The promotion of holistic wellbeing in a school of the Deaf in South Africa

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LETTER OF PERMISSION

I, the promoter, declare that the input and effort of Theresa Lenta in writing this thesis, reflects the research done by her. I hereby grant permission that she may submit the thesis for examination purposes in fulfilment of the requirements for the degree Doctor Philosophiae in Psychology.

__________________________________________

Dr. Ansie Elizabeth Kitching

Promoter
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SUMMARY

The Deaf population in South Africa is approximately 3.5% of the population. Deaf children of school-going age can be accommodated in mainstream and full-service schools. However, the majority of these children are placed in the 47 schools for the Deaf across the country to ensure that they have opportunities to optimise their potential within a context that addresses their specific challenges. Research on the promotion of wellbeing has been focused mainly on individuals in contexts such as schools for the Deaf. However, recent literature indicates that the promotion of wellbeing should be holistic and expanded from a focus on individual wellbeing to wellbeing on multiple levels. These levels include individual, relational, and collective wellbeing. This study focused on a broader understanding of constructing enabling spaces in which holistic wellbeing is promoted in Schools for the Deaf. This is facilitated by application of a transformative approach that corresponds with the Deaf community’s perception of themselves as a community with a specific culture, and not as disabled people.

In this study, three separate but interconnected phases of study were conducted in the context of a bounded system, the Schools for the Deaf selected as an instrumental case study. The aim of the first phase of was a phenomenological investigation to understand the learners’ current lived experiences of wellbeing and to develop an understanding of the ways in which they envision wellbeing in the future. A total of 45 learners across the phases were involved. Drawings, written statements, collages and essays were applied as methods to collect the data, followed by individual discussions with each learner. The data was analysed using visual and thematic analysis. In the second phase of the research, the focus was on obtaining an understanding of the experiences and perceptions of the staff in the contexts of a
bounded system. In this phase of the study the teachers and other staff members employed at the school were asked to share their understanding of how wellbeing is currently promoted, and to share their ideas for the promotion of wellbeing in the future. A semi-structured focus group interview was conducted with 11 participants, comprising 7 teachers, 2 management staff and 2 teaching assistants. Participants created concept-maps in response to vignettes describing challenges faced by Deaf learners in South Africa. In-depth interviews were conducted with a representative of the management staff, a teacher, and house-parent in response to the same research questions. The aim of the third phase of the study was to establish a collective understanding of the way in which holistic wellbeing can be promoted in a School for the Deaf. The process encompassed the identification of current and anticipated activities that can be linked to the themes that has been identified in the previous phases. Data was collected using the world café method involving 50 participants. In response to a presentation of the themes from the first two phases of the study, the participants identified ten focus areas which they associate with the promotion of wellbeing in the School for the Deaf. They also identified current and anticipated activities that would promote wellbeing in each of these focus areas.

The cumulative results, obtained through thematic analysis indicated that the promotion of wellbeing is experienced through the provision of opportunities for learning and development, connectedness to other people in the school and the broader community and when they experience care and support on a continuous basis. Guidelines were developed based on these findings to facilitate the promotion of holistic wellbeing in the School for the Deaf from a transformative perspective, in line with the culturally appropriate understanding of the Deaf as part of an alternative lifestyle and culture. A way to understand Deafness that facilitates the development of relationships and emotional security is to conceive of it as
based on a sense of belonging to the Deaf community. Recommendations include the prioritising of the promotion of holistic wellbeing in policy as a way to address the challenges that the Deaf face in a more transformative manner. Further research on the promotion of holistic wellbeing in Schools for the Deaf should focus on a deeper understanding of how the implementation of the guidelines can be sustained. The role of the hostel and hostel staff in the promotion of holistic wellbeing should also be explored.

KEY WORDS:

Holistic wellbeing, Deaf culture, Schools for the Deaf, community psychology, ecological framework, transformative paradigm, complexity theory
In die Suid-Afrikaanse konteks is ongeveer 3,5% van die bevolking doof. Dowe kinders van skoolgaande ouderdom kan binne hoofstroom-skole of voldiensklike geakkommodeer word. Die meerderheid Dowe leerders is egter in die 47 Skole vir Dowes wat regoor die land versprei is. Navorsing wat gering is op die bevordering van die welstand fokus hoofsaaklik op die welstand van individue in die kontekse. Onlangsse navorsing dui egter aan dat die bevordering van welstand holisties van aard moet wees. Dit moet dus die bevordering van welstand op individuele, verhoudings en kollektiewe vlak aanspreek. Die studie het gefokus op ‘n meer omvattende verstaan van die konstruering van instaatstellende ruimtes waarbinne holistiese welstand in ‘n Skool vir Dowes bevorder kan word. So ‘n proses word gefasiliteer deur die toepassing van ‘n transformerende benadering wat die Dowe gemeenskap se perspesie van hulself as ‘n gemeenskap met ‘n spesifieke kultuur en nie as gestremde groep beskou nie.

Die navorsing in die studie het drie afsonderlike, maar interafhanklike fases behels. Die studie is onderneem binne die konteks van geslote sisteem - ‘n Skool vir Dowes wat as instrumentele gevallestudie geselekteer is. Die doel van die eerste fase was om ‘n fenomenologiese ondersoek te doen na die leerders se belewenis van welstand en die wyse waarop hulle welstand binne die skoolkonteks sou wou bevorder. ‘n Totaal van 45 leerders het aan die proses deelgeneem. Tekeninge, geskerewe stelling, collages en opstelle is as metodes gebruik. Die navorser het daarna individuele gesprekke met elke leerder oor hul ervaringe gevoer. Visuele en tematiese analyse is gebruik om die data te ontleed.
In die tweede fase van die studie was die fokus op die personeel se persepsies van die bevordering van welstand binne die skoolkonteks. ‘n Semi-gestruktureerde foksgroeponderhoud is met 11 personeelede gevoer. Die groep het 7 onderwysers, 2 lede van die bestuur en 2 klaskamer-assitente ingesluit. Die deelnemers is versoek om ‘n konsepkaart te maak in respons op ‘n vingette waarin van die uitdaging waarmee die leerder te doen kry voorgehou is. Individuele semi-gestruktureerde onderhoude is met twee die skoolhoof en een van die huisouers gevoer. Die doel met die derde fase van die navorsing was om ‘n kollektiewe begrip te verkry van die wyse waarop holistiese welstand in die skool bevorder kan word. Die “World Cafe metode is gebruik om data in te samel. Daar was 50 deelnemers. Die deelnemers het in respons op ‘n aanbieding van die temas tien fokus areas geidentifiseer wat hulle met die bevordering van welstand assosieer. Hulle het betaande aktiwiteite wat met die fokus areas verband hou en aangedui watter aktiwiteite ander aktiwiteite geimplimenteer kan word om holistiese welstand te bevorder.

Die kumulatiewe resultate wat deur data analise bekom is dui daarop dat aksies en aktiwiteite wat verband hou met die voorsiening van geleenthede om te leer en te ontwikkel, die verbintenisse met ander persone in die skool en die breër gemeenskap en die ervaring dat daar vir hulle omgee word en dat hulle deurlopend ondersteun word welstand in die konteks sal bevorder.

Riglyne is aan die hand van die resultate van die studie ontwikkel met die oog op die fasilitering van die bevordering van holistiese welstand in die skool vir Dowes vanuit ‘n transformerende perspektief – in lyn met ‘n kultureel aanvaarbare verstaan van Doofheid as deel van ‘n alternatiewe leefstyl en kultuur en nie as ‘n gestremdheid nie.
Aanbevelings sluit in die prioritisering van die bevordering van welstand in beleid as ‘n wyse om die uitdaging van die Dowe skoolgemeenskap aan te spreek. Verdere navorsing oor die volhoubare implimentering van die riglyne word aanbeveel. In die lig van die belangrike rol wat die koshuis personeel in die bevordering van welstand kan speel word verder navorsing oor hul rol ook aanbeveel.

**SLEUTELWOORDE:**

Holistiese welstand, Dowe kultuur, skole vir Dowes, gemeenskapsielkunde, ekologiese raamwerk, transformerende paradigma, kompleksiteitsteorie
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CHAPTER 1

ORIENTATION TO THE STUDY

1.1. INTRODUCTION

Deafness used to be defined as a physical handicap. In the 21st century however deafness is perceived as belonging to a culture defined by language and participation in culture-specific practices (Davis, 2007). Deafness does not directly affect intellectual capacity and is not seen by the Deaf community as a disability or a reason for them being defined as medically incomplete (McKee, Schlehofer & Thew, 2013). Being culturally Deaf is linked to being part of a linguistic minority and being part of the Deaf culture is indicated by the feelings members have towards their deafness (Roberson & Shaw, 2013). The Deaf have proudly chosen to embrace the word Deaf (with a capital D) and use it to show their belonging to the Deaf community (McKee et al., 2013). The authors describe how the Deaf see themselves as part of an alternative lifestyle and culture which is clearly reflected in their attitudes towards being Deaf. This way of understanding Deafness creates opportunities for both personal and communal attachment and facilitates the development of relationships and emotional security based on a sense of belonging to the Deaf community (Roberson & Shaw, 2013).

The Deaf population in South Africa comprise approximately 500 000 people and 1 500 000 hearing impaired people, which is approximately 3.5% of the population (Storbeck, 2010). As a group, the Deaf often experience inequality and injustices in terms of
access to equal educational opportunities compared to their hearing peers, equal opportunities for employment, access to services, and the right to have South African Sign Language (SASL) recognised as an official language (Magongwa, 2010). The Deaf Federation of South Africa (DeafSA) aims to effectively promote the interests of the Deaf and hard of hearing communities in South Africa on a national scale which highlights the importance given to advocacy for the Deaf and the inclusion of children who are Deaf (Druchen, 2010).

Deaf children of school-going age can be accommodated in mainstream and full-service schools as indicated in White Paper 6 on inclusive education (DoE, 2001), since they may well be able to cope intellectually. However, the majority of these children are placed in the 47 schools for the Deaf across the country to ensure that they have opportunities to optimise their potential within a context that addresses their specific challenges.

The World Health Organisation’s (1986, 1998) call that schools should create enabling environments in which the wellbeing of children is promoted, also applies to these schools for the Deaf. The focus on the promotion of wellbeing in schools for the Deaf is aligned with the attitudes of those who understand being Deaf as an alternative lifestyle rather than a disability. Research on the promotion of wellbeing has been focused mainly on individuals in contexts such as schools for the Deaf. However, recent literature indicates that the promotion of wellbeing should be holistic and expanded from a focus on individual wellbeing to wellbeing on multiple levels (Ng & Fisher, 2013). These levels include individual, relational, and collective wellbeing, referred to as holistic wellbeing (Prilleltensky, 2005).
The focus of this thesis is on understanding how the promotion of wellbeing in a school for the Deaf can be promoted with a view to guiding the implementation process.

1.2. MOTIVATION FOR THE STUDY

The Deaf community challenges the notion of being treated as defective hearing people. People who belong to the Deaf culture are proud of their Deaf identity and the use of sign language as their primary language of communication (Hamil & Stein, 2011). Being part of Deaf culture facilitates feelings of belonging and identity which enhance a sense of wellbeing. However, looking at power distribution in society, Deaf people are still often generalised into a single, unified category of people, defined and named by their disability; the deaf, rather than by their personhood; a person with a hearing disability. Using the former characterisation of deafness, leads to a perception of deaf people as being in need of care rather than a people defined by a cultural-linguistic framework which many deaf people use to express identify and place in society (Blankmeyer-Burke, Kushalnagar, Mathur, Napoli, Rathmann, & Vangilder, 2011).

Whilst working at a school for the Deaf, the researcher experienced a support focus which is ameliorative in nature and therefore often sustains a disability approach. Based on this experience she was motivated to negotiate a more equal dispensation by investigating more pro-active ways to address the many challenges that prevail in schools for the Deaf from a holistic wellbeing perspective.
1.3. STATING THE PROBLEM

Based on the WHO’s call in the Ottawa Charter (1986) schools have been encouraged over the past 25 years to create enabling environments in which the health and wellbeing of learners are promoted in spite of the many challenges that they face (Colquhoun, in Jensen & Clift, 2005). The implication of this call is that a healthy lifestyle needs to be facilitated for all school community members through the creation of supportive environments, and through the building of education and school policies that support health and wellbeing in schools.

Schools have been identified in the literature as playing an important part in the Deaf child’s social and emotional development. Schools for the Deaf are therefore also challenged to be enabling environments. Gascon-Ramos (2008) argues that schools for the Deaf which accommodate Deaf learners’ communication needs will become enabling environments for these learners. Communication with Deaf peers is seen as integral to self-esteem development and connectedness with others. Schools that accommodate these unique language needs of the Deaf are thus seen as environments that promote wellbeing for Deaf learners, and wellbeing a result of interaction with the environment. South Africa authors Magongwa (2010) and Parkin (2010), further highlight that teacher proficiency in SASL in schools for the Deaf also contributes to schools becoming enabling environments for learners.

However, merely addressing the communication needs of learners is not sufficient to address the challenges that learners face in schools for the Deaf. The challenges are vast and impact the holistic wellbeing of the learners, teachers, and parents.

Literature on wellbeing is widely reported in the literature. Wellbeing is defined
individually, relationally and collectively (Nelson & Prilleltensky, 2010). Recently, the
authors describe wellbeing from a new perspective where individual, relational and collective
domains of wellbeing correlate and is this described as holistic wellbeing. Holistic wellbeing
according to Prilleltensky (2005) is defined as a positive state of affairs where individual,
relational, and collective wellbeing are simultaneously enhanced through meeting needs in all
three domains.

Ryff and Singer (1998) describe individual wellbeing as engagement in life impacted
on by intellectual, social, emotional, and physical possibilities; which means purpose in life,
meaningful relations with others, self-regard, and mastery. Relational wellbeing is described
as enjoyment of a quality life, where access to food and housing, and being part of family and
a community, generate positive experiences and feelings which outweigh negative
experiences and feelings (McCubbin, McCubbin, Zhang, Kehl & Strom, 2013). Collective
wellbeing is defined by Nelson and Prilleltensky (2010) as fair and equitable access to
resources so that social justice is made possible. Holistic wellbeing acknowledges these
interdependent levels and understands that the promotion of wellbeing needs to take heed of
each of the 3 domains to achieve holistic wellbeing.

From a collective wellbeing perspective, globally, as is experienced in South Africa,
Deaf children and adolescents often face discrimination and social stigma (Erlich, 2012)
because of misunderstandings regarding Deaf culture (Groce, 2004). Discrimination is often
based on stereotyping, and prejudice on a collective belief system about the Deaf as a group
(Groce, 2004). Consequently, Deaf children and youth might experience social exclusion.

Globally, the Deaf face inconsistent opportunities in education. According to
Druchen (2010) the Deaf in South Africa face inequality in education and employment opportunities largely as a result of communication barriers: the majority of people in the wider community are not able to converse in SASL. As a result of these challenges and the internalised feelings of frustration which they cause, Deaf people are at risk of developing mental health problems such as anxiety and depression which threaten the individual domain of wellbeing (Erlich, 2012). In the collective domain, communication problems therefore impact Deaf children and adolescents’ opportunities to participate effectively in a society that does not cater adequately for the needs of the Deaf (Magongwa, 2010).

Looking broadly at challenges faced in the collective domain, globally and in South Africa, many Deaf children and adolescents face contextual challenges such as living with poverty, exposure to violence, facing community danger, and living with HIV/AIDS - all of which impact their experience of wellbeing (Duncan, Magnusen, Kalil, Ziol-Guest, 2012). To compound the challenges of exposure to the identified conditions, exposure to violence carries the risk of developing behavioural and social interaction problems which has also the potential to impact wellbeing in relational and individual domains (Mash & Wolfe, 2010).

In the relational domain, communication problems with Deaf children result from parents, siblings, and extended family members not being able to converse in Sign Language. This can put Deaf children at risk of not developing adequate social skills, largely because communication challenges and lack of opportunity to engage socially give rise to challenges in the relational domain of wellbeing (Krige, 2010). This lack of social skills development often leads to feelings of isolation once again resulting in challenges in the individual domain of wellbeing (Karush, 2011). Deaf children tend to be secluded and shy and thus tend to experience problems making friends (Richardson, 2014). Lack of social interaction with
others in the relational domain, particularly family members and peers, can deprive them of supportive relationships. Social relationships are understood to meaningfully contribute to one’s life experiences and affect one’s ability to think and learn (Antia, Jones, Luckner, Kreimeyer & Reed, 2011). Those who lack social skills tend to be rejected by others and are therefore seen to be at increased risk for developing mental health problems that can persist into adulthood, and are identified as challenges faced in the individual domain (Antia et al, 2011).

Problems with mental health and personality development in the Deaf community are associated with challenges of social adaptation and integration into society; in other words challenges in the individual domain can have a ripple effect in the relational and collective domains of wellbeing (Richardson, 2014). Further challenges in the relational domain of wellbeing result from limited opportunities for Deaf children and adolescents to communicate with and understand hearing people. The authors report that this can also results in their feeling isolated from the world around them.

Challenges faced in the individual domain include low self-esteem and difficulties in identity formation (Erlich, 2012). The Deaf often lack control over their everyday lives since decisions are often made for them without their understanding or consultation which can negatively impact on self-esteem and competence (Richardson, 2014). The Deaf often struggle to access information which enables them to make informed choices and control their lives whilst dealing with hearing people’s low expectations of achievement (Parkin, 2010). In general, Deaf children are more likely to experience weaker self-esteem than hearing children, exacerbated by feelings of isolation from family and society.
The challenges noted in the research literature are currently addressed by providing support to individual learners who find it difficult to deal with the challenges either in one-on-one or in group therapy sessions. This ameliorative support is informed by the medical model that focuses on the diagnosis of behavioural, emotional and/or academic problems in individuals. Such an approach, although valuable, does not necessarily facilitate an enabling environment in which individual, relational, and collective wellbeing are promoted. A shift away from a reactive individualistic focus on diagnosis and labeling, to a focus on prevention and health promotion that involve the whole school community in a collaborative manner, is needed (Evans, Hanlin & Prilleltensky, 2007).

In the South African national policy, guidelines for the development of health promoting schools were developed (Department of Health, 2001; 2008). A health-promoting network was also set up to promote health, understood as physical and mental health, in schools across the country (Swart & Reddy, 1999). Areas of action were highlighted, namely the construction of safe and supportive teaching environments, school partnerships, curriculum intervention focusing on skills development, and accessible education support services with a focus on preventative health promotion (Lazarus, 2007). The ecological nature of this framework is highlighted by Naidoo and Wills (2000) who comment on how the health and wellbeing in schools should continuously be promoted in a physical environment, supported by relationships in the school and community, and in the quality education and care provided by the schools. Konu and Rimpelä (2002) argue that although this framework offers a means by which to address school problems, it is limited in nature due to a lack of focus on wellbeing. The framework promotes an ameliorative approach rather than a more transformative approach which emphasises wellbeing enhancement and prevention.
In order to facilitate a more holistic approach, a pro-active transformative approach in which the school community as a whole is involved, is needed (Nelson & Prilletensky, 2010). Such an approach is in concurrence with the Deaf community’s rejection of the medical model which treats deaf individuals as defective hearing people (Wilcox, 2006). Schools for the Deaf should be encouraged to focus on the promotion of holistic wellbeing though identifying and implementing community strengths and preventative measures, rather than merely addressing the problems experienced by Deaf learners.

Limited research has however been conducted on the promotion of wellbeing in in schools for the Deaf from a transformative perspective. When examining current literature on the Deaf in South Africa, the focus is on educational issues such as communication with the Deaf and legislation affecting the Deaf (Druchen, 2010; Batchelor, 2010).

To address this gap in the research, an in-depth study was conducted in a School for the Deaf to establish how the promotion of wellbeing is experienced, perceived, and envisioned, with the aim of developing guidelines for the promotion of holistic wellbeing in Schools for the Deaf in South Africa.

