonal, ecological resources promote resilience in learners with LD.

The above lead me to the following research question:

What enables adolescent learners with LD to cope resiliently with the daily struggle of having to deal with LD?

This research question can be sub-divided into the following research questions:

- What is the impact of LD on an adolescent learner?
- What does resilience entail?
- What protective resources encourage resilience in adolescent learners who are coping with LD?
- What can we, as LO educators, learn from learners who are coping with LD?

1.3 RESEARCH AIMS

The principal aim of this study is to explore the phenomenon of resilience among adolescents with LD in the Vaal Triangle area.

The overall objective is further divided into the following specific aims:

- To conduct a literature study on LD;
- to conduct a literature study on resilience;
- to conduct an empirical study to determine what protective antecedents underlie resilience among adolescents with LD; and
- to provide recommendations for Life Orientation educators to encourage resilient functioning among learners with LD.

1.4 METHOD OF RESEARCH

Literature states that there are two broad ways to conduct a research project, namely qualitative research methods and quantitative research methods (Leedy & Ormrod, 2005:95).

Quantitative research is based on positivism, which focuses on universal laws. The main focus is placed on objectively summarising the social world by testing hypotheses and then

using the findings to be able to predict and control human behaviour (Leedy & Ormrod, 2005: 96).

Qualitative research, in contrast to quantitative research, is done from a more holistic point of view. The main focus of this method is to understand a chosen phenomenon or research topic and to explore the various meanings people link to this phenomenon in their everyday lives (Leedy & Ormrod, 2005:94; Nieuwenhuis, 2007a:51). The main focal point is to find answers to the 'why' questions of research (Nieuwenhuis, 2007a:51). Qualitative research originates with a general research question which leads the researcher to try and gain a deeper understanding of a specific phenomenon instead of just testing a specific hypothesis (Gilgun, 1992:24; Leedy & Ormrod, 2005:95; Shaughnessy & Zechmeister, 1997:22).

In my study I used a qualitative approach because the focus was not to find out how many learners were coping with LD or to test a hypothesis about how they cope, but rather to understand how learners cope resiliently with LD and which protective processes and factors in their environment contribute to them being able to function resiliently despite the risk of LD (Leedy & Ormrod, 2005:133).

According to Nieuwenhuis (2007a:58-60), qualitative research is frequently based on an interpretive perspective. This means that if researchers use a qualitative approach to research, they believe that there is not just one definite truth that needs to be investigated. My study is based on an interpretive perspective, which means that adolescents with a LD were asked how it affects them and how they cope. In other words the learners' own personal understandings were used to help me, the researcher, understand the impact of their LD on their daily lives and their resilience. The learners' experience was their own interpretation of the impact of dealing with LD and how they manage to cope resiliently. At the end of the study my own interpretations and conclusions were reached based on the information that I gathered or co-constructed during the one-on-one interviews and then interpreted, instead of basing it on universal facts.

During this qualitative study the natural development of information is portrayed. The main focus was to understand, and not explain, the phenomenon of how these learners, struggling with LD, cope resiliently by using the evidence that they presented throughout their individual interviews and supporting that evidence with relevant literature (Henning, 2004:3).

The literature study, which formed the basis of my understanding of the phenomenon of adolescent learners coping with LD, is summarised in 1.4.1 below.

1.4.1 Literature Study

Relevant literature was examined and the following themes and sources were found, as summarised in Table 1.1 below:

Themes	Sources
LD and the risk that it involves	Archer & Green, 1996 Bauer <i>et al.</i> , 2001 Dednam, 2005 Donald <i>et al.</i> , 2002 Donald <i>et al.</i> , 2006 Empson & Nabuzoka, 2004 Elbaum & Vaughn, 2003 Fletcher <i>et al.</i> , 2002 Hultquist, 2006 Landsberg <i>et al.</i> , 2005

	<p>Lerner, 1993</p> <p>Lerner, 2003</p> <p>Lerner & Kline, 2006</p> <p>Mash & Wolfe, 2005</p> <p>Montgomery, 1990</p> <p>Pollock & Waller, 2005</p> <p>Prior, 1996</p> <p>Rourke, 1993</p> <p>Spinelli, 2002</p> <p>Theron, 2004</p> <p>Theron, 2006</p> <p>Tuttle & Paquette, 1993</p> <p>Wallace & Kauffman, 1978</p> <p>Winkler, 1998</p> <p>Woolfolk, 2007</p>
<p>Impact of LD on learners</p>	<p>Bauer <i>et al.</i>, 2001</p> <p>Brooks & Goldstein, 2004</p> <p>Buchman, 2006</p> <p>Derbyshire, 1991</p> <p>Donald <i>et al.</i>, 2002</p> <p>Donald <i>et al.</i>, 2006</p>

	<p>Elbaum & Vaughn, 2003</p> <p>Empson & Nabuzoka, 2004</p> <p>Fergus & Zimmerman, 2005</p> <p>Finlan, 1994</p> <p>Kelley, 2005</p> <p>Lerner, 2003</p> <p>Lerner & Kline, 2006</p> <p>Maree, 1996</p> <p>Mash & Wolfe, 2005</p> <p>Masten & Reed, 2005</p> <p>Montgomery, 1990</p> <p>Prior, 1996</p> <p>Schoon, 2006</p> <p>Theron 2006</p> <p>Tuttle & Paquette, 1993</p> <p>Westman, 1990</p> <p>Winkler, 1998</p>
<p>Protective processes buffering learners against risk</p>	<p>Boyden & Mann, 2005</p> <p>Burt, 2002</p> <p>Cameron <i>et al.</i>, 2007</p> <p>Empson & Nabuzoka, 2004</p>

	<p>Glantz & Johnson, 1989</p> <p>Kelley, 2005</p> <p>Masten & Coatsworth, 1998</p> <p>Masten & Powell, 2003</p> <p>Masten & Reed</p> <p>Schoon, 2006</p> <p>Theron, 2004</p> <p>Theron, 2006</p> <p>Ungar, 2005</p> <p>Ungar & Liebenberg, 2005</p> <p>Ungar, 2008</p> <p>Ungar <i>et al.</i>, 2008</p> <p>Van Rensburg & Barnard, 2004</p> <p>Woolfolk, 2007</p>
<p>Including LD learners in diverse classroom situations</p>	<p>Becker & Luthar, 2002</p> <p>Brooks ,2001</p> <p>Dent & Cameron, 2003</p> <p>Department of Education, 2001</p> <p>Donald <i>et al.</i>, 2002</p> <p>Donald <i>et al.</i>, 2006</p> <p>Chambers, 1999</p>

	Henderson, 1997
	Janas & Nabors ,2000
	Johnson & Lazarus, 2008
	Masten & Coatsworth, 1998
	Masten & Powell, 2003
	Oddone, 2002
	Wang & Haertal, 1995

Table 1.1: Literature overview

The literature that was reviewed, provided a general overview of the phenomenon of resilience and the phenomenon of LD. I found very little literature that specifically outlined adolescent learners coping positively with LD. Numerous studies were found on how LD threatens a learner's resilience, but very few discussed what protective processes contribute to their resilience. This reinforced the need for my study.

1.4.2 The Empirical Study

Because the empirical study is fully discussed in Chapter Four, it will only be summarised very briefly below.

This research focuses on understanding what protective antecedents enable some learners to cope resiliently with the daily struggle that learners with LD have to deal with. As noted in 1.4, because I wanted to gain as much knowledge as possible in order to better understand what contributes to resilience among learners with LD, I conducted a qualitative study (Gilgun, 1992:24; Leedy & Ormrod, 2005:95; Shaughnessy & Zechmeister, 1997:22) on how adolescent learners cope resiliently with LD.

To emphasise the reason for this research design, a short but detailed description of qualitative research design as well as the research group is given.

1.4.2.1 Qualitative research

Qualitative research is carried out when a researcher wants to gain deeper insight to help better understand the phenomenon that is being researched (Leedy & Ormrod, 2005:95). In this study, the aim of the qualitative research that was done, was to provide a better understanding of how some adolescent learners cope with LD resiliently and positively.

Qualitative research involves the use of information such as interviews, documentation, and the observation of study participants, in order to gain a deeper understanding of the phenomenon which is being researched (Gilgun, 1992:5, Leedy & Ormrod, 2005:95; Shaughnessy & Zechmeister, 1997:22). In order to gather such information, qualitative research uses various approaches such as case studies; phenomenological studies; ethnographic studies, grounded theory and content analysis (Leedy & Ormrod, 2005:94-95).

In this study I followed a phenomenological approach because I wanted to gain a deeper understanding of the phenomenon of adolescent learners coping resiliently with LD.

1.4.2.1.1 Phenomenological study

In this study, a phenomenological approach was followed. The broad phenomenon that was studied was the antecedents that encouraged resilience in adolescents with LD. More specifically, the phenomenological study focussed on what encouraged resilient functioning among adolescents who are coping well with LD - i.e. what role do personal and ecological (e.g. family, environmental and cultural) resources play in their resilience?

The main aim of a phenomenological study is to understand and interpret the meaning given to everyday life experiences by the participants themselves. For my phenomenological study I tried to enter the learner's LD-altered world as best as possible

and to engage participants in a relationship of trust to create an open and natural method of gaining information in their own environment (De Vos & Fouche, 2001:80).

1.4.2.1.2 Participants

Potential participants were all learners with LD. However, given logistical constraints, only a limited number of participants could be included. The participants were drawn from a school for learners with LD in the Vaal Triangle area.

The school where I conducted my study is a school that caters for learners with specific learning disabilities. This particular school has an auxiliary department that provides the learners with Speech, occupational, Remedial and Psychology therapy. The school has a psychology department that provides the learners with academic, career and personal / social and life skills counselling programs. Group and individual counselling is also provided to help learners resolve any emotional, social or behaviour problems and to help them develop a clearer focus and sense of direction. In order to provide learners with the best possible education, the number of learners in a class range from 18 learners or less. In other words, the school makes a concerted effort to accommodate the special needs of the adolescent with learning difficulty.

The learners who participated ranged from Grades 8 – 10 and consisted of one distinctive group, namely resilient learners. Due to the fact that standardised tests of resilient functioning were lacking for learners with LD within the South African context when I commenced my study, the identification of learners that took part in this study did not rely on standardised resilient functioning tests. Therefore the judgement of community stakeholders forming an Advisory Panel (AP) was very important in order to identify which learners were resilient, as done by Ungar *et al.* (2008:4).

Resilient learners were identified by an AP consisting of the school principal, and three Life Orientation educators who clearly understood the concept of resilience. The notion of resilience was discussed with the AP based on Masten and Reed's (2005:76) authoritative definition of resilient learners, meaning those with adequate academic achievement, socially acceptable behaviour, peer acceptance, normative mental health, and involvement

in age appropriate activities. Although Masten and Reed's definition was based on research conducted in Western countries, after discussion the AP was confident that it was also suited to youth in our South African context. Following this discussion, the AP identified potential participants who were then recruited ethically.

In other words, purposive sampling was applied as the purpose of this study was to recognise what contributes to resilience in adolescents with LD (Leedy & Ormrod, 2005:206). Therefore the inclusion criteria were:

- Participants had to attend a school for learners with LD.
- Participants had to be in Grades 8-10.
- Participants were identified as resilient by the AP.
- Participants resided in the Vaal Triangle.

Leedy and Ormrod (2005:139) state that 5 - 25 interviews should be conducted, depending on the consistency of data that is received from the participants. After I conducted the tenth interview I was able to identify a consistent pattern of information with which the learners were providing me, therefore no further interviews were required (Leedy & Ormrod, 2005:139; Smit, 2006).

1.4.2.1.3 Data collection

I used semi-structured phenomenological interviews (typically an hour in length) that focussed on the resilient functioning of learners with LD (De Vos & Fouche, 2001:80; Leedy & Ormrod, 2005:139). The interview questions were mostly based on the following central question:

Tell me how you cope with life even though you have learning problems.

Additional or probing interview questions were guided by the participants' responses throughout the interview. For example, I typically asked how their parents, siblings, teachers, peers and communities made it easier for them to cope with their LD, if

participants did not mention these resources, or I asked them to tell me stories of how a resource enabled resilience in order for me to gain a deeper understanding.

All of the participants were interviewed twice. The first interview enabled me to get to know the participants (and vice-versa) and to encourage them to start thinking about what enabled them to be resilient. The second interview focussed on the antecedents of their resilience. I went back a third time to see four of the ten participants, after I had begun to analyse the data to clarify my interpretations. It also provided the participants with an opportunity to 'check' my understanding. Member-checking heightens trustworthiness (Lincoln & Guba, 1985:314; Maykut & Morehouse, 1994:147).

A copy of Interview O5ne is included in Addendum A as an example of the interviews conducted.

1.4.2.1.4 Data analysis

In this research, the interviews were transcribed and then the responses of the learners to the questions were analysed for themes that described how they cope with LD on a daily basis. To find the themes, the contents of the interviews were analysed using an inductive approach. I read the interview data repeatedly until I was able to identify themes that kept on 'popping-up.' All the pieces of my interview data that seemed to answer the original research question were coded (Carnozzi & Mathie, 2005:129; Maree & Van der Westhuizen, 2007:37; Nieuwenhuis, 2007b:99; Patton, 2002:459). The way in which I coded my information was influenced by my knowledge of what I understand about resilience (Chapter Two), and the impact of LD on adolescent learners (Chapter Three). Added to this was my experience as a Life Orientation educator working with learners with LD, some of whom manage to stay positive and behave resiliently in spite of the LD that they are coping with.

I open coded or labelled pieces of relevant text. Open coding was used to select codes according to what the information meant to me. This helped me to gather as much information as possible for an overall overview of the phenomenon (Henning, 2004:104).

I further used axial coding to group my open codes into themes that explained how protective resources encouraged resilience among my participants (Bornheim, 2000:77; Henning, 2004:104).

In selective coding, researchers look for specific codes that might add further dimensions to what has already identified (Bornheim, 2000:77; Gilgun, 2007:16). Selective coding is typically used in grounded theory studies and therefore was not relevant to this study.

1.4.2.1.5 Trustworthiness of qualitative research

Lincoln and Guba (1959:233) state that the key to conducting good and valid qualitative research is trustworthiness. My qualitative study focused on how I could persuade other researchers that my findings were worth paying attention to (Babbie & Mouton, 2001:276).

This qualitative research relied on following an interpretive process. What I believe and the experiences I have encountered influenced how I interpreted the data (De Vos, Schulze & Patel, 2006:6; Le Roux, 2006) and this had an impact on the trustworthiness of my research (Bogdan & Biklen, 2007:37). For example, in this study, I, the researcher, am affected by having to work with adolescent learners who struggle with LD, and therefore my research involved interviewing adolescent learners who seem to be coping with LD. It was important for me to think about what assumptions I brought to the study because of my experience of teaching adolescents with LD. According to Lincoln and Guba (1985:219) there are four main structures in qualitative research that mirror validity, namely credibility, transferability, dependability, and confirmability. In order to provide trustworthy findings, these four constructs must be observed. How I did this is outlined in Chapter Four.

1.4.2.1.6 Ethical aspects

My research was done strictly according to current fundamental ethical principles (Leedy & Ormrod, 2005:101). All the learners who took part in this study were assured of the utmost confidentiality and that they would remain anonymous throughout the study. I explained

my study's aims and how I needed the participants to participate. The learners agreed to participate and gave permission for me to record their interviews by completing a consent form that had to be signed by the learners as well as their parents. They also consented to me using the data for further research purposes (e.g. journal articles; conference papers). They were reminded that they had the right, at any time, to change their minds and to not take part in this research process. They were also told that, if necessary, they would be debriefed and referred for counselling (Leedy & Ormrod, 2005:101).

1.4.2.1.7 Research paradigm

A paradigm includes a basic set of beliefs that guide our actions and our feelings about the world as well as the beliefs of researchers when they undertake a study to help them understand the world (Denzin & Lincoln, 2000:19; Lincoln & Guba, 1985:15). My basic set of beliefs relate to the fact that I chose to work from a post-positivist paradigm using an interpretive approach.

Working as a post-positivist researcher implied that I understood that nothing is definite or absolutely true: certain observations can be incorrect and scientific methods give us an estimation of the truth rather than the truth (Henning, Van Rensburg & Smit, 2005:20). As a post-positivist researcher, I therefore accepted that reality could never be completely understood (Nieuwenhuis, 2007a:65). In other words, I was aware that at best I would provide an interpretation of the participants' interpretation and as such the findings in my research are not absolute.

In this study I followed an interpretive paradigm because I interpreted the data from the participants' viewpoint (Nieuwenhuis, 2007a:58-59). I chose an interpretive paradigm because I believe that human life and experiences can be understood from an insider's point of view and because of this, my research focused on how people link meaning to their everyday life experiences (i.e. how participants with LD cope resiliently with the challenges of LD) (Nieuwenhuis, 2007a:58-60).

A researcher is greatly influenced by previous experiences and prior knowledge. These would include such circumstances experienced in his¹ everyday life, a person's place in the world and various relationships with the world and what he has learned formally and informally (Leedy & Ormrod, 2005:151; Maree & Van der Westhuizen, 2007:33; Nieuwenhuis, 2007a:55). In other words, my interpretation of the data was influenced to some extent by my biases, beliefs, my previous experiences and my values (Leedy & Ormrod, 2005:151; Nieuwenhuis, 2007a:55). Therefore it was important that I reflected on this and thought about what assumptions I had about the research topic and then made these known, so that others would be able to evaluate whether my research conclusions had been influenced by my assumptions (Leedy & Ormrod, 2005:5).

In this regard, my interpretation was influenced by my knowledge of the processes of resilience, which suggests that resilience is possible in most difficult circumstances, especially when families, schools, communities and peers offer constructive support (Masten, 2001:227; Ungar, 2008:225). My interpretation was also influenced by my experience as a high school educator that led me to believe that adolescent learners, when faced with adversity (for example LD), are capable of being resilient. I have taught a number of learners with LD who did not develop maladaptive behaviour patterns even though their school and home lives were complicated by LD. This means that I went into this study believing that I would hear that personal and interpersonal resources encouraged participants' resilience. Never for one moment did I think I would not be able to find resilient participants.

Also, I believed that adolescent learners have the ability to be resilient because they have inner strength that drives them to prove that they are worthy and capable. I believed that they want to be respected, not only by their peers, but also by their family, school and community, and when they receive positive support, they can cope with any difficulty. I further believed that adolescent learners have the ability to associate themselves with positive relationships and processes that help make them less vulnerable to risk and help them develop and promote their resilient functioning. So, throughout this study I focussed on what was positive in these learners as well as their protective resources that

¹ In this study I refer only to the male pronoun. This is merely stylistic and not intended to exclude females

encouraged their resilience, instead of focussing on the negative factors with which they were faced.

This means that I listened attentively to their stories about how they managed to thrive. Although I did not ignore stories about difficulty, I was more focused on the positive. Even though the participants were not from the school where I teach, I empathised with the adverse circumstances that these learners found themselves in because of my experience as an educator often confronted in a class with learners who struggle to achieve academically.

In summary, my approach to this study and my interpretation of the data were influenced by my use of the interpretive paradigm and my belief (based on literature and personal experience) that resilience is possible in difficult circumstances.

1.5 DEFINITION OF KEY CONCEPTS

For the purpose of this study the following terms which are used repeatedly are clarified in Table 1.2 :

Learning Difficulties	A Learning difficulty is when a learner struggles to understand or use language (spoken or written) which presents itself as an inability to listen, think, speak, read, write, spell or be able to solve mathematical problems (Bauer <i>et al.</i> , 2001:44; Donald <i>et al.</i> , 2006:253; Lerner & Kline, 2006:2; Mash & Wolfe, 2005:319; Theron, 2004:318; Tuttle & Paquette, 1993:3; Woolfolk, 2007:131). Such difficulties are often accompanied by emotional and social difficulty (Elbaum & Vaughn, 2003:230; Hulquist, 2006:39; Lerner, 2003:174).
Learner	Learner refers to any person receiving education (Rossouw & Oosthuizen, 2003:28). In my study this relates to school-going learners, and more specifically to high school learners.

Educator	Any person who teaches, educates or even trains another person at an institution like a school (Rossouw & Oosthuizen, 2003:28).
Risk	Risk can be circumstances or interactions that jeopardise healthy development and positive developmental outcomes (Armstrong, Stroul & Boothroyd, 2005:391; Dent & Cameron, 2003:4; Durlack, 1998:513; Empson & Nabuzoka, 2004:40)
Protective Processes	Protective processes 'counteract' risk factors by buffering the effect of a risk factor (Cook & Du Toit, 2005:250; Donald <i>et al.</i> , 2006: 168). They are typically found in the individual and in his ecology (family, school, community and culture) (Boyden & Mann, 2005:15; Gordon Rouse, 2001:462, Lopez <i>et al.</i> , 2005:707; Schoon, 2006:80). A 'mediocre' risk factor can strengthen the ability to cope with more predominant stressors later in life and therefore can be perceived as a protective process (Cook & Du Toit, 2005:249).
Resilience	Resilience is the ability to bounce back from and cope with life's stressors and various adversities (Vaillant, 1993:284). In order to be able to determine resilience, two factors need to be present, namely: Is there risk or stress to overcome and is the person coping regardless of the risk? (Brooks & Goldstein, 2004:3; Empson & Nabuzoka, 2004:42; Fergus & Zimmerman, 2005:399; Kelley, 2005:265; Masten & Reed, 2005:75; Schoon, 2006: 6-7; Ungar, 2005:xv-xvi; Vaillant, 1993:284).

Table 1.2: Definition of terms used in this study

1.6 CHAPTER DIVISION

The chapters will be divided as follows:

Chapter 2: *The nature of resilience*

This chapter will provide information on the nature of resilience. It will highlight the protective and risk factors that influence an adolescent learner's ability to function resiliently.

Chapter 3: *The phenomenon of learners with learning difficulties*

This chapter will focus on the phenomenon of learners with specific learning difficulties and the impact of specific learning difficulties on adolescent life.

Chapter 4: *Research design:*

The aims, objectives and qualitative method of research will be outlined in this chapter.

Chapter 5: *Results of empirical research:*

The data that will be collected in this study will be content analysed in order to give a clear interpretation of the research results and to comment on what antecedents encouraged resilience among the participants in my study.

Chapter 6: *Summary:*

A summative conclusion regarding the empirical and literature study will be given in the summary. Recommendations for Life Orientation educators to encourage resilient functioning in learners with LD will also be made based on research findings.

1.7 CONCLUSION

In this chapter an overview of what this study entailed was provided. The following chapter will focus on the phenomenon of resilience.

CHAPTER TWO
RESILIENCE

OVERVIEW OF CHAPTER 2



Figure 2.1: Overview of Chapter 2

2.1 INTRODUCTION

It has been said that no one can rightfully claim to be a self-made person. Each successful person was given opportunities, encouragement, support, love, feedback or even hard times that facilitate growth and development in a certain direction. If we truly believe in a purpose-driven life, we have to acknowledge that an individual's purpose is linked to service to others, in some form or another (Annie Greeff, 2005).

Adolescence in itself is a period of development often associated with various hardships (Meyer, 2000:229; Theron, 2006:199; Williams, 2002:203). It is often true that when adolescents are confronted with the difficult developmental tasks of this period in their lives and additional difficulties (such as poverty, chronic illness or learning disabilities), that they are more vulnerable to maladaptive outcomes (Theron, 2006:199). However, it is also often true that adolescents cope adaptively with the adversities they face. When they do cope with difficulties that would typically be associated with negative outcomes or a lack of coping, youth are described as being resilient (Masten & Coatsworth, 1998:205; Masten & Reed, 2005:75; Schoon, 2006:8). As noted in the quote above, their resilience is often urged on by some kind of opportunity, encouragement, love and/or feedback during difficult times that will help them to grow and develop in a resilient direction.

In this chapter the concept of resilience and the resources that contribute to an adolescent being resilient was the main focus. Although the focus of my study was on what contributes to the resilience of adolescents who have LD, this chapter will provide an overview of resilience among adolescents in general. In Chapter Three I will include information on what contributes, or may contribute, to resilience among youth with LD. As noted in Chapter One, there is limited information available on the latter.

2.2 DEFINING RESILIENCE

Traditionally resilience has been defined as an individual's own capacity to overcome adversity. It was seen as their own personal ability to "bounce back" from difficult obstacles that they were faced with in their lives (Gordon Rouse, 2001:461; Werner &

Smith, 1992:2) but little attention was given to other aspects detached from the individual self that enabled him to “bounce back,” for example, his interaction with his family, community, culture and other ecosystemic resources.

Current research disputes the definition of resilience as a personal construct only, by saying that resilience should be seen as an active dynamic process between an individual and the capacity of his community to provide him with health-promoting resources that will enable him to be resilient, and not solely as an individual trait (Boyden & Mann, 2005:9; Cameron *et al.*, 2007:285; Greene & Conrad, 2002:33;37; Schoon, 2006:6; Ungar, 2005:220; Ungar *et al.*, 2008:2).

Ungar *et al.* (2008:2) and Ungar (2008:225), provide a more current definition of resilience. In their definition they mention three important processes: firstly, that an individual must have the capacity to navigate himself toward those resources that will nourish his well-being; secondly, the individual’s physical and social ecology must have the capacity to provide such resources; and, lastly, the capacity of the individual, his family, and his community to negotiate culturally acceptable ways for such resources to be shared. Simply, Ungar *et al.* (2008:2) and Masten (2001:227) are saying that resilience is an ordinary phenomenon and that protective resources were always available and not individually created. Ungar *et al.* (2008:2) and Ungar (2008:225) are basically emphasizing that resilience is dependent on an individual’s capacity to navigate himself to protective resources that are already available, and on the use of these resources in ways that are culturally meaningful to himself, his family and his community.

Because the definition of resilience has undergone such radical changes, it is important to know the shifts in research that brought on such a new dynamic definition. As previously stated, resilience studies focused on individuals and their individual abilities to not be vulnerable and stated that resilience is a fixed trait (Cameron *et al.*, 2007:297; Kim-Cohen, 2007:272; Luthar & Zelazo, 2003:513; Schoon, 2006:17). Then a shift occurred where researchers started taking a closer look at the protective factors that enabled someone to be resilient, trying to understand how these protective factors buffered the effect that risk would have on a child. A third shift in research occurred when researchers started examining how to build developmental assets in children and their communities (Ungar *et*

et al., 2008:2). The latest shift in resilient research is to demonstrate the importance of understanding resilience as a product of both the individual's capacity to navigate his way to health resources and just as important, the capacity of his community to provide him with such resources in a culturally meaningful way (Boyden & Mann, 2005:9-20; Cameron *et al.*, 2007: 285; Ungar, 2008:225).

Because resilience is now seen as a dynamic process between an individual and his ecology (Ungar *et al.*, 2008:2; Ungar, 2008:225) it is important to discuss the protective process of resilience.

2.3 RESILIENCE AS A PROCESS

Masten (2001:227) suggests that in general resilience arises from ordinary adaptive processes rather than from rare or extraordinary ones. In other words, resilience is encouraged by everyday protective resources within an individual and the individual's ecology (like caring parents, good schools, opportunities for healthy entertainment, positive cultural beliefs and so on). An individual's ability to adjust in a positive manner to adverse circumstances, because of his interactions with his ecology, provided that his ecology makes protective resources available, supports Masten's (2001:227) idea that resilience is the result of the availability and good use of regular, run of the mill resources. The provision and use of these resources depend on an active give-and-take process (Boyden & Mann, 2005:9-20; Ungar *et al.*, 2008:2).

In order to understand resilience, a person has to clearly understand the significant role that protective and risk factors / processes play in the process of resilience (Kelley, 2005:265; Masten & Reed, 2005:75; Neil, 2005; Schoon, 2006:1-15; Van Rensburg & Barnard, 2004:2). It is not possible to talk about resilience in the absence of adversity or risk (Boyden & Mann, 2005:9; Fergus & Zimmerman, 2005:401; Greene & Conrad, 2002:37; Masten & Powell, 2003: 16; Masten & Reed, 2005: 76; Werner & Smith, 1992:2), therefore when discussing the process of resilience it is necessary to look at both risk and protective processes. Typically, protective resources contribute to an adolescent being able

to cope well with whatever difficulty he is facing, while risk processes heighten the chances of non-resilient outcomes.

2.3.1 Protective Resources

Protective resources can be defined as the characteristics and processes intrinsic to a person and his context that generally predict the outcome of the individual's ability to cope with an adverse situation (Kelley, 2005: 265; Masten & Reed, 2005:75; Schoon, 2006:1-15; Van Rensburg & Barnard, 2004:2). As noted above, protective resources (factors / processes) are not just personal, but associated with the adolescent's ecology and with the interaction between the adolescent and his environment (Burt, 2002:138; Glantz & Johnson, 1989:189-199; Masten & Reed, 2005:85; Theron, 2006:199-200; Ungar, 2005:348; Ungar, 2008:225; Ungar *et al.*, 2008:2; Ungar, 2005:xxv). Individual wellness depends on an adolescent's ability to cooperate, collaborate, negotiate, and live in harmony with other people, but also on the availability and accessibility of contextual protective resources (Ungar, 2008:225; Ungar *et al.*, 2008:2). To use Ungar's words (2008:225), resilience is dependent on a young person using individual strengths to navigate towards and negotiate for protective resources that will help him to overcome some difficulty and on the young person's environment to make such protective resources available and accessible. So, resilience is a product of the constant interaction between intra-personal and inter-personal factors (Masten & Reed, 2005:85). Each of these factors/processes is discussed below.

- **Individual protective factors**

Many researchers have focused on protective resources that are found within the adolescent himself (Kelley, 2005:265; Neil, 2005). These factors are known as individual protective factors or intrinsic protective factors or even intrapersonal protective factors. As noted above, in the early period of resilience research, it was mostly believed that resilience resulted from individual protective factors (Ungar, 2005:xvi). Some of these individual factors are described below.

Resilient adolescents who have **problem-solving skills** typically have a keen sense of curiosity that promotes their enthusiasm for problem solving (Brooks & Goldstein, 2004:251; Fergusson & Horwood, 2003:132; Masten & Reed, 2005: 83; Theron, 2004:319). Resilient adolescents have the capacity to look at any problematic situation and try to solve the problem with perseverance and optimism. According to Wong and Lee (2005:317), optimism in itself can be seen as a protective factor. They also seem to have the ability to identify people that they can navigate towards who will help them solve problems (Ungar *et al.*, 2008:2).

Masten and Powell (2003:13) and Fergus and Zimmerman (2005:401) acknowledge that an adolescent has a high self-esteem when he entertains a positive outlook about himself, and consider this to be a protective factor. An adolescent who has a **positive self-concept** easily comes to terms with and understands his own potential and limitations, and, more importantly, accepts those potentials and limitations, and tries to be the best person he can be in spite of them (Brooks, 2005:300; Rutter, 2000:671; Theron, 2004:319).

Having a sense of humour can help an adolescent cope with whatever obstacles he is faced with (Brooks & Goldstein, 2004:123; Masten & Reed, 2005:83). Thomas and Menampampil (2005:336) state that humour often helps because it allows people to laugh at themselves, and can therefore be seen as a protective factor.

Having a good **temperament** can often help an adolescent when he has to adapt to stressful life events (Isaacs, 2002:330). Reber and Reber (2001:740) describe temperament as an individual's general nature or particular patterns of mood swings, levels of sensitivity and emotional reactions. Boyden and Mann (2005:6) identify an easy temperament as a protective factor.

Emotional strength as well as emotional intelligence contribute to an adolescent's resilience (Edward & Warelow, 2005:101). An adolescent is seen as having emotional strength when he has the ability to express, assess and recognise emotion accurately and more importantly to regulate his emotions so that he can encourage his emotional and intellectual growth (Killian, 2004:45). Being able to express oneself emotionally can also be

seen as a factor contributing to resilience (Sandler, Wolchick, Davis, Haine & Ayers, 2003:222). Opportunities for expression, for example when an adolescent navigates his way towards his family, and is able to talk to them and feel that they understand, often encourage emotional expression.

Autonomous adolescents have the capacity to navigate their way through their resources (Ungar *et al.*, 2008:2) and the ability to get the support they need from others which can help them to be resilient (Greene & Conrad, 2002:36). According to Theron (2004:318), autonomy fosters a sense of empowerment that enhances resilience.

Being able to **adapt** to difficult or new circumstances (i.e. flexibility) is also seen as a protective resource (Dent & Cameron, 2003:5; Masten & Powell, 2005:13; Smith, 2005). For example, a learner with LD might find it difficult to adapt in a mainstream school, but the ability to accept and get used to new circumstances encourages resilience. Being **hopeful** and believing in the possibility of a bright future has also been found to have a significant impact of resilience (Boyden & Mann, 2005:6; Masten & Reed, 2005:83).

Individual protective processes are summarised in Figure 2.2 below. The research findings of individual protective factors reviewed are equal to the above statements depicted in Figure 2.2:

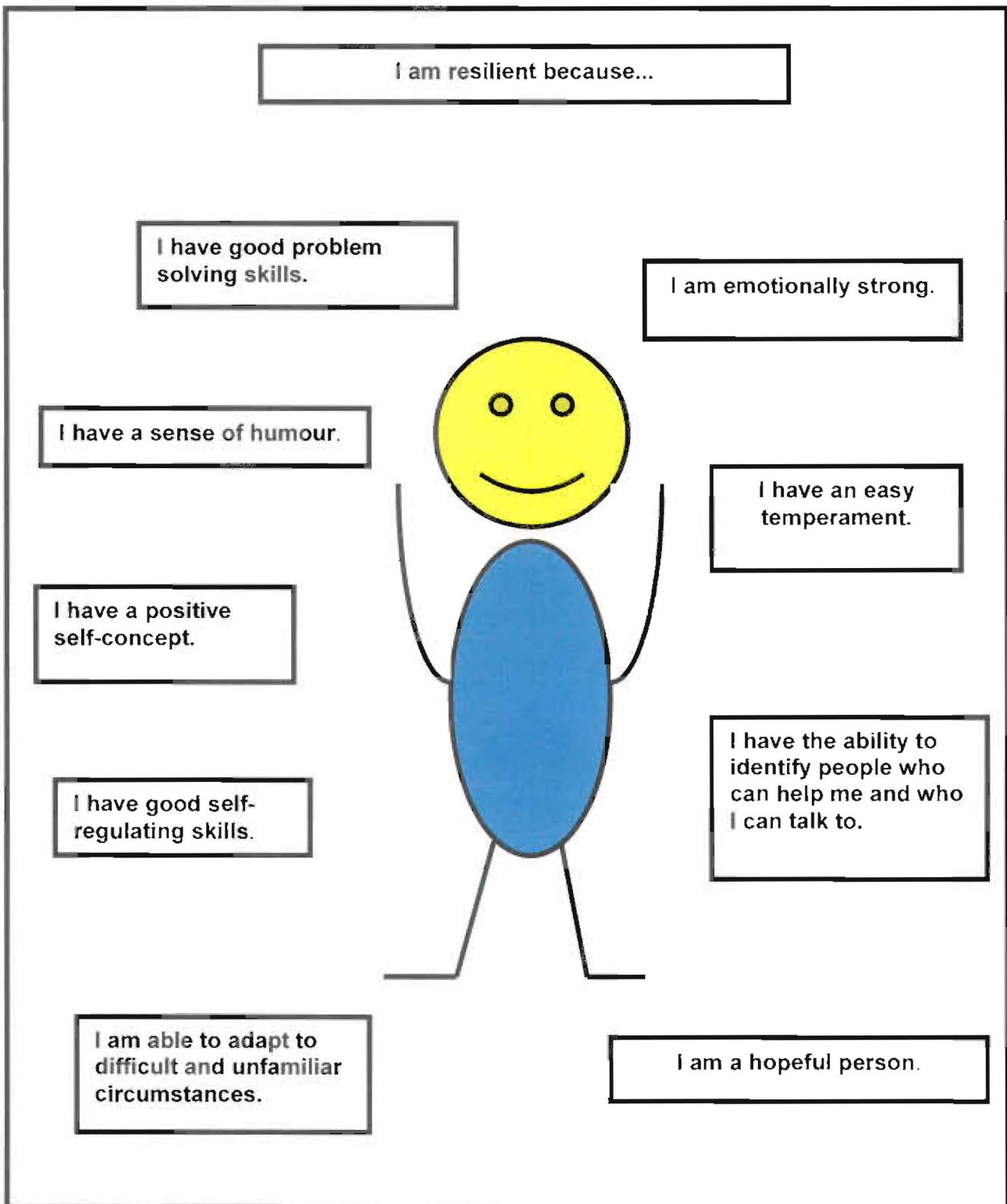


Figure 2.2: Summary of individual protective factors

- **Familial protective factors/processes**

Many researchers have focused on protective resources that are found within the family (Cook & Du Toit, 2005:248; Killian, 2004:46; Masten & Reed, 2005:75; McCubbin & McCubbin, 2005:29). Family protective resources form part of **interpersonal protective** resources that are believed to encourage resilience (Cook & Du Toit, 2005: 248; Friesen & Brennan, 2005:297).

A **supportive family** is believed to encourage resilience. The ultimate goal of family support is to **meet the needs of adolescents** within their family. By being responsive to their children's needs (love, attachment, moral, emotional and financial support) parents encourage resilience (Cook & Du Toit, 2005:248; Masten & Reed, 2005:75; Schoon, 2006:80; Thomas & Menampampil, 2005:334). For example, in Chapter Five I report a related incident: one learner's mother knew that her child needed academic help and arranged extra classes to tend to this specific need; in so doing she encouraged his resilience. Close family support also depends a lot on the **support from extended family**, which leads to a wider informal network of **supportive relationships** (Cook & Du Toit, 2005:248). When families offer support to adolescents they are not alone in coping with difficulty.

Adolescents who come from a **warm family environment** are more inclined to be resilient and resourceful when handling stress and traumatic events. Psychological **stresses are reduced** in children who come from a **stable and secure family** (Boyden & Mann, 2005:6-8; Kümpfer, 1999:189-191; Masten & Reed, 2005:85; Ross & Deverell, 2004:18; Van Rensburg & Barnard, 2004:3).

Wang, Haertel, and Walberg, (1997:20) propose that the family can also play a role in contributing to resilience indirectly, through its **influence on their children's support structures**, for example, by making their children more aware of religious and church-related organisations. When a family has a strong, consistent, and dependable value system in the form of a religious belief or a consistent set of (high) expectations, rules, and structure within the family, it serves as a protective factor for a child (Donald *et al.*, 2006:174; Masten, Best & Garmezy, 1990:432).

Masten and Reed (2005:85); Ross and Devereil (2004:18) and Springer, Wright and McCall, (1997:437) propose that families can contribute to an adolescent's resiliency when they help him to **develop a purpose and positive expectations** in life. By creating opportunities for meaningful family involvement, they can develop co-operation and a sense of belonging which in turn encourages resilience.

Authoritative **parenting styles** that promote a warm, **communicative relationship** between adolescent children and parents help to promote the resilience of their children. When parents are firm and reasonable, their adolescents have a better sense of where they stand and a greater sense of fairness. **Firm, reasonable parents** also create an environment that is predictable and this encourages resilience (Boyden & Mann, 2005:7; Fergusson & Lynskey, 1996:289; Hetherington & Elmore, 2003:196; Masten & Reed, 2005: 83).

When a family has **positive expectations** of the adolescent and when the family is committed to helping children and adolescents develop competency, also with regard to scholastic skills, resilience is encouraged (Donald *et al.*, 2006:174).

Extended family such as relatives or grandparents can be a positive influence. Cook and Du Toit (2005:248) describe extended families as being able to provide a **social support network** which in turn provides a crucial source of aid. As adolescents search for their own identities, grandparents can provide them with cultural and family knowledge (Gouws, Kruger & Burger, 2000:74). Extended family like aunts or older cousins can provide the adolescent with **additional emotional or even material support** and this often encourages resilience (Cook & Du Toit, 2005:248). Often extended family can step in and help out with parenting, thereby easing family strain and encouraging resilience (Hetherington & Elmore, 2003:201).

Familial protective processes are summarised in Figure 2.3 below. The research findings of familial protective processes reviewed above are equal to the statements depicted in Figure 2.3:

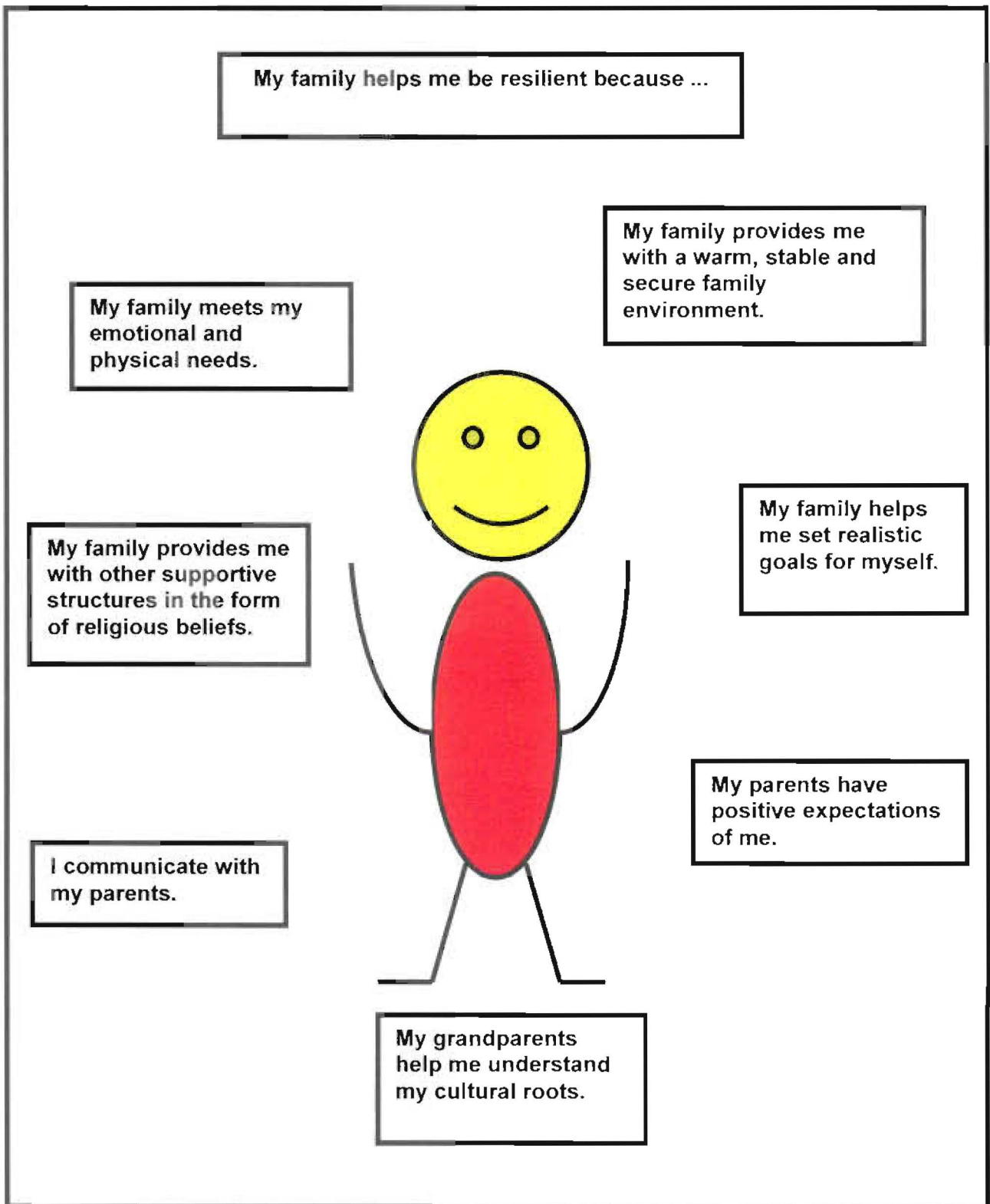


Figure 2.3: Family protective resources summarised

- **Environmental protective processes**

Much research has focused on protective resources that are found within the **environment of the adolescent** (Boyden & Mann, 2005:7; Ungar *et al.*, 2008:2). Environmental protective resources form part of **interpersonal protective** resources that are believed to encourage resilience (Thomas & Menampampil, 2005:335). The environment provides a variety of opportunities for **support** of adolescent children (**including community support structures, good schools, social support, opportunities to engage in extra-mural activity, health services, adults who can be role models**). Resilient children and adolescents are thought to make use of protective resources within their environments more efficiently than their peers (Ungar, 2008: 225; Ungar *et al.*, 2008:6).

Community groups can act as a common protective factor for adolescents and have important protective functions. Krovetz (1999:2) notes that a resilient community is a community with **high expectations, purposeful support** and one that offers on-going prospects for **meaningful participation**, for example opportunities to participate in sporting or cultural events (Luthar & Zelazo, 2003:529).

One of the community protective factors that seems to be prominent is the social processes or **organisations within the neighbourhood** itself (Gorman-Smith & Tolan, 2003:401). For example, a community that provides the adolescent with effective police services or **accessible health services** enables the adolescent towards coping more resiliently (Masten & Powell, 2003:13).

Often the community can provide adolescents with an **opportunity to feel supported and valued** and give them a **sense of purpose** (Boyden & Mann, 2005:8; Thomas & Menampampil, 2005:335). Communities can also be a **source of social support**. Typically such social support provides **direct assistance, emotional support and affirmation** (Masten & Reed, 2005:84; Ross & Deverell, 2004:18; Ungar & Liebenberg, 2005:218-219).

Adolescents might even feel a **sense of belonging** when they receive support from their community as well as any supervision from neighbours or any other adults within their community (Luthar & Zelazo, 2003:529; Wong & Lee, 2005:316). When adolescents receive support from their community, this often gives adolescents the **confidence** to know that they can turn to adults for **nurturing, guidance and support** in whatever situation they find themselves in (Boyden & Mann, 2005:7; Copeland, 1997:53; Musick, Stott, Spencer, Goldman & Cohler, 1987:229; Williams, 2002:200).

Communities or community structures like **schools, churches and sport clubs**, often provide adolescents with **mentors or role models** who encourage them towards resilience (Masten & Powell, 2003:13). Educators, school counsellors, sports coaches, religious leaders and other adults who possess social competency are people who an adolescent might feel comfortable to approach. These people may be perceived as role models and also form a **support network** for the adolescent (Lowenthal, 1998: 49; Masten & Reed, 2005:83; Van Rensburg & Barnard, 2004:4). Often this sense of support and the influence of positive role models help adolescents to form more **positive self-concepts** and to aspire towards positive goals (Donald *et al.*, 2006: 175).

An adolescent's environment must also have and encourage **access to school and education, information and learning resources** (Masten & Reed, 2005:84; Strümpfer, 2003:71; Ungar & Liebenberg, 2005:218-219). Because school is such a prominent part of most adolescents' lives, it is discussed separately in the next section.

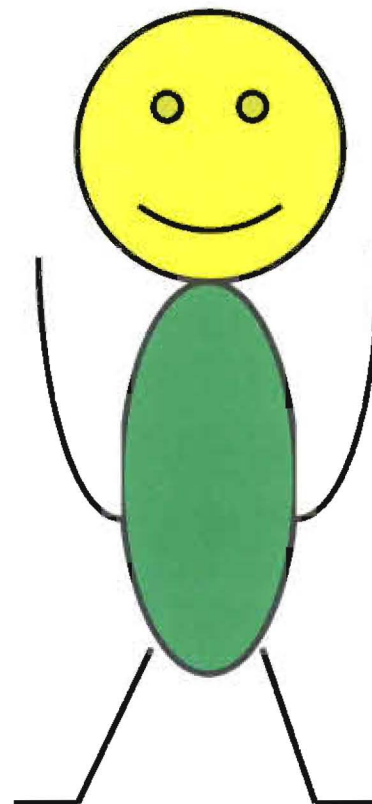
Environmental protective processes are summarised in Figure 2.4 below. The research findings of environmental protective processes as reviewed above are equal to the statements depicted in Figure 2.4:

My environment helps me be resilient because ...

My community has high expectations of me and provides me with emotional and physical support.

In my community I feel like I have a sense of purpose because I feel valued and supported by my community.

My community provides me with social support that in turn provides me with direct emotional support.



My community provides me with mentors/role models that can form a support network for me.

I have access to learning resources within my community.

Figure 2.4: Summary of environmental protective resources

- **School**

Schools and classrooms are very important in establishing an environment that helps in the **development of a learner's social, emotional and cognitive development** (Johnson & Lazarus, 2008:19). The classroom environment should **encourage and support** learners to enable them to achieve to their full potential (Donald *et al.*, 2006:145).

When schools encourage **trusting and open relationships** and make sure that the **curriculum is interesting and relevant**, learners develop more optimally and are better at coping with adversity (Masten & Coatsworth, 1998:205). Adolescents are provided with a safe environment when their school provides them with a caring and learner focused climate (Masten & Powell, 2003:13). Learners can also **learn extra skills** (like coping skills, work skills, study skills) that will enable them towards resilience through special programmes that are purposely presented through the school (Greene, 2002:5; Howard & Johnson, 2000). In other words, schools can choose to become agents of resilience when they purposefully promote **healthy teacher-learner relationships**, healthy relationships among learners, participation in worthwhile school and classroom activities and a nurturing environment (Johnson & Lazarus, 2008:19).

Teachers are very important to the process of resilience. They have the potential to encourage learners to develop skills that will help them towards resilience. Teachers who display a caring and **nurturing temperament** seem to support social interactions amongst peers, and enhance the learner's involvement in class activities. **Caring teachers** are also thought to encourage learners to feel a positive connection to their school which in turn helps them feel that they belong and are of value (Johnson & Lazarus, 2008: 20). Having realistically **high expectations** has also been identified as an important protective process that enhances the competence of learners who are at risk (Burton & Barlett, 2005:90; Chambers, 1999:43).

Studies have shown that learners who feel motivated by their teachers are more devoted to learning and therefore become more academically successful (Becker & Luthar, 2002:202). Brooks (2001:20) recommends ways in which a teacher can use practical methods, in

becoming a child's "charismatic adult" and in so doing touch the child's heart and mind. Oddone (2002:275); Wang *et al.* (1997:19) and Janas and Nabors (2000:18-20) suggest that an attempt can be made by educators to minimise risk and increase resilience in schools by assisting academic growth in addition to becoming mentors and positive role models for learners.

Henderson (1997:10) highlights that the attitude of the educator should be a "**resilient attitude**," which Henderson (1997:10) believes is the first step to promoting resilience in school. This attitude involves searching for, encouraging and reinforcing "any crumb" of resilience, and investigating situations in which learners "outmanoeuvred, outsmarted or outreached" any adversity (Henderson, 1997:10). In other words, the teacher needs to **behave in resilient ways** herself and she needs to help learners to notice when they have behaved resiliently. In this way she encourages them to accept a more resilient identity.

School protective processes are summarised in Figure 2.5 below. The research findings of individual protective factors as reviewed above are equal to the statements depicted in Figure 2.5:

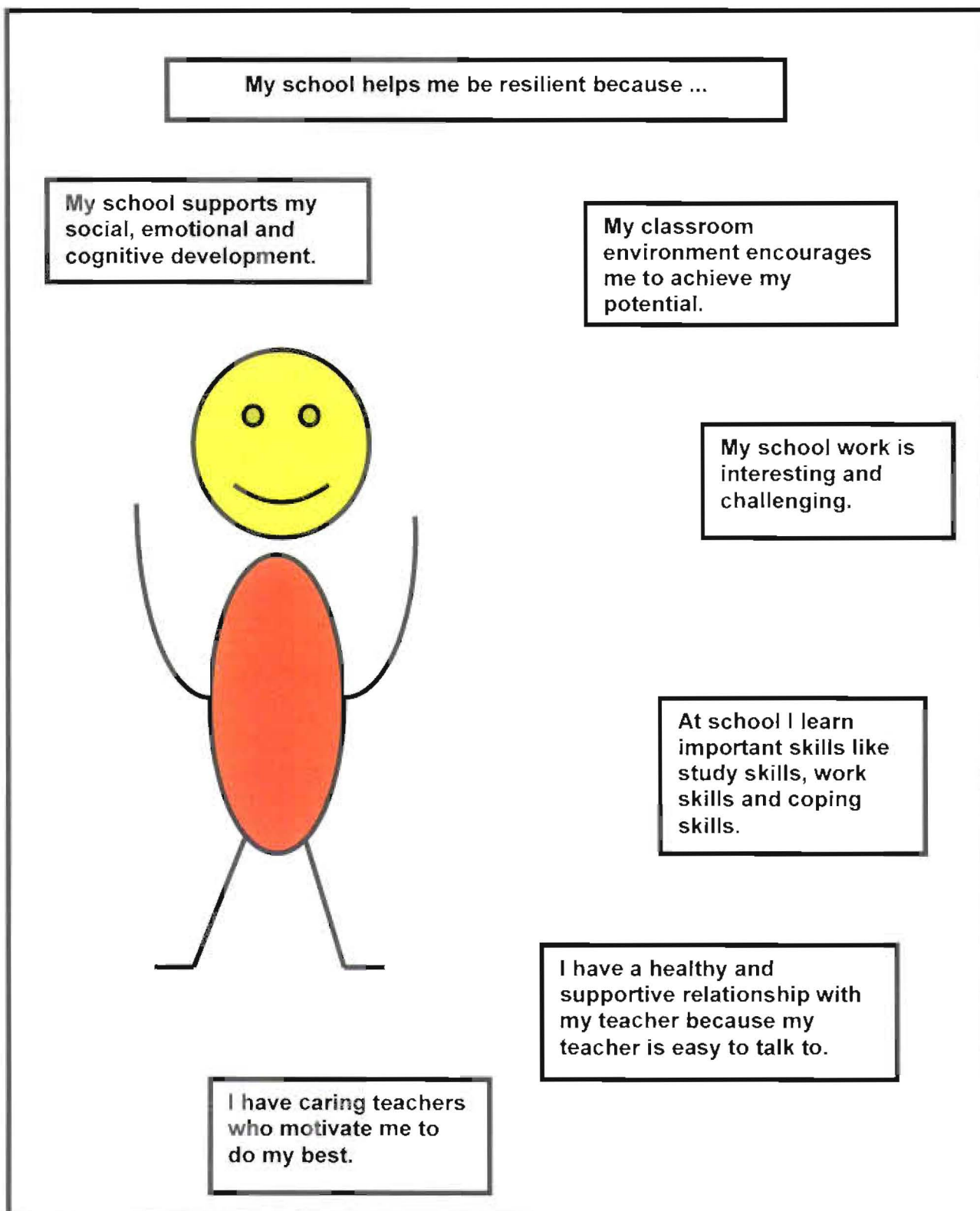


Figure 2.5: Protective processes within the school environment

- **Cultural protective factors**

More recently, research has focused on protective resources found within the culture of the adolescent (McCubbin & McCubbin, 2005:40; Ungar & Liebenberg, 2005:218-219). Cultural protective resources also form part of interpersonal protective resources that are believed to encourage resilience (Ungar *et al.*, 2008:6).

When trying to define culture, a lot of different variables have to be taken into consideration, for example **shared values, beliefs, skills, rules, methods of interaction and adaptive behaviour passed from one generation to another in a given society**. Most often these variables are seen in the way that people from a given culture live their lives and can for example be seen in **family life, patterns of behaviour, beliefs and language** (Carter, 1999:12; McCubbin & McCubbin, 2005:40; Reber & Reber, 2001:170; Robinson, 2007:5).

Resilience is a result of the **interaction between an individual and his ecology**, meaning that his community is providing him with health resources and, importantly, providing him with opportunities to access these resources in a culturally accepted way (Cameron *et al.*, 2007:285; Fergus & Zimmerman, 2005:399; Ungar, 2008:2). According to Ungar *et al.* (2008:6), culture can **help an adolescent develop** his desirable personal identity. Adhering to cultural traditions can contribute to an adolescent's **sense of purpose, aspirations, beliefs, and values, as well as his spiritual and religious identification** (Ungar *et al.*, 2008:6). In order for an adolescent to be resilient he has to be **culturally grounded** in knowing where he comes from and that he is part of a cultural community tradition that is expressed through daily activities (Ungar & Liebenberg, 2005:218-219).

A possible challenge could relate to adolescents having to accept cultural norms. However, when an adolescent accepts **cultural norms and practices**, it is easier for him to **feel grounded**, which in turn **fosters a sense of belonging** and resilience. In this way an adolescent is provided with necessary resources to cope effectively in difficult situations (Ungar & Liebenberg, 2005: 218-219).

Culture can have a profound impact on an adolescent's family and community life. Culture can **regulate the age** at which one should get married and whom they may marry. This is done through **family traditions, beliefs and values** passed down from one generation to the other (McCubbin & McCubbin, 2005:32; Walsh, 2006: 51; Walsh & Crosser, 2000:306). To a lot of cultural minority groups, their cultural connection seems to be very important and therefore family traditions are upheld (Seidman & Pedersen, 2003:332).

Being **proud of one's cultural** background means displaying that you have a sense of identity, function, worth and confidence. This in itself can be a protective factor that helps to enhance an individual's resilience (Beauvias & Oetting, 1999:104; McCubbin & McCubbin, 2005:40). Having a **cultural identity** as a protective factor seems to be more relevant and important to minority groups than to majority groups (Jarvis & Chandler, 2001: 125; McCubbin & McCubbin, 2005: 36; Trimble, Helms & Root, 2003:249).

In conclusion to their article *Unique Pathways to resilience across culture*, Ungar *et al.* (2007:306) state that culture does **provide meaning** to a person living through adversity. They further say that the impact of various risk factors on a young person's life can greatly depend on the culture and context in which they experience risk.

2.3.1.1 Protective resources summarised

A summary of the protective resources discussed in 2.3.1 (Barton, 2005:138; Boyden & Mann, 2005:6-8; Cook and Du Toit, 2005:250; Empson and Nabuzoka, 2004:155-156; Kümpfer, 1999:189-191; Masten & Reed, 2005:85; Ross & Deverell, 2004:18; Theron, 2006:199-200; Ungar, 2005:348; Ungar, 2005:xxv; Van Rensburg & Barnard, 2004:3; Wong & Lee, 2005:316) is presented below in Figure 2.6. The research findings of protective resources are equal (but not limited to) to the statements depicted in Figure 2.6:

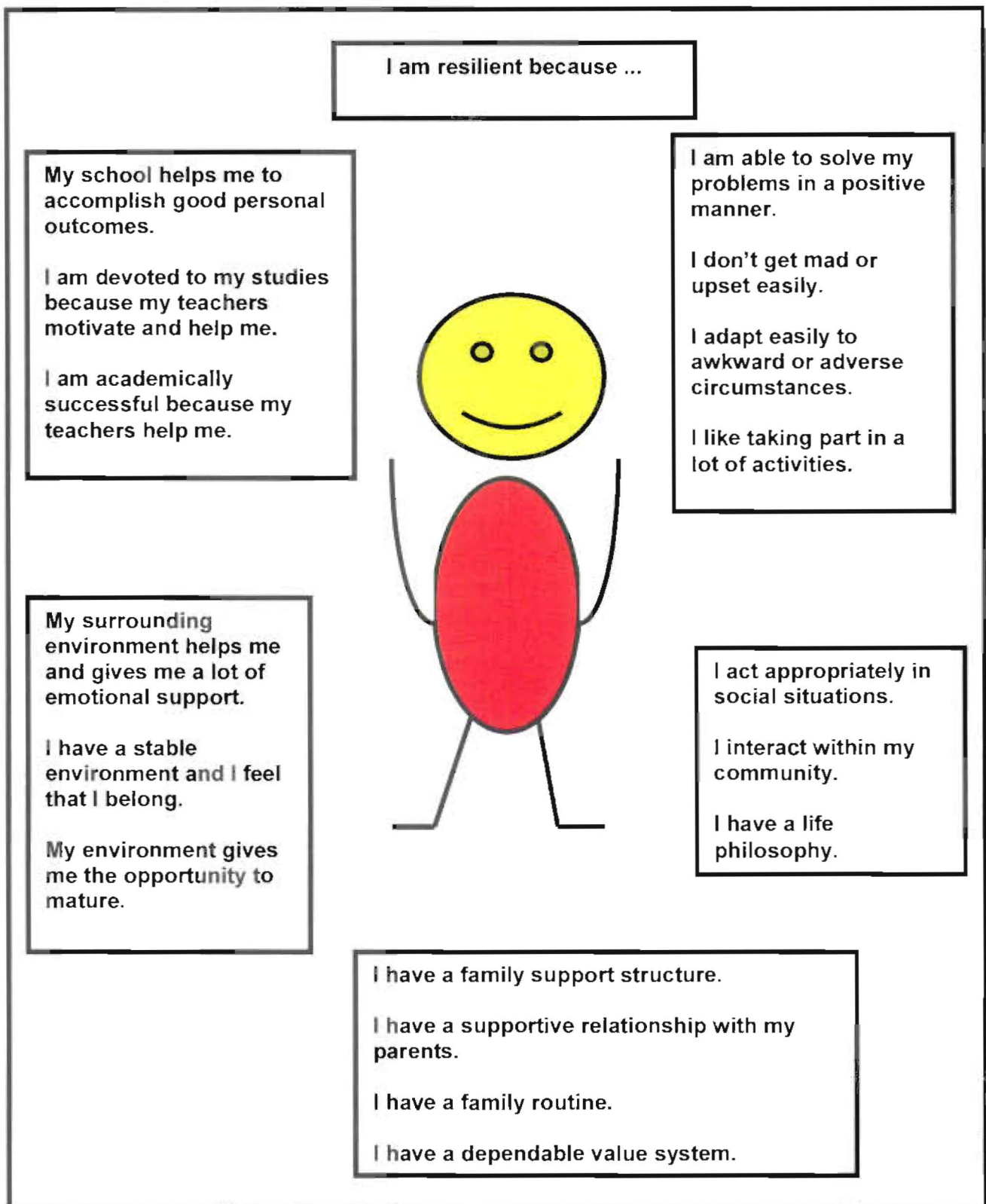


Figure 2.6: Summary of protective processes

2.3.2 Models of Resilience

When it comes to trying to explain the role protective processes play in the process of resilience, there are a number of models to turn to. It is, however, important to take into consideration that no one single model is collectively accepted as providing a definitive explanation of the process of resilience. Some models, for example the **compensatory model**, propose that protective or other compensatory factors are the opposite of risk factors (Cook & Du Toit, 2005:249; Fergusson, 1999) and that these protective resources might be able to neutralise or minimise the impact adversity or stressors might have concerning a specific outcome (Cook & Du Toit, 2005:249-250; Fergus & Zimmerman, 2005:401-403; Masten & Reed, 2005:76). Other models, for example the **balance model**, propose that an individual will be able to cope as long as there is a balance between the protective and risk factors and that these factors are manageable (Loesel & Bliesener, 1994; Werner & Smith, 1982).

The **challenge model** suggests that if an individual is exposed to a moderate amount of adversity he will be able to cope with difficulties and stressors later in life, because he has obtained the necessary skills to buffer himself through early moderate exposure to risk (Schoon, 2006:75). Children will be able to cope with whatever future difficulties come their way because they have learned to cope with previous adversities in their life (Cook & Du Toit, 2005:249; Fergus & Zimmerman, 2005:403).

The **cumulative effects model** proposes that the effects of either risk or protective factors depend largely on the psychosocial resources that are available (Schoon, 2006:76). Because the different assets and protective resources have a growing or cumulative effect, they should be able to compensate for or even counteract adversity (Carrey & Ungar, 2007:504; Richman & Fraser, 2001:4).