The main research question that guides this study is:

*What guidelines can be set for the facilitation of holistic wellbeing in a School for the Deaf in the South African context?*
In order to answer the main research question, the following subsequent questions were formulated:

- How do learners in a School for the Deaf experience the promotion of wellbeing?
- How do teachers and other staff members employed at a School for the Deaf perceive the promotion of wellbeing?
- What current and anticipated activities and interventions are collectively identified as facilitating the promotion of holistic wellbeing in a School for the Deaf?

1.4. PURPOSE AND AIM OF THE STUDY

The purpose of the study is to contribute to a broader understanding of constructing enabling spaces in which holistic wellbeing is promoted in Schools for the Deaf through the application of a transformative approach that is in line with the Deaf community’s perception of themselves as a community with a specific culture, and not as disabled people.

The aim of the study was to develop guidelines for facilitating holistic wellbeing in a School for the Deaf in South Africa.

The research objectives were:

- To investigate how learners in a South African school for the Deaf selected as an instrumental case study experience the promotion of wellbeing
- To investigate how staff members of a South African school for the Deaf perceive the promotion of wellbeing, and
To establish a collective understanding of the promotion of wellbeing in a School for the Deaf selected as an instrumental case study

1.5. RESEARCH PARADIGM

In this study, a transformative paradigm is applied which, according to Mertens (2009) “is a philosophical framework from which the researcher can address issues of diversity and discrimination, including people marginalised from society” (Mertens, 2009, p. 14). The paradigm provides guidance for researchers who work in diverse cultural communities and who have a desire to challenge the current status quo and strive for social justice.

The transformative paradigm was considered an applicable framework in which to situate the research in the School for the Deaf because this group often faces inequality in society, are marginalised due to the challenges associated with Deafness, and often have decisions made on their behalf (Mertens, 2009).

By applying this paradigm, the researcher intended to contribute to the promotion of social justice for the Deaf who are still to some extent “pushed to the margins of society” (Mertens, 2009, p. 48). Within this paradigm, change is created by deepening understanding, making sense of the realities faced by those in the setting, sharing information, and utilising available resources for action. Departing from a transformative position, the researcher established authentic, supportive, and collaborative relationships with all those involved in the school perceived as a community. The differential power relationships in the school...
setting should be acknowledged to further address issues of social justice, linking the results of social inquiry to action (Mertens, 2009).

1.6. RESEARCH DESIGN AND METHODOLOGY

The research was conducted in three separate but interrelated phases. The research design and methodology applied in each phase are briefly discussed with reference to each of the three phases in the research process. A detailed discussion of the design and methodology is presented in Chapter 4.

1.6.1. Research design

A qualitative, single instrumental case study design (Stake 2005; Yin 2003) was applied. Creswell (2007) is of the opinion that a single case study allows the researcher to obtain in-depth information. The author further describes how case study research is defined as a qualitative approach in which a bounded system is explored. In a bounded system multiple sources of information are used to obtain representative, detailed, in-depth data that led to a deeper understanding of the experiences and perceptions of the participants in the specific context (Baxter & Jack, 2008).

Case study designs are suited to research that asks “how” or “why” questions in a real-life context (Yin, 1994). These designs tend to develop from curiosity and the desire of wanting to understand complex phenomena in a social arena. This type of design is preferred when the researcher wishes to understand contemporary events but importantly, when the behaviours observed cannot be manipulated.
Case study designs allow for the generation of understanding which results in thick, rich descriptions of the case involving an exploration of a general problem in a specific setting (Rule & John, 2011). Gillham (2000) describes how human behaviour, inclusive of thoughts and feelings are influenced by the environment. The author therefore suggests that in order to understand people, in real-life, researchers need to study people in their context if they are to truly understand their behaviour. As the researcher wished to obtain an understanding of the members of the school community perceive and envision wellbeing, a case study design corresponded with the aims of the study and allowed for the researcher to gather detailed descriptions of the lived, everyday experiences of the participants. In addition, case study design allows for the creation of theoretical insights which can potentially be used to help understanding of other similar cases. This can lead to generalisation and/or transferability. In this case, the cumulative findings of the study will be used to develop guiding principles for the promotion of holistic wellbeing which can be applied to other schools for the Deaf in South Africa.

The instrumental case study selected in this study is a school for the Deaf in South Africa which accommodates learners from pre-school to Grade 12. The school is situated in an urban area in and has residential facilities. SASL is used as the language of communication with written English as text. A total of 98 learners attend the school, 48 of which make use of the residential facilities. There are 20 teachers at the School. The parents involved number 155. The selected case is described in more detail in Chapter 4 paragraph 4.4.
1. 6. 2. Research methodology

The School for the Deaf in which the research was conducted was purposively selected based on the fact that the school was established 56 years ago and represents a good example of a School for the Deaf in the South African context. The school typically accommodates learners across the spectrum from hard of hearing to Deaf from Grade 0 to 12 in small classes grouped according to mental capacity.

The school faces challenges that are representative of the challenges across the 47 Schools for the Deaf. These include decision-making at governmental level by politicians without any experience in Deaf education which leads to situations such as SASL being grouped with Braille as a tool of communication, rather than the language of the Deaf (Parkin, 2010).

The fact that teachers and principals are not specifically trained in Deaf education is a concern raised by Parkin (2010) and the lack of teacher fluency in SASL is raised by Magongwa (2010). Exclusion from equal opportunities in education has led to many Deaf school-leavers remaining almost illiterate, prohibiting them from effective integration into mainstream society (Magongwa, 2010). The selection of this specific case was convenient since it was close enough for the researcher to allow longitudinal engagements with the various participants over a period of six months.

Following permission from the Ethics Committee of the Faculty of Health Sciences to conduct the research, the researcher approached the officials from the Department of Education (see Appendix H) involved with the school in which she intended to conduct
research. After obtaining written permission from the school principal (see Appendix E), the proposed research was also introduced to the staff, the learners, and the house-parents (see Appendix F), by a colleague who was not directly involved in the research. A power-point presentation (see Appendix P) was made to the whole school and SASL concurrently used to ensure that everybody understood it. The parents were informed about the intention to conduct research during a parent meeting held in the school hall. A permission letter was available for parents to sign at the meeting (see Appendix E). A letter addressed to parents who could not attend the meeting was sent home with the learners. The letters requested their consent. Due to very limited participation from parents, the researcher did not include parents in phase 1 and 2.

Following this presentation each child and the group of staff members who agreed to participate received a consent or assent form and completed the forms (see Appendix A, B and C). The letters of consent and assent were signed on the day that data collection took place. Letters of permission were returned by most parents. The researcher then met with each group separately and described the details of the study and what participation would entail in SASL, as well as in spoken and written English.

The research for this case study was conducted in three phases and the methodology with reference to the selection of participants and the gathering of the data is discussed separately for each phase. The data was analysed using draw-and-write, draw-and-talk method across phases as well as visual data analysis in phase 1 as discussed in section 4.7.

1. 6. 2. 1. Phase 1 - Understanding learner experiences of promoting wellbeing
The aim of this phase of the study was to understand the learners' current experiences of wellbeing and to develop an understanding of the ways in which they envision wellbeing in the future.

Selection of participants

The intention was to include all 98 learners in the school in the study. However, in accordance with ethical principles, only those learners whose parents gave permission for their children to take part in the research were included in the activities. In addition to parents granting permission for their child or children to participate, only learners who gave their assent to participate and who were present on the day of the data collection were included in the research. The learner participants in this study therefore numbered 45 in total across the three phases. The number of participants from each grade in the three phases is indicated below. Due to the focus on academic work in the senior phase, there were fewer learners available for participation in data collection than learners in the foundation and intermediate phases.

- Foundation phase participants included Grade 1 (N=6) out of 7, Grade 2 (N=9) out of 9, Grade 3 (N=4) out of 4, the foundation phase remedial class (N=4) out of 5 and the foundation phase special needs class (N=8) out of 12 with a total of (N=31) out of 35
- Intermediate phase participants included Grade 4 (N=3) out of 4, Grade 5 (N=2) out of 5 and Grade 6 (N=3) out of 5 with a total of (N=8) out of 12
- Senior phase participants included Grade 8 (N=1) out of 6, Grade 9 (N=3) out of 6 and Grade 12 (N=2) out of 8 with a total of (N=6) out of 26
Data gathering

In the first phase of the research the methodology was phenomenological in nature as the focus was on obtaining an understanding of the learners’ lived experiences of the promotion of their wellbeing in the context of a bounded system, selected as a case study. Whitehead and McNiff (2006) describe lived experience as dynamic and ever-changing, as individuals learn about themselves through their on-going interactions with others and the environment. From a complex interactive dynamic perspective, it is in and through these interactions that wellbeing is promoted. The process is not viewed as an intervention that needs to take place, but rather as the recognition of everyday experiences that facilitate a sense of doing well and being well.

With this understanding of the value of the lived experience and the assumption that wellbeing is already present in the everyday actions and interactions within the context, learners were actively involved in the development of guiding principles for the promotion of holistic wellbeing at the School for the Deaf.

The data was collected during work sessions in which the learners were grouped according to their phases. The foundation phase group comprised 31 learners. Two work sessions for each class were planned on separate afternoon slots of half an hour each. The researcher worked with Grade 1 on Monday, Grade 2 on Tuesday, Grade 3 on Wednesday, the Remedial class on Thursday and the Special Needs class on Friday. The process was repeated the following week for activity 2. The activities took place after lunch in a covered court-yard area outside the classrooms. In the intermediate phase the researcher conducted a two hour work session with 8 learners, including Grade 4 (N=3), Grade 5 (N=2), and Grade 6
(N=3) learners. The session took place in the Grade 5 classroom. In the senior phase the researcher conducted a two hour work session with 6 learners including Grade 8 (N=1), Grade 9 (N=3), and Grade 12 (N=2). The Head of the Department for the senior phase made her classroom available for the activity.

In the work sessions all the learners were given two activities as indicated in Appendix I. They were first asked to describe their current experience of wellbeing; explained as *what makes them feel happy at school and helps them to do well*. Secondly, they were asked to describe *what they would like to happen at school to help them feel well and do well*. The learners in the foundation phase drew pictures to indicate what makes them feel happy and what they would like to happen in the future at school that would make them happy (see Appendix J). Learners in the intermediate phase produced collages with some words or statements to answer the questions (see Appendix J). The learners in the senior phase also created collages with words and statements to answer the questions (see Appendix J). Some learners spontaneously decided to write essays to answer the questions.

In phases 1 and 2, the method described by Mitchel, Theron, Stuart, Smith, and Campbell (2011) as ‘draw-and-write’ and ‘draw-and-talk’ was applied. The active role that children play in this method of data collection is highlighted as a pivotal aspect. Drawing is used as a stimulus for communicating and is helpful in getting in-depth insight into lived experiences. This method assisted the young participants to reveal views which they might find challenging to express in words alone, and is particularly relevant to learners in younger classes, remedial, and special needs classes where even signed vocabulary is quite limited.
On completion of the drawings, collages, or essays each learner was allowed time to explain to the researcher what their drawing, collage or essay entailed. Learners sat with their back to the group so that confidentiality was ensured as the other participants were not able to see the signed conversation. The discussion enabled the researcher to gain a deeper understanding of the meaning that the participants attribute to the promotion of wellbeing (Mitchel et al., 2011). The researcher used visual data analysis to analyse the drawings in the foundation phase; where items were placed on the page, the size of the images, the quality of the marking (Butler-Kisber & Poldma, 2010). The researcher asked each learner about their drawing to ensure that meaning was captured. The researcher made notes of the learner responses and this data was then analysed using theme analysis.

Butler-Kisber and Poldma (2010) describe collage making as a useful visual approach that facilitates researcher understanding of participant meaning because the method is an interpretive tool. The authors highlight the fact that there are many realities and ways of doing and understanding which develop out of human interactions and activities and these are contextually dependent. The learners in the intermediate phase chose to work individually or in pairs in the classroom to create their collages which were discussed with the researcher upon completion. The participants’ sat facing the researcher with their backs to the rest of the group while the group was supervised by a teaching assistant. The learners continued with their own activities or read a book during the time the researcher worked with individuals or pairs of learners to discuss the collages. The researcher made notes of the learner’s comments which were added to the data set.

In the senior phase, the learners worked independently to make collages or write essays. On completion of the collages and essays, the researcher took time to discuss each
participant’s work with them to ensure the researcher understood the participant’s meaning and to expand their responses. As mentioned before, these individual discussions took place in a private space in the classroom to ensure that the singled conversation between the researcher and participant could be confidential. All the participants had all been briefed on the importance of privacy and confidentiality which allowed the researcher to work on this activity with each participant without interruption.

1. 6. 2. 2. Phase 2 - Understanding teacher and other staff members’ perception on the promotion of holistic wellbeing

The aim of this phase of the study was to understand how teachers and other staff members perceive the experience of wellbeing at school and to develop an understanding of how they envisioned the promotion of wellbeing in the future.

Selection of participants

The intention was to include all staff members at the school who were informed about the proposed research in a staff meeting about the purpose of the study, and about what participation would entail (see Appendix F). The researcher assured the staff that their names and the names of the school would remain confidential and that the findings would be discussed only with the researcher’s supervisor. Feedback to the school would not reveal individual identities.

However, in accordance with ethical principles, only those participants who gave permission to take part in the research (see Appendix F) and who were present on the day of
the data collection were included in the research. The participants in the study therefore comprised a total number of 14 participants including teachers, teaching assistants, and management staff. The individual interviews were conducted after the group activities with participants who were not available during the work sessions or who did not feel comfortable with the group setting due to possible power differentials within the staff. The number of participants is indicated below.

- Teachers and teaching assistants in the focus group included teachers (N=7) out of 16, teaching assistants (N=2) out of 9, management staff (N=2), out of 5 with a total of (N=11) out of 34
- Staff who participated in the in-depth interviews (see Appendix N) included: a teacher (N=1) out of 16, management staff (N=1) out of 5, house-parents (N=1), out of 6 with a total of (N=14)

Data gathering

In the second phase of the research, the methodology was phenomenological in nature as the focus was on obtaining an understanding of the experiences and perceptions of the staff in the contexts of a bounded system. In this phase of the study the teachers and other staff members employed at the school were asked to share their understanding of how wellbeing is currently promoted, and to share their ideas for the promotion of wellbeing in the future.

The researcher conducted a semi-structured focus group interview with 11 participants, comprising teachers (N=7), management staff (N=2), and teaching assistants (N=2). Focus groups are described by De Vos, Strydom, Fouché and Delport (2011), as group interviews that allow for a researcher to better understand how a group feels about a
particular phenomenon, in this case the promotion of holistic wellbeing. According to Krueger and Casey (2000) focus groups can be less threatening than individual interviews and therefore helpful to obtain various perceptions. In this setting, due to difficulties between the teachers and the house-parents, the group setting was not conducive to some participant’s ability to share openly about their ideas and experiences. A certain amount of direction and structure is useful for moving the discussion along, for controlling dominant group members, and for drawing out reticent respondents (Stewart, Shamdasani & Rook, 2007).

The focus group interview had to be conducted over a period of two weeks due to the limited time available to get staff members together. The interview took place in a separate division of the staff room which is closed off by doors. This ensured that the meeting took place in privacy. Anonymity of the participating staff members could therefore only be partially protected by allocating codes to the information they provided. By definition all staff members were aware of the fact that they were part of the research study. Confidentiality was ensured by asking participants to respect one another and by not sharing information shared in the focus group with anyone outside the group.

In the first session the focus was on the participants perceptions of the current situation regarding the promotion of holistic wellbeing. In the second session the focus was on how they envisioned the promotion of holistic wellbeing in future.

In the first session the teachers and teaching assistants were presented with 3 vignettes (see Appendix K) to introduce the concept of the promotion of holistic wellbeing. Gourlay, Mshana, Birdthistle, Bulugu, Zaba and Urassa (2014) describe vignettes as short stories about a hypothetical person or situation. To ensure that the participants felt comfortable with data
collection, a choice of making either a collage or creating a mind-map was presented to the group. The participants were asked to construct collages or mind-maps to indicate how wellbeing could be promoted despite the challenges that the learners face. In other words they were expected to respond in a transformative way.

Collage-making and concept-mapping (see Appendix M) are described by Butler-Kisber and Poldma (2010), as useful visual approaches that can inform qualitative research as they are interpretive tools that inform experiential research approaches.

**In-depth Interviews**

In-depth interviews are described as conversations with a purpose (De Vos et al., 2011). The aim of the in-depth or unstructured interview is to gain a deeper understanding of the experiences of another person. The researcher wanted to understand on a deep level, building on from the data gathered in the focus group, how wellbeing is currently perceived at the school what ideas the staff members have for the promotion of wellbeing. The participants comprise management staff (N=1), teacher (N=1), and house-parent (N=1). The participants who gave in-depth interviews answered both research questions in 1 interview (see Appendix N). The interviews were conducted at a time and place convenient for each participant and were between one and two hours long.

1. 6. 2. 3. Phase 3 – Investigating current and anticipated activities and interventions to promote holistic wellbeing
The aim of the third phase of the study was to establish a collective understanding of the way in which holistic wellbeing can be promoted in a School for the Deaf. The process encompassed the identification of current and anticipated activities that can be linked to the themes that has been identified in the previous phases. Data was collected using the world café method involving 50 participants. The world café method is a conversational process that helps groups to engage in constructive dialogue around important questions, to build personal relationships, and to foster collaborative learning (http://www.theworldcafe.com). The World Café Method is described as a process whereby group members discuss set questions with the intention of generating new ideas which develop because of the collaborative nature of the method. The World Café is powerful because of the cross-pollination of exchanged information through the movement between tables made possible because of a café-style social context that allows for the sharing of information in a friendly, relaxed, and non-threatening manner (http://www.theworldcafe.com).

Selection of participants

A total of fifty participants participated (N=50) were involved in this phase of the study. The participants were purposively selected to represent the various subgroups that are involved on various levels in the school context. All staff members were invited to participate but only those who gave their consent and assent were involved (see Appendix G). The learners were selected based on their participation in the first phase which clearly showed a deeper understanding of the context, on their ability to participate because of their developmental level, and because permission to participate was granted by their teachers. The Grade 12 learners were not granted permission since they were involved in exam
preparation. There were five Grade 8 participants, six Grade 9 participants, and seven Grade 11 participants.

Members of the school management team (N= 5) including the principal, the deputy principal and the three HODs of the foundation, intermediate, and high school phases were selected because of the positions of influence they held in the school.

Teachers (N=10) from the three phases participated. There were five teachers from the foundation phase, two teachers from the intermediate phase, and three teachers from the high school. This selection included the two sign language teachers. All the teachers were invited to participate but only the ones who gave their consent were included.

The school employs 6 house-parents. As all house-parents participated, representatives from the senior and junior boys and girls hostels were included in the research process, (N=6). They comprised three house-parents from the foundation phase and three house-parents from the high school.

All the support staff employed at the school participated. The support staff (N=4) participants included the school nurse, the audiologist, the speech therapist, and the volunteer who conducts psycho-social intervention for the learners.

The parent who coordinates the support group for parents (N=1), and a teaching assistant (N=1) who also plays various roles in the school setting, namely parent, member of the school governing body, and representative of HI HOPES (early intervention program for the Deaf), also participated.
A representative from the school maintenance team (N=1), the bus driver (N=1), and the PRO (N=1), participated.

Leadership was represented by a school governing body member who is also a parent (N=1). For a perspective beyond the school setting, the director of education at DeafSA (Deaf Federation of South Africa; an organisation for the Deaf) participated (N=1). The Department of Education was invited to participate and two representatives were expected on the day but no representation materialised.

The participants were randomly allocated to one of the two groups by drawing names from a hat prior to the event. The learners were asked to participate but voluntary participation was obtained and their right to withdraw at any point, without consequence was explained in SASL prior to the event as well as on the day. One the day of the event, a SASL interpreter was used whilst the researcher introduced the event and explained the process of the day.

_Data gathering_

The question asked in this phase of study was: “How can the learners’ experiences and the teachers’ perceptions inform our understanding of the promotion of holistic wellbeing in School for the Deaf used as an instrumental case study?”
A World Café event was originally planned by the researcher. This is described by Brown and Isaacs (http://www.theworldcafe.com) as a conversational process that helps groups to engage in constructive dialogue around critical questions, to build personal relationships, and to foster collaborative learning. In the third phase of the study, following on from the analysis of results obtained from phase one and two (see Appendix O), a conversation was initiated between a group of participants which represented the various subgroups in the school community namely teachers, parents, house parents, learners, teaching assistants, management staff, administrative staff, therapists, volunteers, maintenance staff, representatives of organisations for the Deaf, and the school governing body.

**Data analysis**

The data collected was analysed using visual data and thematic analysis in Phase 1 and thematic analysis in Phase 2 and 3 of the study. Thematic analysis is described by Braun and Clarke (2006) as a useful and flexible method used to identify, analyse, and report patterns or themes in data in rich detail.

In this study the researcher employed inductive analysis and the data collected from the drawings, collages, concept maps, and discussion in the work-groups was coded without trying to fit the data into a pre-existing coding frame or the researcher’s analytic preconceptions. The thematic analysis is data-driven. The processes followed in phase one were replicated in phases two and three.
1. 6. 2. 4. Rigor of the Study

Tracey (2010) identifies eight key markers in qualitative research: a worthy topic, rich rigor, sincerity, credibility, resonance, significant contribution, ethics, and meaningful coherence. These key markers were applied in this study rigor. The way in which each of the key markers was applied in the study is discussed in Chapter 4.

1. 7. ETHICAL CONSIDERATIONS

The research reported in this article was conducted with an appreciation of the values stipulated by the Constitution of South Africa (1993) which include human dignity, equality, and freedom. Equally the philosophy of the DeafSA constitution which advocates respect for Deaf culture and equalisation of opportunity and commitment to the holistic empowerment of the South African Deaf, achieved through non-discrimination in race, gender, education, and social standing, and a focus on unity, transparency, accountability, and integrity, was acknowledged (DeafSA Constitution, 1999). A detailed description of the rigor of the study is discussed in Chapter 4.

Permission to conduct the study was obtained from the ethics committee of the Faculty of Health Science at the NWU. The ethical clearance number for the research is NWU-00060-12- A.

The researcher applied the following principles to ensure ethical research: voluntary participation, confidentiality, anonymity, the right to withdraw, and informed consent. The ethical procedures followed in each phase is discussed in Chapter 4.
1.8. KEY CONCEPTS

1.8.1. Holistic wellbeing

Holistic wellbeing is defined by Prilleltensky (2005) as individual, relational and collective sites with specific signs, sources, and strategies in which the wellbeing of an individual is dependent on the wellbeing of his or her relationships and community. Wellbeing is a positive state of affairs in which the personal, relational, and collective needs and aspirations of individuals and communities are met.

1.8.2. Deaf culture

Deaf culture is described as members of a collective group which have a shared history, a shared set of experiences of being deaf in a hearing world, shared institutions including schools and clubs, a language, art, music, and literature which pertain specifically to the Deaf (Sparrow, 2005).

Deafness does not directly affect a person’s intellectual capacity but relates to the ability to hear (Parkin, 2010). Atherton (2009) states that being part of the Deaf culture is reflected in the feelings that Deaf people have towards their deafness. They choose to embrace the word Deaf (with a capital D) and use it proudly, emphasising their affiliation to the Deaf community (Wilcox, 2006). The Deaf see themselves as participating in an alternative lifestyle and culture, as reflected in their feelings towards their Deafness (Sloss Luey, Glass & Elliott, 1995). This perspective on Deafness allows for personal and
communal attachment and relationships, as well as emotional security that help to establish a sense of belonging in the Deaf community (Atherton, 2009), that might enhance holistic wellbeing. However, Deaf learners might be more vulnerable due to mental health problems than their hearing peers, as a result of particular difficulties that their condition creates.

1. 8. 3. Schools for the Deaf

Schools for the Deaf are educational institutions which accommodate Deaf learners and many use sign language. In South Africa some schools for the Deaf use SASL as the primary language of communication but this is not consistent and not all teachers are proficient in SASL (Magongwa, 2010).
CHAPTER 2

THE PROMOTION OF HOLISTIC WELLBEING IN SCHOOLS:

A CONCEPTUAL FRAMEWORK

2.1. INTRODUCTION

In this chapter the conceptual framework for the study is presented. The framework on the one hand encompasses a community psychology approach (Duffy & Wong, 2000) that embraces an ecological perspective on the school for the Deaf. On the other hand a multi-level approach to the enhancement of wellbeing as advocated by Prilleltensky (2005; 2012), informs the research.

A complexity theory perspective is applied to facilitate an understanding of the non-linear, emergent nature of the interactive dynamics created in the process of promoting the wellbeing of all the members of a school which is perceived as a community rather than an organisation. This framework is applied to understand how a shift can be facilitated from an ameliorative focus on challenges to a preventative, transformative perspective.
2.2. A COMMUNITY PSYCHOLOGY APPROACH

Community psychology offers a basis for assisting people who are marginalised by the social system (Nelson & Prilleltensky, 2010). This makes it a suitable approach for addressing the issue of inequality which is often experienced by the Deaf.

Community psychology has a specific focus on social change that facilitates the equal distribution of resources, and on a balance between values, research, and action in the best interest of communities. The Deaf community often experience inequality in social, educational, and occupational domains and a community psychology framework provides a basis for transformation in these contexts since it acknowledges the impact of the
environment on the development of individuals and communities as well as the ways in which their wellbeing is promoted to ensure that social justice is achieved (Prilleltensky, 2012). A community psychology approach calls for a focus on value-based, collaborative work which encourages all members of a community to work together to create social change (Nelson & Prilleltensky, 2010), because people are understood within the system they live in and not as individuals in isolation (Swart & Pettifer in Landsberg, Kruger & Nel, 2005).

From a community psychology perspective schools are viewed as communities in which continuous interactions among individuals, as well as between individuals and their environments, take place (Visser, 2007a). The conceptualisation of schools as communities is furthermore informed by the work of Sarason (1974), Sergiovanni (1994a; 1994b) and Strike (2000, 2004). Sarason (1974) describes the importance of a psychological “sense of community” perceived as the acknowledged interdependence and a feeling of being part of a bigger dependable and stable structure. McLaughlin and Clarke (2010) elaborate on the notion of sense of community in schools by focussing on “school connectedness”, described as an interlinked group of activities and experiences, including relationships between school, community members, pupil satisfaction, a feeling of membership to the community, and traits such as participation and student voice. Strike (2000, 2004) argues that the school in a shared educational project in which coherence (a shared vision and language), cohesion (a sense of community), care (to engage students), and contact (the structural features of school) are essential elements.

A community psychology perspective also facilitates a shift in thinking from a narrow, medical model where the individual is understood in isolation will allow for an understanding of the individual as part of a broader ecological system which impacts the
individual. The ecological metaphor explains the relationship between individuals and the multiple social systems they are part of which are understood to play a role in human development (Bronfenbrenner, 1979). Environments impact individuals in different ways and this is understood as the person-environment fit. The individual and environment are not seen in isolation but understood together.

Bronfenbrenner proposed that the world of the human beings consists of a hierarchy of five systems of interactions. The five systems are the microsystem, mesosystem, exosystem, macrosystem and chronosystem. The macrosystem constitutes systems of belief which are contextually bound which in turn influence the development of personal characteristics and largely depends on the options that are available in the given culture, society or community (Swart & Pettipher, 2011). The macrosystem is considered a “cultural blueprint” which comprises cultural beliefs, resources, opportunity structures, life-course options etc. (Bronfenbrenner & Ceci, 1994). Swart & Pettipher (2011) argues that the macrosystem of the individual has an impact on the nature of interactions of all the other levels, thus providing structure and content to the inner systems. Changes in the macrosystem might have a reciprocal influence therefore changing communities, classroom systems, families and ultimately the adolescents themselves.

Within this macro-system the microsystem, is the most profound systems in terms of the direct influence on the individual as it consists of the direct environment or setting, such as family or school. The microsystem, according to Bronfenbrenner (1979), is portrayed by a complex configuration of activities, social roles and interpersonal relationships in the immediate setting. Microsystem level context include family relationships, which according to the ecological systems theory are transactional, as both the adolescent and family members
affect and are affected by one another (Schweiger & O’Brien, 2005). In addition to school and family, other microsystems that play a significant role in the development of adolescents include the peer groups and the immediate neighbourhood in which the individual live.

The mesosystem consists of the interrelationship between two or more of the microsystems. According to Swart & Pettipher (2011) experiences in one microsystem (such as learner-teacher relationship) may influence interactions in another microsystem (such as teacher-parent relationship). The exosystem also inhabits the space between the micro- and macrosystems (Liao, Lee, Roberts-Lewis, Hong, & Jiao, 2011), such as institutions and practices which influences other microsystems in which the adolescent has proximal relations. The exosystem can either empower or degrade them, especially when the exosystem is under stress. The chronosystem refers to the changes that took place over time within the person and the environment in which they function.

Bronfenbrenner’s model clearly indicates that individuals are active participants in their development and their individual perceptions and experiences of their contexts play a fundamental role in understanding how they will interact with their environments. Bronfenbrenner also identified four interacting dimensions which need to be considered when understanding human development in systems or contexts namely proximal processes, person characteristics, systems/contexts and time (Bronfenbrenner & Ceci, 1994).

Proximal processes are interactions which occur regularly and over extended periods of time. The effectiveness of these processes are dependent on the biopsychosocial characteristics of the individual, the environment (immediate/microsystem and distant/macro- and mesosystems) in which the processes occur. From a bio-ecological perspective these
proximal processes are guided by the characteristics of the individuals as well as the contexts (micro-, macro-, mesosystems) in which they function.

Swart and Pettipher in Landsberg, Kruger and Nel (2005) and De Jong (2013) explain that an individual’s development is understood to be affected by experiences in each of the layers of the ecosystem, and disturbances in one layer have a ripple effect on corresponding layers.

The application of a community psychology approach therefore implies that a School for the Deaf is perceived as a micro-system functioning within a larger macrosystem that includes policy on the integration of the Deaf in society.

2.3. A MULTIPLE-LEVEL APPROACH TO THE PROMOTION OF WELLBEING

Research in wellbeing has been growing over the last few years. Two approaches have emerged namely the hedonic tradition which embraces constructs such as happiness, positive affect, low negative affect, and satisfaction with life; and the eudaimonic tradition which embraces positive psychological functioning and human development (Dodge, Daly, Huyton & Saunders, 2012). Various authors define wellbeing on individual and relational domains but an integrated approach, and the one applied in this study, is defined as holistic wellbeing comprising individual, relational, and collective wellbeing (Prilleltensky, 2005). This study takes a wellbeing perspective on how to conceptualise and promote health and wellbeing at a School for the Deaf.
2. 3. 1. The Promotion of Individual Wellbeing

Ryff (1989) describes individual wellbeing as a multi-dimensional process. Ryff and Singer (1998) interpret this concept as engagement in living impacted on by intellectual, social, emotional, and physical possibilities; and an explanation of what a good life entails, namely purpose in life, quality relations with others, self-regard, and mastery. Individual wellbeing is therefore defined by Ryff (1989) as self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth; a multi-dimensional process.

Ryff (1989) describes a model of eudaimonia which includes autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. His hedonic approach focuses on feelings of contentment with life, consisting of life satisfaction and happiness. This definition of individual wellbeing which proposes a new way of understanding positive human health comprises cultural, social, psychological, and biological components, all of which are connected. It mirrors the socio-ecological framework which highlights the interconnectedness of physical, biological, psychological, social, and cultural factors in various systems which affect and are affected by each other; the approach used to understand how wellbeing is impacted on by forces in the environment at a School for the Deaf (Swart & Pettifer in Landsberg, Kruger & Nel, 2005).

From a western perspective, wellbeing and health promotion is often described in negative terms of what health and wellbeing are not, rather than by what wellness and positive functioning are (Ryff & Singer, 1998). Physical symptoms and social and family problems are often used to assess health and wellbeing; an illness perspective. What this
study aims to achieve is rather an understanding of how wellbeing can be achieved through prevention and transformation by utilising community strengths.

Keyes (1998) also extends the conceptualisation of individual wellbeing to include social dimensions. Social wellbeing is described as incorporating social integration, social contribution, social coherence, social actualisation, and social acceptance. The author proposes that social wellbeing increases with education, and is impacted on by socio-economic status and age because of the person’s ability to manage their social interaction experiences. Keyes (1989) claims that people do not start with, or keep the same resources or opportunities for social wellbeing. Education promotes opportunity while low socio-economic status negatively impacts physical and mental health. Social integration is understood to be linked to a positive experience of community. Healthy individuals understand society as positive, with a view of themselves as social resources, experiencing feeling cared for safe in their communities, and leading meaningful and coherent personal lives.

Keyes (2000) states that the self collects information about the self in relation to the social world. This is achieved when the individual takes heed of appraisals; comparing self to others to makes sense of one’s experiences. The self, according to Keyes is understood when the individual compares him or herself to both positive and negative standards. The importance of the social aspect of wellbeing is acknowledged in this study because of the importance of community and a sense of belonging to the Deaf culture experienced in the residential school for the Deaf.

According to Ryff and Keyes (1995) psychological wellbeing can be experienced if
people feel that their lives have purpose, if they feel as if they are realising their potential, by how connected they are to others, and if they feel in control of their own lives. What the authors highlight is that there is more to wellbeing than feeling happy and satisfied with life.

2.3.2. The Promotion of Relational Wellbeing

Relational wellbeing refers to the enjoyment of a quality life where the individual has food, housing, is part of family and a community, feels no pain, fear, or anger; where feeling good and the positives in life are more prominent than negatives (McCubbin, McCubbin, Zhang, Kehl & Strom, 2013).

McCubbin et al. (2013) stress the importance of the community in their definition of relational wellbeing. Community is understood as important in the creation of a sense of belonging for the individual. The relational perspective highlights that the individual, family, community, and society are interconnected and inseparable. This definition of relational wellbeing corresponds to the ecological perspective of human development where the individual and society are interconnected. What this thinking proposes is that connection with a sense of place facilitates a sense of continuity where specific beliefs and values are upheld (McCubbin et al., 2013). McCubbin et al. (2013) place value on the family and society in experiencing relational wellbeing. The authors indicate that a relational perspective is based on the understanding that wellbeing is a process of choosing, selecting, and balancing what are considered important aspects of wellbeing. What is acknowledged in this study, and mirrors the ecological perspective of understanding human development, is that the individual, family, community, and society are interconnected and inseparable, as indicated by Swart & Pettifer in Landsberg, Kruger and Nel (2005).
According to McCubbin et al. (2013) relational wellbeing provides a framework for understanding the functioning of individual and family systems and because of this can be used to develop strategies for intervention. This framework calls for skills in resilience, community engagement, financial security, cultural practices, family commitment, and health, with success achieved if communities take heed of these principles and meaning is found. In the research setting the importance of relationships between learners, staff, and families, as well as a sense of belonging to the Deaf culture, are understood to be important aspects of learner resilience, as indicated in the literature (Erlich, 2012) and is therefore acknowledged in the researcher’s aims to understand how wellbeing is currently experienced and can be promoted in the setting.

Cognisance is taken of the individual and relational conceptualisations of wellbeing described by Ryff and Singer (1998), Keys (1998) and McCubbin (2001). Ng and Fisher (2009) also suggest that the promotion of wellbeing needs to happen on multiple levels. These authors recommend that the work of Prilleltensky (2005) be applied as a basis for a multilevel approach that conceptualises wellbeing as a holistic process in which personal, relational and collective needs and aspirations of individuals and communities are fulfilled, as proposed by Evans, Hanlin and Prilleltensky (2007). In this approach wellbeing is found in three domains or sites namely the personal, relational, and collective (Prilleltensky, 2005).

According to Nelson and Prilletensky (2010) personal wellbeing is achieved through individual control, self-esteem, the ability to choose, being able, being independent, exercising one’s political rights, and having a positive identity. At the relational level, the authors describe wellbeing as generated by supportive relationships and being part of social
networks. At the collective level, the ability to gain access to resources creates opportunities for wellbeing. Wellbeing is thus achieved through a balance between personal, relational, and collective needs in individuals, families, settings, communities, macro-level structures, and policies.

What is evident from the literature is that the sites, signs, sources, and strategies of wellbeing all interconnect. Evans and Prilleltensky (2007) describe the sites of wellbeing as the location of wellbeing; in persons wellbeing is found in the sites of emotions, thoughts, and phenomenological experiences. In the sites of relationships wellbeing happens through care and compassion, and through both formal and informal support. In relationships, the sites of wellbeing also encompass exchanges of material and psychological commodities. In communities, wellbeing is experienced when individuals have access to affordable housing, an unpolluted environment, and access to transport, health care, and education (Prilleltensky, 2005).

Signs of wellbeing, according to Evans and Prilleltensky (2007) on a personal level become known through looking at connections; by asking people to share their experiences about what conditions lead to a high quality life, and it is highlighted by self-determination, self-control, self-efficacy, physical and mental health, experiencing optimism, finding meaning, and developing spirituality. The authors further describe signs of relational wellbeing as caring, acknowledging differences between people, allowing people the freedom to be, reciprocity, and inclusive and collaborative decision making. Collective wellbeing is experienced when resources are shared equally, when power is shared, and when people are not discriminated against.
The sources of wellbeing as proposed by Prilleltensky (2005) include on a personal level self-determination, meaning that individuals experience opportunities for self-control and have opportunities to voice their opinions. In the relational domain, wellbeing is highlighted by caring and compassion linked to trust, nurturance, and affection. Collective sources of wellbeing can be identified where there is evidence of progressive systems governing communities.

Strategies for wellbeing should include a combination of strategies for personal, relational, and collective change to achieve optimal levels of wellbeing (Evans & Prilleltensky, 2007). The authors further state that the wellbeing of a site is reflected by a particular sign which derives from a particular source and is promoted by a particular strategy.

What Evans and Prilleltensky (2007) mean is that the promotion of holistic wellbeing attends to individual, relational, and collective wellbeing of communities since the promotion of collective wellbeing enhances personal wellbeing and depends on relational wellbeing. The authors argue that although it is easier to encourage strength-based intervention but it is much harder to change community conditions at a collective level, the issues nevertheless needs to be addressed otherwise the unjust way things currently are may simply continue; a situation of unfair power relations which impact those who are marginalised and oppressed. In this study, a wellbeing perspective is applied to the way in which problems are identified and addressed, and the desired outcome is to move away from an illness/ameliorative perspective to a transformative perspective based on identifying community strengths and preventative strategies.
2.4. PERSPECTIVES ON THE PROMOTION OF WELLBEING IN SCHOOLS

The promotion of wellbeing in schools is discussed as part of the conceptual framework. Specific reference is made to various global and local perspectives on the phenomenon.

2.4.1. A Global Perspective

The commitment to addressing health and wellbeing in schools is a worldwide endeavor supported by the Ottawa Charter (WHO, 1986) which, which promotes participation, democracy, and health together in a whole-school approach (Tones, 2005). International policies in education that impact health and wellbeing in schools include the Dakar Framework for Action which developed out of The World Education Forum where an international commitment to education for all was made (Dakar Framework for Action, 2000). This framework refers to The Universal Declaration of Human Rights and the Convention on the Rights of the Child, which state that all people have a human right to an education that meets their basic learning needs in the best way possible, as well as being taught how to live together and how to be.

The Salamanca Statement and Framework for Action on Special Needs Education, adopted by the World Conference on Special Needs Education: Access and Quality (The Salamanca Statement, 1994) states that the policy of inclusion should guide educational policy. Inclusion in education favours schools for all where differences are accepted and promoted and learning support provided in response to individual needs.
The call made by the WHO (1986) is upheld in the Salamanca Statement, and was signed by 92 countries in 1994 (UNESCO, 1994); it proposes the development of an education and training systems that allows for all children to participate actively in their education processes. Active participation in processes that impact their wellbeing allows learners to take ownership which promotes social justice and equity in education (Nelson & Prilleltensky, 2010).

Bujis (2009) highlights how the Millennium Development Goals and the SHE network in Europe state that every child has the right to be educated in a health-promoting school. Warne, Snyder and Gillander-Gådin (2013), report that the Commission on Social Determinants of Health (CSDH, 2008) has challenged European countries to make schools healthy for children. This is deemed achievable through schools identifying challenges and addressing them as a way to improve the context and conditions of learning. The European network of health-promoting schools proposes the development of a healthy lifestyle for all school community members through the creation of supportive environments.