Some models seem to be more sophisticated than others. The **developmental-contextual system model** suggests that an individual's adjustment can be moulded by different influences throughout his life. The different aspects that influence an individual are consistent and don't rely on each other (Schoon, 2006:25-26). The International Resilience

Project proposes, almost in a similar manner, that seven clusters of protective processes and factors occur in tension to each other as found in and influenced by the context of the youth. In other words, for youth to cope with difficulties, they need to have negotiated access to these seven clusters and have resolved this tension. For this reason, youth need to negotiate for material resources, positive relationships (including supportive relationship networks), a positive identity, a collective identity as well as an allegiance to their broader community (socially and spiritually), have negotiated for experiences of power and control, developed cultural loyalty and experienced social justice. Typically, youth who are successful in negotiating for these factors and processes would be more resilient. However, their navigation towards and negotiation for such protective resources need to be supported by communities and contexts that make protective resources available (Cameron *et al.*, 2007:296; Ungar, 2008:22). In other words, youth and their communities negotiate for protective resources and experiences that off-set the potential threats of risk, but their ecologies have to reciprocate.

Whichever model is chosen to explain the process of resilience, all models have the notion of protective resources that buffer risks that would typically jeopardise youth's chances of being resilient.

2.3.3 Risk Processes / Factors

Dent and Cameron (2003:4) and Armstrong, *et al.* (2005: 391) define risk or adverse factors as those circumstances that merge to jeopardise healthy development and positive developmental outcomes. Durlack (1998:513) suggests that certain negative encounters are typically associated with major unfavourable outcomes (for example, poverty is typically associated with poor adjustment). Smith and Carlson (1997:235) emphasise that multiple risk factors, rather than one isolated risk factor, are inclined to produce negative outcomes more consistently.

Masten (2001:227) says that resiliency is not an extraordinary occurrence, and that it is present simply because of ordinary protective systems that are and were always available and in good working order, for example, family protective systems. Just as these working

systems can be a protective resource (as discussed in 2.3.1), they can also potentially introduce risk to developmental outcomes (Masten, 2001:227). In other words, just as with protective resources, risks are found within the adolescent and within his ecology. These risks are discussed very briefly below in order to provide a complete understanding of the process of resilience. However, the main focus of my study is the resilience of adolescents faced with the risk of their learning difficulties. The risks of LD are fully discussed in Chapter Three.

Risk factors can be divided into intrapersonal and interpersonal risk factors. These risk factors are discussed below.

- **Intrapersonal risk factors**

According to Early and Vonk (2001:12); Keogh (2000:3); Smith and Carlson (1997:235), adolescents can typically be vulnerable to risk because of factors within themselves, like constant poor health, limited intelligence, trauma, alcohol and drug abuse, premature birth, a difficult temperament, and poor social skills, to name but a few.

Riley (2002:181) states that having to constantly cope with a **chronic or severe illness** can make it difficult for an adolescent to cope with stressors. Constant poor health can bring about poor behaviour and a poor scholastic performance (Donald *et al.*, 2006:298). A learning difficulty is an individual risk factor in the sense that it relates to psychological processes (as will be defined in Chapter Three).

Risk can further be encouraged by adolescents who find themselves in **relationships** where they receive very **little support** from the other person in the relationship (Boyden & Mann, 2005:7; Masten & Powell, 2003:13; Riley, 2002:179; Williams, 2002:200). Adolescents who form inadequate relationships don't often experience safe environments and isolate themselves from others when they feel they have no one to talk to (Thomas & Manampampil, 2005:335).

Adolescents who are short-tempered, insecure or have an external locus of control (and other **negative personality traits**) are at risk of developing **inadequate problem-solving skills** because they may not have the courage to go out and try and explore different opportunities or because their personality discourages other people from including them in opportunities to do so (Brooks & Goldstein, 2004: 251; Fergusson & Horwood, 2003:132; Masten & Reed, 2005:83; Theron, 2004:319). Inadequate problem-solving skills often increase vulnerability.

- **Interpersonal risk factors**

A familial context has been steady in findings on resilience, that parents and families are vital in promoting positive change. Just as they are essential to promoting positive change, parents and families can be just as damaging to an adolescent's positive adjustment and resilience (Buysse, 1997:67; Smith & Carlson, 1997:235). Poor health conditions such as tuberculosis, poverty and high levels of violence take their toll on family security and stability and are key risk factors related with negative outcomes (Thomlison, 2004:386).

Often families live in **crisis situations** that can include **disharmony, disruptions** or even **poor routines**. Risk can be even more prominent when families have incompetent functioning. Often, if a family experienced **trauma**, the family goes through change and transformation, and not all families cope well with change (McCubbin & McCubbin, 2005:31).

Damaging family and child outcomes have also been linked to **unsafe environments** and social conditions, dangerous and disorganised neighbourhoods and low social status. Vulnerability has been found among adolescents who are at risk because of economic hardship, poverty and a whole list of associated circumstances (e.g. abuse, violence) (Jackson & Martin, 1998:577; Kalil & Kunz, 1999:198; Keogh, 2000:4; Smith & Carlson, 1997:235).

Another risk factor that can threaten an adolescent's resilience is when **teachers** make it **difficult for adolescent** to turn to them for advice, especially when they do not get any

support from home. This can in turn create problematic behaviour which can further encourage risk (Gouws *et al.*, 2000:97). Just as schools can encourage resilience, they can encourage vulnerability when they are not child-focused, have a hostile or violent climate and have unreasonable expectations of learners.

According to Ungar and Liebenberg (2005:218-219), contextual/cultural risk factors have a greater chance of leading to maladaptive outcomes when youth are detached from cultural beliefs or spiritual organisations. Furthermore, when youth do not have a life ideology or when they have been exposed to unsound value systems or experiences of social injustice, there is little motivation for them to improve themselves or to have positive future orientations. Lastly, if there is no involvement in any traditional cultural activities, youth do not develop a sense of cultural uniqueness, which discourages resilience (Ungar & Liebenberg, 2005:218-219).

2.4 CONCLUSION

Resilience is not about toughing it out (Boyden & Mann, 2005:9; Fergus & Zimmerman, 2005:401; Masten & Powell, 2003:16; Masten & Reed, 2005:76;85), it does not imply that you ignore your feelings of sadness over a loss either. Nor does it mean that you have to be strong and not ask others for help. Resilience does not mean that you have to be distant, cold and emotionless.

The truth of the matter is, unfortunately, that for one to demonstrate resilience, one has to face hardships in life. Hardships (or risk) in relation to adolescent children can include (amongst others) poverty, parental death, suicide or illness or rejection, as discussed above. If we take a look at today's youth, the processes of risk are common and ever growing. Although risk processes are threatening, one positive aspect does develop from this, namely that the potential for resilient behaviour is found in such negative circumstances.

Even though it is said that resilience cannot take place without hardship, one has to keep in mind that it is not adversity alone that makes an adolescent resilient. An adolescent

requires protective resources to help him cope resiliently with adversity and the adolescent has to make the most of such resources. Cameron *et al.* (2007:297), Schoon (2006:17), Ungar *et al.* (2008:2-3) and Ungar (2008:225) make this very clear when redefining resilience as a dynamic give and take process that takes place between an individual and his ecology. Resilience is based on an individual's capacity to navigate himself towards protective resources that are made available to him by his community in a cultural meaningful way (Cameron *et al.*, 2007:297; Kim-Cohen, 2007:272; Schoon, 2006:17; Ungar *et al.*, 2008:2-3).

LD in itself is threatening enough to hinder resilient behaviour. Having LD is believed to be a risk factor. This can lead to stressful life-situations with numerous problems which often continue into adulthood and which minimise the potential for adult success on intellectual, social and emotional fronts (Bauer *et al.*, 2001:4; Cordoni, 1990:4). The interaction of the stressful and demanding life-situation with other common life stresses, frequently leads to non-resilient outcomes (Keogh & Weisner, 1993:4). Nonetheless, within the population of adolescent learners with LD, researchers have found flourishing, well-adjusted individuals (Miller, 1996:265-267). LD will be explored more fully in the next chapter.

CHAPTER THREE
LEARNING DIFFICULTIES

OVERVIEW OF CHAPTER 3

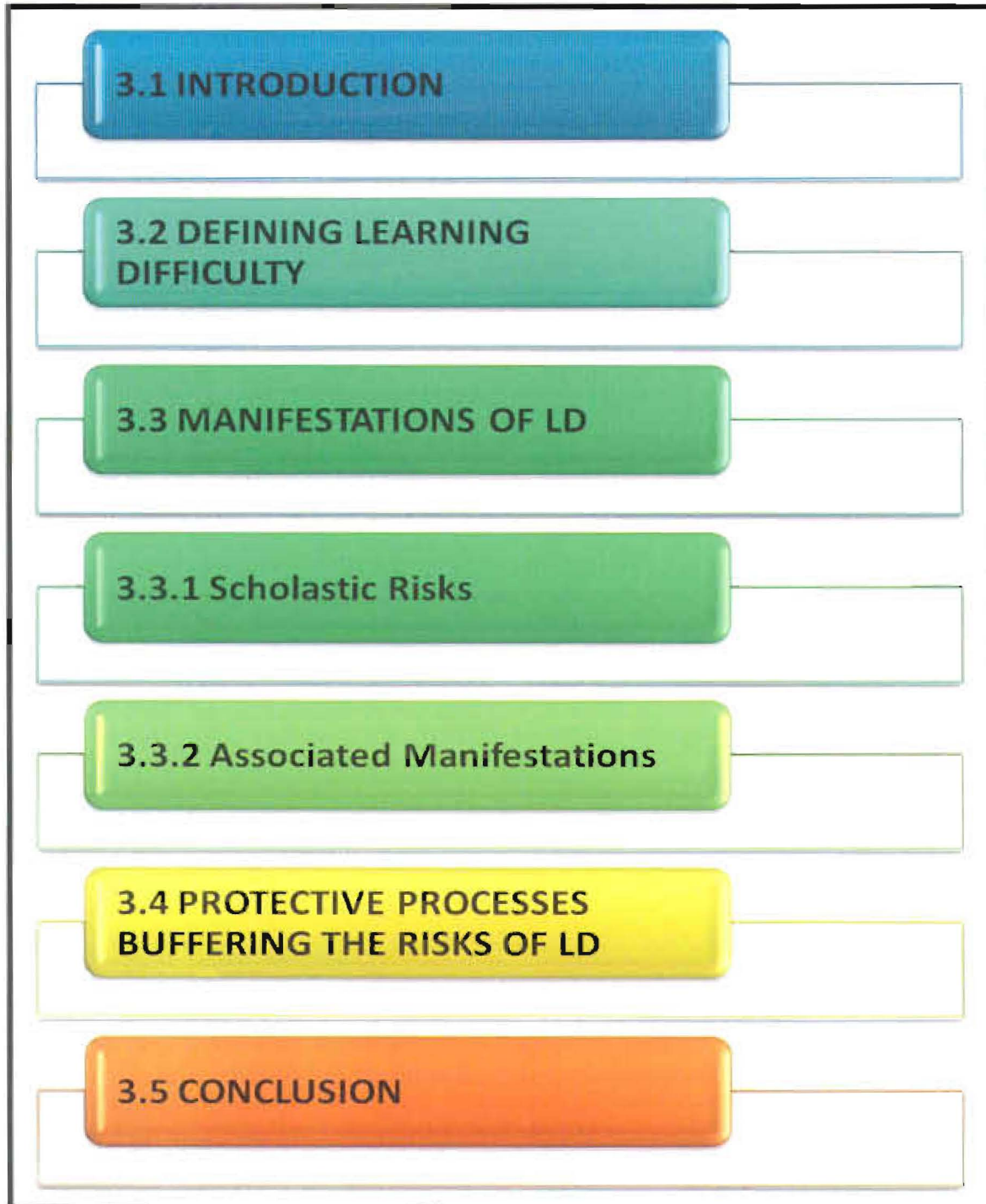


Figure 3.1: Overview of Chapter 3

3.1 INTRODUCTION

For some adolescents life is an awkward experience branded by relentless struggles. Many of these adolescents find it difficult to cope and develop dysfunctional behaviour patterns. Their chances of having dysfunctional behaviour may be directly proportionate to the number of risk factors that they face (Theron, 2006:199). One such risk factor is a Learning Difficulty. Adolescents who encounter learning difficulties may find it hard to adjust effectively when faced with hardships that accompany learning difficulties (Bauer *et al.*, 2001:4). Those adolescents who manage to cope are considered to be resilient (Theron, 2006:199).

Learning difficulties are seen as stumbling blocks that adolescents have to overcome in their growth towards adulthood. LD includes difficulty in using language, whether spoken or written, and may appear as difficulty with listening, speaking, reading, writing, spelling, or mathematical calculations (Bauer *et al.*, 2001:44; Donald, Lazarus and Lolwana, 2002:282; Theron, 2004:318). In truth, however, the difficulty of the LD goes beyond its impact on academic skills, as will be discussed in this chapter.

3.2 DEFINING LEARNING DIFFICULTY

In reviewing literature on LD, I became a bit confused: the literature on LD includes a number of terms and definitions for LD, among others:

- **Learning impairment (LI)**

Learning impairment is defined as a heterogeneous group of neurological disorders in basic psychological processes of the brain that manifest as difficulty with maths, language, reading or writing. Neurological disorders include perceptual problems, dyslexia, developmental aphasia and slight brain injury. Learning impairment does not include problems that might be caused by hearing, visual, motor, intellectual impairment, emotional disturbances, and environmental, cultural or economic disadvantages (Dednam, 2005a:364).

- **Learning disabilities**

For almost five decades the term “learning disabilities” has been used to describe learners who experience serious difficulties in one or more of their basic learning areas, including difficulties in reading, writing, and mathematics (Bauer *et al.*, 2001:44; Donald *et al.*, 2006:253; Lerner & Kline, 2006:2; Mash & Wolfe, 2005:319; Theron, 2004:318; Tuttle & Paquette, 1993:3; Woolfolk, 2007:131).

The term learning disabilities is widely criticised by some other researchers (Finlan, 1994:10-13; Westman, 1990:37-38). According to them, the term “learning disabilities” labels learners based on the fact that they are unable to carry out academic tasks. Learning disabilities do not include problems like visual, hearing or motor handicaps. Mental retardation, emotional instability as well as environmental circumstances are also excluded when defining a learning disability (Mash & Wolfe, 2005:320). The definition of learning disabilities does not take into consideration that a learner may do well in another area of his school work or that a learner might have a different learning style than the one that is being taught at school (Mash & Wolfe, 2005:320; Westman, 1990:59-60). The definition of learning disabilities is still being argued today, and is still subject to change (Dednam, 2005a:365).

Another factor that researchers are arguing about is that the term “disability” also refers to other conditions that have clear or visible identifiable bases such as physical, sensory, neurological and intellectual disabilities. A lot of people with disabilities prefer this term because it helps them to gain public and political recognition for their specific needs (Donald *et al.*, 2006:253).

- **Learning difficulties (LD)**

Prior (1996:3) describes a learning difficulty as a learner’s failure to **learn** or master basic academic skills like reading, writing or maths skills. This can cause a temporary or long term **disability**.

Other factors such as poor attention, inexperience, sensory and perceptual difficulties can contribute to a learner having a learning difficulty (Montgomery, 1990:3-4). A learning difficulty does not only affect a learner's school work but also other facets of his life, such as his daily routine, family life, and his friendships (Bauer *et al*, 2001:44; Donald *et al.*, 2006:253; Lerner, 2006:2; Mash & Wolfe, 2005:319; Theron, 2004:318; Tuttle & Paquette, 1993:3; Woolfolk, 2007:131).

- **Specific Learning Difficulties (SLD)**

A specific learning difficulty is when a learner experiences problems in learning which cannot be easily explained by a learner's lack of intellectual ability or by inadequate schooling (Prior, 1996:3). Learners with specific learning difficulties that appear in early development, for some mysterious reason have difficulty learning in one or more areas (Donald *et al.*, 2006:306-307; Prior, 1996:3).

For a learner to be seen as having specific learning difficulties, he should have an IQ score higher than 80 and deficits in at least one important academic achievement area, for example either language, maths or writing. This should be associated with a specific cognitive impairment, e.g. short-term memory, poor auditory discrimination ability, or vision-perceptual problems, to name a few (Prior, 1996:3). Another general specific learning difficulty is dyslexia (Archer & Green, 1996:126).

- **Learning Barriers**

Barriers to learning are said to be inherited from a learner's contextual (background) disadvantage, social interpersonal problems, as well as his disabilities and difficulties in learning (Donald *et al.*, 2006:3). In other words, any internal or external factor that might hamper a learner's ability to learn and benefit from school is seen as a barrier to learning. A barrier to learning cannot be seen in the same light as a learning difficulty or disability because it refers to a learner's physical background, for example, does the learner come from a poor home? A barrier to learning can hamper a learner's learning process, not

because the learner is incapable of learning but because of the unfortunate circumstances in which the learner might find himself (Donald, *et al.*, 2006:3).

After reading all the different definitions I listed the similarities and differences to minimise my confusion, and came to the following conclusions:

A barrier to learning is the most comprehensive term because a learning barrier is not based only on a learner's personal intellectual potential, but rather focuses on a learner's background and relationships with others (Donald *et al.*, 2006:3).

Learning disabilities, learning impairment, learning difficulties and specific learning difficulties have the following ***in common*** – all of these terms agree that a learner has difficulty with one or more of the following scholastic processes, namely maths, reading, writing, or any other form of language acquisition (Lerner & Kline, 2006:2; Mash & Wolfe, 2005:319; Tuttle & Paquette, 1993:3; Woolfolk, 2007:131).

The ***differences*** in these definitions that stood out are the following:

Both ***learning difficulties and learning impairment***, specify that a learner struggles to **learn** the basic scholastic processes namely reading, writing, and mathematics and that this is not causally related to sensory or mental disabilities, social or cultural deprivation or emotional maladjustment. It also stipulates that LD does not stop with the individual learner's academic ability, but also has an affect on a learner's family and psychosocial environment (Bauer *et al.*, 2001:44; Donald *et al.*, 2002:282; Lerner, 2006:2; Mash & Wolfe, 2005: 319; Theron, 2004:318; Tuttle & Paquette, 1993:3; Woolfolk, 2007:131).

A ***learning disability*** can be confused with the general term "disability" and seems to focus on a learner's inability, not taking other factors into consideration, for example a learner's specific learning style (Mash & Wolfe, 2005:320).

A ***specific learning difficulty***, as a form of learning difficulty, relates to problems with language, reading, writing and maths that cannot be explained by insufficient intellectual

ability (i.e. when someone is intellectually disabled) or by deficient schooling (i.e. a barrier to learning) (Prior, 1996:3). A specific learning difficulty is also commonly linked to dyslexia (Archer & Green, 1996:126; Prior, 1996:3) but could include other manifestations. Obviously, as a form of learning difficulty it has ramifications for the learner's social and psychological functioning.

When initially glancing over these definitions, I wondered if researchers were playing with semantics, as the definitions for LD, SLD and LI were all basically saying the same thing. For this reason, I needed to choose which term I would use in my study.

I chose to focus my study on learners with learning difficulties because learning difficulties also have an impact on a learner's family and psychosocial environment and typically include difficulties in writing, maths, reading and spelling (Bauer *et al.*, 2001:4; Donald *et al.*, 2002:283; Lerner & Kline, 2006: 2; Mash & Wolfe, 2005:319; Tuttle & Paquette, 1993:3; Woolfolk, 2007:131). Because my study involves youth who have been placed in a school previously classified as a school for youth with learning difficulties it would not be appropriate for me to speak of youth with learning barriers. Furthermore, the participants in my study have been identified by various professionals as having learning difficulties. A final reason for choosing to use the term LD is that to me it seemed the least stigmatised term. For these reasons I will use the term learning difficulties (LD) in my study. Because my study will focus on LD, a more in-depth definition is given below.

3.3 MANIFESTATIONS OF LD

Even though a number of definitions for LD has been produced and used over the years, each one has been considered by some to have definite shortcomings (Lerner, 1993:8). In other words, there is not absolute consensus concerning a definition for LD. Nevertheless, these definitions seem to agree that LD impacts negatively on scholastic progress (especially in areas on reading, writing and mathematics) and on development of psychosocial skills (Empson & Nabuzoka, 2004:156; Lerner, 1993:12; Prior, 1996:3). This typically results in a failure to learn with ease (Montgomery, 1990:2-3) and chaotic daily

routines, disrupted family life, problematic relationships with peers and conflict at school (Mash & Wolfe, 2005:319).

These manifestations of LD will be discussed in more detail below, as scholastic risks and as associated manifestations (poor self-concept; poor social skills; hyperactivity and ADD, and disruptive family functioning).

3.3.1 Scholastic Risks

Scholastic risks manifest as difficulties with maths, reading, written expression, and language (Prior, 1996:3; Lerner & Kline, 2006:2; Mash & Wolfe, 2005:319; Tuttle & Paquette, 1993:3; Woolfolk, 2007:131). For the sake of clarity, each is discussed individually below:

- **Mathematical difficulty**

Mathematical difficulty is when a learner is not successful at learning maths. Because maths skills are cumulative and progressive, the next skill cannot be acquired until the previous skill has been mastered. If the learner does not acquire these skills successively he **will** not be able to do more advanced calculations, acquire the next skill or understand the theories (Dednam, 2005b:197; Van Wyk, 1991:99). This implies that mathematical difficulty is long lasting.

When learners struggle with maths, they fail to apply basic maths principles. For example, they may be unable to correctly align numbers in columns or they may reverse numbers (e.g. 15 for 51) or even confuse direction. Such errors are typically associated with poor **spatial organisation** (Lerner, 2003:504; Mash & Wolfe, 2005:331; Rourke, 1993:214-226; Spinelli, 2002:386; Smith, 1979:83; Tuttle & Paquette, 1993:99; Westman, 1990:397; Winkler, 1998:108). Other learners may struggle because they pay **poor attention to visual detail** which means that they would typically read signs incorrectly and because of this they leave out necessary information, for example the decimal sign (Maree, 1996:430; Lerner, 2003:504; Rourke, 1993:214-226; Spinelli, 2002:386; Tuttle & Paquette, 1993:99).

Another example of a learner struggling with maths is when a step is left out or a certain mathematical rule that applies to a totally different procedure is used incorrectly. This is commonly associated with **procedural error** (Dednam, 2005b:204; Lerner, 2003:504; Maree 1996:430; Rourke, 1993:214-226). Some learners may find it difficult to move on to other mathematical procedures and instead keep on applying previous procedures. This is known as the **inability to shift psychological sets** (Lerner, 2003:504; Rourke, 1993:214-226; Spinelli, 2002:386; Westman, 1990:398). Other learners might struggle to read their own handwriting while calculating because they struggle with their own **graphio-motor** abilities. Typically this is when a learner writes in large print, or the writing of numbers might be crowded or even poorly formed (Maree, 1996: 425; Lerner, 2003:504; Rourke, 1993:214-226; Spinelli, 2002:386).

Some learners struggle to remember and recall numerical facts that can be linked to poor **memory** (Fletcher, Lyon, Barnes, Steubing, Francis, Olson, Shaywitz & Shaywitz, 2002:217; Maree, 1996:432; Mash & Wolfe, 2005:331; Spinelli, 2002:385; Tuttle & Paquette, 1993:100), while other learners often give awkward answers and are mostly unaware of the inappropriate answers ($10+6=106$) they give. This is typically known as errors of **mathematical judgement and reasoning** (Lerner, 2003:504; Rourke, 1993:214-226; Spinelli, 2002:384).

Another obstacle that learners might have to face is **maths anxiety**. Maths anxiety is when a learner “freezes up” when it comes to doing maths problems or when having to take a maths test. Maths anxiety may be a result of fear of failing scholastically and the loss of self-esteem. Maths anxiety can affect a learner’s ability to transfer the mathematical knowledge they might have which makes it difficult when they want to demonstrate their knowledge in tests (Dednam, 2005b:200; Donald *et al.*, 2006:312; Maree, 1996:434; Tuttle & Paquette, 1993:101; Van Wyk, 1991:103).

In summary, when LD manifests as a maths difficulty, learners struggle with basic maths computations and knowledge as depicted in Figure 3.2 below (Dednam, 2005b:204; Lerner, 2003:504; Rourke, 1993:214-226; Spinelli, 2002:384-386; Van Wyk, 1991:103).

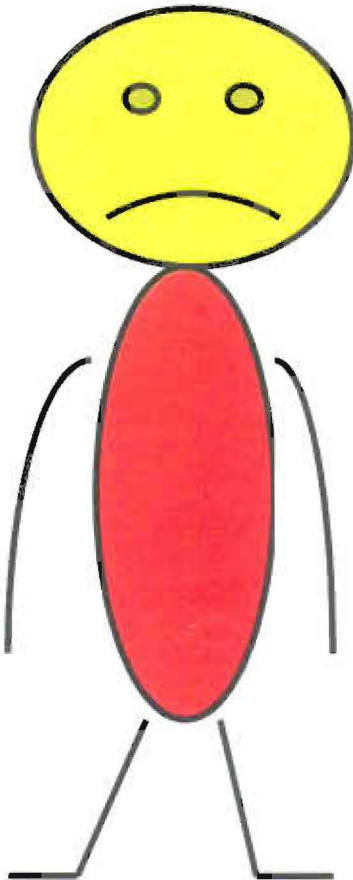
I can't do maths

When I multiply I ...

Can't remember my tables.
Get confused when "carrying over".
Get confused with the methods.

When I do fractions I ...

Don't understand concepts like denominator or numerator.
Get confused with mixed methods.



When I divide I ...

Forget my tables.
Don't understand how to use zero.
Use the wrong method.

When I add or subtract I ...

Get confused with the combinations.
Don't understand how to use zero.
Get confused with add and subtract.

Figure 3.2: Summary of math difficulties

- **Language difficulty**

Learners with LD may uniformly battle with language disorders such as articulation, listening, language progression and vocabulary. A learner with LD might share the ability to organise the auditory commands with all other learners but lacks the ability to respond in a suitable manner; understandably this affects the social conduct of the learner (Bauer *et al.*, 2001:118; Lerner, 2003:14; Spinelli, 2002:269; Woolfolk, 2007:137-138).

Language difficulties can manifest in different forms, for example as an **oral language** (listening and speaking) difficulty, a **reading difficulty** or a **writing difficulty** (Lerner & Kline, 2006:325).

Difficulty in language is noticeable when a learner has **difficulty discriminating between different sounds and understanding speech**. Learners with a language difficulty might have a problem with understanding certain words as well as their connotations, which might make it difficult for them to understand how words are structured in a sentence (Donald *et al.*, 2006:309; Fletcher *et al.*, 2002:206; Mash & Wolfe, 2005:323; Spinelli, 2002:272). Because learners might find it difficult to understand certain words and their functions they struggle to act on oral commands, to make decisions and to listen attentively (Bauer *et al.*, 2001:118-119; Fletcher *et al.*, 2002:206; Mash & Wolfe, 2005:322).

A learner with **auditory language difficulty** finds it hard to understand certain concepts in language, for example a homonym. If you give a learner the two sentences: *The dog can bark*, and: *The tree has bark*, they will be baffled to distinguish the one meaning from the other (Wallace & Kauffman, 1978:153). Literal and figurative meanings can be even more confusing for a learner, especially if the word has a multiple meaning, for example: *The soldier stands guard*, and: *The soldier is a guard* (Bauer *et al.*, 2001:119; Wallace & Kauffman, 1978:153). Having to answer questions about a story that has been read to him can also be a very challenging task for a LD learner with a language difficulty (Tuttle & Paquette, 1993:63; Wallace & Kauffman, 1978:160).

A learner with a **spoken language difficulty** might find it hard to gain meaningful experiences and to understand and hang on to the meaning of words (Wallace & Kauffman, 1978:153). He might find it difficult to produce various speech sounds, to formulate words and sentences, and to develop an adequate vocabulary (Bauer *et al.*, 2001:118-119; Mash & Wolfe, 2005:323; Woolfolk, 2007:138).

Learners with LD will often replace words which they cannot “find” with repetitions such as *things* or *what-cha-ma-call-it* (Wallace & Kauffman, 1978:153). Typically they cannot correctly repeat words or sounds that are said to them. They find it very difficult to understand hand gestures that typically accompany a certain word and do not interpret these gestures (e.g. hands up for stop). Often a learner will have a limited vocabulary and only use two-word or three-word sentences, and this sentence can be accompanied by stammering, stuttering, lisping, and vague pronunciation of a word (Woolfolk, 2007:137-138).

A learner with a spoken language difficulty may omit sounds from words, for example, *tain* for train, or even replace sounds, such as *fumb* for thumb. This usually happens at an age where a learner is normally capable of pronouncing such words correctly (Spinelli, 2002:287; Wallace and Kauffman, 1978:160; Woolfolk, 2007:138).

When LD has shown itself as a language difficulty, this will include that the learner will most likely struggle to communicate with others (Bauer *et al.*, 2001:119; Tuttle & Paquette, 1993:63). The LD will cause the learner to not understand language and he will also struggle to obtain enough language and use the language correctly and appropriately (Mash & Wolfe, 2005:323; Woolfolk, 2007:138).

In summary, when LD manifests as a language difficulty, learners struggle with basic acquisition of language skills as depicted in Figure 3.3 below:

I struggle with language when I read, write, listen or speak.

When I struggle to hear sounds I struggle to ...

Understand certain words.

Know how words fit into a sentence.

To do as I am told.

Listen and pay attention.

I don't understand ...

Concepts like synonyms.

The difference between figurative and literal meanings.

Work that has been read to me.

When I speak, I ...

Sometimes don't understand how to use certain words.

Don't know enough words.

Don't know how to use my hands.

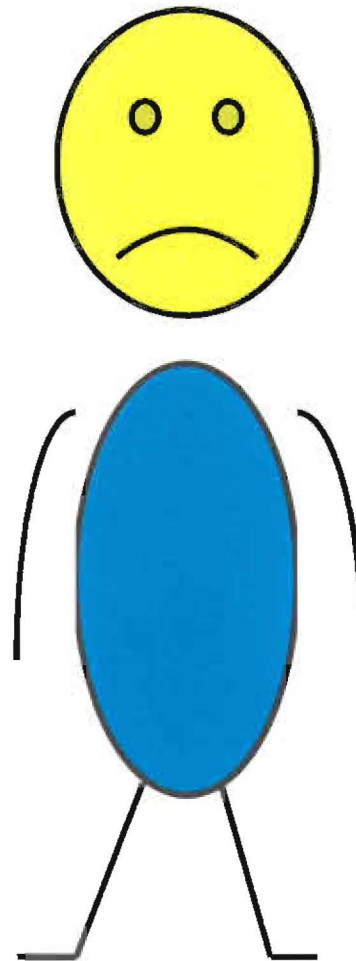


Figure 3.3: Summary of language difficulties

- **Reading difficulties**

In order to flourish in life, the acquisition of reading skills is essential. If you cannot read it is almost impossible to cope at school and later in a work situation (Lerner & Kline, 2006:372; Mash & Wolfe, 2005:330; Pollock & Waller, 1994: 26; Richek, Caldwell, Jennings & Lerner, 2002:3). Since reading skills are the groundwork for all work at school, inadequate reading skills can be the defining factor as to why some learners are not achieving at school (Pollock & Waller, 1994:27). Today the emphasis on reading skills and independent study is quite high in school and without some higher education it can be very difficult to find work (Lerner & Kline, 2006:373). Since reading is the basis of all learning, without this skill learning at school and higher education is arduous. Mostly learners with LD learners ultimately only obtain about fourth or fifth grade reading skills (usually in high school) and improve very slowly after that (Dednam, 2005c:124). In other words, learning at school is slow and awkward, and further formal education very difficult.

Judgement regarding reading can be made in two ways: firstly, while the learner is reading aloud and secondly, by asking the learner contextual questions regarding the section read silently or by written reading comprehension tests. To accurately assess the learner's approach to reading more weight should be placed on the **type of mistakes** the learner makes while reading and not so much the number of mistakes the learner makes. When you scrutinise the mistakes made, you can better understand the problems the learner is having with the reading; does the learner not understand how the words and sentences are put together or does he not understand what he is reading? Everyone makes some mistakes when they read but they can filter out the mistakes to get the general gist of what it is that they are reading (Pollock & Waller, 1994:27; Van Wyk, 1991:89; Winkler, 1998:81).