In Australian schools, Mind Matters (Wyn, Cahill, Holdsworth, Rowling & Carson, 2000), has been developed to promote the mental health and wellbeing of young people. In the Mind Matters Programme, teachers are regarded as responsible for preparing and equipping leaners to help promote their mental health; the programme thus speaks directly to the core responsibility of teachers. It was reported in Hong Kong that schools which adopted a health promotion framework, heightened learners’ satisfaction with life (Lee, Cheng & St. Leger, 2005).
Describing what health in a health promoting school encompasses, the research indicates that schools which link health and education, and which allows schools to become better places, result in health promoting schools. Schools that are described as better places include schools in which learners are excited to be, where learning is a pleasurable experience, where teachers are happy to work, and finally where the school environment is inclusive and the whole school community involved and invested in the health promotion of the school (Buijs, 2009). These attitudes lead to schools building health knowledge and fostering the development of cognitive, social, and behavioural skills. This is when health is deemed to have been achieved in a health promoting school. The WHO revised the Global School Health Initiative (WHO, 1998), and states that a health promoting school aims to continually enhance its capacity for health, including health for living, learning, and working. The WHO (1989) further describes health-promoting schools as places that can provide and maintain healthy settings which is achieved when all members of the school community work collaboratively to give students positive experiences, and when the structures facilitate health promotion (Hoyle, Samek & Valois, 2007). The authors highlight how this approach of collaborative intervention in healthy schools initiatives can promote wellbeing, reflecting the eco-systemic nature of health promoting schools (Hoyle et al., 2007).

The aims of the health-promoting school, as indicated by Buijs (2009) are: enhanced learning outcomes, social justice and equity promotion, safety, supportive environments for all, encouragement of learner participation and empowerment. Implementing principles of the transformative paradigm where social justice and equity guide thinking and practice to effect change in social conditions where needed, allows all members of a community the opportunity to participate in the decisions that affect their lives.
The above principles match Prilleltensky’s (2005) guidelines of how holistic wellbeing can be promoted when the voices of all members of a community need to be heard; when intervention is designed to improve community conditions, is achieved through empowerment and transformation, and thus addresses injustice and inequality. Health promoting schools aim to increase the voices of children in the educational setting (Buijs, 2009) a sentiment that resonates with Nelson and Prilleltensky’s (2005) claim that the voices of children are seldom heard in educational settings.

The researcher concurs that the ways in which this can be achieved include collaboration with parents and the local community and by the school integrating health into its ongoing activities. Extending ways to incorporate health and wellbeing into the school system includes access to the curriculum and by setting realistic goals in schools built on accurate, evidence-based data. Healthy schools encourage improvement through accurate and transparent monitoring and evaluation, motivated by the knowledge that schools can contribute to the health and wellbeing of learners (Buijs, 2009). Networking and collaboration with other schools is encouraged, as is building onto existing structures wherever possible, to create sustainable school development.

Busch, Leeuw, de Harder, de Schrijvers, and Petrus (2013) state that learner and teacher wellbeing is promoted through parent engagement in the school, as is evident in healthy schools. Parental involvement is seen to have a positive effect on the wellbeing of learners.

Colquhoun, in Jensen and Clift (2005) states that health promotion is not considered the core business of schools and this attitude impacts on the health-promoting schools model.
Recently however, a paradigm shift has occurred, which the researcher wishes to bring to the notice of the School for the Deaf in South Africa; a model where health, wellbeing, and educational success are linked. This shift challenges the long-standing split between school and health sectors to integrate educational theories and practices to achieve health outcomes (Rowling, 2009). Konu and Rimpelä, (2002) state that health in schools was previously understood as a separate aspect of school life which makes it challenging for health promotion to become part of the way schools function on a daily basis. The authors further state that health programmes in schools have begun to move to a broader interpretation of health but that these programmes still emanate from the theory of health and health promotion, and not from a concept of wellbeing promotion. This critical thinking is acknowledged in the current research setting and the researcher aims to incorporate a wellbeing perspective of health and wellbeing promotion at the School for the Deaf to initiate a process of holistic wellbeing.

The authors Konu and Rimpelä (2002) comment that health promotion should be built on systems and values that include the perspectives of all learners in the school setting which will potentially allow for the development of supportive environments. The authors propose that this can be achieved through a socio-ecological approach to health, incorporating social, physical, and psychological aspects which the researcher will apply to this study. Warne et al. (2013), state that in schools, the settings approach focuses on developing environments that promote individuals in relation to a larger context. The authors describe how the school, based on a systems perspective, is part of a larger complex dynamic system. Warne et al. (2013) describe how this wider system’s approach includes home, work, and society; the basis from which wellbeing promotion is understood at the Schools for the Deaf.
2.4.2. A South African Perspective

With regard to the national policy on the promotion of holistic wellbeing and the intention to provide ‘quality education for all’ in schools in South Africa, the Department of Education proposes an inclusive learning environment to develop the personal, academic, and professional domains of all learners without discrimination (Department of Education, 2001). The Education Act (DoE, 1996) and the White Paper 6 (DoE, 2001) propose the same principles of the Dakar Framework for Action (2000), and the Salamanca Statement (2004), where education designed to meet the needs of all learners should be delivered, and where the efforts of the directorate of inclusive education are acknowledged. The Education White Paper 6 on Special Needs Education (DoE, 2001) calls for a supportive and inclusive psychosocial learning environment in all schools.

To address health and wellbeing and address problems of human behaviour in schools in South Africa, a health-promoting schools network was established along national policy guidelines (Department of Health, 2001; 2008). In the interest of promoting wellbeing and the holistic development of schools, five areas of action have been proposed by the network. These are: safe and supportive teaching environments, school partnerships, curriculum intervention which focuses on skills development, education support services, and a focus on preventative health promotion (Lazarus, 2007).

The ecological nature of this framework which is highlighted by Naidoo and Wills (2000) who comment on how the framework calls for health and wellbeing in schools to be continuously promoted in a in a physical environment, and upheld by relationships in the school and the community to impact on the quality of education and care received by the
learners. Whilst the framework offers a means by which to address school problems, its approach is limited when it comes to the promotion of wellbeing.

Konu and Rimpelä (2002) argue that health promotion programmes tend to derive their conceptual basis from the theory of health and health promotion but not from the concept of wellbeing and identify the gap that this study aims to address. Swart and Reddy (1999) report that the Health Promoting Schools movement attempts to create health promotion in schools across South Africa but that in reality, the different networks need to work collaboratively to ensure progression. Efforts to address health in schools have been initiated. The policy of inclusive education as prescribed by the White Paper 6 (DoE, 2001) indicated support at governmental level as learners are included in educational settings despite learning difference and through support provided to school by DoE district-based support teams (Prinsloo, in Landsberg, Kruger & Nel, 2005). What is called for is support which addresses health and wellbeing from a wellbeing perspective.

Resilience is described as a facet of wellbeing (Prilleltensky, 2012). Theron and Theron (2010) state that resilience is understood as ‘bouncing back’ from adversity, and is a phenomenon often experienced in societies where wellbeing is threatened. The authors comment that international resilience studies increasingly show that the capacity to bounce back is nurtured by multiple resources which protect against further risk, and that these resources are embedded in the culture of the community.

Theron and Theron (2010) in reference to the literature on resilience in South Africa, comment that the focus has predominantly been on what forms the basis of resilience. In other words the findings have contributed to the understanding of the resources and
protective factors that impact resilience. According to Theron and Theron (2010) this knowledge has contributed to strategies and interventions that promote resilience. Moreover, they note that resilience is boosted by everyday resources. Everyday resources are thus available to the individual, family, community, and culture and available to people affected by adversity. Awareness of the value of everyday resources linked to wellbeing promotion is noted for this study.

Theron and Theron (2010) promote a collaborative, trans-disciplinary approach to widen access to health in South Africa. They add that acknowledgement of how culture and context impact strategies which promote wellbeing is needed, highlighting the eco-systemic perspective of their understanding of health and wellbeing promotion. The authors raise awareness of the paucity of culturally distinctive health-promoting ways of communicating and relating to communities in South Africa. This is a reality noted in this research and the study aims to address the paucity of communication strategies and relating to the Deaf in health promoting ways. Theron and Theron (2010) also discuss the importance of understanding how cultural practices enable young people; for schools to promote wellbeing, they state that the cultural values which schools ascribe to, and the ways they can be linked to health-promotion and resilience, need to be made evident. The authors reflect on what culture teaches us about problem-solving approaches, assertiveness, and system-appropriate behaviour that can be harnessed to promote resilience.

In South African schools efforts have been focused on ameliorative support and a call is made to shift this to transformative practice which approaches health and wellbeing from a strengths-based empowerment framework. Due to limited human resources, the current support provided to learners in the School for the Deaf is not sufficient to address all the
challenges which beset the promotion of holistic wellbeing. To initiate the process in South Africa, the researcher will aim to incorporate the resources and strengths which currently protect Deaf children and adolescents in the school against risk, as a point of departure for the enhancement of future experiences of wellbeing. The findings of resilience studies in South Africa are fragmented and a call to strengthen resilience through the collaboration of health and wellbeing initiatives is therefore made. This requires an understanding of the global and local challenges faced by school-going populations.

2.5. CHALLENGES TO THE PROMOTION OF WELLBEING IN SCHOOLS

What is highlighted by the current global literature is that children and adolescents face challenges in their daily lives (Jamal, Fletcher, Harden, Wells, Thomas & Bonell, 2013). These challenges impact their wellbeing and ability to take full advantage of opportunities for teaching and learning at school (Duncan, Magnusen, Kalil & Zoil-Guest, 2012). Schools are therefore coming under increased pressure to solve the wider society problems that impact the school-going population (Colquhoun, in Jensen & Clift, 2005).

The challenges faced by the current school-going population include emotional and behavioural problems (Stene & Thomas, 2014), drugs, and alcohol usage (Heck, Livingstone, Flentje, Oost, Stewart & Cochran, 2014; Futrell, 1996; Stewart, 2004), inappropriate behaviour (Comancho, Anderson, Moore & Furlonger, 2014), psychological problems, the impact of these on teacher attitudes towards learners (Moldavshy, Pass & Sayal, 2014), child abuse (Chinwa, Aronu, Chukwu & Obu, 2014), and the impact of health on learning (Moore, Wehby, Hollo, Robertson & Maggin, 2014).
Examining inappropriate learner behaviour, bullying is found to be a common problem in schools (Hansen, Hasselgård, Undheim, Indredavik, 2014). The effects on those being bullied are: lowered goals and dreams, diminished self-esteem, feelings of being left out and feelings of being alone, all of which can lead to increased absenteeism and illness. Students with disabilities are greatly affected by bullying and are more vulnerable to this phenomenon that non-disabled learners (Young, Ne’eman, & Geiser, 2011). Bullying affects not only bullies, their targets, teachers, and bystanders, but also affects the health of the whole school community. Linked to bullying behaviour, the negative impact of gang membership and peer pressure are noted in schools (Derksen & Strasburger, 1996; Futrell, 1996).

Another form of inappropriate behaviour in schools is the adolescent use of drugs and alcohol. The side-effects and risks attached to these practices are: the risk of developing substance use disorder, a deficit in psychosocial skills development, and the possible development of psychological problems (Mash & Wolfe, 2010). The authors highlight the implications of drug and alcohol usage which include poor academic achievement, increased failure, increased delinquency, and possible family conflict, all of which impact the health and wellbeing of learners.

The inappropriate behaviour of children and adolescents has been a long-standing societal concern with many children and adolescents displaying anti-social, destructive, and violent behaviours. The authors describe this pervasive problem as occurring across all social classes and family types, in males and females. Conduct problems and anti-social behaviour affect the developing person’s ability to function in multiple settings. Psychological and
emotional wellbeing and their health are often depleted as a result of inappropriate behaviours.

High rates of sexual abuse are reported in the research (Duval, 2005). The author argues that sexual abuse can have a significant impact on the wellbeing and development of the child or adolescent and can lead to acting-out through delinquent behaviour, drug use, promiscuity, and self-destructive behavior (Mash & Wolfe, 2010). Abuse can also affect an individual’s ability to integrate and function effectively in society (Jamal et al., 2013).

According to Jamal et al. (2013) the global challenges faced by children and adolescents in their home environment which impact on their wellbeing in schools include poor approaches to parenting and lack of parental supervision at home. Child abuse, family violence (Haugaard & Feerick, 1996), and a decline in the morals of society in general (Noddings, 1996) also affect wellbeing. The lack of effective parenting and care which often result from poverty is noted (Duncan et al., 2012). The authors reveal that neglected children may suffer from physical health problems, limited growth, and increased complications in other health conditions, and consequently fail to thrive. Emotional neglect, as stated by Mash and Wolfe (2010), including witnessing violence at home, affect the developing child and can influence sleep patterns and have health implications. Failure to thrive and sleep disturbance impact the ability of children to focus on learning; those exposed to violence and trauma tend to focus their thoughts on their disruptive home environments and not on teaching and learning opportunities (Duncan et al., 2012). Mash and Wolfe (2010) comment that young children require the most care and are often the most common victims of abuse and neglect. They state that young children affected by maltreatment are more often than not.
disadvantaged and therefore more vulnerable than those who come from more privileged backgrounds.

Cantón-Cortés, Cortés, & Cantón (2011) discuss the implications of abuse and maltreatment. They describe how victims of abuse and maltreatment often feel they have no power and experience feelings of betrayal. These feelings can negatively impact the victims’ views of themselves and can result in feelings of self-blame and guilt, affecting the way they interact with those around them.

What is highlighted by Mash and Wolfe (2010) is that children who are exposed to maltreatment can develop inappropriate attachments which is understood to have a negative impact on emotional regulation; the ability to control emotions and respond in appropriate ways, including outbursts of anger and depression; self-harm behaviours, and physical and verbal aggression towards their peers. This can result in being rejected and isolated causing further challenges to wellbeing promotion.

As discussed by Oluwatoyn (2013) socioeconomic status is a major contributing factor the psychological wellbeing of a family. The author comments on the negative consequences of low income and poverty on child development; lower academic achievement, poor physical health, and problematic or delinquent behavior. This is understood to affect school performance which can lead to socio-emotional stress. Social-emotional stress is identified by Oluwatoyn as having a negative impact on child development, including cognitive functioning, academic achievement, and socio-emotional functioning. The author describes how disobedience, impulsivity, anxiety, and depression in
adolescents are affected by poverty - with persistent poverty having a significant impact on the developing child or adolescent.

Health-related disorders are seen to negatively impact the health and wellbeing of children and adolescents and this is a global reality faced by many families. Chronic illness affects normal living and disrupts daily activities such as schooling and social interaction which impact development and adjustment in childhood (Mash & Woolfe, 2010).

The literature highlights the many challenges faced by South African schools today. These include disciple problems, school drop-out, teenage pregnancy, and drug usage, with many children exposed to the effects of poverty and lack of opportunity (Bezuidenhout, 2008). Schools face the challenges of mental health problems in learners (Plüddermann, Mololele, Myers, Townsend, Lombard, Petersen-Williams, Carney and Nel, 2014), challenges faced by historically disadvantaged learners with regard to educational opportunities (Zeelen, Rampedi & van der Linden, 2014), challenges faced as a result of bullying for both victims and perpetrators (Erbahor, 2013), challenges faced by learners with emotional and behavioural problems (Richards, Pillay & Fritz, 2012), and challenges caused by illness and death which affect individuals, families, and communities (Cluver, Operario, Lane & Kganakaga, 2012).

Jamal et al. (2013) comment that schools in the developing world are faced with the reality that many children and adolescents engage in multiple health-risk behaviours which are likely to impact on their wellbeing. These behaviours include smoking, drinking, drug use, violence and sexual risk; all of which most commonly occur in economically disadvantaged groups. The authors discuss how children and adolescents adopt various
strategies to cope with the challenges in their daily lives. These strategies often produce a cycle in which acting tough or escaping the school environment and encountered challenges can lead to more aggressive behaviours as well as increased substance abuse. The behaviours mentioned by Jamal et al. are evident in the School for the Deaf and their impact on the experience of holistic wellbeing is noted.

Jamal et al. (2013) highlight the lack of discipline as a threat to the wellbeing of children and adolescents at school. Wolhuter and Steyn (2003) comment on poor learner discipline in South Africa and is augmented by Pienaar (2003) who states that discipline has collapsed in many South African schools. The breakdown of behaviour can lead to further challenges faced by school communities.

Jamal et al. (2013) concur with Maree (2005) who highlights that bullying is prevalent throughout South African society, including schools. This behavioural problem has been associated with diminished school performance, a lack of social skills, and feelings of hopelessness about the future (Jamal et al., 2013; Noddings, 1996). According to Jamal et al. (2013) and Townsend, Fisher, Chikobvu, Lombard & King (2008), the effects of bullying in South Africa can result in psychosomatic complaints, depression, anxiety, and ultimately suicide. The authors add that bullies tend to have criminal convictions by the time they reach adulthood and have more diagnosable psychiatric disorders than those who do not bully.

In addition to challenges faced directly in schools, South Africa has a high rate of violence and crime, and the impact of violence on the developing child or adolescent is noted (Bezuidenhout, 2008). The number of people exposed to violence or to witnessing trauma in South Africa is high, often leading to the development of post-traumatic stress disorders.
(Atwoli, Stein, Williams, McLughlin, Petukhova, Kessler & Keon, 2013). In South African society, Bezuidenhout (2008) comments that adults and children who witness violence tend to be passive and withdrawn which can lead to low self-esteem. Violence-exposed children are more likely to experience social and behavioral problems (Wigham, Hatton, & Taylor, 2011), and often experience future violence; a cycle-of-violence occurs where victims of violence become perpetrators of violence. Violence and community dangers affect learners’ ability to focus on teaching and learning opportunities as they are burdened by worrisome thoughts (Duncan, et al., 2012). These challenges present frequently at the School for the Deaf where pupils are exposed to violence and crime. As a result the children are reluctant to focus on teaching and learning opportunities, and experience challenges in their interactions with their teachers, peers, and house-parents.

In addition to the effects of trauma, Barbarin and Richter (2007) note that maltreatment frequently occurs in South African society, which impacts the wellbeing of children and adolescents. Mash and Wolfe (2010) discuss the impact that child abuse and neglect has on the developing child. They disclose that abuse and neglect have a negative impact on relationships but when this occurs in relationships that are supposed to be supportive, the impact is magnified. Environments where abuse and neglect are prominent rarely have the ability to guide the development of children. Bezuidenhout (2008) describes how children exposed to physical and emotional harm, and who do not have appropriate role-models often develop delinquent behaviours themselves. Achievement, cognitive processing skills, and self-esteem are negatively affected by exposure to maltreatment (Veltman & Browne, 2003). The experience of maltreatment affects children in their living environments and their ability to thrive in a school context, highlighting the eco-systemic nature of development where influences in one context can impact other contexts.
Building onto this argument, Atwoli et al. (2013) comment that children exposed to maltreatment can experience suicidal tendencies. They are also identified as being at increased risk for the development of long term stress disorder and can develop a fear of being alone. Sadly, over time, children exposed to maltreatment on a regular basis become less capable of identifying the perpetrators and often find themselves in further abusive situations (Bezuidenhout, 2008). The environment in which the children reside therefore impacts their wellbeing, and the consequences thereof filter from their homes to their schools, to their ability to function in the wider society.

Nelson and Prilleltensky (2010) highlight the impact of disadvantage and oppression on children and adolescents. The authors express how poverty, a major influence in the promotion of wellbeing, tends to result in physical needs being unmet. Children affected by poverty and disadvantage are often marginalised from society and do not have access to the opportunities which their non-poor peers have access to.

Nelson and Prilleltensky (2010) add that many poor and disadvantaged children suffer or die from HIV/AIDS, malnutrition, starvation, and violence, and many children are orphaned. These children have a lower life expectancy than those not affected by poverty. Children living in isolation have limited interaction with communities, extended families, and friends and as a result, lack access to resources and services. Quality of life and prospects for a better future, and therefore wellbeing, is hampered by these conditions.

Many children and adolescents in South African are not raised in ideal stable family homes which has consequences in their health development (Bezuidenhout, 2008; Pharoah,
HIV/AIDS has become a reality faced by many people in South Africa and affects family stability; it is a risk factor in the wellbeing of individuals, households, and communities (Pharoah et al., 2004).

When looking at the factors that contribute to the spread of HIV/AIDS and how this disease affects people in South Africa, it is clear that poverty plays a significant role in the transmission of the disease. Bezuidenhout (2008) describes the reality of people living in poverty; they usually have lower standards of education, and less access to health-care facilities and other social services. HIV/AIDS leads to developmental problems, increased child mortality, morbidity, school drop-out, victimisation, and exploitation rendering many children vulnerable (Pharoah, et al., 2004). These children are at risk of not developing adequate skills to help them function optimally in society which creates potential social challenges since many will be marginalised and may not develop into adults who can contribute to a healthy society (Pharoah et al., 2004). Richter and Panday (2007) discuss how HIV/AIDS results in many children taking on adult roles before they are developmentally ready for it; many parents and care-givers die from the disease or are too sick. Bezuidenhout (2008) comments on child-headed house-holds becoming a reality in South Africa largely due to the HIV/AIDS epidemic with extended family members taking care of vulnerable or orphaned children. This burden can result in care-givers becoming over-burdened and unable to cope financially, emotionally, and physically (Govender, Penning, George & Qualain, 2012). These challenges faced by the school-going population today are noted but in this study, and the challenges faced by the Deaf are also taken into consideration and form the background to the enabling of a process to promote wellbeing at the School for the Deaf.
2.6. A COMPLEXITY THEORY PERSPECTIVE

Complexity theory is a process theory that introduces a new language that describes the complex dynamics involved in being together in everyday life (Shaw, 2002). The term complexity, according to Morrison (2002) is derived from the Latin “to entwine” and therefore suggests that an organism interacts dynamically with its environment, influencing and, in turn, being influenced by its environment. Human interaction is a complex dynamic process in which people influence and are being influenced by one another in their social networks (Stacey, 2000; 2003). The process in itself is non-linear, spontaneous and cannot be controlled. While trying to make sense of our experiences, people reach a state of higher order and in turn co-evolve together (Badenhorst, 1995; Radford, 2006; Shaw, 2002; Stacey, 2000; Stacey, 2003).

A complexity perspective provides a radically alternative way of thinking about the interaction between individuals in a social context such as a school and has been used to understand the interactive dynamics in schools (Morrison, 2002). From a complexity theory perspective schools are viewed as complex, adaptive systems that possess a capability for self-organisation which enables them to facilitate change. In these complex adaptive systems, the interactions between people on the different levels give rise to the behaviour of the school as a whole in non-linear, self-organising ways.

Schools, according to the theory of complex responsiveness processes of relating (Stacey, 2001; 2003; 2007a; 2007b; Shaw 2002), are viewed as reiterating patterns of being together. The members of a school community are interdependent, and individual minds are
formed by the social interactions between them while they, in turn, form the social relations in iterative, non-linear self-organising processes (Stacey, 2003).

The focus in addressing problems in schools should therefore be on the actual dynamic interactions (Stacey, 1997; Davis & Sumara, 2001) between the people in the school context and not only on the behaviour of individuals. In schools, the interaction between individuals as elements of the complex adaptive system is rich in the sense that any element in the system influences and is influenced by other elements in the system non-linearly (Gatrell, 2005). As people make sense of their experiences they reach a state of higher order and in turn co-evolve together (Badenhorst, 1995; Radford, 2006; Shaw, 2002; Stacey, 2000; Stacey, 2003).

All the members in a school community are therefore continuously involved in the interactive processes that take place between every day. In these conversations people resonate with each other in nurturing and constraining ways. They do not have control over this process of self-organization, but rather continuously shape and are being shaped in their interactions with each other.

From a complexity perspective, schools school communities should be understood as conversational processes that involve self-organising participation in the spontaneous emergence of continuity and change (Shaw, 2002; Fonesco, 2002). Such processes will encompass open, spontaneous dialogue between the members of a school community that takes place through everyday ways of relating and interacting.

Learners, staff members and parents have to be involved in the dialogue with one another to ensure that the opposing voices of the members of a school community are heard
Through the active engagement of all the members, the continuous conversations between them, and not the individual members, then become the agents of change in the school community (Stacey, 2007a; Shaw, 2002).

2.7. SUMMARY

The promotion of wellbeing in schools is approached from a transformative paradigm which is critical in nature. A community psychology perspective therefore provides a meaningful theoretical basis for investigating how a shift in the current stance of wellbeing promotion in a South African School for the Deaf can be approached. The holistic wellbeing perspective developed by Prilleltensky (2005; 2012) provides a basis for implementing a process of facilitating wellbeing in a particular context. A complexity theory approach which promotes change, evolution, and adaptation allowed for a change in the way in which problems are identified and addressed at the school. This facilitated a move away from an illness to a wellbeing perspective based on strengths rather than deficits (Morrison, 2006).

However, investigating the promotion of holistic wellbeing in a School for the Deaf necessitates insight into the research literature on Deaf culture and the promotion of wellbeing in the context of schools for the Deaf.
CHAPTER 3

THE PROMOTION OF HOLISTIC WELLBEING

IN THE CONTEXT OF SCHOOLS FOR THE DEAF

3.1. INTRODUCTION

In this chapter the focus is on the context of schools for the Deaf. An understanding of Deaf culture is therefore critically important and will be explained with reference to the global and local understanding of the culture.

3.2. TOWARDS AN UNDERSTANDING OF DEAF CULTURE

Deaf culture is described as members of a collective group which have a shared history, shared set of experiences of being deaf in a hearing world, shared institutions including schools and clubs, a language, art, music, and literature (Sparrow, 2005). In this chapter, global and local perspectives of Deaf culture are discussed.

3.2.1. A Global Perspective on Deaf Culture

When looking for ways to support the children and adolescents at a School for the Deaf with the myriad of challenges, the researcher, with the aim of initiating a process to promote holistic wellbeing at the school takes cognisance of Ryff and Singer’s (1998)
proposa that culture and context need to be considered in the definition of wellbeing. This study recognises the need for an understanding of the ways of the Deaf and Deaf culture. Schools for the Deaf globally provide an arena for the promotion of wellbeing for the Deaf since they are environments in which appropriate communication for the Deaf and an understanding of Deaf culture exists (Snoddon & Underwood, 2014).

Deaf culture has its own social norms, beliefs, values, important historical figures, and art which impact on identity formation in the Deaf community (Hamill & Stein, 2011). Currently, as the authors indicate, most Deaf people live in a hearing world and the Deaf community is often the only setting in which they can feel equal. Because the Deaf experience feelings of inclusion and a common identity within Deaf culture, they tend to experience an increase in self-esteem and a sense of agency. A point the authors raise in response to understanding the identity development of the culturally Deaf, is that the deaf community, a subculture of the larger hearing population that developed because of marginalisation and exclusion from the hearing population, developed from a sense of isolation to a sense of belonging. This development differs from other cultures since membership to the Deaf culture does not happen at birth or because of geographic location, but rather from a choice to subscribe to an alternative way of being (Richardson, 2014).

Sutton-Spence (2010) comments that the majority of Deaf children are born to hearing parents and are therefore often only introduced to Deaf culture when they begin school. Here they become aware of the ways of the Deaf and learn to use sign language. Enculturation and socialisation in the Deaf community are therefore important as this is where young learners begin to develop their Deaf identity (Sutton-Spence, 2010). In these schools children and adolescents often experience deafness not as a disability, and are not
defined as medically incomplete but rather as individuals belonging to a culture with a unique language, for the first time (McKee, 2013). Research indicates that educational institutions have played an important role in the formation of Deaf communities (Kowalski & Meier, 2013) and are thus acknowledged in this study as potential sites for the promotion of holistic wellbeing.

Deaf culture comprises many elements. Humour is understood to be an important facet of Deaf culture in the creation of attachment and unity because it relates specifically to the Deaf and is based on visual communication (Hamil & Stein, 2011). Sutton-Spence & Napoli (2012) describe how the content of Deaf humour supports the Deaf community members with many jokes making reference to sign language with punch-lines often targeted at the hearing population.

Wellbeing can be further experienced through signing songs, an important aspect of Deaf culture around the world (Maler, 2013). This traditional Deaf practice has become known in the hearing world through the use of the Internet, thus creating opportunities for Deaf awareness. Haggerty (2007) comments on how story-telling in the Deaf community creates further opportunities for experiencing connectedness and belonging. He comments that the cultural structure of the Deaf community is developed in residential schools for the Deaf where storytelling is a useful tool for motivation, and thus an important location for the promotion of wellbeing.

Martin (2009) comments that one of the ways in which Deaf culture unites Deaf people and creates further opportunities for wellbeing is through social clubs for the Deaf where they share leisure time with others through similar experiences, interests, and outlooks.
These Deaf clubs provide a setting where Deaf people form personal and communal attachments, and again provide a location for the promotion of wellbeing. In the clubs culture, language, tradition, and history are experienced via community and location.

Richardson (2014) highlights how the use of sign language amongst the Deaf creates feelings of unity with the global Deaf community. Deaf people from all over the world can communicate and feel a sense of cohesion. While sign languages develop in specific counties, International Sign Language provides an opportunity for an extended sense of belonging (Green, 2014).

3. 2. 2. A Local Perspective on Deaf Culture

According to Ram and Muthkurishna (2001) most Deaf people in South Africa belong to the Deaf Community which is regarded as a separate minority language and cultural group which use Sign Language as its language of choice. The authors propose that the Deaf have the right to be classified as a nationality as a result of being a culturally similar group sharing a common language. A shared community leads to a shared ways of thinking about and doing things; likewise the development of a Deaf culture and identity leads to shared goals and a feeling of responsibility to one another (Storbeck & Magongwa, in Moores & Martin, 2006) which corresponds to Prillelstenksy’s (2005) conceptualisation of collective wellbeing.

When understanding they ways of the Deaf, it is important to understand how the Deaf perceive deafness. Deafness relates to the ability to hear, with abilities ranging from the mild to profoundly deaf, and importantly, not linked to intellectual capacity (Parkin, 2010). Being Deaf, mirroring global perspectives, is not perceived by the Deaf community as a
disability or being medically incomplete; it is about being part of a linguistic minority (Druchen, 2010) reflected in the feelings they have towards their own deafness (Andrews, 2012). The Deaf have chosen to embrace the word Deaf (with a capital D) and use it proudly, emphasising their affiliation to the Deaf community (Wilcox, 2006); a minority culture with a unique language and alternative lifestyle rather than sensory loss. This perspective on Deafness allows for the development of personal and communal attachment which can lead to the development of relationships (Atherton, 2009), and an expression of relational wellbeing as proposed by Prilleltensky (2005). This creates opportunities for emotional security; a sense of belonging can enhance holistic wellbeing (Atherton, 2009). Smit (2010) comments that Deaf culture in South Africa is characterised by feelings of inclusion for all members because it Deafness transcends race, gender, and belief. What is highlighted by Vermeerbergen & Van Herreweghe in Guendouzi, Loncke, & Williams (2010) in South Africa, as is the trend globally, is that the Deaf identity develops from solidarity in the Deaf community, and difference from the hearing community.

According to Louw and Surtees (2010) sport is another way in which the Deaf community experiences wellbeing. The South African Deaf Sports Federation (SADSF) promotes and develops sport for the Deaf, encouraging unity amongst the Deaf, avoids discrimination and encourages participation in the Deaf-Olympic team wherever possible.

Arts and literature have been identified as further areas for the promotion of wellbeing in South Africa. The Deaf, due to the visual nature of their language, are well suited to performance. The reality however is that the Deaf often face communication challenges with the majority of hearing professionals and theatre managers who are not able to communicate in SASL (Storbeck & Magongwa, as cited in Moores & Martin, 2006).
3.3. A GLOBAL PERSPECTIVE ON THE CHALLENGES TO PROMOTING THE WELLBEING OF THE DEAF

The Deaf community faces particular threats to their wellbeing. These challenges include discrimination and social stigma (Erlich, 2012) largely as a result of misunderstandings regarding Deaf culture (Groce, 2004). Discrimination is based on stereotyping and prejudice, based on collective belief systems about the Deaf as a group.

Skelton and Valentine (2003) indicate that the Deaf struggle to access information which can enable them to make informed choices, and to control their lives because of communication difficulties. The Deaf therefore often lack control over their everyday lives and have decisions made for them, often without their understanding or consultation, which negatively affect their self-esteem and competence. This finding is confirmed by Russinga (2012) who discusses how the disabled are still viewed negatively in many traditional cultures, and experience lack of autonomy in decision-making opportunities which lead to feelings of powerlessness.

Raising awareness to further discrimination faced by the Deaf, research indicates that employers tend to hire people with other disabilities rather than people with hearing disabilities (Marx, Soer & Dicks, 2011). One of the reasons may be that the literacy achievements of children with hearing loss presents far below the average for the population at large.

Deaf children and adolescents are often isolated from family members and from society due to communication problems and misconceptions about deafness (Erlich, 2012).
A parent would normally raise a child based on the norms and shared experiences of the parent’s own cultural expectations, but parents of Deaf children often have to embrace Deaf culture which can cause stresses and confusion for many parents; the majority of deaf children are born to hearing parents (Blankmeyer-Burke et al., 2011). The authors further describe the personal challenges many parents face in loving and accepting a Deaf child.

Blankmeyer-Burke et al. (2011) state that the expectations regarding Deaf children should be equivalent to those of hearing children but this is not always the case as opportunities for the deaf are often not equivalent to those of their hearing peers. This forces parents and caregivers to fight for opportunities for their deaf child. The literature confirms that the Deaf face the challenge of dealing with many hearing people’s low expectations of their achievements (Sparrow, 2005).

Sipal and Sayin (2013) highlight some of the challenges families can face in raising a deaf child; having a deaf child can cause depression in mothers which in turn can have a negative impact on their parenting attitudes which can aggravate family relations. The authors indicate that maternal depression can affect the child’s health, development, and behavior since children are dependent on their mothers at a young age. Increased levels of maternal depression in children with disabilities are linked to the extra time and resources needed to care for these children.

Bullying in schools is a global concern (Mash & Wolfe, 2010). In the educational context, significant bullying problems were found in schools which accommodate Deaf and hearing learners, with bullying rates for Deaf learners at two to three times higher than those reported by hearing students (Weiner, Day & Galvan, 2013). The authors highlight that Deaf learners are not supported in the same way as their hearing peers in incidents of school
bullying. Fewer interventions from school personnel are also reported where bullying occurs for Deaf learners.

The developmental years can present challenging times for children and adolescents due to biological and developmental changes (Mash & Wolfe, 2010). Examining the increased challenges faced by the Deaf in comparison to their hearing peers, it is found that Deaf children and adolescents have a higher rate of psychosocial problems and psychiatric disorders than their hearing peers (Fellinger, Holzinger, Sattel & Laucht, 2008). The Deaf are likely to experience lower self-esteem than hearing children, impacted on by isolation from family and society (Sardar, Kadir, Tamiz, Abdullah & Chong, 2012). Sardar et al. (2012) also report that self-esteem is promoted when Deaf children and adolescents are integrated into Deaf culture which again highlights the value of a residential school in wellbeing promotion.

Deaf children tend to be secluded, shy, and have problems making friends (Ibid, 2012). Their lack of social interaction with others, particularly with family members and peers can deprive them of supportive relationships. According to Oluwatoyin, (2013) adolescents with hearing impairment struggle with social acceptance, and face prejudices and discriminations. Oluwatoyin adds that Deaf adolescents often face social isolation which can lead to them retreating from social situations and remaining alone which can have a negative impact on their self-esteem.

The communication problems faced by the Deaf often include lack of communication with family members as many parents and caregivers are unable to converse in sign language (Sardar, et al., 2012). Social relationships are understood to add quality to one’s life and
contribute to one’s ability to think and to learn (Antia et al., 2001). The authors add that people who lack social skills are often rejected by others and are seen to be at risk for developing mental health problems that can remain throughout life. Problems with mental health and personality development in the Deaf community are linked to the problems they have in social adaptation and integration into society (Karush, 2011). Children with permanent hearing loss whose language needs are not met are at risk of exhibiting negative behavioural problems, psychosocial disorders, juvenile delinquency, criminal behaviour, and possible reliance on the social services available to them (Miller, Vernon & Capella, 2005). Fellinger et al., (2008) confirm this finding and report on the high levels of emotional and behavioural problems in Deaf children and adolescents both at home and at school.

Expanding the challenges faced by the Deaf in the social context, Duvall (2005) states that the Deaf are at risk of sexual abuse due to the vulnerability of the population, coupled with the fact that law enforcement agencies are neither able to communicate effectively with the Deaf nor understand they ways of the Deaf when crimes are reposted. Russinga (2012) and Rohleder, Swartz, Schneider and Eide (2012) state that people with disabilities are often viewed as incapable of conceptualising life issues and therefore regarded as dependents; disability is equated with inability. Adolescents with hearing disability have equal or greater risks of unsafe sexual behaviour than their hearing counterparts (Oludunni, 2012). The author comments that adolescents with disabilities are at extremely high risk for teen pregnancy. A large number of young people with hearing disability become sexually active and engage in sexual activities at a very young age (Oludinni, 2012). Peinkofer (1994) describes how deaf adolescents require sexual health knowledge to assist them in the development of a healthy sexual identity and for the development of positive self-regulation techniques, but the required information is often inaccessible. This leads to adolescents with
hearing disability facing many reproductive health problems (Oladunni, 2012). The author states that the predominant source of sexuality information is peer-led, indicating strong peer influence in molding sexual behaviour patterns. Oladunni also found that parents and teachers lack the knowledge and skills to provide information and guidance on sexual matters which results in a high dependence on peers for information. The reality is that the Deaf are often not accurately informed and thus engage in practices which do not promote health and wellbeing.

In addition to the difficulties related to sexual practices, people with disabilities are reported to be at greater risk of rape and abuse and therefore at increased risk of HIV/AIDS infection, in addition to their having less opportunity for support from health initiatives and physical, psychological, or judicial interventions (Russinga, 2012). Oladunni (2012) comments that in Nigeria the existing national curriculum on family life and HIV/AIDS education does not recognise the sexual and reproductive needs and rights of adolescents with disabilities. This is reported to leave Deaf adolescents at risk. The consequences of unsafe sexual behaviour are understood to have an impact the individual, their family, and society.

3.4. A GLOBAL PERSPECTIVE ON THE PROMOTION OF WELLBEING OF THE DEAF

Whilst research on wellbeing promotion in the Deaf school-going community is limited, the findings which are available are discussed. Anglin-Jaffe (2013) highlights the role of the Deaf child as peer educator in schools where sign languages are banned. Deaf children who can sign teach their Deaf peers to sign. This is revealed in a number of schools worldwide. Evidence of peer-lead sign language education in residential schools for the deaf
is evident in schools in Nicaragua and Thailand. This child-led oppositional learner behaviour links to Freire's (1970) theory of critical pedagogy. This behaviour of the Deaf learners is seen as an act of resistance to the oppression of their language and culture. The author describes this as enabled self-actualisation of the Deaf.

The value of friendships for children and adolescents is well documented (Mash & Wolfe, 2010), and thus the value of friendships for deaf children and adolescents within the Deaf community is noted. Marschark, Bull, Sapere, Nordmann, Skeen, Lukomski and Lumsden (2012) explore parents’ perceptions of peer interaction and friendship as ways to promote wellbeing for their deaf children. The authors found that when hearing parents reported on their children’s friendships, parents gave them higher school friendship ratings than the children gave themselves and the parents were more positive about children’s friendships than the Deaf children. However Deaf children who have deaf parents, who attend a school for the Deaf and use sign language at home, experienced more positive perceptions of social success, indicating the value of inclusion in the Deaf culture and again raising the importance of the residential school setting in wellbeing promotion for Deaf learners.