Learners who struggle to read may have **poor comprehension** because they struggle to read purposefully and to monitor their understanding while they are reading. Learners who find it difficult to read may also often experience comprehension problems because they struggle to use their background information, to decode and recognise their vocabulary knowledge, and their fluency (Prior, 1996:21; 53; Mash & Wolfe, 2005; Winkler, 1998: 86; Woolfolk, 2007:132).

Learners who struggle with their reading often tend to lose their place while reading or may jerk their heads from side to side. They often read the book while holding it very close to their face and their facial expressions display tension while reading or they may read in a high-pitched voice, biting their lips or fidgeting (Woolfolk, 2007:132).

Learners with LD might suffer from another reading difficulty named **dyslexia**. In simple terms dyslexia means abnormal reading (Pollock & Waller, 1994:xiii). Learners with dyslexia do not see backward letters or words. They tend to often confuse similar looking words, letters, and even numbers when they learn about the different symbols that are used in writing and maths. Learners with dyslexia are developmentally normal when learning to read. For example, learners might struggle to remember the difference between b and d (Hultquist, 2006:14; Montgomery,1990:177; Pollock & Waller, 1994:xiii; Winkler, 1998:107). Many learners with dyslexia often get confused with letters and words at the same rate as other learners without dyslexia with the same reading ability. For example, a ten-year-old learner with dyslexia who is currently reading at a Grade 2 level might have the same amount of trouble with *b* and *d* as an average learner who is in the second grade. Typically a learner with dyslexia might struggle with this problem for a longer period of time than other learners who do not suffer from dyslexia (Hultquist, 2006:14; Winkler, 1998:107). In some cases a learner with dyslexia might forget which letter is which, but if they are shown the letter b and d, they can tell that they are not similar and even copy them correctly. In other cases it might happen that the brain sends the wrong information. A learner may see, for example, the word *was*, but then their brain sends a signal to the wrong place where the word *saw* might be stored (Hultquist, 2006:14; Montgomery, 1990:177; Pollock & Waller, 1994:4; Winkler, 1998:107). In other words, their reading is characterised by confusion of letters and words which in turn obscures the meaning they make.

Dyslexia is not something that can be easily hid from other people. This can also cause emotional or behavioural problems for the learners with LD (Hultquist, 2006:15).

In summary, when LD manifests as a Reading difficulty, learners struggle with the basic acquisition of Reading skills as depicted in Figure 3.4.

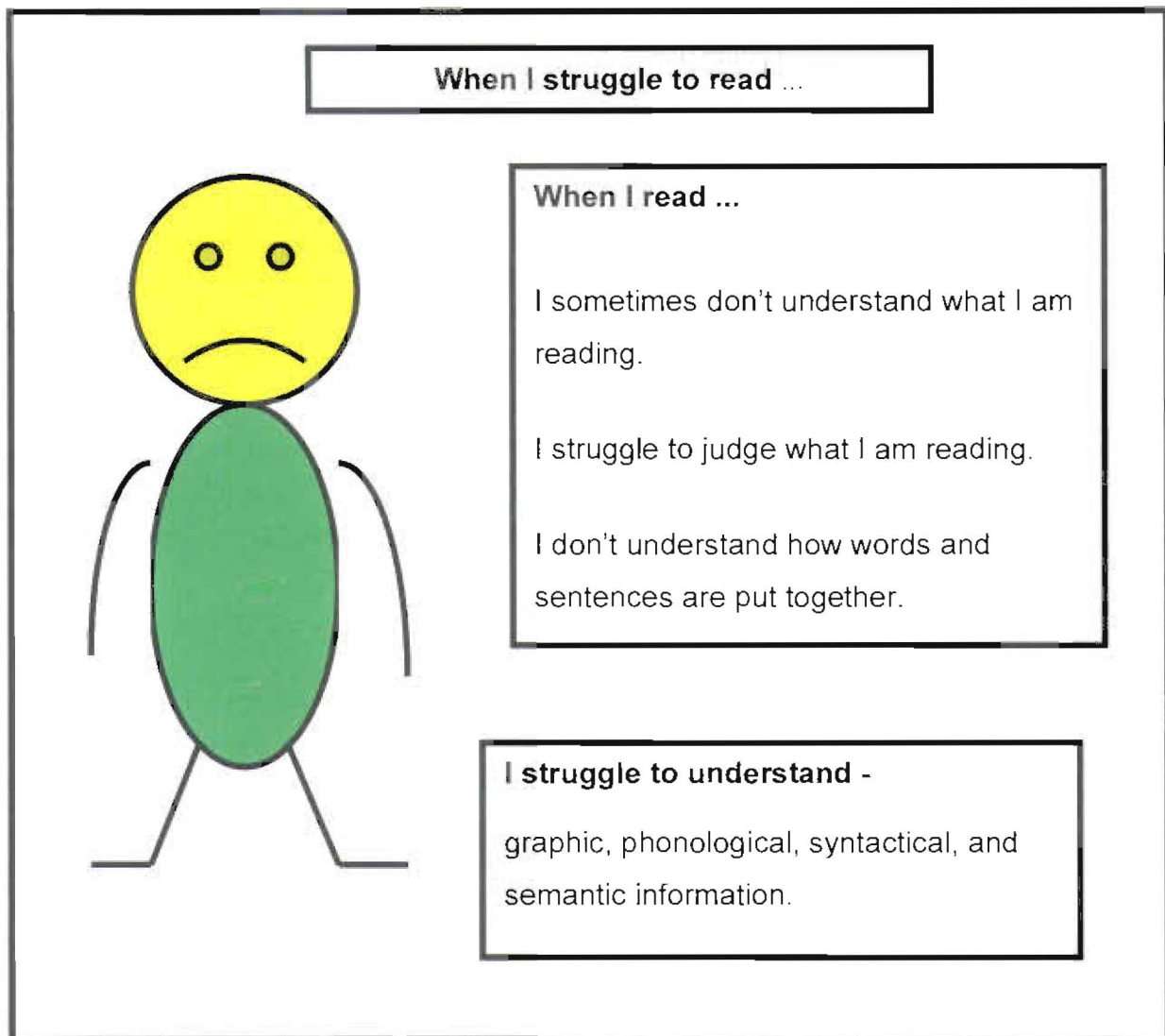


Figure 3.4: Summary of the manifestation of a reading difficulty

- **Spelling difficulties**

Spelling difficulties can result from various factors. A learner may be struggling with **phonological awareness** when he has trouble progressing from the semi-phonetic to the phonetic stage (Prior, 1996:28; Spinelli, 2002:334). In other words, spelling difficulties arise from learners struggling to make sense of sounds. On the other hand, it is possible that learners struggle to move from the phonetic to the transitional stage and may have poor **visual-orthographic memory** (Pollock & Waller, 1994:39; Spinelli, 2002:334). In

other words these learners struggle to recognise the printed or written word and so cannot link letters and sounds. Typically, learners who struggle with visual-orthographic memory and phonological awareness may have trouble with spelling.

Learners who struggle with language may add extra letters, for example instead of *dress* it becomes *dresses*. In other cases learners might omit letters and instead of *home* they will write *hom*, for example (Pollock & Waller, 1994:46; Prior, 1996:36). When a learner struggles with the correct way of pronouncing a word, it might interfere with a learner's spelling ability (Winkler, 1998:98). For example, a learner might say *pin*, instead of *pen*, or they might reverse their letters or words, for example *eno* instead of *one*. A learner can struggle with phonetic spelling or might even reverse their syllables while struggling with their spelling abilities (Pollock & Waller, 1994:44; Prior, 1996:36; Winkler, 1998:98).

- **Writing difficulties**

When referring to writing difficulties, I am referring to a learner's graphio-motor skills. The written word is unarguably the highest form of communication and expression and is also the last of the language skills acquired by learners. A learner first learns to speak then to read and lastly to write the language (Spinelli, 2002:272-273).

A learner with LD may have a very untidy handwriting, the line formation might be uneven and the size of his letters can be erratic (Mash & Wolfe, 2005:332; Pollock & Waller, 1994:71-72). A learner struggling with handwriting writes very slowly or either very fast. Slow writers often press hard with their pen or pencil when they write. A learner's handwriting can sometimes seem to be very neat but is actually very difficult to read. Learners may tend to form their letters incorrectly and sometimes add additional lines or curls (Dedman, 2005c: 137-138; Donald *et al.*, 2006:313; Mash & Wolfe, 2005:332; Tuttle & Paquette, 1993:91-91).

Other factors contributing to learners who struggle to write is that they may have poor visual perception and motor skills. They may not be sure of which hand to use when they have to write, they may suffer from anxiety or any other underlying problems that are associated with poor handwriting (Dednam, 2005c:138; Pollock & Waller, 1994:73:74).

Learners may also struggle to keep their place while writing or even to notice the different shapes of the letters or the direction or shapes of the letters (Pollock & Waller, 1994:72; Tuttle & Paquette, 1998:92; Winkler, 1998:96).

In summary, when LD manifests as a writing difficulty, learners struggle with basic writing skills as depicted in Figure 3.5

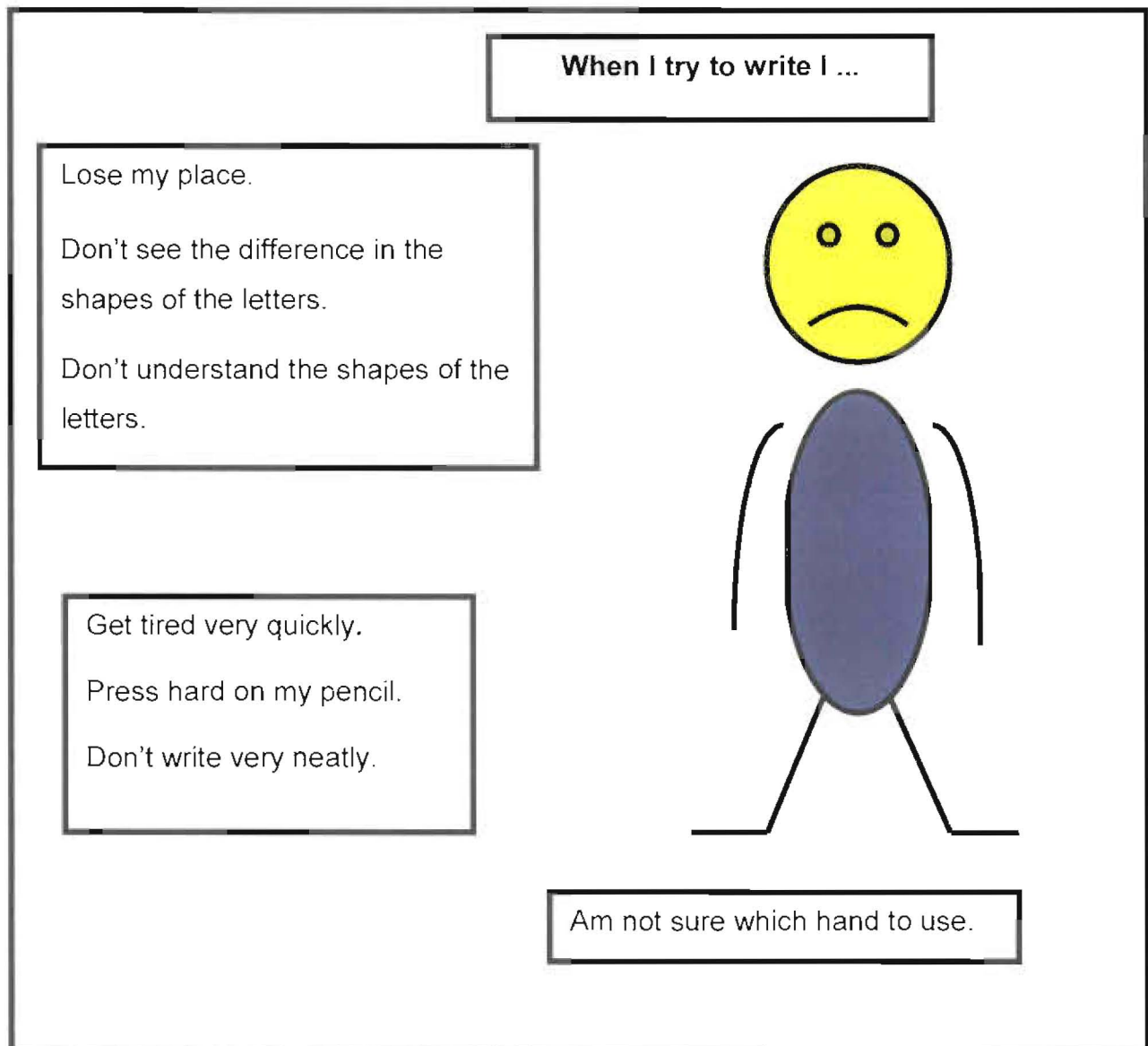


Figure 3.5: Summary of writing difficulties.

3.3.2 Associated manifestations

In addition to scholastic difficulties, there are other associated difficulties that may manifest in various ways. Each is discussed below:

- **Poor self-concept**

Self-concept relates to the ways in which a learner thinks about himself and how much he values himself (Donald *et al.*, 2006:172). When a learner is used to failing as is often the case with LD, it is difficult to have a positive self-concept. The effect that the challenges of LD have on an adolescent learner can range from a minimal impact on a learner to rather severe (Elbaum & Vaughn., 2003:229; Tuttle & Paquette, 1993:17; Winkler, 1998:110). Learners with LD who find it difficult to read, write, or spell are vulnerable because they might often experience failure, and this typically lowers their self-esteem (Elbaum & Vaughn, 2003:229; Lerner, 2003:289; Van Wyk, 1991:106; Winkler, 1998:111). An adolescent with a poor self-concept often feels that he does not belong and /or is not good enough (Tuttle & Paquette, 1998:17).

A learner makes decisions about his own abilities and with learners who have LD this can often be quite unrealistic as they base their assessment on their repeated failures and because they are often seen as being inadequate by and in the presence of their friends, parents and teachers (Derbyshire, 1991:396; Tuttle & Paquette, 1993:18; Van Wyk, 1991:106; Winkler, 1998:111). If a learner does not get help, criticism of his own abilities become more frequent, to which he can become extremely sensitive. Because of this, it will only be a matter of time before the learner will no longer believe in his positive attributes and capabilities (Mash & Wolfe, 2005:334). He will start to believe that all the positive encouragement and remarks that he is receiving are false and then becomes more anxious and focuses only on his limitations and failures (Elbaum & Vaughn, 2003:229; Tuttle & Paquette, 1993:18; Van Wyk, 1991:106).

- **Poor social skills**

Learners with LD often fail to perform independent activities expected from learners of the same chronological age, and this can stymie social interaction and the development of social skills. Poor social perception is also often associated with LD and linked to learners with LD frequently lacking the ability to understand various social situations, and being insensitive to others' feelings and emotions. Furthermore, adolescent learners with LD often don't have the necessary social skills that enable them to judge the moods and attitudes of people in their environment, and are often tactless when it comes to an emotional or social situation. They are inclined to make unsuitable remarks, to act inappropriately, and frequently do not know how to disagree with other people in appropriate ways (Derbyshire, 1991:398; Empson & Nabuzoka, 2004:165-166; Lerner, 2003:549; Mash & Wolfe, 2005:335). In reality this means that their peer group and adults tend to shun them.

This leads to adolescents with LD often feeling isolated or being denied the experience to grow socially, emotionally, and cognitively (Mash & Wolfe, 2005:334). Their poor self-concept is often reinforced by spending time with friends who become angry with them for their inappropriate social behaviour, or by working in learning groups where they struggle to conform to the social norms of such a group, and also when they engage socially with peers in inappropriate ways and experience rejection or teasing (Mash & Wolfe, 2005: 334). Having social problems can keep adolescents from participating successfully or meaningfully in their schoolwork, social settings, and their family environments (Derbyshire, 1991:398; Winkler, 1998:110). Learners with LD are sometimes avoided socially because they might be clumsy when it comes to sport, dancing, making small talk or listening to others (Mash & Wolfe, 2005:335). Lacking adequate social skills can result in very painful experiences for a learner with LD (Tuttle & Paquette, 1993:32).

- **Hyperactivity and attention deficit disorder**

Hyperactivity and attention deficit disorder (ADD) are often associated with LD (Fletcher *et al.*, 2002:209). When a learner has both LD and ADD life can become even more challenging.

According to Gaddes, (1985:132) hyperactivity is often difficult to define, but it can be recognised socially. A hyperactive learner displays a high mobility level as well as unacceptable behaviour that place him in constant conflict with the social and scholastic environment he finds himself in. Hyperactivity can often be linked with a learner's emotional issues, such as poor self-image, unpredictability, and inability to control frustration (Smith, 1979:18; Tuttle & Paquette, 1993:53).

Hyperactive learners often fidget with their hands or feet or even squirm in their seats. They leave their seats when they are expected to remain seated, and they often find it difficult to do take part in playing or in leisure activities quietly. They talk excessively and act as if they are "driven by a motor" and simply cannot remain still (Donald *et al.*, 2006:306; Woolfolk, 2007:135). Understandably this means that they are often in trouble in the classroom and at school and that social situations where they need to wait a turn or sit still (e.g. in church) can become awkward.

A disorder that often accompanies hyperactivity is Attention Deficit Disorder (ADD). Learners with ADD have a short attention span, might find it difficult to concentrate, are easily distracted, very impulsive, struggle to finish anything that they start, may often lose things at school, and even struggle to sit still in class. This type of behaviour is often expressed by a learner through purposeless or meaninglessly repetitive activities (Bley & Thornton, 2001:18-19; Cramer & Ellis, 1996: 219; Prior, 1996:120; Tuttle & Paquette, 1993: 53). Learners with ADD may often complain that they are bored, and don't finish assignments because they find it difficult to follow instructions accurately. Learners with ADD tend to be restless and unorganised. They are also very easily distracted and may tend to talk a lot. A lot of learners with ADD have poor fine motor development and poor handwriting skills. They may even tend to lose their place when they are reading (Finlan,

1994:185; Prior, 1996:120). As with hyperactivity, learners with ADD are frequently in trouble. When they are disorganised and lose things or forget things, they experience failure and this reinforces poor self-concept.

In summary, when learners with LD also have ADD or are hyperactive, they are even more inclined towards negative social, emotional and scholastic experiences which put them at risk for negative outcomes.

- **The impact LD has on a family and on siblings**

When a learner is diagnosed with LD, the adaptations that might have to be made can have an impact on the family and home life. For example, it is often necessary to take the child with LD to multiple therapies or to accommodate their ADD, and this can be stressful. Consequently, it can have an impact on the siblings of the learner, the way the parents and learner with LD interact with one another, and also how discipline is dealt with. Dyson (1996:280) stated that having a child with LD can result in additional stress placed on the parents, and that this could have a negative effect on the relationships the parents have with the other children in the family who do not have a LD, and on the relationship between the mother and father (Rörich, 2008:33-34).

According to DesNoyers Hurley and Levitas (2004:77) siblings of learners with LD often struggle to adjust to home-life which is affected by the sibling with LD, especially when there is strain between the parents. In such instances, they may develop adjustment problems. It is also possible that siblings of a learner with LD feel neglected because the parents have to spend more time assisting the learner with LD and taking him to therapies or to a special school that may not be in the neighbourhood (Tuttle & Paquette, 1993:28). Not all researchers are convinced that siblings of learners with LD adjust with difficulty (Hallahan, Kauffman & Loyd, 1999:166). However, it would seem that in most instances, siblings struggle to be tolerant of their sibling with LD.

Siblings of LD learners often can become very jealous because their brother or sister is receiving extra attention because of their LD. They might feel that their brother or sister is getting more support at home or that they have fewer responsibilities, especially at home (Hultquist, 2006:39). When siblings experience jealousy, or neglect, this may decrease how supportive they are towards their brother or sister with LD.

- **Summary of risk linked to associated manifestations**

As noted above, learners with LD often have poor social and emotional skills that lead to unfavourable outcomes. Because a learner with LD is often incompetent in acting appropriately in sensitive social circumstances, they might often find themselves **ostracised** by those learners who do not struggle with LD (Derbyshire, 1991:398; Lerner, 2003: 549; Mash & Wolfe, 2005:335). Because adolescence can be such an awkward phase, a lot of adolescents are very sensitive, especially in a social environment in front of their peers. Learners with LD are likely to make inappropriate remarks and are often very tactless regarding an emotional situation (Derbyshire, 1991:398; Lerner, 2003:549; Mash & Wolfe, 2005:335). Because of such situations learners with LD are often **avoided and rejected** by their peers (Mash & Wolfe, 2005:334).

When a learner is diagnosed with a LD, the adaptations that might have to be made can have a negative impact on the family and home life (Buchman, 2006:ix; Walsh & Williams, 1997:144). Having a child with a LD can result in **additional stress** being placed on the parents and siblings; and this can lead to less support for, and impatience with, the learner with LD (Mash & Wolfe, 2005:335; Rörich, 2008:33-34).

Struggling with LD can have further implications that continue into adulthood. Learners who struggle with their LD well into their adult years are more likely to get a job in occupations requiring low levels of skill and that pay less money than that earned by their peers (Mash & Wolfe, 2005:336). Learners with LD might find it difficult to fill in application forms, write a letter of application, read instructions, etc. It is therefore safe to assume that this can have an effect on their abilities in the workplace and their effectiveness in their working environment.

3.4 PROTECTIVE PROCESSES BUFFERING THE RISKS OF LD

There has been limited research outlining what helps learners with LD cope with the risks of failure and struggle mostly associated with LD. Though a lot of emphasis is placed on learners who struggle to cope with LD, researchers have found that despite having to deal with LD, there are learners who are able to cope in a positive and resilient manner (Cordoni, 1990:4; Keogh & Weisner, 1993:4; Mash & Wolfe, 2005:334; Theron, 2006:200; Theron, 2008: 226-232).

One previous South African study that focused on resilience among youth with LD suggested that resilience in youth with LD is linked to personal characteristics (Theron, 2004:319), including:

- **assertiveness** implying self-confidence and independent mindedness;
- positive attitude, implying the capability to remain **optimistic**;
- moderate anxiety signifying sensitivity or a **sense of obligation**;
- **drive**, suggesting curiosity and creative problem solving skills;
- **enthusiasm** suggesting spontaneity;
- **positive future orientation** which suggests orientation to goals and a willingness to keep trying;
- **moderately positive self-concept**, suggesting positive self-talk and some self-acceptance;
- **internal locus of control** signifying a sense of authorship; and
- **good interpersonal relationship skills**, implying a good positive social orientation.

3.5 CONCLUSION

A lot of prominent people of the past (Albert Einstein, Thomas Edison, Nelson Rockefeller, etc) struggled with some form of learning difficulty (Lerner, 1996:4-6). These persons of prominence were able to face their disabilities and learn to find ways to help them overcome their first initial failures (Lerner, 1996:6). The main focus of this study is to establish what protective resources help some South African learners with LD to be resilient like these historical figures. The research method used to discover what the antecedents of resilience were among a group of learners with LD, is outlined in the next chapter.

CHAPTER FOUR
RESEARCH DESIGN AND METHOD

OVERVIEW OF CHAPTER 4

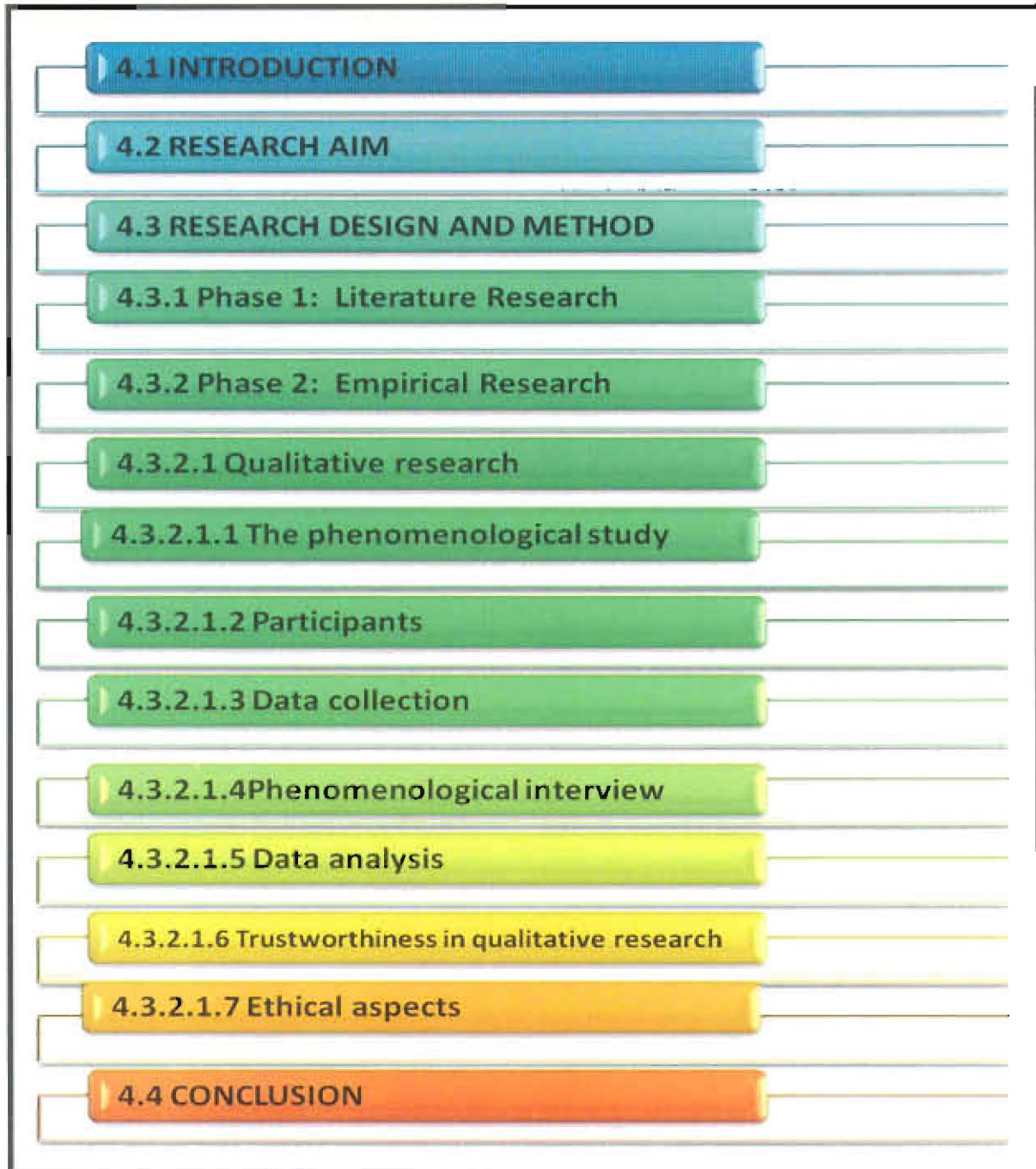


Figure 4.1: Overview of Chapter 4

4.1 INTRODUCTION

This chapter presents the research method that was followed throughout this study. It will conclude with an overview as well as a justification of why this method of research was used to collect information that enabled me to reach the broad aims of this study.

4.2 RESEARCH AIM

The principal aim of this study was to explore the phenomenon of resilience among adolescents with LD in the Vaal Triangle area.

The overall objective was further divided into the following specific aims:

- To conduct a literature study on LD;
- to conduct a literature study on resilience;
- to conduct an empirical study to determine what antecedents underlie resilience among adolescents with LD; and
- to provide recommendations for Life Orientation educators to encourage resilient functioning among learners with LD.

4.3 RESEARCH DESIGN AND METHOD

A qualitative empirical investigation was conducted. The investigation was conducted in two phases.

Phase 1: A literature study was conducted.

Phase 2: Phenomenological research was done.

The procedure used in each phase is outlined below:

4.3.1 Phase 1: Literature Study

Primary and secondary literature sources, as well as Internet sources, were studied to gather information on LD and on resilience. I used this literature review to better understand what LD and resilience entailed. I used this understanding to shape my interview questions and to make meaning of the collected data. Once I had interpreted the data as themes, I used the literature review to comment on whether or not the antecedents of resilience referred to by my participants had been noted in previous studies.

The results of the literature research were documented in Chapters Two and Three.

4.3.2 Phase 2: Empirical Study

Because this research focused on the phenomenon of how adolescent learners cope with LD resiliently, a qualitative research design was conducted. As noted in Chapter One, the reason why I considered a qualitative approach was that my main focus was to understand more deeply how adolescent learners cope with LD resiliently. With this study I wanted to understand who and what contributes to these learners being resilient and how they manage to sustain their resiliency, in spite of constantly being surrounded with not only the stress of having to cope with LD, but also with other life stressors typical to adolescence.

To motivate my choice of a qualitative research design, a description of qualitative research design as well as the investigation group is given.

4.3.2.1 Qualitative research

Qualitative research focuses on understanding certain phenomena or experiences. Instead of asking how many (quantitative) people are part of the phenomenon, qualitative researchers ask **how** were these people affected by the phenomenon, **who** or **what** contributed to the phenomenon and what impact did the phenomenon or experience have on them (Babbie & Mouton, 2007:278; Henning, 2004:4; Leedy & Ormrod, 2005:95; Nieuwenhuis, 2007a:50-51).

One of the main reasons researchers prefer qualitative methods over quantitative methods (when wanting to gain a deeper understanding of something), is that qualitative research does not set out to explain, predict or control phenomena. Qualitative research only consists of understanding and describing phenomena (Babbie & Mouton, 2007:271; Gilgun, 2005:44-45; Leedy & Ormrod, 2005:94).

Qualitative and quantitative researches have both positive and negative qualities that are linked to them. Below is a summary (Table 4.1) of the advantages and disadvantages of qualitative research that helped me choose to conduct a qualitative approach (Leedy & Ormrod, 2005:270; Smit, 2006).

Advantages of Qualitative Research	Disadvantages of Qualitative Research
Qualitative research is not limited to unyielding and specifically defined variables. As the research process moves along the method can be changed and adapted.	Qualitative research takes up a lot of your time.
When collecting information the researcher is an observer or an instrument of data collection (e.g. an interviewer). This gives the researcher the opportunity to take a closer look at complex questions, and discourages the researcher from becoming personally involved.	During the collection and interpretation of the information, the validity might be lost because the researcher might be biased in what she pays attention to. Furthermore, it is not easy to become a skilled interviewer, and so inexperienced interviewers might not get the information needed.
Throughout the study, personal information that is gathered from the participants provides them with the opportunity to relate their own understanding and experiences to the	The themes and categories are not fixed and vary in different settings, ultimately making it very difficult for the researcher to compare the research findings.

topic that is being researched.	
Qualitative research acknowledges that there is a possibility for various perspectives, and thus it is not limited to one ultimate truth.	Many traditional scientists reject the findings of qualitative research because they are not easily verifiable.

Table 4.1: An overview of the advantages and disadvantages of qualitative research

In order to conduct qualitative research, a number of steps have to be carefully followed. In Table 4.2 below are the 12 steps I followed in my qualitative research as discussed by Babbie and Mouton (2007:270), Leedy and Ormrod (2005:134).