Miles, Wappling and Beart (2011) report on developments in Uganda with regard to deaf children and their right to attend school in their own communities. The authors argue that the government’s commitment to teacher education, parent involvement, and Sign Language development has led to more positive attitudes towards Deaf children and their right to attend schools in their communities. The authors’ further comment that the imaginative use of community-based human resources can be used to create opportunities for the inclusion of Deaf learners. The authors highlight the value of community involvement as
a necessary component to achieving quality education for Deaf and disabled children. This raises awareness of the impact of an ecological perspective on wellbeing promotion since factors beyond the individual are understood to impact on wellbeing promotion.

According to De Raeve and Lichtert (2012) there has been a shift in the number of children who are Deaf and hard of hearing being educated in mainstream classes in Belgium over the past 12 years. The authors maintain that this is largely because of early detection, support programmes for the Deaf. The growing popularity of cochlea implants has also increased the number of learners with specific hearing needs in mainstream schooling (2012). The authors raise comment on the many challenge faced by these mainstream schools in accommodating Deaf learners since their educational needs are complex. In Flanders, all students with hearing loss who attend mainstream secondary schools are entitled to an interpreter. Students who do not have cochlear implants tend to make use of sign language interpreters. The authors further comment that students who are hard of hearing or Deaf tend to still tend to select vocational training and technical schools for secondary school placement.

In Sweden and Northern Ireland, Doherty (2012) maintains that the use of sign language and a culturally Deaf environment promotes learner wellbeing. Findings of a study reveal that schools in Sweden where sign language is used throughout the school and Deaf culture is promoted resulted in Deaf leaners experiencing their school environment more positively than their deaf peers in Ireland where the school climate was not as inclusive of the ways and needs of the Deaf. Deaf culture was not promoted in Northern Ireland but the learners responded positively to having access to a deaf classroom assistant who was able to
use sign language. The author reports how this helped to foster more effective communication between learners and teachers.

The wellbeing of Deaf learners was promoted when Deaf learners’ engaged in therapy called ‘Strategies and Measurable Interaction in Live English’ (Schamroth & Threadgill, 2007). This approach is used to teach Deaf children skills to facilitate effective communication in real-life situations. The authors promote the value in helping deaf learners develop the ability to make successful requests in a specific communication situation. The training comprises eleven weeks of therapy following a specific programme. Longer therapy is suggested by the authors as a means to further consolidate the acquired communication skills.

Munoz-Baell, Alvarez-Dardet, Ruiz, Ferreiro-Lago and Aroca-Fernandez (2008) identify ways in which to promote the wellbeing of Deaf learners. They raise the importance of communication in sign language and place value on effective Deaf role models. Acceptance by others and a supportive psycho-social environment help to empower Deaf children. This empowerment is seen to have a positive effect on Deaf learners’ health behaviours. The authors suggest examining existing school practices to enhance opportunities for health and wellbeing promotion for Deaf children, staff, and the wider community (Munoz-Baell et al., 2008). It is this thinking which the researcher applies to the current wellbeing promotion in a School for the Deaf.

Nelson and Prilleltensky (2010) comment that the voices of children are seldom heard in educational settings which negatively impact on their experience of wellbeing. According to Munoz-Baell et al., (2008) learners should be able to share their feelings, views, and
opinions in sign language in enabling psycho-social environments which promote academic and social development.

3.5. A LOCAL PERSPECTIVE ON THE CHALLENGES TO WELLBEING OF THE DEAF

In South Africa, the Deaf face considerable challenges at home, in school, and in the wider hearing community. Late identification of hearing loss is a reality faced by many individuals and families in South Africa (De Wet, Storbeck & Friedland, 2009). This has serious consequences for the developing child, including school placement since only once this has happened can the learner be placed in a school for the Deaf where language development, socialisation, and acculturation into Deaf culture can happen. Late identification can impact on the level of educational attainment of individuals which can negatively impact on career prospects which in turn can lead to isolation and stigmatisation because of the inability to engage fully in employment opportunities (Swanepoel, Delport & Swart, 2007). De Wet et al. (2009) raise awareness of the fact that parents have the task of making decisions that will impact on their child and that these decisions are often made without full understanding of the needs and ways of the Deaf. The authors raise concerns about the lack of knowledge of risk factors for hearing loss, and about how superstitious cultural beliefs regarding possible causes of infant hearing loss limit access to support services (De Wet et al., 2009).

Research indicates that Deaf children are more likely to display challenging behaviours than their hearing peers (Austin, 2010). However support services to deaf children with mental health or behavioural problems is limited; Deaf children often have
additional behavioural difficulties. Because deaf children with hearing parents struggle to set appropriate boundaries, coupled with social isolation as a result of their deafness, and a lack of appropriate Deaf adult role models, behaviour problems can develop. These behaviours can be managed and prevented with appropriate intervention which should include access to language and an understanding of the ways of the Deaf.

Examining the benefits of communication, it is reported that the ability to communicate with parents, family members, friends, and educators is important in learners’ academic and social progress (van Staden & Badonhorst, 2009). Hearing parents of Deaf children can struggle to form appropriate bonds in the parent-child relationship because of communication challenges (van Staden & Badonhorst, 2009). Krige (2010) and Burke et al. (2011) describe the many challenges faced by South African parents of deaf children, including shock and denial at their child’s deafness, lack of family support and opportunities, and financial limitations faced by many families, all of which impact on the deaf child’s wellbeing. The authors further discuss the challenge of raising a Deaf child with hearing siblings, and highlight the challenges of family members learning SASL effectively. Families have to choose what they believe is the best method of communication for their Deaf child; oral or sign language. As mentioned by Austin (2010), these decisions affect the child and the family in different ways and impact on the wellbeing of the Deaf child or adolescent.

Examining further challenges faced by the families of Deaf children, the literature reveals the complexities of meeting the needs of those diagnosed as deaf with additional disabilities. There is however a paucity in the literature on counseling advice for the families of children with multiple disabilities; children who are also diagnosed as deaf or hard of
hearing. According to Krige (2010) many families experience anger, frustration, and grief as a result of their children’s deafness, only to be further challenged by multiple challenges since many children diagnosed as deaf have additional disabilities. Families are faced with the stress of trying to access suitable programmes and trying to manage working with many different professionals.

Research highlights the value of healthy family relationships (Mash & Wolfe, 2010) but in spite of this Deaf children and adolescents tend to spend large amounts of time with their Deaf communities and with others who also subscribe to Deaf culture. Residential schools for the Deaf are places where they can feel incorporated into a community and where wellbeing can be promoted. Deaf identities are shaped by alienation from the hearing community and belonging to the Deaf community (Vermeerbergen & Van Herreweghe, in Guendouzi et al., 2010).

The negative effects of hearing loss on language and cognitive development, as well as on psychosocial behaviour, are widely reported (Swanepoel et al., 2007). Deaf children and adolescents often experience communication problems at home and in the wider community, largely because the majority of people whom they engage with are not being able to converse in SASL. Communication problems therefore impact Deaf children and adolescents’ opportunities to participate effectively in a society that does not cater properly for the needs of the Deaf (Magongwa, 2010). There are limited opportunities for mainstream education for the Deaf in South Africa and very limited opportunities for participation in tertiary education (Krige, 2010). Krige (2010) states that first-world countries would be shocked at the lack of resources available to Deaf education in South Africa. There is also a worldwide shortage of educational opportunities for the Deaf and a significant lack of sign
language interpreters, educationally and in the wider society (Marx et al., 2011). The authors add that adolescents with hearing loss face challenges in gaining access to and using information which negatively impact on their autonomy and decision-making capabilities. According to Aarons and Akach (2002) if the Deaf human right to own language was fully recognised, the Deaf would no longer be classified as disabled. Their disability need to be viewed not as a physical disability but as a barrier to access on the basis of their language. As teachers in schools for the Deaf in South Africa are not required to have formal qualifications in Deaf education, the potential for difficulties in effective communication is acknowledged (van Staden & Le Roux, 2010).

Druchen (2010) comments that in South Africa, the Deaf face inequality in education and employment opportunities, coupled with marginalisation and unjust treatment (Hammil & Stein, 2011). This can be linked to the difficulties faced by the Deaf in language acquisition which impacts their ability to access academic material effectively coupled with limited prior learning (Marx et al., 2011) largely because of communication barriers, and parental and societal attitudes towards deafness (Krige, 2010). Coupled with this is the challenge to access equal opportunities in quality education since SASL is not yet recognised as an official language in South Africa (Magongwa, 2010). Parkin (2010), mirroring global findings, comments on society’s low expectations of Deaf learners in comparison to their hearing peers. This attitude impacts on the way the Deaf children and adolescents are viewed, and on their educational opportunities and employment prospects (Parkin, 2010).

Building on the effects of inequality in education and a belief the Deaf are not as capable as achieving as their hearing peers (Parkin, 2010). Marx et al. (2011) state that adolescents with hearing loss need to acquire essential skills and knowledge to plan and carry
out complex projects, and to be critical, creative, and reflective thinkers, decision makers, and problem solvers. The authors’ add that if the Deaf are able to access and use academic information successfully, they would be more likely to be able to live independently. The challenges presented by the inequality in gaining access to information through SASL in the wider community poses a major challenge to the Deaf (Magongwa, 2010; Batchelor, 2010). According to research conducted by Ram and Muthkurishna (2001) the Deaf in South Africa have a strong desire to be involved in decision-making on issues pertinent to the Deaf community. This desire is upheld in this study where the Deaf will be included in the conceptualisation of a strategy to promote holistic wellbeing at a School for the Deaf. Ram and Muthkurishna (2001) comment that the Deaf in South Africa, similar to the Deaf globally, have fought for a shift in thinking away from the perception that Deaf people are pathologically deficient of hearing, to an emphasis on Deaf people as being a culture with its own distinctive language.

According to Druchen (2010) confirmed by Aarons and Akach (2002) when examining the policy regarding education of the Deaf, the South African Schools Act of 1996 does indicate that SASL is to be used as a medium of instruction for Deaf learners. The authors add that the NCSNET/NCESS Report and the Integrated National Disability Strategy White Paper support the South African Schools Act in this regard, but even with legislation backing the use of SASL as an appropriate language of teaching for the Deaf in South Africa, the majority of teachers in schools for the Deaf cannot sign proficiently and often maintain the belief that it is up to the teachers in the school to decide whether SASL should be used in these schools or not. The authors comment that many teachers of the Deaf are not aware of the properties of SASL, and believe that Deaf children must learn the spoken language of the area. Frequently, the learners are blamed and labeled because they are not able to do so.
Being expected to be proficient in a spoken language results in many Deaf learners being treated as if they are disabled when in reality, it is the conditions they are exposed to which limit their access to an education which does not adequately meet their needs (Aarons & Akach, 2002).

Aarons and Akach (2002) raise awareness of the limited number of Deaf matriculants in the country which highlights the extent of inequality in educational opportunities for the Deaf. Deaf people are fully capable of achieving academic success at tertiary level, however, they have not been well-served by the education they are given in South Africa. Further exploring the inequalities faced by the Deaf in South Africa, Glaser and Aarons (2002) raise awareness of the history of racial inequality which can be seen in the make-up of the Deaf matriculants and graduates. Most schools for the black and coloured Deaf in South Africa do not even offer Grade 12. Until 1995, more than half of black Deaf children of school going age did not attend school. Alarmingly, many of the students in adult literacy classes specifically for the Deaf have actually attended schools for the Deaf for up to ten years, and are not literate.

Druchen (2010) and Aarons and Akach (2002) state that SASL has survived and flourished independently in South Africa, even while it was not recognised or encouraged in education by policy. The authors indicate that because the government did not recognise SASL, the historical lack of SASL resources is apparent. The use of oralism is described as making many Deaf people resentful of hearing peoples’ attempts to force them to use a language to which they have only partial access and this limits educational opportunities for the Deaf (Arons & Akach, 2001). Linguists state that it is educationally beneficial to use signed language with Deaf children from their early developmental years. What is further
highlighted in the literature which explores the challenges faced by the Deaf in educational contexts is that there is a paucity of sign language interpreters in South Africa with few interpreters employed in educational settings (Glaser & van Pletzen, 2012). The authors elaborate that in the classroom context, teachers and interpreters may not be proficient in sign language and many Deaf school-leavers who work in school settings after completion of their education are not proficient in literacy.

According to Mall and Swarts (2012) the Deaf face particular challenges in learning about HIV/AIDS largely because of communication difficulties with family members who are not able to communicate in sign language. The authors comment that open communication with parents encourages positive sexuality in adolescents but if language barriers are not addressed, this is not a possibility for the Deaf adolescent. In any medical situation Haricharan, Heap, Coomans, and London (2012) comment that without sign language interpreters, Deaf patients in South Africa experience challenges to their rights to health and their dignity is violated. A challenge highlighted by Dagut and Morgan (2003) is that the Deaf face severe challenges with regards to infringement of their rights in the judicial system and police stations as a result of communication challenges.

3.6. A LOCAL PERSPECTIVE ON THE PROMOTION OF WELLBEING OF THE DEAF

The literature on the promotion of wellbeing in South African Schools for the Deaf is limited. The literature focuses on challenges, inequality in educational settings, and policy regarding education and experiences of being Deaf in South African education systems. A
review of the limited support provided by the Department of Education, organisations for the Deaf, and educational institutions including universities and schools, follows.

The Department of Basic Education addresses various barriers to learning in South Africa and provides guidelines for inclusive education to address the identified barriers. The White Paper 6 (DoE, 2001) promotes a move away from the medical model to inclusive practice in schools where learner are encouraged to participate fully and to achieve their full potential, made possible through accommodations to meet the individual’s special educational needs.

Section 6 (4) of the South African Schools Act 34 of 1996 recognises SA sign language for use in teaching and learning of Deaf learners in public schools (http://www.politicsweb.co.za). The Department of Education has developed a draft Curriculum and Assessment Policy Statement for SASL from Grade R to Grade 12 (Government Gazette 36818, 2013, http://www.education.gov.za). According to the DoE as reported in the Government Gazette in 2012, there were 8 835 Deaf learners in 116 public schools (special and ordinary). The Gazette reveals that there are different curricula in the different provinces because of a lack of standardisation in SASL. In response, as reported in the Gazette, the DoE developed the new CAPS document to address the problem of equality in education for the Deaf. SASL, as reported in the Gazette, is not yet recognised as an official language and therefore it is only possible to offer SASL as a subject at school. A curriculum management team has been set up to manage the development of this curriculum (http://www.politicsweb.co.za). In the Western Cape, the government has begun to address the use of sign language, especially in schools, with the aim of working towards SASL becoming part of the National Curriculum Statement up to Grade 12 (http://www.westerncape.gov.za). In 2010, Premier
Zille appointed a task team to investigate the state of education at special needs schools which accommodate Deaf and hard-of-hearing children in the Western Cape.

Examining ways in which the DoE is attempting to promote deaf education in KwaZulu-Natal, the ETDP SETA in partnership with KwaZulu-Natal DoE is looking for accredited training providers to facilitate the implementation of part qualifications in SASL and BRAILLE for 33 special school teachers in the KZN Province (http://www.skillsportal.co.za). What is noted is that SASL and Braille are grouped together despite presenting different educational challenges which require different classroom accommodations to address learner needs.

Provision for the Deaf in the promotion of wellbeing in South Africa is catered for by early intervention programmes such as HI HOPES, an organisation that provides support for families with Deaf or hard-of-hearing infants (http://www.hihopes.co.za). The focus of the organisation is on early intervention, dissemination of information, and support for the family. Mentors, according to HI HOPES support families and promote whichever method of communication is best suited to the particular child and his or her family. The importance of early identification is highlighted by De Wet, Storbeck, and Friedland (2014) who raise awareness of the importance of the Deaf child gaining access to communication which will assist the child to develop effectively in an educational setting. Storbeck and Pittman (2008) highlight findings from an early intervention programme, a family-centered home-based intervention programme (HI HOPES), which showed that infant receptive and expressive language skills improved as a result of participation. If children are correctly diagnosed, the Deaf child’s opportunities for the development of sign language are increased. HI HOPES mentors assist families with challenging decisions on oral or signed communication with the
deaf child and assists with appropriate school placement depending on which communication method the family selects.

Support for the Deaf is also available through organisations for the Deaf such as the Deaf Federation of South Africa (DeafSA) which acts as the national research, information, and community action organisation on behalf of the approximate 600 000 South Africans who are culturally and linguistically deaf (http://www.deafsa.co.za/about-us/).

The South African National Deaf Association (SANDA) is an independent, non-profit, public-benefit, national advocacy, and consumer organisation managed and representing the Deaf and hard of hearing in South Africa. SANDA is committed to improving quality services, ensuring public accessibility and increasing awareness of issues affecting Deaf people, promoting the rights of Deaf people to contribute their experience, talents and capabilities (http://www.sanda.org.za).

The KwaZulu-Natal Blind and Deaf society (http://www.kznbds.org.za/index.html) aims to break the isolation which surrounds Deaf and blind people. The society aims to help people access support for correct diagnosis and early intervention, to establish units to support individuals, to develop strategic partnerships, and to encourage appropriate education through creating a lobbying forum for parents. Counseling staff from the organisation have been made available to support children at the school for the Deaf in KwaZulu-Natal.

The Deaf face considerable challenge in finding opportunities for employment due to limitations in access to tertiary training opportunities, and communication challenges in the work context. To overcome these challenges, eDeaf, an employment company for Deaf
people in South Africa aims to empower the Deaf through proper education and training for suitable employment opportunities. Moreover, it states that eDeaf involves employ trainers for proper collaboration and quality education (http://www.edeaf.co.za/).

According to De Villiers (2010) the vast majority of the Deaf population in South Africa is unemployed, abused, and neglected by employers. The author adds that the South African education and training systems do not support Deaf students. He raises concerns that leaders of schools for the Deaf fail to recognise the desperate need for skills and occupational training for the Deaf. The only accredited occupational training institution in Africa is The National Institute for the Deaf (NID) College where Deaf students from South Africa can obtain accredited international certifications in occupational training (De Villiers, 2010). The principle of ‘nothing for us without us’ guides the practice at the National Institute for the Deaf, a sentiment supported by DeafSA (http://www.deafnet.co.za/academy/introduction.html).

Lewensruimte (living space, at the National Institute for the Deaf in Worcester, South Africa, provides an arena where the Deaf can experience wellbeing. It is a community which offers services and training at local, national, and international levels to develop the full potential of Deaf persons (http://www.deafnet.co.za/lewensruimte/about.html). Wellbeing is further promoted at the NID through offering opportunities for spiritual growth, teaching, and mentorship (http://www.deafnet.co.za/dcma/spiritual.html).

The Centre for Deaf Studies at the University of the Witwatersrand aims to develop globally competitive standards of excellence in the training of teachers for the Deaf, and provide equitable learning and research in the field of Deaf education.
In addition to working with teachers of the Deaf, the centre aims to equip parents of Deaf children, and the greater Deaf community with the necessary knowledge and skills to foster equal opportunities for the South African Deaf Community. The centre aims to use all its assets to serve the intellectual, professional, and educational needs of South African society, specifically the Deaf Community.

At schools for the Deaf in Johannesburg, the Western Cape, and KwaZulu-Natal, counseling services are made available to Deaf learners by psychologists employed to assist with emotional, social and psychological problems (http://www.stvincentschool.org.za/pastoral-care.html).

Wellbeing promotion is achieved by Sign Language Education and Development (SLED), a Deaf non-profit organisation committed to providing the Deaf child in South Africa with an equal and democratic right to literacy, learning, and access to information through the promotion of SASL (http://www.sled.org.za). The SLED team (75% of whom are deaf) is made up of people with many years of expertise in Deaf education and culture from Pre-School to Grade 12, ABET (Adult Basic Education and Training), and tertiary education; television presentation, production, directing and editing; SASL poetry and storytelling; educator training and SASL interpreting. According to the website, the SLED team has conceived, created, developed, and produced 19 SASL literature DVDs and 12 accompanying reading books. Language is pivotal for social interaction, personal development, and abstract thinking which, for the majority of people, happens unconsciously, automatically and mostly naturally. SLED aims to support the Deaf with resources and skills to foster the development of SASL which does not happen naturally. A memory-box methodology was adapted by Sinomlando in 2010 to meet the needs of Deaf children in a
joint pilot project between Sinomlando, two schools for the Deaf in KwaZulu-Natal, and the Department of Basic Education. In 2011 educators and house parents of two schools participated in a memory work training workshop facilitated by Sinomlando, and started to implement memory-work methodology in their respective schools. Since 2013 the teachers and educators of a fourth school, have also been receiving training from Sinomlando (http://www.sinomlando.ukzn.ac.za).