Steps	Qualitative Process	Example of how it was done in this study
Step 1	Choose a research topic.	I chose to research the phenomenon of adolescents who are able to cope resiliently with LD.
Step 2	Consider the underlying assumptions.	LD is a risk that threatens a learner's ability to be resilient. In my experience as a high school educator I have experienced this among the learners in my class, but I have discovered that, despite the struggle of having to cope with LD, many of these learners are still able to be positive and resilient. Therefore when I commenced this study, I assumed that all learners would be capable of resilience and that they would typically depend on similar processes to encourage their resilience.
Step 3	Select the specific qualitative design to be used.	For this study I chose a phenomenological design, purely because I wanted to understand the phenomenon of resilience among adolescents coping with LD, and what contributed to their resilience from their perspective as based on their experiences.
Step	Plan qualitative	The participants who took part in my study were all

4	sampling.	adolescents attending a school for learners with LD in the Vaal Triangle Area. I recruited the participants by contacting the school's management, explaining my study, working with an AP and asking them to identify at least 10 to 20 resilient learners who would suit my recruitment criteria (Cf. 1.4.2.1.2 and 4.3.2.1.2).
Step 5	Explain the researcher's role.	I conducted interviews with ten learners who voluntarily took part in this study. I explained the reason for my research to the learners and what I hoped to gain by doing this research. (i.e. a deeper understanding of how they cope resiliently with LD). I had one to three contact sessions with each participant depending on the amount of information I gathered through the interviews. I followed standard ethical procedures (Cf. Table 4.8).
Step 6	Establish the protocol for recording information.	All the interviews were tape recorded (with the permission of the learners as well as their parents) and then transcribed word for word.
Step 7	Write out a research proposal.	I wrote a research proposal explaining the problem that I wished to research (adolescent learners coping resiliently with LD) as well as the methods I would use in my research in order for me to gain a deeper understanding. The proposal was accepted by the Research Committee of the School of Educational Sciences and the Faculty of Humanities, Vaal Triangle Campus (North-West University).

<p>Step 8</p>	<p>Collect the information via observation, interviews, documents or visual material; record immediately.</p>	<p>The information was gathered through multiple face-to-face semi-structured interviews. The interviews were tape recorded and then transcribed word for word. I interviewed the participants outside of school hours at times that were convenient to them. The interviews took place in an available office at their school because all of the participants made use of the school's aftercare facilities.</p>
<p>Step 9</p>	<p>Process the data into themes and categories through coding.</p>	<p>I listened attentively to the learners during the interview processes for various pieces of information that would 'pop-up' repeatedly and answer my research question. By doing this I was able to focus my research questions more thoroughly on the topic that was being researched. I probed for information that I needed. After the interviews, I read through the transcribed interviews over and over until I was familiar with the contents. I coded parts of the interviews that seemed to answer my guiding research questions. Here I used open coding (see Addendum B for examples of this). Following this I grouped similar codes into groups or categories (Addendum B for examples of this) and these became my themes.</p>
<p>Step 10</p>	<p>Analyse and interpret the data in order to draw conclusions.</p>	<p>I repeated the above process with each interview transcript and then, by constantly comparing the contents of these transcripts, I identified themes that ran across all my interview data. The information I gathered through the interviews was painstakingly analysed, so that I was able to draw valid conclusions when I interpreted the data.</p>

Step 11	Ensure that your research is valid.	I followed the steps recommended to heighten trustworthiness by asking the participants to check my interpretation and describing the participants in detail (Cf. 4.3.2.1.6) to ensure that my research was trustworthy.
Step 12	Write the research report.	In Chapter Five of this dissertation I explained my findings and interpretation of what I understood about the phenomenon of how adolescents cope resiliently with LD. In Chapter Six I noted the limitations and contributions of the study.

Table 4.2: The 12 steps I followed when I conducted my qualitative research

When conducting a qualitative research design different types of qualitative designs have to be considered (Leedy & Ormrod, 2005:144). The different design and their purposes are summarised in the Table 4.3 below as identified by Leedy and Ormrod (2005:144).

Design	Purpose
<i>Case study</i>	To understand only one person or situation.
<i>Ethnography</i>	To understand how the culture of a group is reflected through its behaviour.
<i>Phenomenological study</i>	To understand how participants of a study experience the phenomenon that is being studied.
<i>Grounded theory study</i>	To come up with a new theory from data collected in a natural setting.

Table 4.3: Different qualitative designs and their purposes

As noted previously, I chose a phenomenological study – this is discussed in detail below.

4.3.2.1.1 The phenomenological study

As outlined in my problem statement in Chapter One, the empirical study conducted in this study was necessary because the literature available on the phenomenon of how adolescent learners cope resiliently with LD is limited. Because I wanted to understand what and who contributed to their resilience, I needed to research how these adolescents coped. In other words, I wanted to hear their stories about what and who contributed to their resilience; therefore I chose to conduct a phenomenological study.

A phenomenological study is conducted when a researcher wants to study the meaning of individual life experiences regarding a certain phenomenon. In a phenomenological study the researcher's aim is to try and understand the participants' understanding and perception of a certain situation (De Vos & Fouche, 2001:80; Gilgun, 2005:44; Leedy & Ormrod, 2005:139). The responses given by the participants are then analysed to come up with themes that explain the chosen phenomenon and provide better understanding thereof.

In this study the phenomenon of how adolescent learners cope resiliently with LD was researched. Because of this, I asked the participants questions about their personal experiences of having to cope with LD on a daily basis and what and who helped them to cope resiliently.



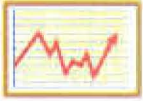
Because this was a qualitative approach, I was the research instrument. The role I played was that of an interviewer who tried to gather information and pass it on in my findings in an impartial way. I tried to guide the participants to give me relevant information without influencing them (Leedy & Ormrod, 2005:145).

In a phenomenological study the researcher is seen as an instrument because the researcher acts as an observer and a data gatherer. The researcher has to guide the participants to respond to the topic when they are wandering away from the topic. I also had to be vigilant not to use leading questions or put words in the participants' mouths

(Leedy & Ormrod, 2005:145). I tried to connect with the participants so that they would trust me enough for them to reveal their own personal experiences.

The success of the phenomenological study depends as much on the participants as on the researcher. Because a phenomenological interview can tend to be unstructured, it is vital for the researcher and the participants to work together to understand the phenomenon. It is also important that the researcher should be aware of the basic questions she needs answered (Leedy & Ormrod, 2005:146).

The characteristics of a phenomenological design (Leedy & Ormrod, 2005:144) are discussed in Table 4.4 below, as well as how I adapted it in my study.

<p>Design</p> 	<p><i>Phenomenological design</i></p>	<p>I chose a phenomenological design because I wanted to understand the phenomenon of adolescent learners coping resiliently with LD from the perspectives of resilient adolescents with LD, because I believed this would provide a deep and meaningful understanding of their resilience.</p>
<p>Purpose</p> 	<p><i>To identify and understand what the participants go through</i></p>	<p>I listened attentively to the stories and experiences of the participants in order to understand their emotions and experience and how they deal resiliently with the challenges of LD.</p>
<p>Methods of data analysis</p> 	<p><i>Select data segments that answer the research question meaningfully</i></p>	<p>I read the transcribed interviews over and over again until I was able to identify segments of meaningful information that answered my guiding research questions. I coded these segments and then I grouped similar codes into appropriate themes and categories.</p>



<p>Methods of data collection</p> 	<p><i>Semi-structured interviews.</i></p> <p><i>Sampling – 5-25 people</i></p>	<p>Because I was getting consistent information from the participants, I stopped after conducting 10 semi-structured interviews. Semi-structured meant that I had basic questions I needed to have answered but that I adapted these or added probing questions as the interviews were conducted.</p>
<p>Focus</p> 	<p><i>How we as people live and experience a certain phenomenon</i></p>	<p>My focus was to understand how these learners manage to be resilient despite the challenges of LD. More specifically, I wanted to know who and what contributed to their resilience.</p>

Table 4.4: Characteristics of a phenomenological qualitative design

4.3.2.1.2 Participants

In my study, the population of all possible participants was adolescent learners with LD. Because of logistical constraints, I decided to focus my research and limit it to adolescent learners identified as having LD and who live in the Vaal Triangle area. Furthermore, for logistical reasons, I interviewed learners who attended a school that caters specifically for learners with LD.

Leedy and Ormrod (2005:144) state that participants in a phenomenological study should range between 5 to 25 participants, and all those who are taking part must have direct experience of the phenomenon being studied. Leedy and Ormrod (2005:144) and Smit (2006) suggest that a researcher should continue conducting interviews until a clear pattern of themes keep recurring and there is nothing new to be learnt from the participants. In this study I interviewed ten participants, because the information I was getting was recurring and no new information presented itself.

As I indicated in Chapter One, I made use of purposive sampling to attain my participants. The criteria made it a lot easier for me to interview participants who had direct experience of the phenomenon of adolescent learners coping with LD (Leedy & Ormrod, 2005:206).

The selection criteria included:

- Participants had to attend a school for learners with LD.
- Participants had to be in Grades 8-10.
- Participants were identified as resilient by the AP.
- Participants resided in the Vaal Triangle.

I went to a school that caters for learners with LD in the Vaal Triangle area and asked the principal for permission to meet with staff members and inform them about my research project. I was then allocated to one teacher as my contact person at the school. This teacher helped me to organise an Advisory Panel (AP) as explained in Chapter One (Cf. 1.4.2.1.2). An advisory panel consisted out of the principal and three teachers identified ten learners who they considered to be suitable participants to start off with and gave the names to my contact teacher. I informed the AP about the purpose as well as of the procedure (interviews) that I would use. I explained the criteria to be met by the participants and asked the AP to help me identify learners who matched the criteria. Their recommendation of participants was based on a discussion of how Masten and Reed (2005:76) characterise resilient learners, which the AP agreed was a suitable definition for resilient learners.

Once the AP had identified potential participants I met with them as a group. This meeting was facilitated by one of the AP members. I explained the purpose as well as the procedure (interviews) that I would use and what this would mean for them, time-wise and in terms of them having to share their experiences of resilience with me. All the participants took part in this study voluntarily with their parents' consent (an example of the consent form is included in Addendum C).

In this study four participants were boys and six were girls. Their ages ranged from 13 to 16 years. The demographic detail of each participant is tabulated and is available in Chapter Five (Cf. Table 5.1).

4.3.2.1.3 Data collection

The data were collected by conducting semi-structured interviews. A basic interview is when the interviewer asks the participant questions to gather information about the specific research that is being done. In general it can be described as a two-way conversation where the interviewer learns more about the ideas, beliefs, opinions, values as well as the certain behaviour of those who are participating (Reber & Reber, 2001:367).

The main objective of a qualitative interview is for the researcher to try and experience the world through the perceptions of the participant and to have a clear understanding of the participant's experiences. If the researcher is able to gain the trust of the participants and they believe that he is genuinely interested in their experiences, the researcher will be able to gather information from them that would probably not be gained in any other way (Babbie & Mouton, 2007:249).

Kvale and Kvale, (1996:19) and Leedy and Ormrod (2005:139), state that an interview should take place in the form of a conversation and not a question and answer session. Babbie and Mouton (2007:249), Henning (2004:74-75), suggest that as an interviewer, it is important to do the following:

- Listen more, talk less,
- follow up on what the participant says,
- ask questions when you do not understand,
- ask to hear more about a certain experience,
- explore, don't probe,
- avoid leading questions,

- ask open-ended questions which do not presume an answer,
- follow up but do NOT interrupt,
- keep participants focussed and ask for more details,
- do not reinforce the participant's response, and
- tolerate silence and allow the interviewee to be thoughtful.

I tried my best to comply with the above guidelines, but I struggled at times (e.g. it was hard to remember not to ask closed questions).

According to Henning (2004:74-75) there are various types of interviews. These include:

- ***A structured interview***

In a structured interview you will find questions that are structured and well developed in advance. The researcher follows this protocol of questions closely. A structured interview is commonly used in case studies of larger sample groups.

- ***A semi-structured interview***

A semi-structured interview is generally used when the researcher wants to confirm data arising from other data sources. It rarely spans over a long period of time and generally expects the participant to answer a set of questions that have already been determined. Occasionally the researcher will probe a response, but mostly the protocol of questions is followed.

- ***Open-ended interview***

Basically the open-ended interview is generally a conversation where the researcher explores the participant's views, ideas, beliefs and different attitudes concerning the phenomenon with the participant. Open-ended interviews usually take some time and will

generally be more than one interview. The main focus falls on the perceptions of the participant and narrated events related to the phenomenon.

Interviews have both advantages and disadvantages as summarised in Table 4.5 below.

Table 4.5 Advantages and disadvantages of interviews (Bless & Higson-Smith 2000:184-5; Leedy & Ormrod, 2005:146-150; Smit, 2006).

Advantages	Disadvantages
Interviews are very helpful in investigative research when wanting to gather enough information about a specific topic/interest.	If the interviewer is not efficient or competent it can lead to him introducing a lot of biases. It can also lead the interviewer to drawing the wrong conclusions and perceiving a lot of inaccurate information.
Explanations provided by the interviewee allow further discovery of additional aspects of the problem that might help to better understand the problem that is being researched.	Interviews can tend to be time consuming and can often turn out to be expensive. The interviewee may get bored with the questions and may lose interest if the interview carries on for too long.
Interviews are very helpful when comparing the different responses of a large group of participants, and to determine any consensus as well as discrepancies.	It is possible that the interviewer can affect the participant's answer by interpreting the information wrongly and by drawing the wrong conclusions.
Participants can participate in an interview and give valuable information even when they are unable to read or write.	Having an interviewer present can be seen as a threat to the participants' anonymity.
If an interviewer does not fully understand the interviewee, it is easy for him to ask the interviewee	

<p>to explain what he means and therefore limits a lot of confusion that might occur.</p>	
<p>Interviews are a way of making certain that all questions, even the difficult ones, have been considered and ensuring that the necessary information was acquired.</p>	

Table 4.5: Advantages and disadvantages of interviews

4.3.2.1.4 Phenomenological interview

As noted previously, I used phenomenological interviews to gain my data. A phenomenological interview is usually lengthy (Leedy & Ormrod, 2005:139). Because I was interviewing learners with LD it was often difficult to interview some of them for more than thirty minutes as they typically could not focus for extended periods. I therefore tried to stick to the point without leading the participants and without them feeling that they were being rushed. I took a break during the interview so that we would not lose focus on the topic.

I must add that although my intention was to conduct phenomenological interviews this was often difficult because participants mostly gave one line answers. This meant I had to coax or probe a lot and that conversation did not always flow.

When conducting the interviews I focussed the questions on my chosen phenomenon, namely how the participants coped resiliently with the multiple challenges associated with LD (De Vos & Fouche, 2001:80; Gilgun, 2005:44; Reber & Reber, 2001:533).

It was important for me to understand how the learners coped resiliently with LD and who and what contributed to their resilience, and therefore I thought it was applicable to conduct

phenomenological interviews. I listened very carefully as the learners described their daily experiences and their protective resources (i.e. the people and processes that helped them to cope resiliently). This enabled me to identify meaningful information that could be used

to gain a deeper understanding of their resilience (De Vos & Fouche, 2001:80; Gilgun, 2005:44; Leedy & Ormrod, 2005:139; Pollio, Henley & Thompson, 1997:28).

My overall plan for the interviews was based on what I wanted to understand (i.e. how adolescent learners manage to cope resiliently with LD). I mostly started with the following central question:

Tell me how you cope with life even though you have learning problems.

Based on what the participant answered I probed for deeper information or asked direct questions, if participants told me very little about protective resources that enabled them to be resilient. Typically I wanted to know who (e.g. parents, teachers, friends, siblings, community members) and what (e.g. religion, therapies, extra-curricular activities) encouraged resilience. I listened to the response of the participants, and from their responses I would pose the next question in order to probe for more information. An example of Interview One is included in Addendum A.

The interviews I conducted were recorded and transcribed word for word. All the interviews were conducted in English.

4.3.2.1.5 Data analysis

In this study data analysis refers to the process of content analysis.

According to Gilgun (2007), Leedy and Ormrod (2005:142) and Reber and Reber (2001:152) content analysis is a general term stretching over a variety of methods for analysing the contents of discussions, messages or documents for common or divergent

themes. In other words, content analysis is a detailed method of examining qualitative data that will enable the researcher to recognise certain patterns, themes, or biases (Gilgun, 2007; Leedy & Ormrod, 2005:142). Qualitative data usually include verbal, visual, or behavioural forms of communication (Leedy & Ormrod, 2005:144; Shaughnessy & Zechmeister, 1997:173). In this study, the contents of the transcribed interviews were analysed to see what and who contributed to the participants functioning resiliently despite the challenges of LD.

Gilgun (2007), Leedy and Ormrod (2005:140-142) and Nieuwenhuis (2007b:105:113) identify the following steps that are typical of content analysis. These steps, as well as how I carried out the steps throughout my research, are briefly discussed in Table 4.6 below:

Steps of content analysis	Adapted to this study
A body of material is selected.	This refers to the transcribed interviews. I used all the interviews.
The researcher outlines the characteristics and qualities to be focussed on.	In this research it refers to the protective resources (people, processes and factors) that encourage the learners' resilience while struggling with LD. This was my focus as I wanted to understand the antecedents of resilience among the participants.
When the analysed material contains a large amount of information, the process can be done in sections.	I worked with one interview at a time. Only when I was sure that I had understood its contents did I move on to the next interview. After reading the second interview I compared the answers given with those given in the first interview and so on (i.e. parts of the transcripts that might answer my research question).
The researcher studies the data for incidences of the defined	Once I had identified relevant parts, I inductively coded the data (using first open

<p>characteristics.</p>	<p>and then axial coding). I used codes to define the grouped statements that came from the data itself. I used open coding as an inductive process and selected the codes according to what the information meant to me (Gilgun, 2005: 43). For example, when a participant described his mother as supportive, I used the code: 'supportive parent.' I did not have a predetermined set of codes (Nieuwenhuis, 2007b:107), but my knowledge of related literature (Cf. Chapters Two and Three) and my personal experiences as an educator working with learners with LD in a mainstream school did influence the codes that I chose. I grouped my open codes into themes relating to what the participants repeatedly told me was contributing to their resilience. I went a step further by using axial coding to make sense of what contributed to the resilience of adolescent learners coping with LD. This means I grouped my initial codes to form categories or themes that could allow an understanding of what protective processes and factors encouraged resilience in adolescent learners coping with LD (Babbie & Mouton, 2001:500; Bornheim, 2000:77).</p>
<p>The researcher must carefully reread the original transcripts to make sure that no themes, patterns or expectations</p>	<p>In my study I did just this to ensure that I did not miss any themes, patterns or expectations. It was quite time consuming.</p>

were missed.	
Analysed data must be understood against the background of existing theories to show how it corroborates or how it might provide new insight.	I did this by conducting an in-depth literature study (prior to the interviews) that focused on the phenomenon of LD and of resilience. Once I had grouped coded data into themes, I discussed these themes in relation to what current literature says (Cf. Chapter Five).

Table 4.6: Steps that are typical of content analysis

In summary, I used inductive content analysis to draw appropriate conclusions from the interview data. Through constant comparisons and careful examinations, I searched for themes and categories that emerged from the data (Camozzi & Mathie, 2005:129; Patton, 2002:459) and used these to describe the antecedents that encouraged resilience among my participants. To ensure that the findings were valid, I asked other people (especially the research participants) to comment on how valid my interpretations were (Leedy & Ormrod, 2005:100).

4.3.2.1.6 Trustworthiness in qualitative research

Lincoln and Guba (1985:219) propose four criteria to evaluate the trustworthiness of qualitative research work: credibility, transferability, dependability, and confirmability, as discussed below.

- **Credibility**

Credibility refers to the adequate representation of the constructions of the social world under study (Lincoln & Guba, 1985:21). In other words, credibility relates to how believable my findings are. My interpretation of the data are done in such a way that it has sufficient content to make it believable. I did this through coding processes that highlighted the differences and similarities within the data I collected. I used these codes to help me draw credible conclusions concerning the information I had gathered throughout the interviews

(Babbie & Mouton, 2007:277; De Vos, 2005:346). I also included long or rich excerpts from the interviews when introducing and discussing the findings in Chapter Five, as this helps to clarify how I came to the conclusions I did.

Another way to ensure credibility is member checking. This is a process where the researcher verifies the data and the information obtained with his participants (Lincoln & Guba, 1985:314; Maykut & Morehouse, 1994:147). Concerning my study, I randomly selected participants and confirmed their answers with them as well as my analysis of their responses.

- **Transferability**

Transferability refers to the extent to which the researchers' working hypothesis and findings can be applied to another context (Babbie & Mouton, 2007:276; Hammell, 2004:140; Lincoln & Guba, 1985:202). There will always be aspects that make specific situations unique and therefore it is very difficult to generalise qualitative information. Although transferability is not the aim of qualitative research per se, if the researcher provides detailed descriptions about participants and their contexts, other researchers can decide whether findings can be generalised to their research contexts (Gilgun, 2005:44-45; Lincoln & Guba, 1985:202).

I was responsible for providing information and enough detail to enable other researchers to make judgements regarding the transferability of my findings to other groups of adolescents (Lincoln & Guba, 1985:202). In other words, I included a description of the background information of the participants and made it clear that they were challenged by the risk of LD, so that other researchers can decide whether my findings can apply to adolescents facing different or even similar risks. I also made it clear that all my participants attended a school for learners with LD, as this may impact on how well my findings can be transferred to learners in a mainstream school.

- **Dependability**

Dependability relates to replicating the study and findings that if the study was to be repeated in a similar way with similar research participants in similar environments, the findings would prove to be in fact similar (Babbie & Mouton, 2007:278; Brown & Rodgers, 2002:242; Decrop, 2004:159). In order to do this, other researchers should be given an in-depth description of the context, participants, data collection and process of analysis. For this reason, in addition to a description of my participants, I included examples of a transcribed interview (Addendum A) and of my process of content analysis (Addendum B).

- **Confirmability**

Confirmability refers to the extent to which the findings as posited by the researcher, can be confirmed by others who read or review the results (Babbie & Mouton, 2007:278; Lincoln & Guba, 1985:219).

Throughout my research I checked in with my study leader and with a fellow- student to ensure that I was being objective in my interpretations of the data. I asked the fellow-student to read some of my interviews and then to review my interpretation so that we could discuss how well my interpretation matched the data. The fellow-student was also completing a qualitative study focused on resilience so she had a theoretical framework that allowed her to comment meaningfully. I provided four of the participants with a copy of my interpretations and asked them to comment whether or not I was accurate in my interpretations. I used the comments of all these people to further refine how I was interpreting my data.

- **Ensuring accuracy**

To further ensure trustworthiness in my research, I made use of the following methods outlined in Table 4.7 below (Leedy & Ormrod, 2005:100; Lincoln & Guba, 1985:219; Padgett, 1998:101; Thomas, Nelson & Silverman, 2005:364).

Validity component	Explanation of the use
Extensive time in the field.	I interviewed ten learners. The reason for only interviewing ten learners was because the information I was getting was consistent and no new information was presenting itself. Nevertheless, because I interviewed each of these learners more than once, I spent a lot of time exploring the phenomenon of their resilience with them.
Negative case analyses.	I did not originally set out to find a case that would disagree with others, but because I used different participants from different environments (different grades and classes) this possibility was taken care of. Once I had decided on the themes that emerged from the data, I scrutinised the interview transcripts for data or themes that contradicted what had already emerged. I did not find such themes.
Thick description of the information I gathered throughout the interviews.	In Chapter Five I included quotes from the interviews that highlighted the essence of the themes and sub-themes that I reported. I made sure that I used lengthy or very descriptive (rich) quotes that would clearly convey the essence of the themes and sub-themes.
Feedback from others.	I was constantly in touch with my study leader as well as educators/colleagues in the field throughout the whole process of my research. I shared my findings with some of my colleagues and used their reactions to shape my findings. I also went back to some of the learners who participated to show them my interpretations and to get their views on how accurate my interpretations were. I further reflected on my findings with a fellow-student.
Respondent Validation.	After I had completed analysing the content, I shared my findings as well as the conclusions that I drew, with some of those who participated in the study, to establish

	whether they agreed or disagreed with my findings and interpretations. They did agree.
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Table 4.7: Validity as I incorporated it in my study

4.3.2.1.7 Ethical aspects

Ethical guidelines (Leedy & Ormrod, 2005:101) provided me with a set of standards and a foundation on which I could evaluate my own conduct. I tried to take the participants' comfort into account at all times (e.g. I made appointments with the participants at a time that would best suit them; I let them take breaks during the interviews).

To make sure that the information I reported on was ethically correct, I regularly consulted with my study leader and the advisory panel. My aim was to report my findings accurately, objectively and with no ambiguity. In Chapter Six I noted all my limitations and recommendations regarding my study. All the consent forms and recordings of the interviews are in safe-keeping.

This study adhered to certain ethical aspects because no participants may in any way be harmed as a result of participating in the study. I received ethical clearance from North-West University (NWU-0003-08-A2) to conduct my study. The ethical aspects that I adhered to are summarised in Table 4.8 below (Leedy & Ormrod, 2005:101).

ETHICAL ASPECT	ADHERENCE IN THIS STUDY
Informed consent.	<p>In this research:</p> <p>After I gave the participants detailed information about the process, aims and the potential impact of the interviews, I asked them to consent to taking part by having their parents as well as themselves signing a consent form. I informed them that their responses would remain anonymous when included as part of my research findings; and all the participants were more than willing to take part in the research.</p>
Right to withdraw.	<p>Throughout the study I informed the participants (numerous times) that they had the right to at any time withdraw from this study and to at any time withdraw any of their responses; and I interviewed each participant twice, and every time I saw them I made them aware of this fact.</p>
Privacy of participants.	<p>I ensured the anonymity of the participants by using aliases that they themselves chose, for example, Superman; and I did not document any information that might lead to their identity (like the name of their school).</p>
Deception of Participants.	<p>Each participant was given accurate information regarding the goal of my research as well as the possible benefits, drawbacks and of course the risk they might be exposed to by participating; and I gave the participants enough opportunities to ask for clarification if they did not understand any of the aspects that I discussed with them.</p>
Restoration of participants.	<p>Participants were debriefed to prevent any negative experiences / memories the interviews might have triggered. However, the participants all commented that it had been fun to participate; and I thanked all the participants for their</p>

	willingness to take part in my research.
Release of findings.	My research findings are reported in this dissertation; I tried to be objective and to avoid ambiguity; the limitations of my findings are noted in the final chapter of this thesis; and I avoided plagiarism.

Table 4.8: Overview of ethical principles followed in this study

4.4 CONCLUSION

The aim of this chapter was to clearly define and outline the qualitative research method that I followed. In order for me to reach the aims of this study I conducted phenomenological interviews with ten adolescents who were purposively recruited. The results of the interviews are presented in the following chapter.

CHAPTER FIVE
RESEARCH FINDINGS

OVERVIEW OF CHAPTER 5

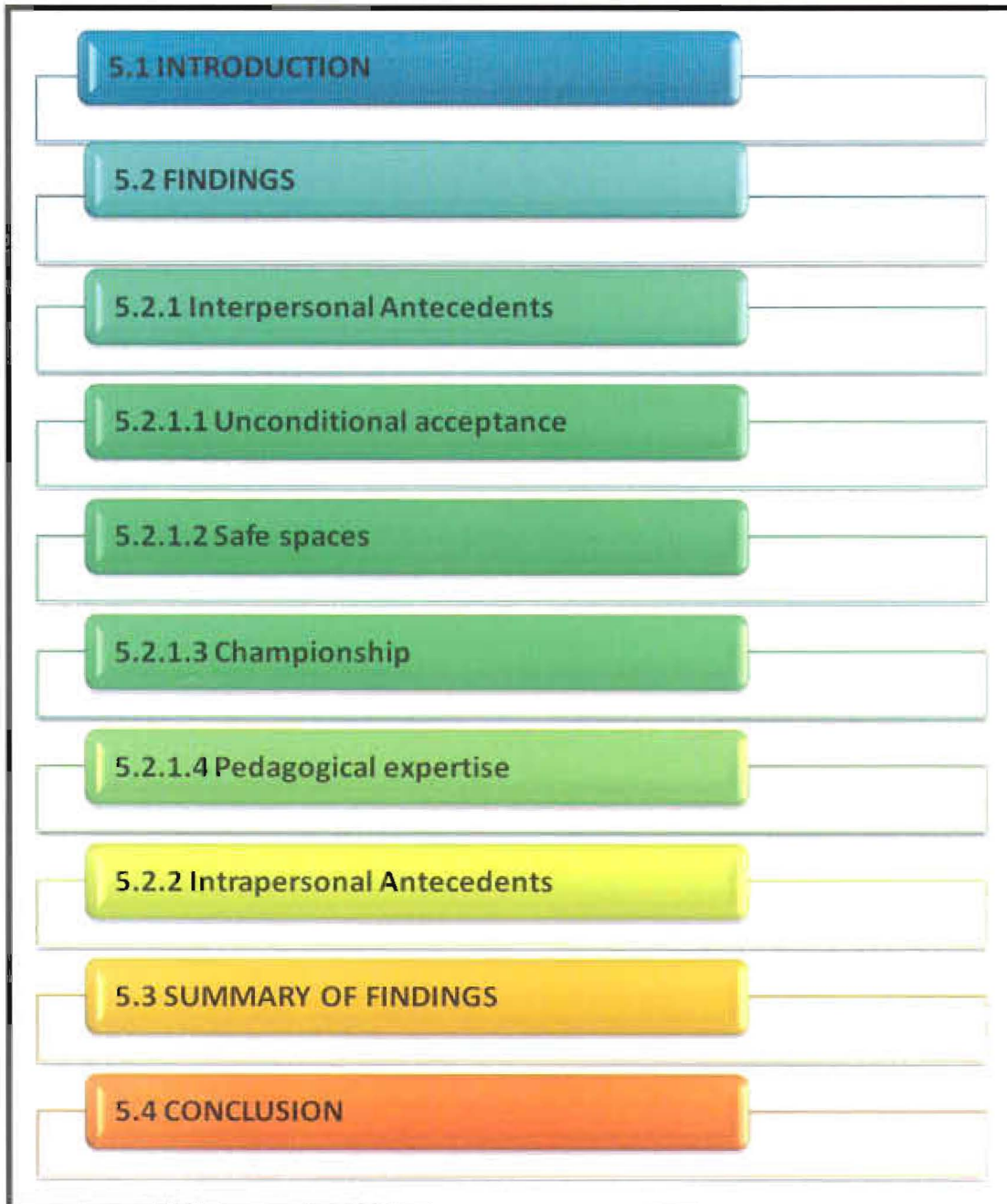


Figure 5.1: Overview of Chapter 5

5.1 INTRODUCTION

In this chapter the themes (as well as the sub-themes) that emerged throughout this study on how adolescent learners cope resiliently with LD will be discussed.

I used the following guidelines to indicate the number of participants on which I based emerging themes:

- All the participants = all the participants
- More than six but less than ten participants = most participants
- Between three and five participants = some of the participants
- Two participants = a few participants

As noted in Chapter Four, the interviews were done with adolescents who fitted the given criteria for resilient English-speaking adolescents who are struggling with a LD. All the adolescents who were interviewed were identified as resilient by a panel of the principal and three educators from a school for learners with LD in the Vaal Triangle. It is important to note that the participants all had experience of previous schooling in mainstream schools. In all instances they had been transferred to a school for learners with LD because they were no longer coping academically in a mainstream environment. In all instances, the participants had been at the school for learners with LD for at least two years.

The following further general background information in Table 5.1, was obtained from the participants before the interviews took place (all the names are pseudonyms chosen by the participants themselves):

Participants	Current grade	Age	Male/ Female	Number of years in current school	Living arrangements
Sherlock Holmes	9	14	Male	2	Both parents
Pinky	9	14	Female	2	Both parents
Babs	10	15	Female	3	Both parents
Brainy	9	14	Male	2	Aunt and uncle
Tammy	10	16	Female	3	Dad and Stepmom
Shy-boy	9	14	Male	2	Both parents
Betsie	10	16	Female	2	Both parents
Snoopy	9 (Repeating)	15	Female	3	Both parents
Garfield	10	16	Female	3	Grandmother and Aunt
Rambo	10	16	Male	3	Both parents

Table 5.1: Background information of participants

5.2 FINDINGS

After repeated reading of the interview transcripts, a number of themes relating to antecedents of resilience emerged. These themes were clustered as **interpersonal antecedents** (within the adolescent's ecology), including **unconditional acceptance; safe spaces; championship; pedagogical expertise**; and **intrapersonal antecedents** (within the adolescent), including **self pride and perseverance**. Each of these is discussed below.