Sinomlando adapted their memory-work methodology to work with the Deaf because the psychosocial needs of Deaf children are considerable. The Deaf struggle to communicate their emotions and experience frustration in the process. They also experience rejection and stigmatisation especially in contexts where the phenomenon of Deafness is not well understood.

Memory work facilitators help the Deaf child or adolescent to identify support systems in their lives to boost resilience. They help the Deaf to understand their family history and family background as many do not have a clear understanding of this as a result of communication challenges with family members who cannot communicate in SASL. According to Sinomlando, the mentors help them to share their experiences regarding their loss in terms of hearing, as well as their goals for their future.

Based on experience in the school for the Deaf, the needs of Deaf children and adolescents are acknowledged, and provision to attend to their needs is made although the support is not sufficient to address all the needs at all the schools. Principles of the White Paper 6 on Special Needs Education (DoE, 2001) outline a supportive and inclusive psychosocial learning environment based on inclusion. However, due to the many challenges
faced by schools and the many challenges faced by the Deaf, the current provision is not sufficient to address the needs of the school as a whole.

3.7. SUMMARY

Recently, a global paradigm shift has occurred in education where health, wellbeing, and educational success have been linked. This shift challenges the traditional division between school and health sectors to integrate educational theories and practices to achieve health outcomes (Rowling, 2009). Health promoting schools provide a way in which to address health inequalities and to link health and education (Buijs, 2009). Yet health promoting schools tend to derive their conceptual basis from a health and not a wellbeing perspective (Konu & Rimpelä, 2002). A call for health and wellbeing promotion in Schools for the Deaf in South Africa is made in this study and a new paradigm to understand health and wellbeing is called for; one that identifies community strengths, prevention, and empowerment, and one that understands community conditions as a precondition to understanding wellbeing (Prilleltensky, 2005). A change is proposed: a move away from an ameliorative to a transformative perspective; away from an illness to a health and wellbeing perspective. A change is proposed in the way challenges are understood and addressed in the setting.

Health promoting schools acknowledge that health promotion needs to be included in all aspects of school functioning, not simply in isolated areas (Buijs, 2009). Prilleltensky (2005) indicates that all domains of the setting: parents, curricula, the environment, and the systems governing schools, need to collaborate to create health promotion. The conceptulisation of health promoting as a barrier-free supportive and inclusive psycho-social
learning environment, with a flexible curriculum and a health-promoting approach which embraces the wellbeing of teachers, pupils, and parents, is suggested.

Exploring the concept of wellbeing and health promotion from a Western perspective, health and wellbeing are often described in negative terms of what health and wellbeing are not, rather than on wellness and positive functioning are (Ryff & Singer, 1998). Physical symptoms and social and family problems are often used to assess health and wellbeing. In this study, a conceptualisation of health and wellbeing is called for where the focus is placed on health and wellness. Ryff and Singer (1998) state that wellbeing should be understood as engagement in living and a full expression of potential, rather than an expression of what is not achieved. This change in perspective on what health and wellbeing are and how they can be defined, link to the researcher’s proposed paradigm shift of how problems in the school for the Deaf need to be viewed; where the individual is not seen as an isolated entity and interventions planned from a deficit model and an ameliorative perspective, but rather where the individual understood as an integrated member of an eco-systemic environment with multiple influences affecting their development; where intervention focuses on prevention and transformation.

It is this thinking that the researcher wishes to bring to the School for the Deaf: behaviour not seen as maladaptive but rather as an individual responding as well as possible in oppressive and stressful conditions (Nelson & Prilleltensky, 2010). In intervention, participants are seen as active and having choices and self-determination, as having an understanding of what is best for them. Nelson and Prilleltensky (2010) explain that when problems are based in the individual domain, the social domain remains unchallenged, therefore comprehensive intervention which views the individual is understood as part of an
environment, is optimal and is acknowledged and promoted by this study, where a call for the individual to be understood as part of an eco-systemic environment, is made. Interventions to promote wellbeing are usually aimed at the individual level but a proposal is made by the authors, and recognised and acknowledged by the researcher, to examine the socioeconomic determinants of health.

This thinking needs to guide practice at the School for the Deaf in the initiation of a process to promote holistic wellbeing, where the timing of the intervention will be considered, and where a change in social conditions is called for through giving voice to those in the setting through active participation in the promotion of wellbeing, using strengths as a starting point and the onus rests on the school for the Deaf to provide support in this regard. A way to empower the Deaf can be provided by equity and inclusion in decision-making regarding the future promotion of holistic wellbeing. The researcher takes cognisance of the experiences and ideas of all the members of the school community and asserts that all these perspectives need to be incorporated in the exploration of experiences of wellbeing and ideas to initiate a strategy for the promotion of holistic wellbeing at the School for the Deaf.
CHAPTER 4

RESEARCH DESIGN AND METHODOLOGY

4. 1. INTRODUCTION

In this chapter an extensive discussion of the research paradigm and the research design and methodology applied in this study is presented. The context in which the research was conducted is also discussed in detail.

4. 2. RESEARCH PARADIGM

A research paradigm is described as a pattern, or an example or a frame of reference from which to conduct research (De Vos et al., 2011). This research was conducted within a transformative paradigm to addresses the issues of inequality of those who are marginalised by the social system; something often experienced by the Deaf (Mertens, 2009). According to Mertens, a transformative perspective empowers the Deaf to claim their right to be well and do well. This is achieved through equal consideration of all perspectives in the process of knowledge generation.

According to Nelson and Prilleltensky (2010) a transformative paradigm is participatory and action oriented towards those who do not have equal status to become equal participants in a research process which can facilitate self-awareness and an understanding of their own resources and strengths. In line with this thinking community strengths will be
identified to initiate a process for the conceptualisation of a strategy to promote holistic wellbeing at a School for the Deaf. The researcher concurs with Mertens (2009) that by following the principles of inclusion and challenging oppressive social structures, building trust with community members through transparent goals and strategies, and disseminating findings in a way that enhances social justice and human rights, the possibility of creating change in the way problems in a setting are identified, understood, and addressed, becomes possible.

Mertens describes the assumptions of a transformative paradigm which will be applied in the research context. Ethical considerations under the axiological assumption which includes respect for cultural norms of interaction are achieved by asking what can be considered to be ethical and moral behaviour. Beneficence encompasses the promotion of human rights which can lead to an increase in the development of social justice. The members of the community in the school for the Deaf ascribe to Deaf culture and respect and this way of being will be respected and upheld by the researcher.

The ontological assumption explores the nature of what exists and what can be defined as reality while recognising the influence of privilege in determining what is real, and how multiple realities are shaped “by social, political, cultural, economic, ethnic, gender, disability” (Mertens, 2009, p. 48). The understanding of the participants’ experiences of wellbeing as well as their ideas for the promotion of wellbeing was captured to establish what is real in their context.

The epistemological assumption explores the nature of knowledge as well as the relationship between researcher and participants in a particular setting, to review what can be
considered accurate knowledge, bearing in mind that knowledge is seen as both socially and historically situated (Mertens, 2009). The researcher worked collaboratively with the school community, valuing the participants’ experiences and the meaning they ascribed to them. In other words she did not base the findings from her perspective alone.

The methodological assumption in this study is based on appropriate methods of systematic enquiry where the inclusion of qualitative methods through a dialogic approach is seen as critical, and where the methods are adjusted to accommodate cultural complexity through the recognition of contextual and historical factors (Ibid, 2009). The researcher’s research with the Deaf, via SASL in ways that are applicable to them consisted in ensuring that the participants were comfortable with the method of research, and that the location of the data collection allowed for effective communication in a space where the lighting allowed for the participants to see each other clearly.

Nelson and Prilleltensky (2002) highlight the importance of understanding how cultural norms and systems of social relations influence human experience. The authors describe how factors such as social class, gender, ability, and race have an impact on levels of power, but also that that power relations can be changed. The participants were provided with the opportunity to share their viewpoints under circumstances where they felt comfortable and free to voice their experiences and ideas, and where all points of view were equally considered.
4.3. RESEARCH DESIGN

Based on the ontological and epistemological positions taken by the researcher, the research methodology was qualitative in nature. This approach allowed for meaning to be captured and accurately described, yielding rich detailed data regarding participants’ experiences of wellbeing at the School for the Deaf. Qualitative research derives from real-world or direct experience based on a researcher’s interests (Denzin & Lincoln, 2013). It acknowledges multiple realities, achieving in-depth understanding of phenomena and recognises the importance of understanding the participants’ viewpoints. Qualitative researchers need to open their work to analysis, and to make their findings accessible and replicable in other settings for other researchers; they consequently need to choose research methods that will allow for this (Lapan et al., 2012).

This study emanated from real-world experience; the many challenges faced by Deaf children and adolescents and how these challenges impact on their holistic wellbeing, were made apparent to the researcher who was previously employed at the school under scrutiny. The study was inductive and naturalistic which helped to ensure that the complexity of the phenomenon of how wellbeing is experienced at the school. Data was gathered individually but understood holistically to describe and understand the participants’ experiences of wellbeing.

An instrumental case study design was applied in this study. This type of study, according to Flyvbjerg (2011) involves research based on a single unit, described as a
bounded system, which takes cognisance of developmental factors in relation to the environment. Yin (2003) states that a case study design is suitable when ‘how’ and ‘why’ questions need to be answered, when the behaviour of those involved cannot be manipulated, when contextual conditions are relevant to the phenomenon studied, and when the boundaries between the phenomenon and context are not clear.

In this research study the bounded system was a School for the Deaf purposively selected as an instrumental case study. The research aimed to understand the experiences and perceptions of the participants to be able to develop guidelines for a more transformative approach focused on the promotion of wellbeing in the school.

4.4. RESEARCH CONTEXT

The selected case study is a residential School for the Deaf in an urban area in South Africa. The school is fifty-six years old. In 1958, the land and the main house including the ancillary buildings and a ten acre plot were donated to be used as a school for Deaf Children. The sponsoring body was the Anglican Church and the School opened on 31 January 1959 with an initial enrolment of 3. Within three years it had risen to 17. Loans were provided by the Provincial Department of Education in which the school is situated. This enabled extensive additions to be made to the infrastructure. By 1976, classrooms, additional freestanding hostels, a hall, and an office block had been added and the enrolment had reached 70. To date, the total number of learners who have been accommodated at the school is 98.

1 Reference omitted for the purpose of confidentiality of the school’s name
The school accommodates learners from pre-school to Grade 12. There are 98 enrolled pupils with 48 learners accommodated in the hostel which offers a weekly boarding facility. The learners in the pre-school and the reception class are accommodated in a separate section of the school with multiple rooms for teaching, and extensive play areas with equipment. The foundation phase includes classrooms for Grades 1-3, and a remedial and a special needs class comprising a junior and senior group. The intermediate phase has a classroom for Grades, 4 - 6 and a remedial class. The senior phase has a classroom for Grades 7- 12 and a vocational class.

The school has a junior and senior boys and girls hostel. The hostels have sleeping, eating, and washing facilities as well as a lounge with television and DVD players. The learners have access to a computer room and kitchens for cooking.

The school has multiple libraries and interactive white boards. The therapists are a nurse, an audiologist, and a speech therapist, and volunteer staff provide various interventions to support learners according to their individual needs. The learners have access to a netball court, a tennis courts, a soccer fields, and a swimming pool. There is a games room with activities which the learners can use in the afternoons.

The school is situated in extensive grounds and experiences financial difficulties due to the cost of running the grounds, having a limited number of fee-paying learners, and limited funding from the DoE because of the relatively low number of learners enrolled at the school.
The demographics of the pupils are representative of the South African population and include African, Indian, Coloured, and White learners. The school accommodates learners from various socio-economic backgrounds due to the specialist nature of the school. The school admission policy states that a learner’s primary disability needs to be deafness.

Due to the specialist nature of the education that deaf learners require, the teachers are responsible for small numbers of children (DoE, White Paper 6, 2001). Curriculum adaptation is planned from within the school as there is no special curriculum for the deaf. Additional time is allowed for exam purposes as stipulated by the DoE (DoE, White Paper 6, 2001). The DoE has developed an SASL curriculum and this has been piloted in certain schools (DoE, 2014). Despite these new developments in Deaf education in South Africa, the school still experiences many challenges.

The development of special needs, remedial, and vocational classes at the school requires additional staff, and funding would assist the school in the enhancement of support in these areas, most notably in the vocational class. Adaptations in various phases have been necessary due to the difficulties some learners experience in their academic development.

The school faces significant challenges with regard to the limited involvement of parents. Few parents attend meetings, school-wide events such as the play, the gala, and sports days. The vast majority are not able to converse in SASL with their deaf child. In short, the level of parental involvement in the school has declined significantly over the years.
The DoE has limited involvement in the school. DoE support is experienced through engagement with the District-Based Support Teams. The function of the District-Based Support Teams is to evaluate and support teaching, build the capacity of the schools, and support the staff (DoE, 2001). The District-Based Support Teams have contact with the school, and representatives meet with the school principal, although overall, in the day-to-day functioning of the school, however, limited engagement with the DoE is noted (DoE, 2001).

4.5. RESEARCH PROCESS

Selecting the instrumental case study

The case for this study was purposively selected based on the reputation of the School as one of the first Schools for the Deaf in South Africa. It was established in 1958, and is thus a well-established school. The school is also representative of a typical School for the Deaf in South Africa which accommodates learners across all grades and phases and has a residential hostel for learners who do not travel home during the school week. The population for this instrumental case study includes learners, teachers, and staff members in the school, and representatives of organisations for the Deaf in South Africa. As indicated in Chapter 1 the following criteria were applied to select the school.

The school accommodates learners across the spectrum from hard of hearing to Deaf from Grades 0 to 12 in small classes grouped according to their mental capacity.

The school faces challenges which are representative of the challenges across the 47 Schools for the Deaf. These include decision-making at governmental level by politicians
without experience in Deaf education which lead to situations such as SASL being grouped with Braille as a tool or communication rather than the language of the Deaf (Parkin, 2010).

Teachers and principals not specifically trained in Deaf education is a concern raised by Parkin (2010) and the lack of teacher SASL fluency is raised by Magongwa (2010). Exclusion from equal opportunities in education has led to many Deaf school-leavers remaining almost illiterate and not being able to integrate effectively into mainstream society.

The selection of this specific school was also convenient as it was close enough for the researcher to allow longitudinal engagements with the various participants in this study over a period of three months.

Obtaining permission to conduct the research

Following permission obtained from the ethics committee of the Faculty of Health Sciences to conduct the research, the researcher approached the officials from the Department of Education involved with the school in which she intended to conduct research (see Appendix H). She informed the principal of the school and the school governing body of her intention to conduct research, and obtained their permission.

Introducing the research to the school community

A power-point presentation (see Appendix P) was made and presented to the whole school in assembly. SASL was used concurrently to ensure that all present could understand it. The parents were informed about the intention to conduct research during a parent
meeting held in the school hall. A letter addressed to the parents who could not attend the meeting was sent home via the learners (see Appendix D). The researcher described the purpose of the research and what participation would entail.

The participants were told that their names and the name of the school would be kept confidential and that the information provided to the researcher would be used only for purposes of the research study. There was no deception; nothing was withheld and the information was accurately presented. The potential risks and benefits of participation were clearly stated (De Vos et al., 2011). The participants were told they had the right to choose to participate and that they were free to change their minds without any consequences at any time. The participants’ informed consent was then requested based on the information provided to them and they could take a thoroughly reasoned and voluntary decision (Lapan et al., 2012).

Obtaining permission from the participants and their parents

Following this presentation, each learner and member of staff who agreed to participate, received a consent or assent form if younger than 18 years of age (see Appendix A, B and C). These were completed after participants had taken their time to make the decision. The letter of permission was returned by most parents. The researcher then met with each group separately to describe the details of the study and what participation would entail in SASL, as well as spoken and written English.

The research for this case study was conducted in three phases. The methodology with reference to the selection of the participants and the gathering of the data is discussed
separately for each phase. The data was analysed across the three phases as discussed in paragraph 4.7.

The participants in this study comprised 45 participants in phase one, 14 participants in phase two, and 50 participants in phase three. This sample included (1) all the learners whose parents gave permission for their children to take part in the research and who gave their consent to participate, (2) school staff, and (3) a representative of the school governing body, two representatives from the organisations for the Deaf, a representative of the parent support group, and a volunteer who provided psycho-social intervention.

The research in this study was done in three distinctive phases each of which will be discussed separately with reference to the selection of participants and the data gathering. The procedure for the data analysis follows later and a detailed description of the research process is presented before the phases are discussed.

*Conducting the research*

The research study comprised three separate but interconnected phases. Phase 1 involved working with the learners in the school across the foundation, intermediate, and senior phases. Phase 2 involved working with the staff. Phase 3 involved working with representatives of the school community. The work sessions are presented below:

**Phase 1 - Learners**
- Foundation Phase: two 30 minute work-sessions over a period of two weeks after lunch to create drawings
- Intermediate phase: two and a half hour work session to create collages
 Senior phase: two hour work session to create collages and essays

Phase 2 – Teachers and other staff
 Teachers and teaching assistants: two 45 minute sessions over a period of two
weeks to create mind-maps
 In-depth interviews: one to two hour individual interviews for three members
of staff

Phase 3 – Representatives of the whole school
 Two and a half hour World Café event in the school hall involving learners,
staff, representatives from organisations for the Deaf, the governing body, and
the parent support group

Analysing the data

The data collected was analysed using visual and thematic analysis in phase 1 and
thematic analysis in phase 2 and 3 of the study. Thematic analysis is described by Braun and
Clarke (2006) as a useful and flexible method for identifying, analysing, and reporting
patterns or themes within data in rich detail.

The findings from phase one and phase two revealed main and sub-themes (Braun &
Clarke, 2006). These findings were used to develop four statements which were used as a
point of departure for the conversations in the World Café event conducted in phase three.
The themes revealed for phase three were incorporated with the themes from phases one and
two and were used to develop guiding principles which are discussed in Chapters 6 and 7.
Writing the research report

The research report was written as the study progressed. The findings were presented honestly and accurately. The study includes the perspective of the participants and not only the researcher’s point of view. The report provides an accurate account of the research process, the findings of the study, and the researcher’s recommendations based on an analysis of the cumulative findings of all three phases in the study.

Feedback to the school

The researcher will present the findings of the study to the school once the study has been completed. The researcher has made the suggestion that the findings be presented in school assembly which includes representatives from organisations for the Deaf and the DoE. A further suggestion to share the findings with parents at a parent meeting in the school hall was also made.

4. 6. RESEARCH METHODOLOGY

4. 6. 1. Phase 1 – Understanding learner experiences of promoting wellbeing

The aim of this phase of the study was to understand the learners’ experiences of wellbeing and to develop an understanding of the ways in which they envision wellbeing in the future.
The research questions asked in this phase of study was: “How do learners in a School for the Deaf experience the promotion of wellbeing?” The question was made accessible to the learners by asking them what makes them feel happy at school and helps them to do well. They were also asked what they would like to happen at school to help them feel well and do well in the future.

Selection of participants

The intention was to include all 98 learners in the school in the study. However, in accordance with ethical principles, only the learners whose parents gave permission for their children could take part in the research and who were present on the day of data collection, were included in the research. The participants in this study therefore included a total number of 45 participants across the three phases. The number of participants from each grade in the three phases is indicated below:

- Foundation phase participants included Grade 1 (N=6) out of 7, Grade 2 (N=9) out of 9, Grade 3 (N=4) out of 4, the foundation phase remedial class (N=4) out of 5, and the foundation phase special needs class (N=8) out of 12, with a total of (N=31) out of 35
- Intermediate phase participants included Grade 4 (N=3) out of 4, Grade 5 (N=2) out of 5, and Grade 6 (N=3) out of 5, with a total of (N=8) out of 12
- Senior phase participants included Grade 8 (N=1) out of 6, Grade 9 (N=3) out of 6, and Grade 12 (N=2) out of 8, with a total of (N=6) out of 26

Pilot Study – Foundation Phase
A pilot study was conducted only in the foundation phase remedial class with 4 learners (N=4) out of 5, who were present on the day of the pilot study. The pilot study was only conducted with this class because of the limited time allocated to it as the researcher; the school management team and teachers were concerned about using the children’s learning time. The pilot study was used to refine the activities for phase one.