5.2.1 Interpersonal Antecedents

The themes that related to protective resources found in the ecologies of the participants included **unconditional acceptance, safe spaces, championship and pedagogical expertise**. Each is discussed individually.

5.2.1.1 Unconditional acceptance

One of the processes that emerged throughout the interviews and seemed to encourage resilience was unconditional acceptance. This was not limited to only one source. The participants spoke of the encouraging power of unconditional acceptance from parents, siblings, peers, and extended family. In summary, the power of unconditional acceptance lay in participants feeling that they were good enough for their parents, siblings and friends. This sense of being acceptable, of being good enough, encouraged the participants towards resilience.

- **Parental acceptance**

Parents demonstrated unconditional acceptance when they acknowledged their child with LD positively and treated the child with LD as they would their other children who did not struggle with LD. For example, Snoopy said:

My parents never treat me differently from my brother. Like once my brother got a prize at the prize giving for maths. I have never been to a prize giving so I felt really sad. But my mom and dad took us both out to Spur. And my mom always says I draw nicer than my brother but they don't make him feel bad because he can't draw like me (Interview 8, lines 191-194).

There was consensus among most of the participants that their parents' unconditional acceptance provided them with much needed support that they relied on, in the sense that acceptance from their parents helped them to feel better about themselves. There was also some evidence (as in Snoopy's words above) that when parents noted their assets or

positive abilities, this helped them to feel accepted. Ebersöhn and Eloff (2006) emphasise that recognising a child's assets encourages resilience.

The experience of unconditional parental acceptance enabled the participants towards self-acceptance and a sense that they were no different from other adolescents, even though they struggled with LD and did not attend mainstream schools. Tammy said that her parents not treating her differently empowered her in this regard:

They don't treat me any different. They treat me the same as when I was in my old school. I just get a lot more done now. They don't treat me like a freak or something. My dad says just because I don't read like others do, doesn't mean that they know more than me. He always says it's not a big deal, you know (Interview 5, lines 125-128).

Her parents' unconditional acceptance helped her to accept her reading difficulty.

Unconditional parental acceptance also had positive ramifications for family functioning. Rambo suggested that his parents' impartiality meant that not only did he feel accepted, but also that his sibling (a sister) did not resent him for getting special treatment:

My sister can't actually like support me, because she's younger than me. I'm the old one. She always asks me for help and stuff like that. And she kind of has to do what I tell her to do because I am her older brother. I don't think she knows that I am struggling with school. My parents treat us pretty much the same, so she doesn't like feel that I am more important or something (Interview 10, lines 282-286).

Generally not a lot of information on sibling support related to LD, is available (Crosnoe & Elder, 2004:575). Tuttle and Paquette (1993:28) state that siblings of learners with LD tend to feel neglected because they do not receive as much attention as their sibling with LD. Hultquist (2006:39) further states that siblings often become jealous of the extra attention the sibling with LD is getting. Although literature states that there is tension amongst

siblings, I did not find any evidence of this in my study. All the participants mentioned how supportive their siblings were and how they provided some sense of normality for them. This may be because their parents were impartial and did not treat them different from one another.

Being treated equally by parents included parents not getting mad and parents understanding their child's frustration, difficulties and uncertainties. In some instances this encouraged youth with LD to talk to their parents freely about their struggle. For example, Sherlock Holmes said the following:

I once came home from school crying because the teacher made me sit in the corner with a hat on because I didn't do my homework. I didn't do it because I didn't understand it, but the teacher said it was because I was talking too much in class and that's why I don't understand my work. So my mom asked me if I like really didn't understand and like what I don't understand. She then took me to someone that could help me, and went and explained the whole thing to the teacher. It didn't matter though because my parents took me out of that school and put me in the school where I am now (Interview 1, lines 375-382).

The above excerpts suggest that when parents accepted their adolescents with LD unconditionally, this encouraged them to accept themselves. Furthermore, the parents were willing to treat them the same as their siblings, to speak out on their behalf (for example, with teachers) and to make an effort to help their child cope better with the risks of LD. In other words, their acceptance of their child was enabling.

The finding that parental acceptance is enabling is not completely new. Previous studies (Boyden & Mann, 2005:6-8; Kümpfer, 1999:189-191; Masten & Reed, 2005:85; Ross & Deverell, 2004:18; Van Rensburg & Barnard, 2004:3) have suggested that parental understanding, empathy and acceptance generally enable youth to be resilient. None of these studies refer specifically to parental acceptance of adolescents with LD. It is probably fair to speculate that parental acceptance is even more protective when children and adolescents are disabled.

What is interesting, is that the last excerpt (taken from the interview with Sherlock Holmes) demonstrates that resilience is encouraged by a dynamic process: Sherlock Holmes needed to know that his mom was accessible, accepting and that she would listen, but he also had to be willing to access this protective resource of an accepting mother. When he navigated towards the protective resources of his mother, she could enable him further by negotiating on his behalf (with regard to the teacher and to finding him an extra teacher and a more suitable school) (Ungar, 2008:225; Ungar *et al.*, 2008:2). In other words, unconditionally accepting parents is a protective resource but youth who are at risk need to make the most of such a protective resource.

- **Sibling acceptance**

When it came to the issue of being treated equally by their brothers or sisters there was consensus among most of the participants (who have siblings) that they were **not treated differently by their siblings either**. According to Snoopy, her relationship with her brother was not altered by her LD. This was clear when she said:

My brother doesn't treat me any different. He still picks on me, and has to do everything first. And he always tells me to stop being a brat. The rest of the time he does his homework and I do mine. Now and then I would ask him for help and then he would call me a name or something, but not in a bad way, just in a brother way (Interview 8, lines 204-207).

"... just in a brother way" was echoed by the other participants: there was a sense that because their siblings accepted them despite the difficulties of their LD, their relationships resembled typical sibling relationships. As noted previously, although literature states that there might often be tension amongst siblings when one has a LD (Tuttle & Paquette, 1993:28; Hultquist, 2006:39), I did not find any evidence of this in my study.

- **Friends' acceptance**

All of the participants mentioned at least one friend/peer they could talk to. What they emphasised as enabling was **unconditional acceptance** from their friends. Most of the participants mentioned that their friends displayed their acceptance when they **understood, did not judge them**, and **treated them as equals**. This was related to the fact that they and their friends attended a school for learners with LD and that this meant they were all challenged by learning in one way or another. For example, Betsie said:

Like my friends I have now, are a lot more understanding than my friends in my old school. I don't get teased here for the stuff in my old school. Here if I get teased, it's about normal stuff. My friend is in another class, but she's cool. We get together at break and would talk about stuff. I don't feel embarrassed when I told her I couldn't do my math, or that I am scared to read in the English class. She gets it you know, she sometimes also doesn't get math, so she's cool about things like that. She doesn't think that I am weird or a freak (Interview 7, lines 222-227).

Pinky made this point even clearer when she said:

... a lot of friends struggle with something. I know they don't like judge. It's nice that they also have a problem with learning and other things. I can't think of a story, we all get along well though. Ja, they don't judge me, you know, they also struggle just like me (Interview 2, lines 696-698).

In other words, what seemed to be key to the participants' experience of unconditional acceptance was the knowledge that their friends would not judge or ostracise them, in part because their friends also have LD and attend the same school (a school for learners with learning difficulties). This raises interesting questions about one of the motivations for the policy of inclusion, namely that inclusive education encourages respect for learner diversity (Donald *et al.*, 2006:18-19). From the above, it would seem that in practice this respect was

not experienced when the participants were in mainstream schools and that their experience of being segregated with peers who also had LD was actually enabling.

In summary, the unconditional acceptance which the participants in my study described as enabling was equal to the statements depicted in Figure 5.2 below. When their parents, siblings and friends accepted them for who they were (i.e. a person with LD), this encouraged the participants to feel that they were acceptable which in turn enabled resilience in the face of living with a LD.

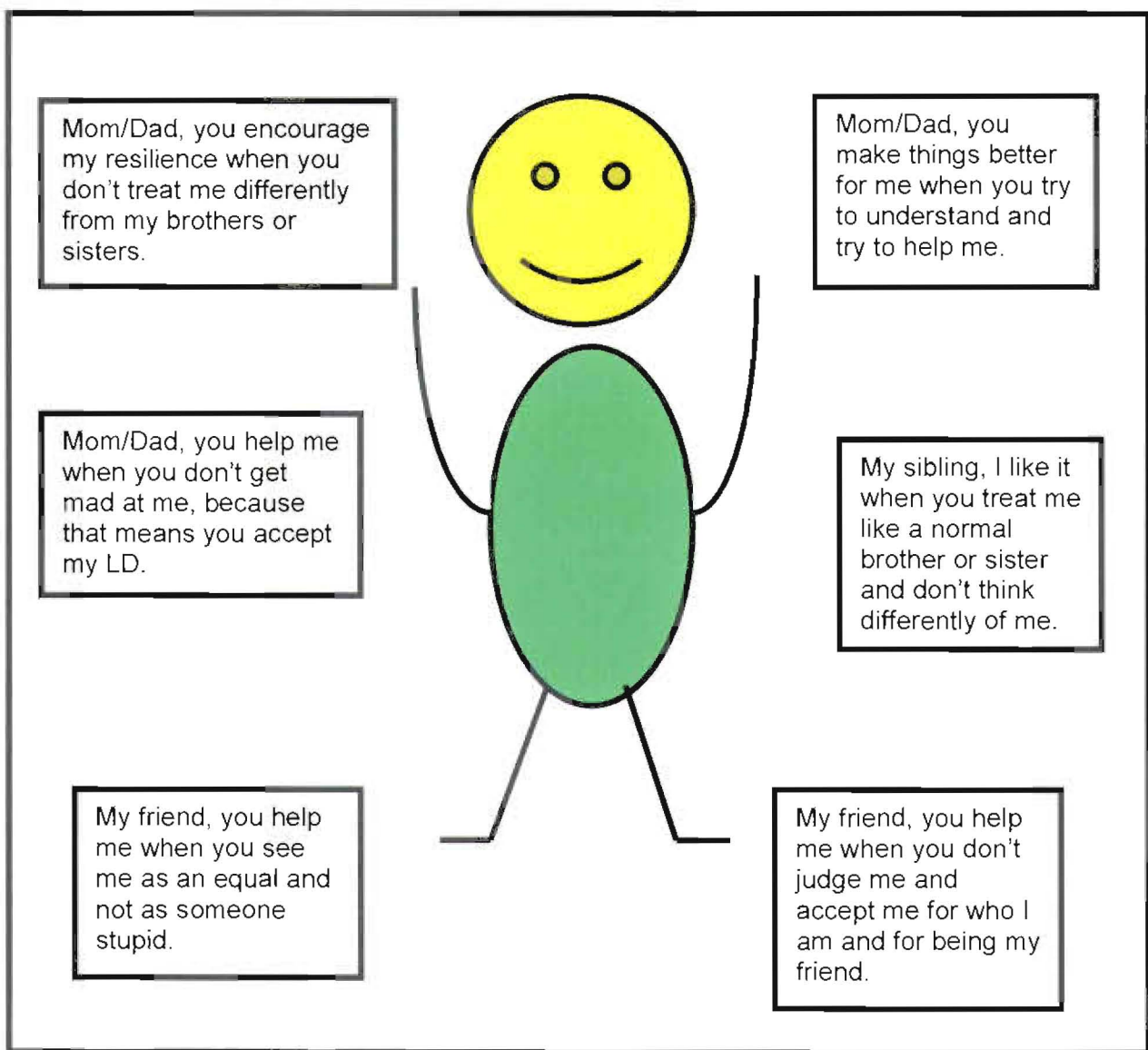


Figure 5.2: Summary of unconditional acceptance

5.2.1.2 Safe spaces

All the participants referred to being enabled because they all had spaces in which they felt safe. These safe spaces were not limited to one specific space or to someone with whom they felt comfortable and safe. Participants spoke of a range of spaces where they felt “safe” and comfortable. These “safe” spaces included their home, community, school and the classroom. What these safe spaces had in common was that the participants felt comfortable enough to go to these spaces and open up and talk to the people with whom they felt comfortable within these spaces. Typically, this encouraged the participants towards resilience because they felt they had a safe space where they did not feel threatened or judged because of their LD.

- **Home as a safe space**

Most of the participants perceived their **home as a safe space** because their parents were there and because it was mostly a comfortable setting where they could be themselves and not be confronted with the daily struggles that their LD brings. In this sense, their homes provided time-out from the difficulties of life. For example, Babs said:

No one at home will tease me, except my brother, but he doesn't count. Like when I had that fight with that girl, it was nice to go home and know I didn't have to deal with it then and there. It was nice just to relax and not think about it and school for the rest of the day. Even when I do my homework at home, you know it's not school, it's different (Interview 3, lines 212-215).

Typically participants who referred to home as a safe space echoed Babs's sense that home was a haven away from difficult relationships or challenging tasks. In this sense home as a safe space provided a sense of emotional shelter.

The idea of home as bolt-hole or refuge that encourages resilience, is not new. When a home environment provides physical shelter, a comfortable routine, positive family climate and social and emotional support, it is a protective space that encourages adolescents to

be resilient and cope positively with their struggles (Masten & Reed, 2005:83 - 84; Ross & Deverell, 2004:18; Ungar & Liebenberg, 2005:218-219). However, these findings have not yet been linked specifically to youth with LD. Previous studies on LD have not highlighted that learners' homes encourage them to be resilient because they provide time-out from daily challenges and a sense of emotional refuge.

- **School as a safe space**

All the participants mentioned that they did not feel threatened in any way, emotionally or physically, when they were at **school**. For them their school was a safe place where they were accepted as all being equal with regard to struggling with their learning because all of them attended a school that caters for learners with LD. They also perceived their school as being a safe place because there was no judgement from their peers or teachers. Snoopy made this clear when she said:

Everyone here can't like judge the other one for something if you know what I mean. Everyone is here for a reason, even if it's not the same one as mine, but it all comes down to the same thing. And all the teachers here know it, and know how to help us better than other teachers from other school (Interview 8, lines 245-248).

Part of what contributed to their school being a safe space, was the compassion of their teachers and their willingness to help. Mostly they also mentioned how they were able to "keep-up" with the work and that they were not placed under a lot of pressure in the classroom, because the pace of work was more accommodating. For example, Tammy said:

Um, at this school it is a lot different than my own school. We do things a lot slower here and get more time to finish our tasks. They don't rush us to do everything like NOW! The teachers don't push and push and don't get like mad when we can't do something. So this school is much better than my old school (Interview 5, lines 149-152).

Another way in which teachers helped to make the classroom a safe space, was to provide second chances and to reinforce learners' perseverance by giving them good marks. Having a safe space where they felt comfortable with not only achieving but also failing, seemed to give some participants a motivational "kick," especially when they achieved the end result and knew that their hard work was not in vain. This became clear when Sherlock Holmes said the following:

... it's nice when I like struggle to do something or if I worked like really hard on something and the teacher gives me like eight or ten out of ten. Even if I didn't get it right the first ten gazillion times she let me stay in class and helped me until I got it right on my own (Interview 1, lines 466-469).

A learner's academic abilities and achievements can have a profound impact on him, especially with regard to encouraging self-efficacy and self-concept (Elbaum & Vaughn, 2003:229; Tuttle & Paquette, 1993:17; Winkler, 1998:110). Teachers who provide a nurturing environment and who are caring and fair, encourage more positive learner involvement in the class activities and in so doing, often a sense of achievement (Becker & Luthar, 2002:202; Johnson & Lazarus, 2008:20). This in turn encourages resilience.

Current literature contains multiple references to the importance of a positive school environment in relation to the well-being of learners (Greene & Conrad, 2002:46; Hetherington & Elmore, 2003:203; Johnson & Lazarus, 2008:19; Masten & Powell, 2003:13). Learners who feel comfortable with their schooling environment will benefit emotionally and academically. The right schooling environment does not only provide a learner with a safe space in which to develop academic abilities, but it also encourages social and emotional development (Greene & Conrad, 2002:46; Howard & Johnson, 2000; Johnson & Lazarus, 2008:20). From my study, it seems that schools which are safe, accepting and accommodating spaces, also encourage resilience among learners with LD.

However, to the best of my knowledge, previous studies have not emphasised that one antecedent of resilience in learners with LD is being in a school where their peers also have LD. The idea of school as a safe space because all learners share a LD suggests that

despite the merits of the theory of inclusion (Swart, 2004:231-242), the practice of inclusion still needs to be developed so that it encourages resilience among learners with LD.

- **Community safe spaces**

A few of the participants mentioned that they do have a safe space within their **community** where they do not feel judged, but rather accepted and supported by others. This became clear to me when Pinky said the following:

There is this lady at my dance school that I sometimes talk to. She's really nice and I ask her for advice and stuff. She always asks me how I'm doing at school and stuff. And she always comes to watch us dance (Interview 2, lines 707-708).

In a similar manner, Babs made it clear that her surrounding community (neighbours) helped her cope with difficult situations when she said:

Sometimes I will go away with our neighbours when things at home get too much for me at home when my sister is there. They will like take my mind off things or we will talk about other things like movies and music and stuff like that. Just something totally different (Interview 3, lines 220-222).

Part of the safe space which the community offered her was a space which helped her to redirect her focus. Community support often promotes resilience. The support that adolescents get from people within their community tends to remind them that they are loved and supported when they are dealing with difficult life circumstances (Boyden & Mann, 2005:7; Copeland, 1997:53; Musick *et al.*, 1987:229; Williams, 2002:200).

As noted previously, in both of the above excerpts, safe spaces enabled the participants partly because the spaces were available, but also partly because the participants were willing to navigate towards these protective resources: Pinky spoke to the lady at her dance school; Babs went to the neighbours. Again, this reinforces the notion that resilience is

encouraged by a dynamic interaction between the youth who are at risk and available protective resources (Ungar, 2008:225; Ungar *et al.*, 2008:2).

In summary, Figure 5.3 depicts what learners see as a safe space:

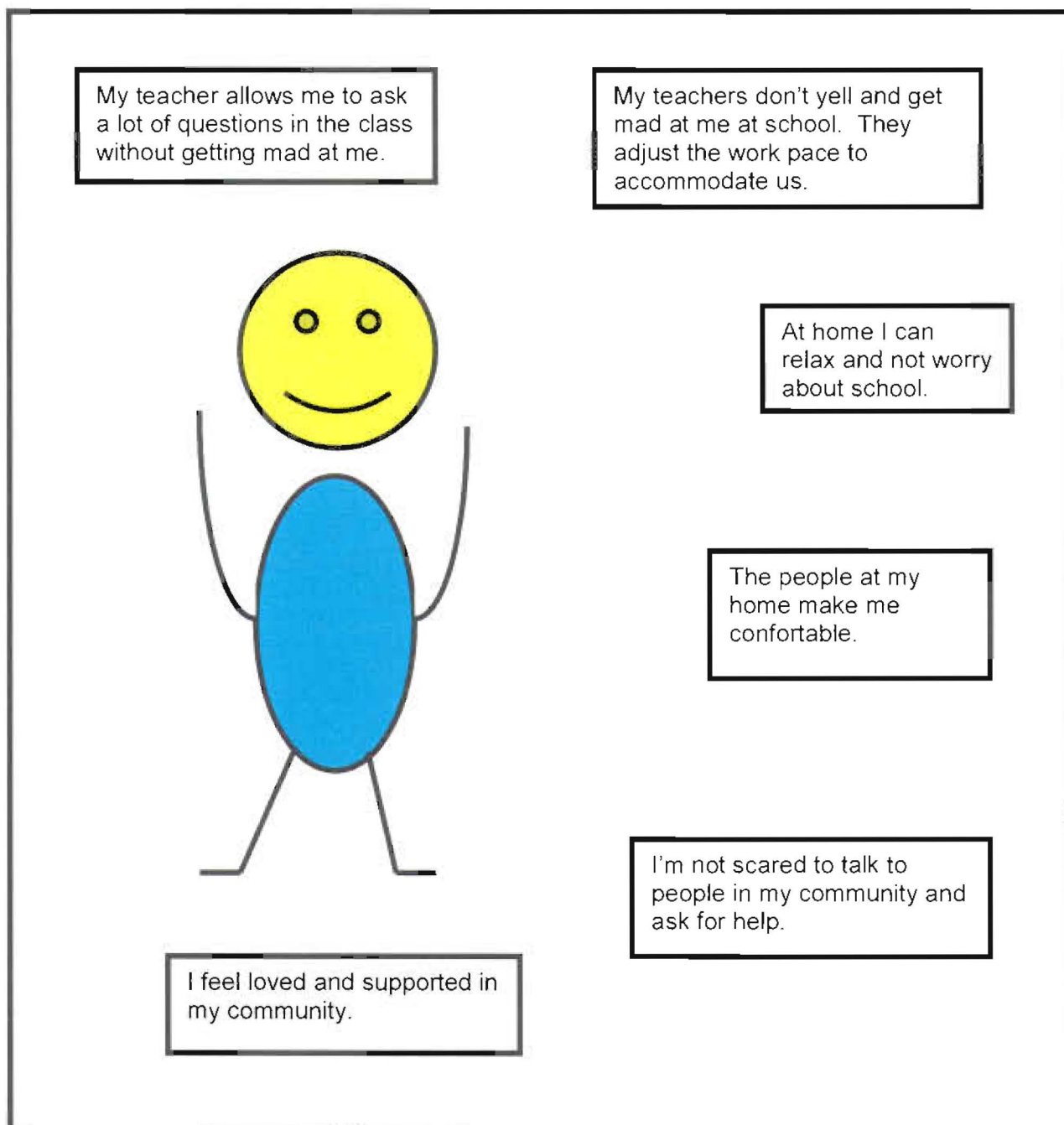


Figure 5.3: Safe spaces summarised

5.2.1.3 Championship

Some of the participants referred to how they were enabled towards resilience when **their parents and teachers championed them**. In such instances they referred to experiences where their parents or teachers **voiced pride in them**. Rambo made this very clear when he said:

... my mom does like give me something or let's me play my play station longer when I do, do something good or when I do like good at school like in a test or something. Or like even when she asks me to do something at home for her. It's nice when she says she like appreciated how I help her when my dad's not there. It's cool when my teachers say things like that, but it's their job (laughs) but my mom doesn't have to say things like that to me, so I kind of like it when she does (Interview 10, lines 314-319).

Sherlock Holmes made a similar comment about how his dad told him how proud he was when he became a prefect. He said:

Prize giving was like the best night. I thought I was going to get a certificate for good attendance, but I was shocked when they called out my name for a grade prefect. I was like really, really shocked, but happy too. My dad and my mom were very happy and my dad told me he was very proud of me, and that I must keep up the good work (Interview 1, lines,392-397).

Some of the participants mentioned how easy their work had become once they asked for help, and how eager they were to take on new work knowing that they had the encouragement and support to do it. The one thing that was evident from the interviews was that they had some satisfaction in telling me that either their teacher or parent would tell them how proud they were of them in this regard. For example, Pinky said:

I use to hate asking for help. I would always feel stupid or something you know. But I got used to the teacher not getting mad and telling me to sit down. Now I like asking her for help because she does tell that she's happy when she can

see that I try my best, and that she has confidence in me doing my work. She says she doesn't worry about me and my homework at home (Interview 2, lines 630-634).

A learner's **self-concept** is greatly improved when others acknowledge the learner's successes or praise their actions. When learners start to believe **positive reinforcements** they hear about themselves, they start to feel more **confident** and **positive about themselves** (Tuttle & Paquette, 1993:18). A positive self-concept encourages resilience (Donald *et al.*, 2006:172).

It is interesting to note that in all of the above excerpts, the praise that teachers and parents gave was not false or exaggerated. In all the above instances, parental and teacher reinforcement acknowledged what the participants had done. Championship probably encouraged resilience in these participants because the praise was specific and realistic (Wyman, 2003:302).

5.2.1.4 Pedagogical expertise

By pedagogical expertise I am referring to the formal training, sensibilities and abilities of educators that will enable them to effectively teach and support learners, especially learners with LD. Recent South African policy makes it the task of every teacher to effectively accommodate the learning needs of each individual learner (SA, 2001). Donald *et al.* (2006:313-314) suggest that adopting a remedial approach to accommodate learners with LD should not be overly challenging to educators. A protective process that all of the participants referred to was their teachers' abilities to successfully help them learn as much as possible according to their own individual abilities. For example, Rambo said:

The teachers I have now help me a lot better than my other teachers at my other school. I think they know how to work better with us here, because they know that I am on Ritalin and that I sometimes get a bit out of hand. They know what to do with me and how to handle me. Not like my old teachers, they would get

mad at me a lot and tell my parents that I am a problem in class. Here my teachers don't do that (Interview 10, lines 314-318).

Brainy supported this notion by saying the following:

... I am doing a lot better now then what I did. My teacher helps me a lot and she explains the work much better, and she lets me ask a lot of questions, even if it is the same one over and over again (Interview 4, lines 241-243).

Teachers have the academic expertise to guide support, and to set appropriate standards and reasonable expectations for LD learners (Crosnoe & Elder, 2004:575). The participants in my study certainly voiced that their teachers' expertise made a difference to their learning and progress, thereby encouraging their resilience. Interestingly, all the participants perceived their current teachers to be more competent than the teachers they had in their mainstream schools. This suggests that despite policy which encourages teachers to accommodate learners with LD (Donald *et al.*, 2006:313-314), some mainstream teachers do not succeed in doing so.

In summary the pedagogical expertise that the participants noted as protective was equal to the statements depicted in Figure 5.4 below:

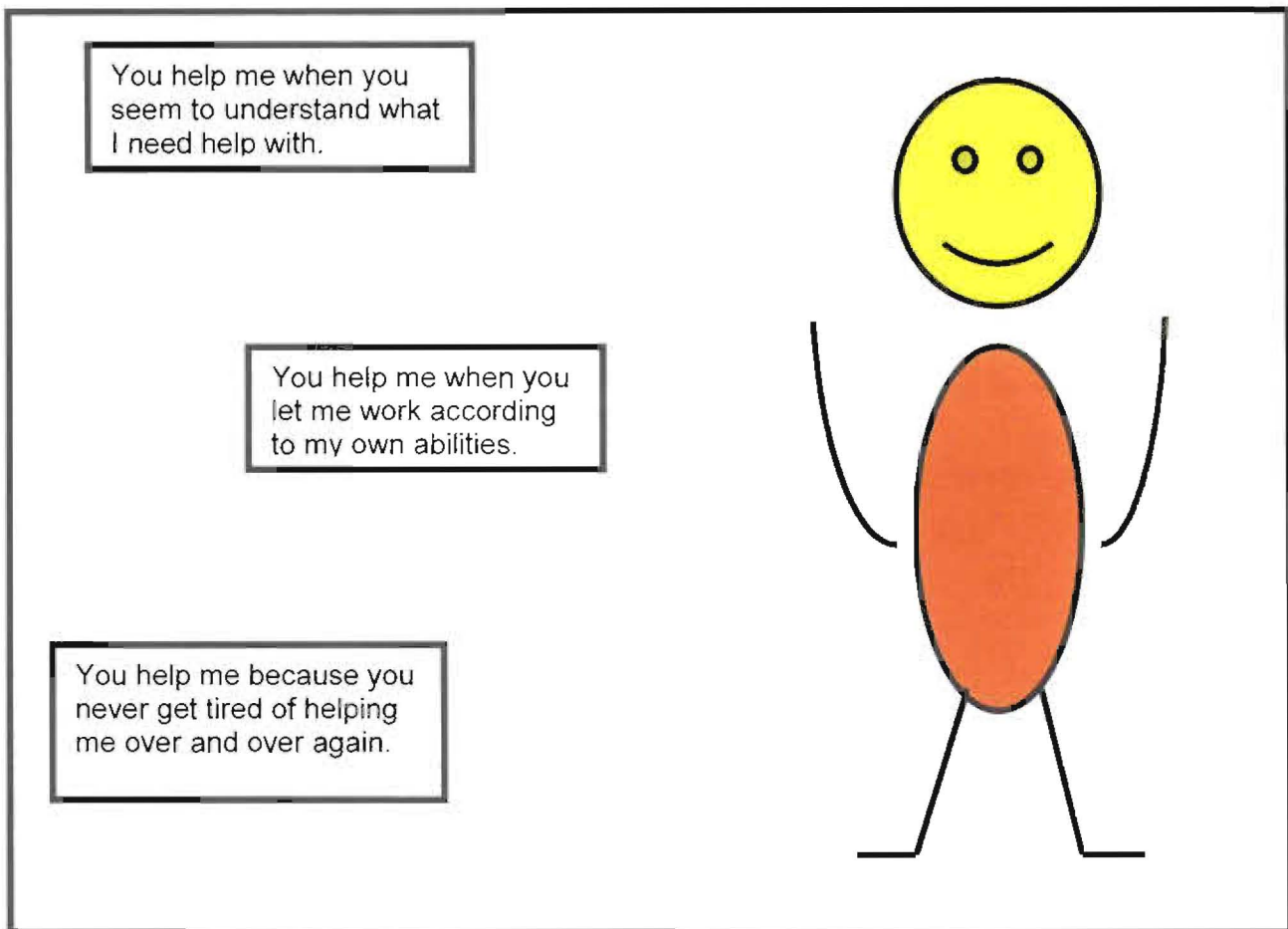


Figure 5.4: Summary of pedagogical expertise

5.2.2 Intrapersonal Antecedents

In addition to interpersonal protective resources, the participants in my study also referred to resources within themselves (intrapersonal antecedents) that enabled them towards resilient coping. The themes that were related to protective resources within the participants themselves included **self-pride**, and **perseverance**.

- **Self-pride**

All the participants voiced some sense of self-pride. Such self-pride was not limited to one specific personality trait or to one specific outcome. What did emerge was that their self-

pride was fuelled by their self-determination and somewhere in the background there was always someone willing to help and encourage them, for example a parent, family member, teacher, friend or someone in their community. Through these people, who were not afraid to tell them that they were proud of them, they were able to see some good in themselves, and develop their own sense of **self-pride**. For example, Garfield said this about herself:

My teachers always tell my grandmother that I am a hard worker, and that I am always positive in class and that I always do my work and that I always try my best. I like it when my teacher tells my Gran this. It makes me want to work harder, and I like it when I do well in my work, because I know I work hard (Interview 9, lines 193-196).

Previous resilience studies have suggested that self-pride encourages resilience (Fergus & Zimmerman, 2005:401; Masten & Powell, 2003:13) and a positive self-concept (which includes concepts like self-pride) has been noted as characteristic of youth with LD (Theron, 2004:319; Theron, 2006:200).

- **Perseverance**

Not only did these learners have a sense of self-pride, but they also referred to the skill of not giving up when the going gets tough. All the participants mentioned how frustrated they would get when they were unable to accomplish a task or master some or other mathematical problem. However, not once did any of the participants say anything about giving in, or in their words, “*just leave it*”. They would mention that they do in fact struggle with their studies, but in the same breath said with confidence that they kept on trying and trying. Previous resilience studies have suggested that tenacity and perseverance encourage resilience (Howard & Johnson, 2000) and perseverance was specifically noted as characteristic of youth with LD (Theron, 2004:319; Theron, 2006:200).

In this regard, they would again mention someone who helped them to stay focussed and who encouraged their **persistence**. For example Tammy said the following:

I sometimes get frustrated when I have to do everything over and over again. But my teacher says "practise makes perfect". Even though sometimes I get frustrated I still do my work. The teacher still tells me that it's wrong like my tenses and stuff but at least I still do it, even if it's wrong (Interview 5, lines 156-158).

Shy boy supported the notion that persistence is encouraged by someone in their ecology when he mentioned the following about his mother:

... I always try to finish my work and even if I'm not sure about an answer I'll try and do it in pencil. My mom says you should never just give up, because if you do, you will never know if you can do it. So I don't just leave it, I will always try to do everything (Interview 6, lines 193-197).

As noted earlier on, excerpts like these reinforce the notion that resilience is not just a person-centred construct (Ungar, 2008:225), but more typically a dynamic person-context process. In my study, the participants were willing to persevere, but their perseverance was encouraged by people who supported them.

In summary the following statements, depicted in Figure 5.5 below, represent intrapersonal protective resources:

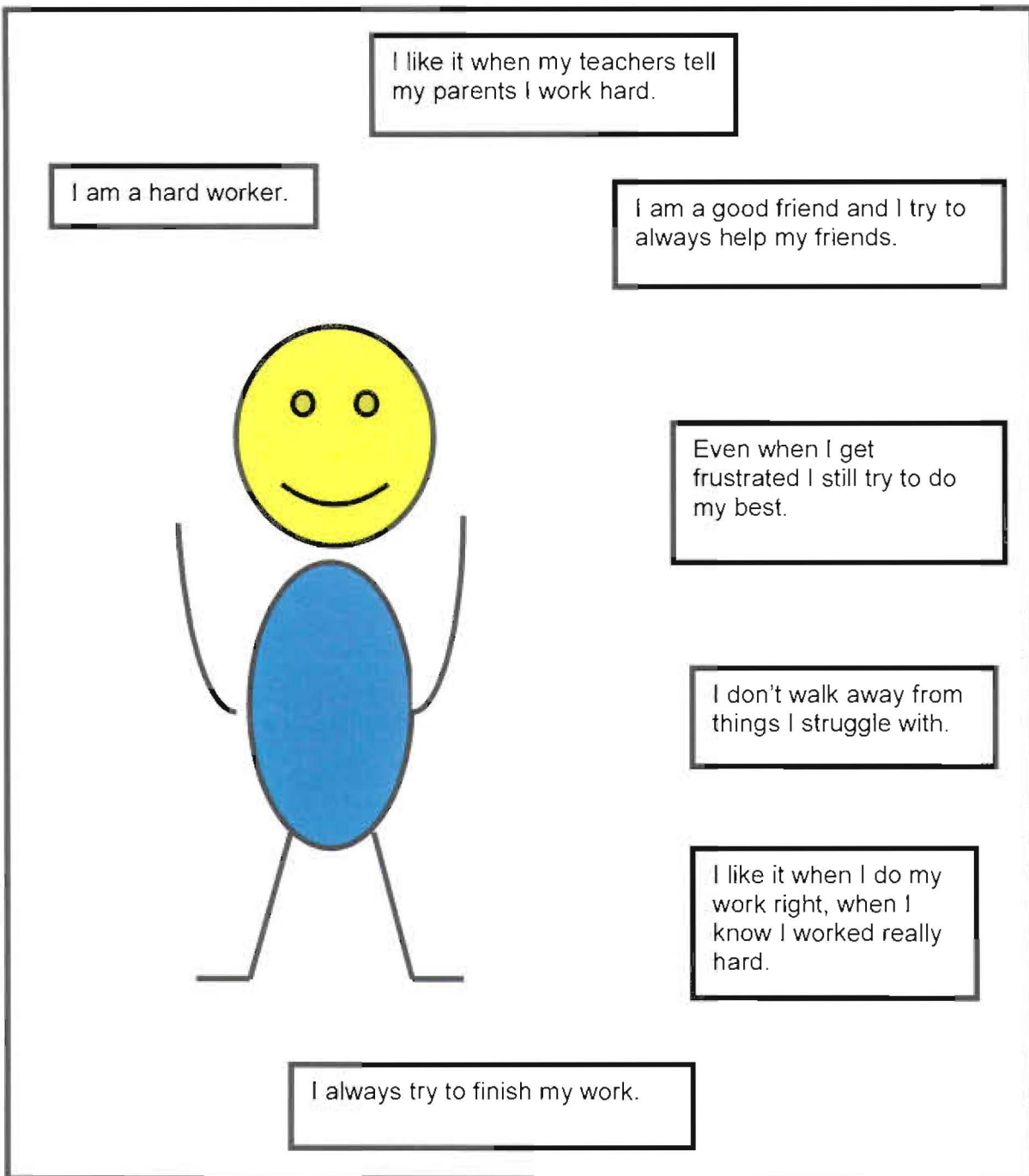


Figure 5.5: Summary of a learner's intrapersonal protective resources

5.3 SUMMARY OF FINDINGS

Figure 5.6 below summarises the antecedents of resilience among youth with LD as illustrated in this study. What must be emphasised is that the participants often suggested that these inter- and intrapersonal resources reinforced one another. This suggests that their resilience was encouraged by a dynamic, positive give-and-take process between them and their teachers, parents, siblings, community, schools and friends.

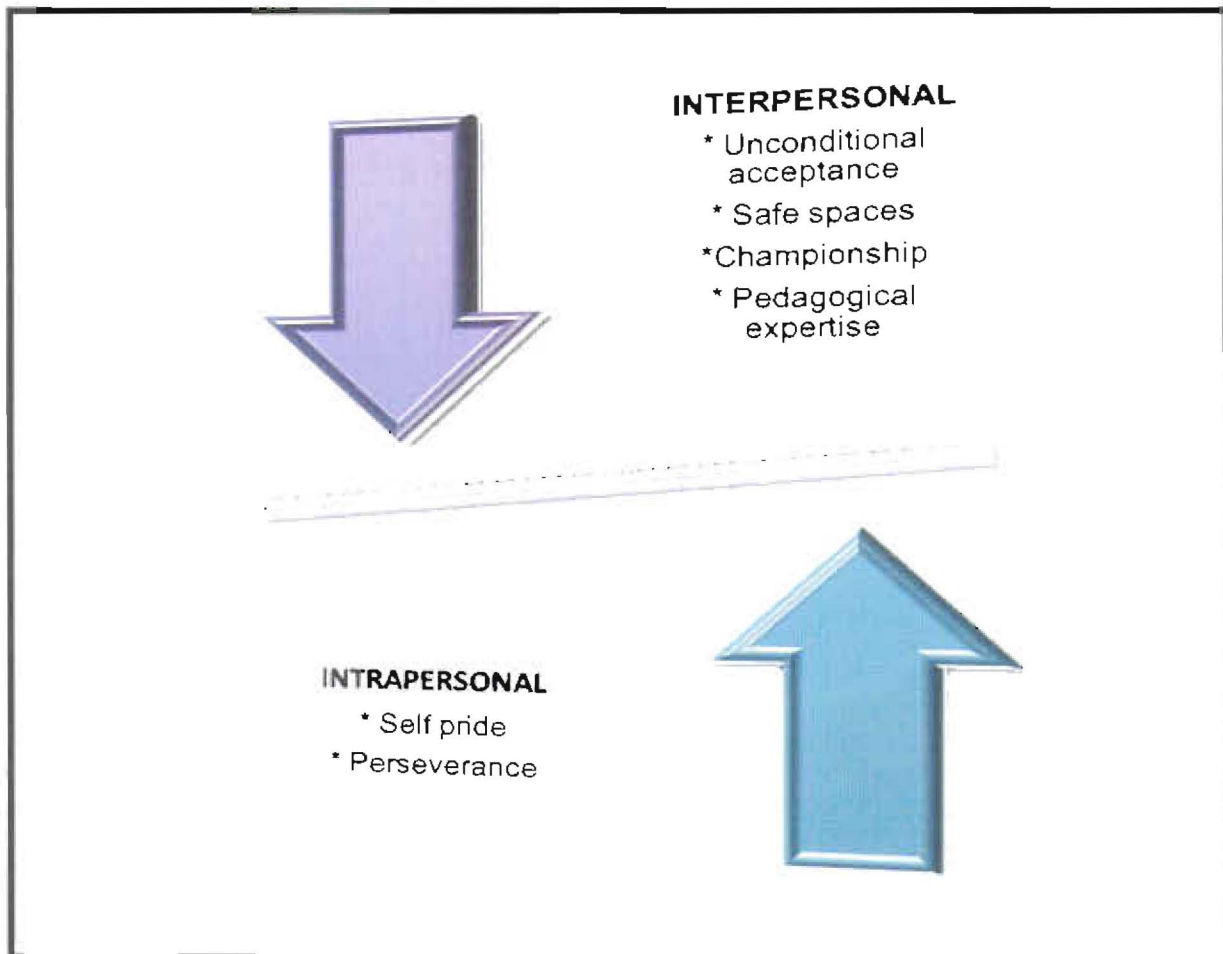


Figure 5.6: Summary of the antecedents of resilience among youth with LD

In my study, most of the emerging findings replicated findings from previous studies. I found that intrapersonal antecedents such as **self-pride and perseverance** contribute to the resilience of an adolescent with LD.

These findings were noted in previous research done with resilient youth who had LD (Theron, 2004:318; Theron, 2006:200).

My findings (specifically those relating to interpersonal antecedents of resilience) correlated with findings from general resilience studies (i.e. studies that focused on resilience in cohorts of youth who were at risk for reasons that were not necessarily related to LD). The interpersonal antecedents in my findings included unconditional **acceptance by parents** (Boyden & Mann, 2005:6-8; Kümpfer, 1999:189-191; Masten & Reed, 2005:85; Ross & Devereil, 2004:18; Van Rensburg & Barnard, 2004:3) and **friends** (Copeland, 1997:55; Walker, 2001:7); **safe spaces found within the adolescent's home environment** (Masten & Reed, 2005:83; Ross & Devereil, 2004:18; Ungar & Liebenberg, 2005:218-219), **school environment** (Greene & Conrad, 2002:46; Hetherington & Elmore, 2003:203; Johnson & Lazarus, 2008:19; Masten & Powell, 2003:13) **and the community** (Boyden & Mann, 2005:7; Copeland, 1997:53; Musick *et al.*, 1987:229; Williams, 2002:200); **self-concept and self-confidence championed by parents and teachers** (Donald *et al.*, 2006:172), **and the importance of pedagogical expertise** (Crosnoe & Elder, 2004:575).

Furthermore, some of my findings correlated with findings in literature that provided guidelines on how to help an adolescent learner cope with LD. In other words, these findings were not overtly noted in resilience-focused studies. For example, **teachers who encourage a learner's self-efficacy and self-concept** (Elbaum & Vaugh, 2003:229; Tuttle & Paquette, 1993:17; Winkler, 1998:110), **parents and teachers who encourage learners through positive reinforcements** (Tuttle & Paquette, 1993:18) and **specific and realistic praise** (Wyman, 2003:302) contribute to the support system of a learner coping with LD.

Although there are matches between my findings and general resilience-focused or LD-focused studies, the **contribution** that my study makes is to **specifically link the protective resources of unconditional acceptance, safe spaces, championship and pedagogical expertise** to the promotion of resilience among some adolescents with LD.

What I found that seemed to be **different** from existing theory is the **impact** LD can have on a learner's **siblings and family**. According to theory, a sibling with LD can place a lot of strain on the family environment and especially cause controversy among siblings (Tuttle & Paquette, 1993:28; Hulquist, 2006:39). In my study I found that siblings and family members were **not** actually affected in a negative way. Learners with LD related that siblings and family context were antecedents to their resilience.

What I found interesting was that the participants in my study emphasised that their **exclusive school environment** was an antecedent to their resilience – this raised a question about whether inclusion is the best way forward for learners with LD. Although the theory of inclusion convinces one of its merits, the findings of my study suggest that not including learners in the mainstream encouraged resilience (at least among my participants) because the school they were attending catered for their learning and emotional needs and allowed them to feel that they were learning among equals. Alternatively this finding could suggest that mainstream teachers and learners need to be more sensitive toward learners with LD and need to know the importance for learners with LD to feel unconditionally accepted.

5.4 CONCLUSION

Throughout the interviews, the participants identified a number of processes that contributed to their resilience. The findings reinforce that protective resources are not just personal, but are also found in the interaction between an individual and his environment and in the environment's ability to make buffering resources and protective processes available (Burt, 2002:138; Glantz and Johnson, 1989:189-199; Masten & Reed, 2005:85; Theron, 2006:199-200; Ungar 2008:225; Ungar *et al.*, 2008:2).

Chapter Six provides an in-depth **summary** of the literature and empirical study. Recommendations for Life Orientation educators will be given to encourage resilient functioning in learners with LD and will be based on my research findings.

CHAPTER SIX

CONCLUSIONS AND RECOMMENDATIONS

OVERVIEW OF CHAPTER 6

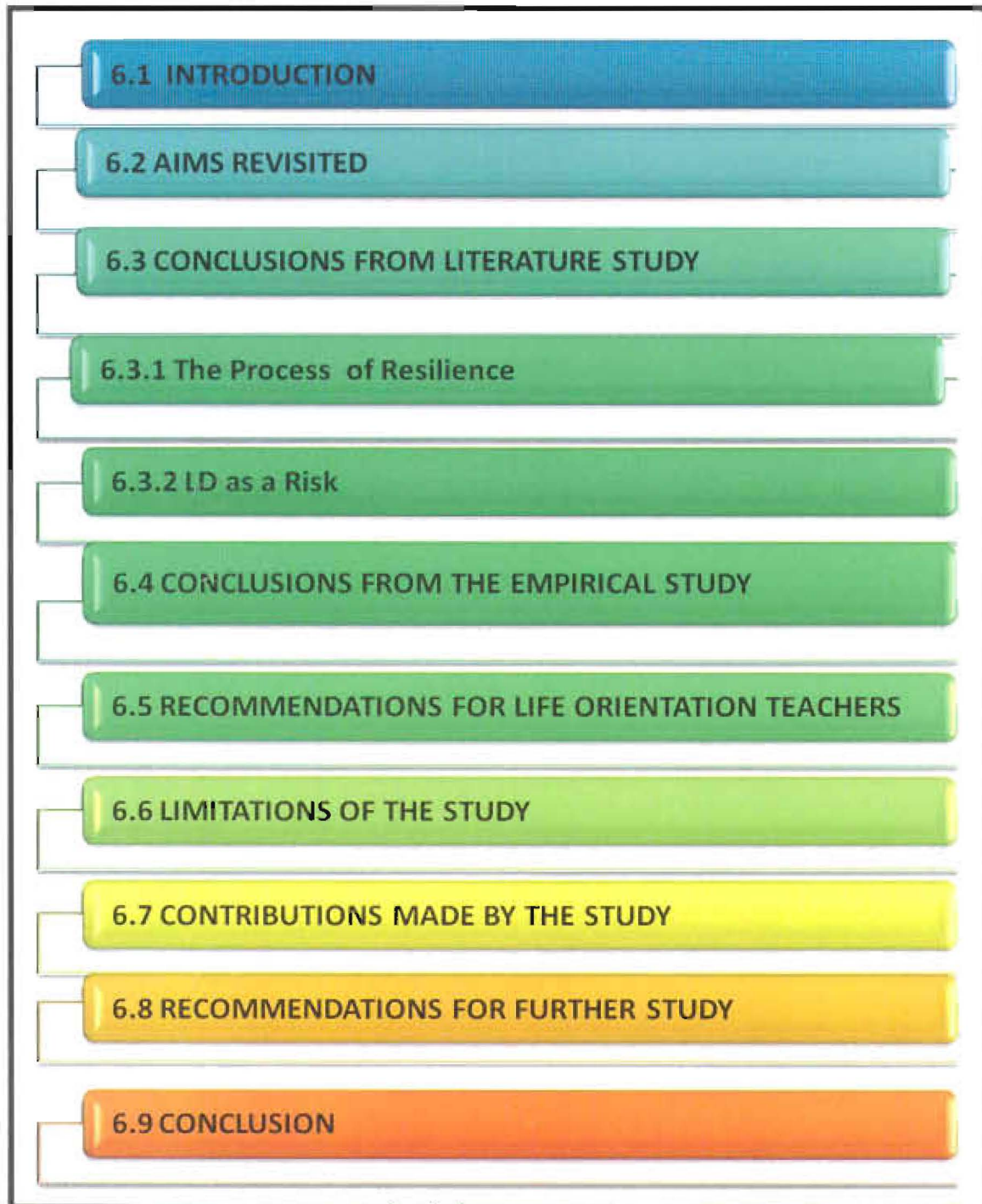


Figure 6.1: Overview of Chapter 6



6.1 INTRODUCTION

The problem that instigated this research was to see what enables adolescent learners with LD to cope resiliently with the daily struggle of having to deal with LD? With the education system adapting to a more inclusive institution, I thought it was important to know what the possible struggles were that learners could be threatened with, and what makes them cope and be resilient in spite of those threats. I believe that such knowledge could empower Life Orientation teachers, as well as other teachers, to encourage learners who are struggling to cope with their LD to be more resilient and help them either acknowledge their LD and/or help them deal with it in a positive way. An understanding of the protective processes that encourage resilience among learners with LD could be used to motivate learners with LD and help them to develop their own resilience. Because literature only really indicated what intrapersonal resources encouraged resilience among learners with LD (Theron, 2004; Theron, 2006), and because I could not find resilience studies that commented on the interpersonal antecedents of resilience specifically for learners with LD, my study was necessary to facilitate such an understanding.

The focus of this chapter will be on the conclusions of my literature study (which focussed on the resilient functioning of adolescent learners and on LD), followed by a summary of the findings of my empirical study. I will then highlight the limitations and contributions of my research. This will be followed by recommendations for possible future research.

6.2 AIMS REVISITED

Table 6.1 below summarises my aims for this study with an indication of whether or not I achieved my aims.

<p style="text-align: center;">AIMS</p> 	<p style="text-align: center;">ACHIEVEMENTS</p> 
<p>To conduct a literature study on resilience.</p>	<p>I conducted an intensive literature study to explain what it takes for an adolescent to be resilient. The literature study is documented in Chapter Two.</p>
<p>To conduct a literature study on LD.</p>	<p>I conducted an in-depth literature study so that I could determine and explain what LD is. My main focus was on the impact LD has on all the spheres of an adolescent's life. The findings of this literature study are documented in Chapter Three.</p>
<p>To conduct an empirical study to determine what protective antecedents underlie resilience among adolescents with LD.</p>	<p>I conducted ten phenomenological interviews with resilient learners coping with LD, so that I could identify what enabled them to cope resiliently. I coded the interviews inductively and compared them with each other to see if I was able to identify any common protective factors and processes that could be seen as the antecedents that underlie resilience among adolescents with LD.</p>

<p>To provide recommendations for Life Orientation educators to encourage resilient functioning among learners with LD.</p>	<p>Guidelines can be provided to Life Orientation teachers on how they can encourage resilience among adolescent learners with LD, based on the findings of my research. These guidelines are noted in 6.5.</p>
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Table 6.1: The aims of my study

From the above it is clear that all the aims I set out to achieve, were achieved.

6.3 CONCLUSIONS FROM THE LITERATURE STUDY

I conducted two literature studies. Chapter Two focuses on the phenomenon of resilience and Chapter Three focuses on the impact LD has on an adolescent.

6.3.1 The Process of Resilience

Resilience can be seen as a dynamic process occurring between an individual and his ecology. It is described as an individual's ability to navigate toward healthy resources that are provided by his ecology. An individual does not only make use of these health-promoting resources, but more importantly uses them in a culturally meaningful way (Boyden & Mann, 2005:9; Cameron *et al.*, 2007:285; Greene & Conrad, 2002:33;37; Schoon, 2006:6; 95; Ungar & Liebenberg, 2005:220; Ungar *et al.*, 2008:2).

Throughout the literature study multiple resources were identified that can possibly contribute to an adolescent's resilient functioning. These protective resources include:

- **Personal protective factors and processes**

Personal protective factors include problem-solving skills, good attitude, flexible personality and a good self-image. Resilient learners are active, charismatic and inspire participation in their peers. Resilient learners usually have a hobby that develops positive feelings of success. Since a resilient learner has good communication skills this further facilitates good social interaction (Masten & Reed, 2005:82; Norton, 2005:56; Strümpfer, 2003:70; Theron, 2004:317-318; Ungar, 2005: xxv).

An adolescent's individual characteristics, values and attitudes influence his reaction tremendously in regard to his environment and how the environment will in turn influence his resilience. These characteristics include optimism, good self-esteem, a good sense of self-worth, self-confidence, internal locus of control, easy temperament, and being emotionally strong (Howard & Johnson, 2000; Wallston, 2007:149).

Specifically with regard to resilient learners with LD, previous research has suggested that resilient learners with LD are future-orientated, enthusiastic, assertive, optimistic, driven, moderately positive about their self-concept, they have a sense of obligation, internal locus of control and good interpersonal relationship skills (Theron, 2004: 319; Theron, 2006: 200).

- **Familial protective factors/processes**

Children who have a positive supportive relationship with their parents are naturally more resilient, adapt better and deal with trauma much better (Boyden & Mann, 2005:6-8; Kümpfer, 1999:189-191; Masten & Reed, 2005:85; Ross & Deverell, 2004:18; Van Rensburg & Barnard, 2004:3). Parental influence and teaching of healthy values as well as encouraging access to a religious support system, have positive results since the learner usually develops a strong moral structure (Donald *et al.*, 2002:224; Masten *et al.*, 1990:432; Wang *et al.*, 1997:20). Parents whose parenting style is constant and who set positive expectations for their children can further promote an adolescent's resilience.

Parents who satisfy their children's emotional and material needs also contribute to their child's resilience (Friesen & Brennan, 2005:297; Reed-Victor, 2003; Wyman, 2003:302).

- **Environmental protective factors/processes**

Resilient children make more use of the social support structures at their disposal. The resilience of the community also plays a part in the support of a learner (Krovetz, 1999:2).

The support learners receive from their social structure directly influences their resilience as it helps to keep them focused and positive. This social structure stretches from the **immediate family** (Cook & Du Toit, 2005:248; Killian, 2004:46; Masten & Reed, 2005:75; McCubbin & McCubbin, 2005:29), **neighbours and friends** (Gorman-Smith & Tolan, 2003:401) **to the community at large** (Ungar, 2008:225; Ungar *et al.*, 2008:6).

When the youth's ecology provides stability, integration and connections that inspire them to feel a sense of belonging, support and to broaden their education, resilience is further encouraged (Masten & Reed, 2005:84; Strümpfer, 2003:71; Ungar & Liebenberg, 2005:218-219). School does not only develop learners' cognitive and emotional skills but can also encourage their resilience. A constructive and supportive classroom environment combined with an understanding teacher enhances the social interaction, class and extra-mural involvement and encourages resilience (Greene & Conrad, 2002:46; Hetherington & Elmore, 2003:203; Johnson & Lazarus, 2008:19; Masten & Powell, 2003:13).

- **Cultural/Contextual protective factors**

Boyden and Mann (2005:8), Howard and Johnson (2000), Kümpfer (1991:199), Smith (2005), and Williams (2002:200) find that religion, cultural pride and bi-culturalism contribute to the resilience of an adolescent. According to Beauvais and Oetting (1999:104), McCubbin and McCubbin (2005:40), and Walsh (2006:51), having cultural and ethnic pride encourages a sense of belonging and of group identity and this is often encouraged by family rituals or traditions that might have been passed on from generation to generation.

A strong sense of heritage enhances resilience in learners and this is promoted when the community is actively involved in heritage-building activities (Ungar & Liebenberg, 2005:218-219).

6.3.2 LD as a risk

LD is generally synonymous with risk for poor developmental outcomes and can impact on an adolescent in the following ways:

- **Scholastic risks**

Learning is awkward when a learner struggles with his reading, writing, spelling, language, or mathematical skills (Lerner, 1993:8; Mash and Wolfe, 2005:319; Prior, 1996:3). This often leads to repeated failures and other associated psychological issues (as noted below) (Elbaum & Vaughn, 2003:230; Hulquist, 2006:39; Lerner, 2003:174).

- **Poor self-concept**

Adolescents who are constantly confronted with failure can judge themselves very harshly because they compare their own abilities with those of friends and find themselves to be inadequate. When parents and teachers make harsh judgments, their self-concept is further threatened (Derbyshire, 1991:396; Tuttle & Paquette, 1993:18; Van Wyk, 1991:106; Winkler, 1998:111). A learner who is constantly judging himself according to his failures can become even more sensitive about criticism if this goes unattended. If a learner continues on the destructive path of self-criticism, it can only be a matter of time before he no longer believes in his own positive attributes (Mash & Wolfe, 2005:334). Furthermore, an adolescent learner might become anxious and only focus on his limitations, starting to question and doubt any positive encouragement he might receive (Elbaum & Vaughn, 2003:229; Tuttle & Paquette, 1993:18; Van Wyk, 1991:106).

- **Poor Social skills**

Poor social skills can be very damaging for an adolescent. When lacking social skills an adolescent can make inappropriate remarks and easily offend others. Adolescents, who lack the social skills to read the attitudes of others, can create an uncomfortable social environment and so lose out on social support and positive social connections (Derbyshire, 1991:398; Empson & Nabuzoka, 2004:165-166; Lerner, 2003:549; Mash & Wolfe, 2005:335).

Often adolescents who lack social skills are cut out of social groups because of their inappropriate behaviour, and then have limited opportunities to learn social skills (Mash & Wolfe, 2005:334). Having inadequate social skills can influence a learner scholastically as well and often leads to poor teacher-learner relationships. Poor social skills can stand in the way of them becoming actively involved in their schoolwork or even taking part in school activities. Such negative effects can even carry over to their family environments (Derbyshire, 1991:398; Tuttle & Paquette, 1993:32; Winkler, 1998:110).

- **The impact LD has on a family**

An adolescent being diagnosed with a LD can have an impact on the home-life of the family. Often increased strain is placed on the parents, which in turn could affect the parents' relationship with their other children, and even the relationship between mother and father (Buchman, 2006:299; Dyson, 1996:280).

- **The impact LD has on siblings**

Siblings of learners with LD may feel neglected by their parents because their brother or sister with LD is getting a lot of attention from their parents (Tuttle & Paquette, 1993:28). Although research on whether siblings of the child with LD experience more problems in adjustment is mixed (Hallahan, Kauffman & Loyd, 1999:166), Tuttle and Paquette (1993:28) state that the siblings of learners with LD may themselves develop social problems because the family dynamics have been affected and this may leave them feeling

less important than the sibling with LD. Understandably, this would have the potential to disrupt sibling relationships.

6.4 CONCLUSIONS FROM THE EMPIRICAL STUDY

I collected data and analysed it by making use of the qualitative phenomenological method, which focuses on understanding the phenomenon and not on explaining or predicting the phenomenon. I conducted ten phenomenological interviews. From the data gathered and then coded by means of inductive analysis, I was able to draw the following conclusions about **protective resources** that **contribute to the resilience of adolescent learners coping with LD** in Table 6.2 below:

Protective Resources	More than five	Fewer than five	Previous resilience studies	Previous studies on LD & resilience	Previous studies on LD	Not noted in previous resilience studies	Not noted in previous studies LD & resilience
Unconditional acceptance							
Parental acceptance	😊		😊				😊
Sibling acceptance	😊						😊
Friend's acceptance	😊						😊
Safe spaces							
Home	😊		😊				😊
School	😊		😊		😊		😊
Community		😊	😊				😊
Championship	😊		😊		😊		😊
Pedagogical expertise	😊				😊		😊
Intrapersonal resources							

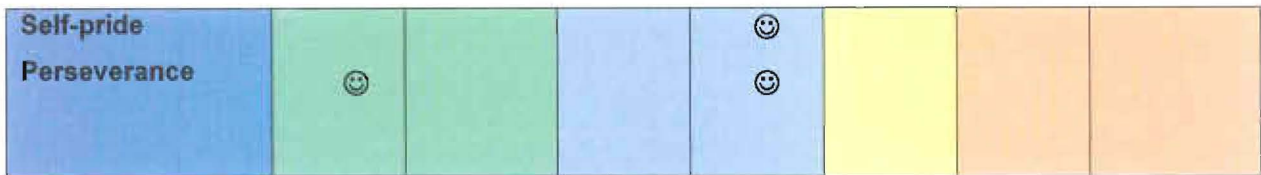


Table 6.2: Summary of the empirical study

With the exception of sibling acceptance, most of the resources noted above were identified as resilience-promoting in previous studies (Burt, 2002:138; Glantz & Johnson, 1989:189-199; Masten & Reed, 2005:85; Theron, 2006:199-200; Ungar, 2008:225; Ungar *et al.*, 2008:2; Ungar, 2005:xxv). However, previous studies did not overtly link **all** of these resources to the promotion of resilience with LD. The only resources that have been overtly linked to resilience promotion among learners with LD are the intrapersonal resources of self-pride and tenacity (Theron, 2004:319; Theron, 2006:200). My study suggested that sibling acceptance encouraged resilience and this was not noted in previous resilience studies.

What also differed to some extent were the participants' views of their school. Most current literature (SA, 2001; Swart, 2004:231-242) strongly motivates inclusion as best practice, also for learners with LD. The participants in my study believed that part of school being a safe space, was that it was peopled by learners with similar learning difficulties and by empathic teachers who were well-trained to assist them to learn. As noted in Chapter Five (Cf. 5.3), this raised my concern as to whether inclusion is the best way forward for learners with LD. Although the theory of inclusion is sound, the findings of my study suggest that not including learners in the mainstream is one way of giving them access to a school which is a safe space. Alternatively, this finding could suggest that mainstream teachers and learners need to be more accepting of learners with LD and perhaps need to be trained to cope better with learners with LD.

Figure 6.2 below demonstrates that the interaction between participants with LD and the protective resources in their ecology (individual make-up, school, parents, sibling, friends, home) ultimately encouraged their resilience.



Figure 6.2: Interaction between an adolescent with LD and his ecology

In other words, Figure 6.2 emphasises Ungar’s point (2008:225) that resilience results from navigation towards resilience-promoting resources (like safe spaces) but also needs ecologies to provide resilience-promoting resources.

6.5 RECOMMENDATIONS FOR LIFE ORIENTATION TEACHERS

The following recommendations for Life Orientation and other teachers are based on the findings of my empirical study. Life Orientation teachers could:

- ☺ Encourage peers of learners with LD to be supportive and non-judgmental because peer acceptance encourages learners with LD and also helps them to experience their school context as a safe space;
- ☺ encourage peers to find mutual ground with learners with LD where they have something in common to avert the attention away from the ways in which they might be different – in so doing learners with LD may feel accepted;

- ☺ encourage other teachers to be more sensitive and accepting of the learner who might be slower than the other learners or who might need a little bit more attention than the other learners, because teacher acceptance encourages learners with LD and also helps them to experience their school context as a safe space. e.g. see figure 2.5: Protective processes within the school environment;
- ☺ encourage other teachers to provide learners with LD with opportunities for success so that they can experience a sense of achievement and in so doing be enabled towards resilience e.g. see figure 2.5: Protective processes within the school environment;
- ☺ educate parents on how important it is for their homes to be havens for their child with LD and how important it is for parents to demonstrate acceptance of their child's LD e.g. see figure 2.3: Family protective resources;
- ☺ educate parents on how important it is for them to champion their child with LD (when this is applicable) as this encourages youth with LD to accept and be proud of themselves e.g. see figure 2.3: Family protective resources;
- ☺ teach learners in the class who have siblings who struggle with LD, the importance of encouragement and acceptance of their siblings e.g. see figure 2.3: Family protective resources;
- ☺ facilitate workshops that will educate the community on how to provide adolescents with LD with the necessary support (such as safe spaces that can help them redirect their focus, and spaces that make them feel that they are loved and supported) that can help them become more resilient e.g. see figure 2.4: Summary of environmental protective resources;
- ☺ help or maybe educate other teachers on how important the pedagogical expertise is in enabling learners with LD towards resilience and how helpful teachers can be in enabling learners with LD towards resilience e.g. see figure 2.5: Protective processes within the school environment; and
- ☺ help establish appropriate life skills, like problem-solving skills, that might equip learners with LD to develop self-pride and acceptance.

6.6 LIMITATIONS OF THE STUDY

The following limitations are noted:

- ☞ I only interviewed ten resilient learners coping with LD. Although I stopped at ten because I was hearing the same answers from the participants (data saturation), it is possible that a larger sample would have led to the identification of other antecedents of resilience.
- ☞ All the participants came from only one school in the Vaal Triangle area. This means that when they commented that teachers and their school context were part of what contributed to their resilience, this could have been influenced by the specific school context in which these learners found themselves. If I had interviewed learners from different schools, I may not have drawn the conclusion that being part of a special school encouraged resilience, because I may have identified resources at mainstream schools that encouraged resilience.
- ☞ All the participants were white English-speaking learners. It is therefore possible that the culture of these participants influenced their resilience, even though they did not comment on this. If I had interviewed learners with LD from other cultural and language groups, I may have identified different antecedents of resilience.

6.7 CONTRIBUTIONS MADE BY THE STUDY

The study made the following contributions:

- ☺ A deeper understanding of the antecedents of resilience (especially interpersonal ones) that encourage some adolescents to cope with their LD were identified. To date, South African studies that documented the factors that contribute to resilience among learners with LD, focused on the individual protective resources that encourage resilience (Theron, 2004:319; Theron, 2006:200) Therefore my study adds to what was understood about the process of resilience in learners with LD, because my study identified interpersonal processes (**unconditional acceptance, safe spaces,**

championship and pedagogical expertise) that encouraged resilience among my participants. Although these protective resources were noted in previous studies of resilient youth (Boyden & Mann: 2005:6-9; Donald *et al.*, 2006:18-19; Greene & Conrad, 2002:46; Hetherington & Elmore, 2003:203; Johnson & Lazarus, 2008:19; Kümpfer, 1999:189-191; Masten & Reed, 2005:85; Ross & Devereil, 2004:18; Ungar *et al.*, 2008:2; Van Rensburg & Barnard, 2004:3), none of these studies focused specifically on youth with LD. In this way my study contributed to theory.

- ☺ Contrary to previous studies (Hultquist, 2006:39; Tuttle & Paquette, 1993:28), the participants in my study did not reveal strained sibling relationships. Instead, the participants in my study suggested their siblings' unconditional acceptance of them, encouraging them to be resilient.
- ☺ Identification of the above-mentioned interpersonal resilience-promoting processes, as well as recognition of previously documented intrapersonal protective resources, meant that my study contributed to practice in that guidelines could be drafted for Life Orientation teachers based on the findings of this study (Cf. 6.5). These guidelines can enable dedicated teachers to adapt their classroom environment so that a learner with LD, can benefit. Possibly if more mainstream educators are sensitive to how resilience can be facilitated among learners with LD, more learners with LD might feel comfortable in mainstream schools.

6.8 RECOMMENDATIONS FOR FURTHER STUDY

This study had limitations that can hopefully be cleared up by further, more extensive studies. Such recommendations include studies that will explore:

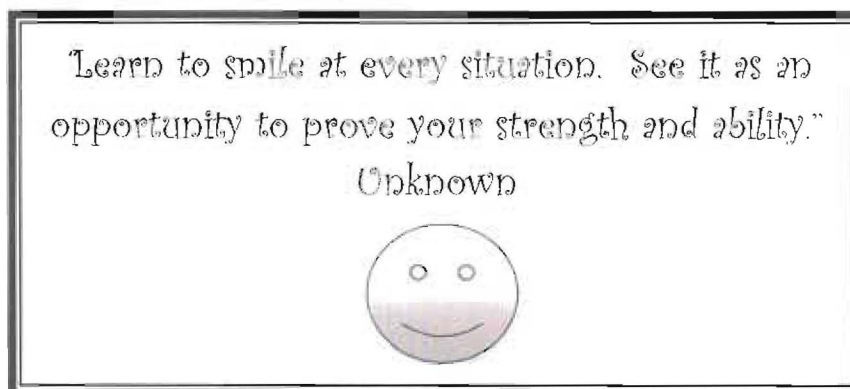
- The correlation, if any, between antecedents of resilience as identified in this study and the antecedents of resilience among resilient learners with LD from different cultural groups (i.e. Black, Coloured and Indian learners);
- the antecedents of resilience among resilient learners with LD in mainstream schools;
- strategies a teacher can make use of to assist a learner with LD towards resilience in a mainstream school; and

- o the antecedents of resilience in families that cope resiliently with a child's LD.

6.9 CONCLUSION

Sadly LD is a major part of many adolescents' life. Although the South African Education system is trying to include all learners in mainstream schools, as well as those with LD, I feel that in some way it is failing. What has been made clear to me throughout my research is that an adolescent learner with LD will, some time or another, need positive individual attention, not only from family and peers, but also from educators in order to cope resiliently with a LD. I am not sure that our inclusive system always manages to provide the unconditional acceptance, safe spaces, championship and pedagogical expertise which the participants in my study noted as resilience-promoting. However, the participants in my study also made it clear that schools are not the only resilience-promoting resource: the learner himself and families, friends and communities also have a part to play.

What is encouraging about my study's findings is that the participants did not talk about expensive or out of the ordinary resilience-promoting resources. In this sense they echoed what Masten (2001:227) says about resilience arising from everyday processes and structures and giving us hope that if communities, schools, peers, teachers, siblings and parents will make the effort to accept youth with LD unconditionally, offer them safe spaces, champion them, and teach them well, then youth with LD will be enabled towards resilience. When we do this, youth with LD will 'learn to smile at every situation.'



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24 **Interviewee:**

25 Some or other College

26 **Interviewer:** *Do you like it here at D?*

27 **Interviewee:**

28 Yes I do.

29 **Interviewer:**

30 *Do you know why your parents decided to bring you to D?*

31 **Interviewee:**

32 I was struggling, I was always bad, I was never good because I was a little slower so my
33 parents put me in a school that was a little slower.

34 **Interviewer:**

35 *Now, I have explained to you what resilience is. Do you think your teachers and friends
36 think you are resilient ?*

37 **Interviewee:**

38 Um, ja, not most of the time but I think they do.

39 **Interviewer:**

40 *Why would you say they think you are resilient most of the time?*

41 **Interviewee:**

42 Um, because I always try and try my best.

43 **Interviewer:**

44 *When you were in your other school do you think your friends treated you differently
45 because you struggled with your school work?*

46 **Interviewee:**

47 Yes, even the teachers did. They used to make me sit in a little corner like in a little box.

48 **Interviewer:**

49 *If you think about your life now what do you think makes your life difficult for you. Is*
50 *there something particular?*

51 **Interviewee:**

52 Um, I think it might be a lot of the work and I know especially when I don't take my
53 Ritalin.

54 **Interviewer:**

55 *Are you on any other medication or just Ritalin?*

56 **Interviewee:**

57 Just Ritalin.

58 **Interviewer:**

59 *Who do you think helps you to be resilient? Who contributes to it?*

60 **Interviewee:**

61 Its mostly my mom and dad.

62 **Interviewer:**

63 *Are they very supportive at home?*

64 **Interviewee:**

65 Yes.

66 **Interviewer:**

67 *Are you an only child?*

68 **Interviewee:**

69 Yes.

70 **Interviewer:**

71 *How do you think they help you to be resilient?*

72 **Interviewee:**

73 Um, ja, just like the other day when I lost my prefect badge I went home and told them
74 and my mom was like very nice about it and tried to cheer me up.

75 **Interviewer:**

76 *Why did you loose your prefect badge? What did you do?*

77 **Interviewee:**

78 I forgot to take my Ritalin and I was walking around in class.

79 **Interviewer:**

80 *Do you know if you are going to get it back soon?*

81 **Interviewee:**

82 Ja. I probably will. My teacher told me to go and talk to the principal and ja, I didn't go
83 today because he was in a really bad mood and I knew he would say no so ill go
84 tomorrow.

85 **Interviewer:**

86 *Is there anybody else in your family that helps you cope when life gets hard?*

87 **Interviewee:**

88 Um not really, oh wait my nan.

89 **Interviewer:**

90 *Is that your grandmother?*

91 **Interviewee:**

92 Yes, she lives in Zimbabwe.

93 **Interviewer:**

94 *Do you see her very often?*

95 **Interviewee:**

96 Not very often, but like every year or so.

97 **Interviewer:**

98 *Do you talk to her a lot over the phone?*

99 **Interviewee:**

100 Um, not a lot because its very expensive to phone from there.

101 **Interviewer:**

102 *Do you miss her?*

103 **Interviewee:**

104 Um yes.

105 **Interviewer:**

106 *So what do you guys usually talk about?*

107 **Interviewee:**

108 Um, we usually talk how life has been in the olden days and stuff.

109 **Interviewer:**

110 *Is there anybody at school, when life gets difficult like yesterday when your prefect*
111 *badge got taken away, that might make life easier for you?*

112 **Interviewee:**

113 I think its mostly my friends.

114 **Interviewer:**

115 *Do you have any teachers at school that you get along with?*

116 **Interviewee:**

117 Yes. Teacher S.

118 **Interviewer:**

119 *Would you understand if I ask you who in your community helps you cope when life*
120 *gets hard?*

121 **Interviewee:**

122 I know what community is. It's like my whole area that I live in.

123 **Interviewer:**

124 *You are right. Like maybe if you go to church or someone in your child or anyone else*
125 *outside school. Are there any other people that you might know?*

126 **Interviewee:**

127 I have a lot of people that supported me. I had a best friend and then he stole from me.
128 The gardener boy. I used to be best friends with him until we found out that he was
129 taking drugs.

130 **Interviewer:**

131 *But when you guys were good friends, did he help you get through a bad day?*

132 **Interviewee:**

133 Um, no I just liked to talk to him. He had like this little guitar band and he sometimes let
134 me play.

135 **Interviewer:**

136 *Do you play any instruments?*

137 **Interviewee:**

138 I used to play the tambourine but I got bad at it and then I could play the guitar but now
139 the gardener is gone now.

140 **Interviewer:**

141 *Do you like music?*

142 **Interviewee:**

143 Yes

144 **Interviewer:**

145 *What kind of music do you like?*

146 **Interviewee:**

147 I'm not like a really rock n roll kind of person. I don't like rock n roll and I don't like hip
148 hop. Normally I would listen to like anything like if I am calm I would listen to calm
149 music.

150 **Interviewer:**

151 *Is there anything in your culture that helps you cope by culture I mean for example your*
152 *religion, if you don't mind me asking are you religious?*

153 **Interviewee:**

154 I'm not very religious but I am a Christian.

155 **Interviewer:**

156 *So do you go to Sunday school?*

157 **Interviewee:**

158 No, my mom and dad don't have time.

159 **Interviewer:**

160 *So what do you do at home for fun?*

161 **Interviewee:**

162 I sometimes ride on my four-wheeler, I read books, but most of the time I play play
163 station but I also like playing with the dogs.

164 **Interviewer:**

165 *So what book have you been reading lately?*

166 **Interviewee:**

167 Um, I'm on a, um a series of unfortunate events. There use to be a movie about it but I
168 am reading the book. I'm on chapter 4 now.

169 **Interviewer:**

170 *Have you read the Harry Potter books?*

171 **Interviewee:**

172 No they are too hard for me.

173 **Interviewer:**

174 *When you have a bad day at school like when you got your badge taken away, do you
175 maybe have a special friend that makes life easier for you?*

176 **Interviewee:**

177 No not really. I have a good friend, he um, why I lost my badge is that he also went
178 screaming down the hall that I went bonkers.

179 **Interviewer:**

180 *You made a comment that your friend said that you went mad. Why would he say that?*

181 **Interviewee:**

182 Because I didn't take my tablets and then I don't concentrate. And when I don't
183 concentrate I don't even like care if there is a camera up there. I will like walk around.

184 **Interviewer:**

185 *Is that how you are when you don't take your medicine?*

186 **Interviewee:**

187 Most of the time but I also think it was because of the cold that day.

188 **Interviewer:**

189 *So how would a normal day be for you when you are on your Ritalin?*

190 **Interviewee:**

191 I would be very calm.

192 **Interviewer:**

193 *Before you came to Destinata and you were in a mainstream school, you said they use
194 to put you in a corner, how did that make you feel?*

195 **Interviewee:**

196 Well I always thought I was one of the bad kids.

197 **Interviewer:**

198 *So basically they just thought you had discipline problems. And your friends in that*
199 *school how did they treat you?*

200 **Interviewee:**

201 Well, they use to say when I did get on the tablets I use to become a little more calm
202 and then they would call me tablet boy and freak and “Di-Di” boy because of the ADHD.

203 **Interviewer:**

204 *Have you ever felt frustrated with those teachers because they couldn't understand*
205 *when you tell them you are not naughty its just that I don't understand?*

206 **Interviewee:**

207 Well um I tried to explain it with my parents but I would still have to stand in the corner
208 or sit in the corner with a little wall around me.

209 **Interviewer:**

210 *Did you have to sit there the whole day?*

211 **Interviewee:**

212 Yes

213 **Interviewer:**

214 *And what did you do the whole day?*

215 **Interviewee:**

216 Work, would go to the teachers if I needed help.

217 **Interviewer:**

218 *How did you feel knowing everyday that if you go to school you would have to sit in the*
219 *corner?*

220 **Interviewee:**

221 The only good thing about the day is break.

222 **Interviewer:**

223 *Did you have a lot of friends at your old school?*

224 **Interviewee:**

225 I would like to say I have had a lot of friends but I didn't know that many people there.

226 **Interviewer:**

227 *Did you like your old school . Is there anything that you liked about your old school?*

228 **Interviewee:**

229 Thinking about it no but the only thing I did like was the aftercare.

230 **Interviewer:**

231 *Were there any teachers that you liked in your old school?*

232 **Interviewee:**

233 I cant really remember her name but, ja I did.

234 **Interviewer:**

235 *Is your new school much better for you now than your old school? Was it a huge
236 transformation when you came here? Did you have to adapt to a lot of things?*

237 **Interviewee:**

238 Um yes.

239 **Interviewer:**

240 *Can you maybe give me an example of some of the things?*

241 For one thing all the cameras, the discipline at the school, there is a different type of
242 order, a different discipline order.

243 **Interviewer:**

244 *Do the cameras help a lot with discipline?*

245 **Interviewee:**

246 Yes they do.

247 **Interviewer:**

248 *Would you say you have more friends here at this school than what you had at your old*
249 *school?*

250 **Interviewee:**

251 I can't really say I have a lot of friends, I have one good friend but as I said he was the
252 one who was screaming down the hall.

253 **Interviewer:**

254 *Does your friend also have ADD or ADHD?*

255 **Interviewee:**

256 I really don't know but I think he has ADHD.

257 **Interviewer:**

258 *Can you maybe understand why he did that yesterday or do you think he is just not*
259 *someone you should trust?*

260 **Interviewee:**

261 No he is someone I can trust but he kind of has a way with his mouth.

262 **Interviewer:**

263 *Do you have any teachers at this school that you don't like?*

264 **Interviewee:**

265 Yes a lot. There were teachers that I thought were nice and then this year because I
266 was a prefect they just nail me.

267 **Interviewer:**

268 *How many kids are in your class?*

269 **Interviewee:**

270 I think there is sixteen.

271 **Interviewer:**

272 *And how many kids were you in a class in your old school?*

273 **Interviewee:**

274 42.

275 **Interviewer:**

276 *Do you get along with the kids in your class?*

277 **Interviewee:**

278 No. in my class I'm called a freak.

279 **Interviewer:**

280 *Why do they call you a freak at this school? Why do you think they call you that?*

281 **Interviewee:**

282 I don't know.

283 **Interviewer:**

284 *Do other people have nicknames for them?*

285 **Interviewee:**

286 Yes they have names when they tease each other but its like a friendship teasing, like
287 for example Barbie or Britney Spears.

288 **Interviewer:**

289 *When they tease you do you feel its part of the whole friendship thing?*

290 **Interviewee:**

291 No maybe only when they call my weasel.

292 **Interviewer:**

293 *Do you talk to your teachers about this when they tease you?*

294 **Interviewee:**

295 Yes

296 **Interviewer:**

297 *And what do they say?*

298 **Interviewee:**

299 Nothing they don't do anything about it.

300 **Interviewer:**

301 *And your parents what do they do?*

302 **Interviewee:**

303 I don't really tell them about it.

304 **Interviewer:**

305 *Well obviously your are very, very resilient. You don't allow these kids to call you freaks*
306 *to actually bother you, or does this actually bother you a lot?*

307 **Interviewee:**

308 No but mostly one girl but she thinks she is the queen of the class.

309 **Interviewer:**

310 *Despite everything that is happening in this school, if you had a choice would you go*
311 *back to your old school or would you stay here at this school?*

312 **Interviewee:**

313 I would stay here.

314 **Interviewer:**

315 *Why would you rather stay here?*

316 **Interviewee:**

317 Just being able to adapt to the work.

318 **Interviewer:**

319 *Was it hard to adapt when you came here?*

320 **Interviewee:**

321 Well it was much more quicker than my other schools.

322 **Interviewer:**

323 *Do you think you will finish all your school years here at Destinata.*

324 **Interviewee:**

325 Um I would hopefully like to because I haven't been in one school for more than a year.

326 **Interviewer:**

327 *Once you finish school what do you plan on doing?*

328 **Interviewee:**

329 *I'm thinking about taking over my father's flats.*

330 **Interviewer:**

331 *Well thank you very much for taking the time. Is there anything you would like to ask*
332 *me?*

333 **Interviewee:**

334 *Um no not really*

335 **Interviewer:**

336 *Is there anything you would like to know about the study that I am doing?*

337 **Interviewee:**

338 *Um why?*

339 **Interviewer:**

340 *I would like to find information that focuses on the positive things. Its always easy for a*
341 *lot of people to see the bad in everything or everyone and focus on everything that is*
342 *going wrong, for example you say your friends like teasing you but I think you are such*
343 *a cool guy for putting up with all of them and that's basically what this study is focused*
344 *on, all the positive things about learners. And we would also like to try and help other*
345 *teachers who don't know how to work with learners with learning problems like your*
346 *teachers at your old school just use to put you in the corner.*

347 *what I'm going to do with this information that you have given to me is I'm going to code*
348 *it and write a report based on the information that you have given me. In my report I will*
349 *basically write what I think you have been saying and what I feel I have learnt from you.*

350 *I am then going to bring the report back to you so you can see what I have written and*
351 *then you can comment on the report and tell me whether or not what I have written is*
352 *right or wrong. You will have an opportunity to rectify me if you feel that what I have said*
353 *is not right or if you feel that I have misunderstood you. If you feel that there is something*
354 *that you would like me to take out and you don't want it in the report anymore you can*
355 *tell me that and I will take it out. While I am writing my report and I feel that I still need*
356 *some more information about you I will call your teacher and ask her if I can come and*
357 *see you again. If you don't want to talk to me again you have every right to say so and*
358 *then I won't bother you again. Are there any questions you would like to ask me now?*

359

360

PART 3

361 **INTERVIEWER:**

362 Hi W. thanks for talking to me again today. How have been? Any new trouble?

363 (laughs)

364 **INTERVIEWEE:**

365 *No, no trouble. I've actually been good believe it or not.*

366 **INTERVIEWER:**

367 That's good to hear. W, remember last time I explained to you why I am asking you so
368 many questions.

369 **INTERVIEWEE:**

370 Yip

371 **INTERVIEWER:**

372 Well, today the questions are going to be kind of in the same line, but today when I ask
373 you questions I specifically mean it in relation to you struggling with your learning and
374 ADD. Is that ok with you?

375 **INTERVIEWEE:**

376 *That's cool. I don't mind.*

377 **INTERVIEWER:**

378 When you struggle with you work and you get into trouble because of you ADD, how do
379 your parents help you? Can you maybe tell me in instance or story of what happened
380 and how they helped you to deal with it?

381 **INTERVIEWEE:**

382 *I once came from school crying because the teacher made me sit in the corner with a*
383 *hat on because I didn't do my homework. I didn't to it because I didn't understand it, but*
384 *the teacher said it was because I was talking too much in class and that's why I don't*
385 *understand my work. So my mom asked me if I like really didn't understand and like*
386 *what I don't understand. She then took me to someone that could help me, and went*
387 *and explained the whole thing to the teacher. It didn't matter though because my*
388 *parents took me out of that school and put me in the school where I am now.*

389 **INTERVIEWER:**

390 How about your dad? How do the two of you get along? How does he help you when
391 you have to deal with stuff at school?

392 **INTERVIEWEE:**

393 *Oh, his cool. He always supports me a lot. And is always around and tells me how cool*
394 *I am.*

395 **INTERVIEWER:**

396 Can you maybe tell me a story about when of how your dad encouraged you?

397 **INTERVIEWEE:**

398 *Like for example, like the night we had prize giving here at school. I Was like so*
399 *surprised really. Prize giving was like the best night. I thought I was going to get a*
400 *certificate for good attendance, but I was shocked when they called out my name for*
401 *a grade prefect. I was like really, really shocked, but happy too. My dad and my*
402 *mom were very happy and my dad told me he was very proud of me, and that I must*
403 *keep up the good work.*

404 **INTERVIEWER:**

405 In our last two interviews you told me a lot about your grand mother and how she gives
406 you good advice. How do you think she helps you specifically relating to your learning
407 problems? Any advice?

408 **INTERVIEWEE:**

409 *Mmm ... just that when i gat mad she tells me to hug a tree. I'm her only grand child so*
410 *I guess she doesn't see me different that others. I don't get to see her that much either,*
411 *but when she visits she's nice and always asks me about school and my teachers. I*
412 *always show her my reports and my school books and stuff and she always says she*
413 *was as good as doing sums as I am. I tell her that is was actually the teacher that*
414 *helped me, but she says it's in my hand writing so it MUST be me.*

415 **INTERVIEWER:**

416 That's nice. She really does seem nice.

417 **INTERVIEWEE:**

418 *She is. She's like the ultimate granny, the one you read about in books.*

419 **INTERVIEWER:**

420 What a sweet thing to say W. I hope you tell her that too. But let's carry on. Okay, how
421 do you friends help you deal with your learning difficulties?

422 **INTERVIEWEE:**

423 *My friend and I get along. We are in the same class and my teacher calls us double*
424 *trouble when she sees us (laughs). Um, even though we do get in trouble sometimes,*
425 *but he never turns around and says I'm stupid or that it is my fault for getting us in*
426 *trouble. He is also on Ritalin so we kind of remind one another to take our tablets when*
427 *we see the other onw is not doing what he is suppose to be doing.*

428 **INTERVIEWER:**

429 Is this the same boy who got you in trouble when they took your prefect badge away?

430 **INTERVIEWEE:**

431 *Uh, yes. But his really not that bad and it was just that once. He felt really bad about it.*
432 *I talked to him about it after the first time I told you about it. He really is my best friend*
433 *and I don't think he will do that again. He was just doing like a boy thing.*

434 **INTERVIEWER:**

435 Well, then you are very lucky to have a friendship like this.

436 **INTERVIEWEE:**

437 *Thank you.*

438 **INTERVIEWER:**

439 Your welcome. Move on?

440 **INTERVIEWEE:**

441 *Yip, next up?*

442 **INTERVIEWER:**

443 W, do you like your school? Do you feel comfortable at school, your friends, teacher?

444 **INTERVIEWEE:**

445 *I like my school. We have video cameras that keep an eye on us and like to see what*
446 *we are up to in class. They also keep an eye on the teachers to see whether or not*
447 *they are doing their work. So it kind of helps with the discipline and stuff.*

448 **INTERVIEWER:**

449 Do you do fun things that helps take your mind off you school work? It can be things at
450 school or at home, or anywhere else where you do fun things.

451 **INTERVIEWEE:**

452 *I play soccer at school, but only at breaks with my friends. It's nice, because we are a*
453 *group of friends that always get together and play during break.*

454 **INTERVIEWER:**

455 Do you maybe do other stuff at home or somewhere else?

456 **INTERVIEWEE:**

457 *No, I pretty much do stuff at school. I stay after school, so I play after school and stuff.*

458 **INTERVIEWER:**

459 W, What kind of person do you think you are?

460 **INTERVIEWEE:**

461 *I don't think I'm a bad person.*

462 **INTERVIEWER:**

463 What I meant was ... would you say that you are a hard worker?

464 **INTERVIEWEE:**

465 *Ja, I think I am a hard-worker" ... it's nice when I like struggle to do something or if I*
466 *worked like really hard on something and the teacher gives me like eight or ten out or*

467 *ten. Even if I didn't get it right the first ten gazillion times she let me stay in class and*
468 *helped me until I got it right on my own.*

469 Did you like you old school more then what your school you are in now?

470 **INTERVIEWEE:**

471 *Um, no. I like where I am now.*

472 **INTERVIEWER:**

473 Can you tell me why?

474 **INTERVIEWEE:**

475 *Like in my old school I would like sit in this type of box because the teacher said I*
476 *distracted the other kids. She told my parents that I didn't pay attention in class and*
477 *stuff like that. Here none of my teachers make me sit in a box. They remind me to take*
478 *my Ritalin when I get a bit out of hand, and then I'm fine again. They don't tell me that*
479 *I'm like out of hand, and my math teacher will like sometimes come sit next to me and*
480 *go through my word problems for me. She always says we need to break them up into*
481 *smaller pieces.*

482 **INTERVIEWER:**

483 She seem nice.

484 **INTERVIEWEE:**

485 Yeah she's cool.

486 (his phone rings)

487 That's my dad. His here. Must I tell him to wait?

488 **INTERVIEWER:**

489 Oh no that's ok. I think we're done in any way. I'll call you if need to ask you something
490 again. Is that ok.

491 **INTERVIEWEE:**

492 *No problem. I'll see later then. Bye.*

493 **INTERVIEWER:**

494 Thanks for your time. Stay out of trouble.

ADDENDUM B

AUDIT TRAIL

INTERVIEWER:

How about your dad? How do the two of you get along? How does he help you when you have to deal with stuff at school?

INTERVIEWEE:

Oh, his cool. He always supports me a lot. And is always around and tells me how cool I am.

Comment [J P1]: Boosts self esteem

Comment [J P2]: Supportive Dad.

INTERVIEWER:

Can you maybe tell me a story about when or how your dad encouraged you?

INTERVIEWEE:

*Like for example, like the night we had prize giving here at school. I Was like so surprised really. Prize giving was like the best night. I thought I was going to get a certificate for good attendance, but I was shocked when they called out my name for a grade prefect. I was like really, really shocked, but happy too. My **dad and my** mom were very happy and my dad told me he was very proud of me, and that I must keep up the good work.*

Comment [MSOffice3]: opportunity to be praised / recognized

Comment [MSOffice4]: Proud of self

Comment [J P5]: Encouragement from parent
Likes pleasing parents?
Parents are supportive: show approval

Comment [MSOffice6]: encourage goal directed behavior

INTERVIEWER:

In our last two interviews you told me a lot about your grandmother and how she gives you good advice. How do you think she helps you specifically relating to your learning problems? Any advice?

INTERVIEWEE:

*Mmm . . . just that when I get mad **she tells me to hug a tree**. I'm her only grandchild so I guess she doesn't see me different than others. I don't get to see her that much either, but when she visits she's nice and always asks me about school and my teachers. I always show her my reports and my school books and stuff and she always says she was as good as doing sums as I am. I tell her that is was actually the teacher that helped me, but she says it's in my hand writing so it **MUST** be me!*

Comment [J P7]: Advice from grandma

Comment [J P8]: Grandma treats him the same as others.

Comment [MSOffice9]: she's interested

Comment [J P10]: Opportunity to be praised

Comment [J P11]: Encouragement from Gran

Comment [J P12]: Boosts self-esteem

INTERVIEWER:

That's nice. She really does seem nice.

INTERVIEWEE:

She is. She's like the ultimate granny, the one you read about in books.

INTERVIEWER:

What a sweet thing to say W. I hope you tell her that too. But let's carry on. Okay, how do you friends help you deal with your learning difficulties?

INTERVIEWEE:

My friend and I get along. We are in the same class and my teacher calls us double trouble when she sees us (laughs). Um, even though we do get in trouble sometimes, but he never turns around and says I'm stupid or that it is my fault for getting us in trouble. He is also on Ritalin so we kind of remind one another to take our tablets when we see the other one is not doing what he is suppose to be doing

INTERVIEWER:

Is this the same boy who got you in trouble when they took your prefect badge away?

INTERVIEWEE:

Uh, yes. But his really not that bad and it was just that once. He felt really bad about it. I talked to him about it after the first time I told you about it. He really is my best friend and I don't think he will do that again. He was just doing like a boy thing.

INTERVIEWER:

Well, then you are very lucky to have a friendship like this.

INTERVIEWEE:

Thank you.

INTERVIEWER:

Your welcome. Move on?

INTERVIEWEE:

Yip, next up?

INTERVIEWER:

W, do you like your school? Do you feel comfortable at school, your friends, teacher?

INTERVIEWEE:

I like my school. We have video cameras that keep an eye on us and like to see what we are up to in class. They also keep an eye on the teachers to see whether or not they are doing their work. So it kind of helps with the discipline and stuff.

Comment [J P13]: Camaraderie? Associates himself with friend. Feels that he and his friend are alike?

Comment [J P14]: Accepted by friends

Comment [J P15]: Friends don't judge

Comment [J P16]: Camaraderie. Friend deals with the same things he does.

Comment [J P17]: Sticks up for his friend

Comment [J P18]: Accepting and forgiving

Comment [J P19]: Feels comfortable at school

Comment [J P20]: Likes discipline? Good working environment? Finds it useful?

- Supportive parents
- Boosts self-esteem
- Opportunity to be praised / recognized
- Proud of self
- Likes pleasing parents
- Encouragement from parents
 - encourage goal directed behavior
- Supportive Gran
- Gran does not treat him different
- she's interested
- Encouragement from Gran
- Boosts self-esteem
- Camaraderie? Associates himself with friend. Feels that he and his friend are alike?
- Accepted by friends
- Friends don't judge
- Camaraderie. Friend deals with the same things he does
- Sticks up for his friend.
- Accepting and forgiving
- Feels comfortable at school
- Likes discipline? Good working environment? Finds it useful?

GROUPED CODES: AXIAL

<p>Supportive Relationships ? Unconditional acceptance</p>	<p>Safe Spaces? Comfortable places?</p>			<p>Championship</p>
<p>Supportive parents Encouragement from parents Supportive Gran Gran does not treat him different Encouragement from Gran she's interested Accepted by friends Friends don't judge</p>	<p>Likes discipline? Good working environment? Finds it useful?</p>	<p>Camaraderie? Associates himself with friend. Feels that he and his friend are alike? Camaraderie: Friend deals with the same things he does</p>	<p>Likes pleasing parents Accepting and forgiving Sticks up for his friend opportunity to be praised / recognized encourage goal directed behavior</p>	<p>opportunity to be praised / recognized Boosts self-esteem</p>

ADDENDUM C

ASSENT/CONSENT FORM ¹

VOLUNTARY informed consent form

THE *HOW SOUTH AFRICAN YOUTH NEGOTIATE RESILIENCE* STUDY:

If you agree, please place an “X” in the ‘yes’ box to show that you understand and agree with each statement:

1. I understand the information about the study in the Information Letter. Any questions I had were answered.	Yes, I understand
2. I realize that the participation is completely voluntary and that I can stop being part of the study at any time. If I am uncomfortable answering any question, I may choose not to answer.	Yes, I understand
3. My participation will be confidential. I understand that my full name will not be used, nor will specific details of where I live be shared, when information from the interviews is used by researchers.	Yes, I understand
4. I understand that what I say may be quoted at great length in publications, presentations and the final report. If I become concerned with anything I said, I can ask for parts, or all, of what I said not to be quoted. I may also have deleted any parts of the interview I want deleted.	Yes, I understand
5. I understand that even if my parent or guardian consents to my taking part in this study, it is my decision whether I want to participate. If I do not wish to participate, or want to withdraw from this study at any time, my wishes will be respected without penalty. My parent's or guardian's	Yes, I understand

¹ Assent forms were given to youth younger than 16. Their parents/guardians co-signed.

consent does not make me have to participate.	
6. I understand that if something troubles me while participating, the researcher will provide me with information about community resources (e.g. a local psychologist) that might help me. I understand that I will be responsible for the payment of such a professional in the event that I should follow up the referral.	Yes, I understand

I agree to take part in this study.

Research Participant's Signature

(Date)

I agree to allow my child to participate.

Parent or Guardian's Signature

(Date)

The study has been explained to the young person and this form signed voluntarily.

Researcher's Signature

(Date)