The remedial class learners (N=4) were asked to describe their current experiences of wellbeing; what makes them feel happy at school and what helps them to do well. Upon completion of the pilot study, the researcher realised that due to time constraints, amendments to the planned activities in phase one were necessary. The use of magazines, scissors, and glue distracted the learners, and the activity was not completed within the 30 minute time-slot. After a second activity using drawing only, the participants in the foundation phase remedial class were able to complete the task in the 30 minute time-slot.

Phase 1 - Selection of Participants

<table>
<thead>
<tr>
<th>Foundation phase</th>
<th>Intermediate phase</th>
<th>Senior Phase</th>
</tr>
</thead>
<tbody>
<tr>
<td>31</td>
<td>8</td>
<td>6</td>
</tr>
<tr>
<td>Drawings</td>
<td>Collages</td>
<td>Collages and essays</td>
</tr>
<tr>
<td>2 X 30 minutes per class</td>
<td>2 hours</td>
<td>2 hours</td>
</tr>
</tbody>
</table>

Participants – Foundation Phase
In phase one in the foundation phase the researcher involved Grade 1 (N=6), Grade 2 (N=9), Grade 3 (N=4), the foundation phase remedial class (N=4), and the foundation phase special needs class (N=8), with a total of (N=31).
Data gathering

WORK SESSIONS - FOUNDATION PHASE:

<table>
<thead>
<tr>
<th>Foundation Phase</th>
<th>N</th>
<th>Method</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 1</td>
<td>6</td>
<td>Draw-and-write/talk</td>
<td>2x 30 minutes</td>
</tr>
<tr>
<td>Grade 2</td>
<td>9</td>
<td>Draw-and-write/talk</td>
<td>2x 30 minutes</td>
</tr>
<tr>
<td>Grade 3</td>
<td>4</td>
<td>Draw-and-write/talk</td>
<td>2x 30 minutes</td>
</tr>
<tr>
<td>Remedial</td>
<td>4</td>
<td>Draw-and-write/talk</td>
<td>2x 30 minutes</td>
</tr>
<tr>
<td>Special Needs</td>
<td>8</td>
<td>Draw-and-write/talk</td>
<td>2x 30 minutes</td>
</tr>
</tbody>
</table>

Table 4.1. Indicating foundation phase data collection

Following the pilot study, the researcher arranged for an actual work sessions with the foundation phase learners. The session was conducted in a pre-selected area outside the foundation phase classrooms that forms part of the play area. It is a concrete floor with a roof, tables, and chairs. This environment is familiar to the learners and in close proximity to the teachers in the classrooms and the hostel parent in the foundation phase girl’s hostel, should additional support have been required in an emergency. All staff members had been briefed on the proceedings and were aware of the planned activities and what they would entail. The 31 foundation phase learners had easy access to the foundation phase toilets. Two group sessions of 30 minutes were held over a period of two weeks with each class after lunch.

In the first research phase the methodology used was phenomenological in nature as the focus was on obtaining an understanding of the learners’ lived experiences of the promotion of their wellbeing within the within the context of a bounded system, selected as
the case study (see Appendix I). Whitehead and McNiff (2006) describe lived experience as dynamic and ever-changing since individuals learn about themselves through their on-going interactions with others and the environment. From a complex interactive dynamic perspective, it is in and through these interactions that their wellbeing is promoted. The promotion of wellbeing is therefore not viewed as an intervention that needs to take place, but rather as the recognition of everyday experiences which facilitate a sense of doing well and being well.

In the work-sessions the learners were first asked to describe their current experiences of wellbeing; explained as what makes them feel happy at school and helps them to do well. In the second activity, the learners were asked to describe what they would like to have happen at school to help them feel well and do well.

In the foundation phase the method applied in this research is described by Mitchel et al. (2011) as ‘draw-and-write’ and ‘draw-and-talk’ to aid the participants’ exploration of reflections, perceptions, and views which may be challenging to express in words alone. This is particularly relevant to the learners in the younger classes, the remedial and special needs classes where signed vocabulary is quite limited. The use of verbal discussion on completion of the work enabled the researcher to gain a deeper understanding of the participants’ meanings of the representations in the drawings. The active role that children play in this method of data is pivotal: a stimulus for communication and a way to get to their inner world. The researcher sat with the learners and was accompanied by a teacher or teaching assistant in each activity.
The learners were asked to draw their responses and the researcher provided white blank A3 and A4 paper, either of which size the learners could select, felt-tip pens, and wax crayons. These were laid out on a large table where the learners could complete their tasks.

The learners were able to create their drawings easily and enjoyed the activity, made evident by their excitement during the task (see Appendix J). They drew the pictures but some learners felt that they also wanted to add words or basic sentences; some asked the researcher for assistance with the spelling of certain words.

Once the learners had completed their drawings, they worked one-on-one with the researcher in a separate area of the court-yard where privacy was assured and confidentiality could be maintained. The researcher asked for clarifications of the pictures to ensure that she accurately captured and understood each participant’s meaning. The learners’ responses were presented in SASL. The researcher took notes during the activity which were later added to the data set for analysis. This process was repeated for each learner in each phase in all the activities.

The teacher or teaching assistant sat with the remaining learners who were still busy with the activity. The researcher instructed the learners that if they had completed their tasks and while they were waiting for the researcher they could communicate with their class mates and draw or read a range of books provided for them by the researcher.

Two learners in the special needs class were able to complete activity two. The remaining six learners were not able to complete the activity due to their level of cognitive development. The researcher explained the activity to the children in SASL in a variety of
ways and used examples for clarification but the majority of this class struggled to understand and answer the question.

Participants – Intermediate Phase

In phase one in the intermediate phase the researcher involved Grade 4 (N=3), Grade 5 (N=2), and Grade 6 (N=3), with a total of 8 participants (N=8).

Data gathering – Intermediate Phase

<table>
<thead>
<tr>
<th>Intermediate Phase</th>
<th>N</th>
<th>Method</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 4</td>
<td>3</td>
<td>Collage</td>
<td>2.5 hours</td>
</tr>
<tr>
<td>Grade 5</td>
<td>2</td>
<td>Collage</td>
<td>2.5 hours</td>
</tr>
<tr>
<td>Grade 6</td>
<td>3</td>
<td>Collage</td>
<td>2.5 hours</td>
</tr>
</tbody>
</table>

*Table 4.2. Indicating intermediate phase data collection*

The Grade 5 classroom in the intermediate phase block was made available to the researcher for the purposes of the planned activity. Due to the small number of learners in this phase, the researcher conducted a work session with all the learners combined as a single group for two and a half hours to fit in with the timetable availability of the learners. This allowed for activity one and two to be completed in one session. In activity one, learners were asked to describe their current experience of wellbeing; what makes them feel happy at
school and what helps them to do well. In the second activity, the learners were asked to
draw what they would like to have happen at school to help them feel well and do well (see
Appendix I).

The learners were given the choice of working individually, in pairs, or in groups of
three to produce a collage. The researcher had A2 and A3 blank white paper, magazines,
scissors, and glue available for the learners to make their collage. The researcher showed the
learners an example of a collage help them understand the task.

Collage-making is described by Butler-Kisber and Poldma (2010) as one of the
“useful, visual approaches that can inform qualitative research as they are interpretive tools
that inform experiential research approaches” (Ibid, p. 1, 2010). The authors highlight the
fact that there are many realities and ways of doing and understanding which develop out of
human interactions and activities, and these are understood to be contextually dependent.
Visual inquiry is used by researchers to reveal insights and to reconstruct data so as to
understand phenomena which can lead to the formulation of ideas, and an understanding of
the relationships that connect the ideas. The learners chose to work individually and in pairs
to create their collages (see Appendix J). Once they had completed their collages, they
worked one-on-one with the researcher in a separate space where privacy was assured and
confidentiality could be maintained because their signing could not been seen by the others;
they sat facing the researcher with their backs facing the group. The work was discussed
with the researcher upon completion while the remaining learners were supervised by a
teaching assistant. The learners continued with their activity or read a book during the time
the researcher worked with individuals or pairs of learners to discuss their collages. The
researcher made notes of learner’s comments which were added to the data set.
Some learners chose to work on their own and others chose to work in pairs. All the learners produced collages. Some added words, written statements, and/or basic sentences on their collages. The researcher took notes during the activity which were added to the data for thematic analysis.

**Senior phase – selection of participants**

The researcher conducted a work-session with Grade 8 (N=1), Grade 9 (N=3), and Grade 12 (N=2), with a total of (N=6) learners combined as a single group for a two hour session to fit in with the timetable availability of the learners.

**Data gathering – Senior Phase**

**WORK-SESSIONS – SENIOR PHASE**

<table>
<thead>
<tr>
<th>Senior phase</th>
<th>N</th>
<th>Method</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade 8</td>
<td>1</td>
<td>Collage and essays</td>
<td>2 hours</td>
</tr>
<tr>
<td>Grade 9</td>
<td>3</td>
<td>Collage and essays</td>
<td>2 hours</td>
</tr>
<tr>
<td>Grade 12</td>
<td>2</td>
<td>Collage and essays</td>
<td>2 hours</td>
</tr>
</tbody>
</table>

*Table 4.3 Indicating senior phase data collection*

The senior phase HOD made her classroom available to the researcher for the two hour work session. The researcher worked independently with these classes due to the small number of participants and the age of the learners. This allowed for activity one and two to
be completed in one session. In activity one, the learners were asked to describe their current experiences of wellbeing; what makes them feel happy at school and helps them to do well (see Appendix I). In the second activity, the learners were asked to draw what they would like to have happen at school to help them feel well and do well. The learners were given the choice of working individually, in pairs, or in groups of 3 to produce a collage. The researcher had A2 and A3 blank white paper, magazines, scissors, and glue available for the learners to make their collages. The researcher had an example of a collage available to show the learners to help them understand the task.

All the learners produced individual collages (see Appendix J). Some learners added words, written statements, and/or basic sentences on their collages. The researcher took notes during the activity which were added to the data for thematic analysis. Only three learners divided tasks one and two into two distinct tasks. These three learners produced a collage in activity one and written statements for activity two. The remaining three learners produced a collage for both questions one and two.

Once they had completed their collages, they worked one-on-one with the researcher in a separate space where privacy was assured and confidentiality could be maintained because their signing could not been seen as the participants sat facing the researcher with their backs facing the group. These conversations for clarification helped the researcher ensure that the participants’ meanings were accurately captured. Their responses were included in the thematic analysis of the data.
4.6.2. Phase 2: Understanding teacher and other staff members’ perceptions of the promotion of holistic wellbeing

The aim of this phase of the study was to understand how teachers and other staff members perceive wellbeing to be experienced at school, and to develop and understanding of how they envision the promotion of wellbeing in the future.

The research question asked in this phase of study was: “How do teachers and other staff members employed at a School for the Deaf perceive the promotion of wellbeing?”

Phase 2 - Selection of participants

The intention was to include all staff in the school in the study. However, in accordance with ethical principles, only those participants who gave permission to be included in the research and who were present on the day of data collection were included in the research (see Appendix F). The total number of participants in this study was 14 participants which included teachers, teaching assistants, and management staff. The numbers are indicated below.

- Teachers and teaching assistants who participated in the focus group included teachers (N=7) out of 16, teaching assistants (N=2) out of 9, and 2 management staff (N=2) out of 5, with a total of (N=11) out of 34
- Staff who participated in the in-depth interviews included: a teacher (N=1) out of 16, management staff (N=1) out of 5, house-parents (N=1) out of 6, with a total of (N=14)
Pilot Study

The class teacher completed the activity planned for phase two (N=1) at the same time as the remedial class completed their pilot study. The class teacher (N=1) met with the researcher after she had completed the activity for staff members in phase two to describe her experience of completing the activity to the researcher. Feedback on how clearly she understood the instructions, as well as how appropriate she believed the vignettes to be in describing challenges faced by Deaf learners, as well as the appropriateness of the materials to create the concept-map, were reviewed. The researcher was satisfied with the activities planned for phase two and thus no amendments were made, however the teacher and the researcher debated whether she was supposed to include her own experience of wellbeing. The researcher explained that this was up to the teacher and that there were no correct or incorrect responses when responding to the vignettes and reflecting on how the school promotes opportunities for learner wellbeing.

The research methods used in this phase included a semi-structured focus group interview with nine staff members who produced mind-maps in response to the vignettes (see Appendix K), and three in-depth individual interviews with a member of the management team, a teacher, and a house-parent (see Appendix N). These sections are discussed separately.

Data gathering

In the second phase of the research the methodology was phenomenological in nature; the focus was on obtaining an understanding of the lived experiences of the staff in the
context of the bounded system (see Appendix L). In this phase of the study the teachers and other staff members employed at the school were asked to share their understanding of how wellbeing is experienced, and to share their ideas for the promotion of wellbeing in the future.

The researcher addressed the staff in a whole-school assembly and in a staff meeting in the morning before school, to explain the purpose of the study and what participation would entail. The researcher explained to the staff that their names and the names of the school would remain confidential, that the findings would be discussed only with the researcher’s supervisor, and that the feedback to the school would not reveal individual identities (see Appendix F).

In the work sessions and in-depth interviews, the staff members were given two activities. They were first asked to describe how they understood the learners to experience wellbeing; explained as *what happens at school that helps learners to feel well and to do well*. Secondly, they were asked to describe *what they would like to happen at school to help learners feel well and do well*.

**Phase 2 - Work sessions**

<table>
<thead>
<tr>
<th>Groups represented</th>
<th>N</th>
<th>Methods</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teachers</td>
<td>7</td>
<td>Semi-structured focus group using vignettes and creating mind-maps</td>
<td>2 x 45 minutes</td>
</tr>
<tr>
<td>Management</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teaching Assistants</td>
<td>2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Table 4.4. Indicating phase 2 work-sessions*
Phase 2- Data Gathering

The researcher conducted a semi-structured focus group interview with 11 participants, including teachers (N=7), management staff (N=2), and teaching assistants (N=2). Focus groups are described by De Vos et al. (2011) as group interviews that allow for the researcher to better understand how the group feels about a particular phenomenon, in this case the promotion of holistic wellbeing. According to Krueger and Casey (2000) focus groups are less threatening than individual interviews and therefore helpful to obtain various perceptions. Most focus group discussions involve an interviewing style that allows for a certain amount of direction and structure that is useful for moving the discussion along, for controlling dominant group members, and for drawing out reticent respondents (Stewart et al., 2007).

In the first part of the work session, the teachers and teaching assistants were presented with three vignettes, described by Gourlay et al., (2014) as short stories about a hypothetical person or situation, traditionally used in research on sensitive topics. The vignettes described families of three Deaf school-aged children in South Africa and highlighted the challenges faced in each family in their home, in the school, and in the wider community (see Appendix K). The vignettes were read by the teachers. The participants were asked to identify similarities between the experiences described in the vignettes and the realities faced by Deaf children and their families in a group discussion. The researcher then briefly introduced wellbeing as a construct and asked teachers to identify ways in which wellbeing is currently promoted at the school amidst the challenges faced by the learners. The researcher made notes of the comments.
The participants then created concept-maps or collages in response to the vignettes to depict the ways in which the school created opportunities for wellbeing promotion, and also to share their ideas on ways in which they believed the school to be able to promote holistic wellbeing in the future. All the participants were asked to keep the shared information confidential. The researcher explained that when the participants discussed their work with the researcher, the discussion would take place in a private space in a separate section of the staff room so that conversations could not be overheard.

Due to their busy schedules, the group work session was conducted with the staff members over a period of two weeks during the 45 minute weekly staff meeting time-slot in the staff room.

The participants were given A3 and A4 blank white paper, felt-tip pens, wax crayons, magazines, scissors, and glue on a large table in the staffroom where they could complete their activity. These methods are described by Butler-Kisber and Poldma (2010) as being useful, visual approaches that can inform qualitative research as they are interpretive tools that inform experiential research approaches.

Once the participants had completed the concept-maps or collage the researcher sat with each participant in the second part of this work-session to discuss the work and to ensure that the meanings were accurately understood by the researcher. This took place in a separate section of the staffroom from where the rest of the teachers and teaching assistants were sitting to ensure that privacy and confidentiality were maintained. The researcher took notes which were added to the data set for thematic analysis. During the thematic analysis of the participants’ work, the researcher also conducted follow-up activities with them to clarify
meanings, to probe, and to extend their thinking. This took place in person, telephonically, and via email. Some teachers did not feel comfortable to discuss their work in person with the researcher. They were happy to hand in the work and felt that their mid-maps and notes were self-explanatory.

In the follow-up activity, another focus group was held a week later in the weekly staff meeting. Staff members were asked to indicate how they perceived the promotion of wellbeing at the school in the future. The same procedure as described for the first focus group was followed.

*Phase 2 Data Gathering – In-depth individual interviews*

In-depth individual interviews were conducted with the principal of the school (N=1), a house-parent (N=1), and a Deaf teacher (N=1), with a total of 3 (N=3) participants in this activity.

In-depth interviews (see Appendix N) are described as conversations with a purpose to understand the meaning a participant makes of their experiences to reveal their ways of thinking about a specific situation or event, their opinions, beliefs and ideas; and in this case the participants understanding of wellbeing promotion at their school (Mertler, 2012). The interviews conducted in this study took place in settings which were convenient for the participants. The interviews ranged from one to two hours. The researcher took detailed notes during the interviews with the permission of the participants and transcribed them afterwards.
<table>
<thead>
<tr>
<th>In-depth interviews</th>
<th>N</th>
<th>Method</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management</td>
<td>1</td>
<td>In-depth interview</td>
<td>2 hours</td>
</tr>
<tr>
<td>Deaf teacher</td>
<td>1</td>
<td>In-depth interview</td>
<td>2 hours</td>
</tr>
<tr>
<td>Hostel parent</td>
<td>1</td>
<td>In-depth interview</td>
<td>1.5 hours</td>
</tr>
</tbody>
</table>

*Table 4.5. Indicating phase 2 in-depth individual interviews*

4.6.3. **Phase 3 – Identifying current and anticipated activities and interventions to promote holistic wellbeing**

The aim of the third phase of the study was to establish a collective understanding of the way in which holistic wellbeing can be promoted in a School for the Deaf. The process encompassed the identification of current and anticipated activities that can be linked to the themes that has been identified in the previous phases by applying the World Café method (http://www.thewordcafe.com).

The question asked in this phase of study was: The question asked in this phase of study was: “How can the learners’ experiences and the teachers’ perceptions inform our understanding of the promotion of holistic wellbeing in School for the Deaf used as an instrumental case study?”

*Phase 3 - Selection of participants*
A total of fifty participants participated (N=50) were involved in this phase of the study (see Appendix G). These participants were purposively selected to represent the various subgroups involved at various levels in the school context. The learner selection was based on participation in the first phase which showed: an understanding of the context, an ability to participate because of developmental level, and permission to participate granted by their teachers. The Grade 12 learners were not granted permission as they were involved in exam preparations. There were five Grade 8 participants, six Grade 9 participants and seven Grade 11 participants.

The inclusion of the learners’ points of view ensured that their experiences were captured first hand and not based on teacher and parent observations only. The literature reports on limited opportunities for learners with special needs to share their experiences of wellbeing promotion in schools (Nelson & Prilleltensky, 2010); most reports tend to be teacher or parent observations. This study aims to address this gap in perspective by including the voices of the learners.

Members of the school management team comprised (N= 5) which included the principal, the deputy principal, and the three HOD’s of the foundation, intermediate, and high school phases; selected due to the positions of influence they held in the school context.

Teachers (N=10), from the three phases participated. There were five teachers from the foundation phase, two teachers from the intermediate phase, and three teachers from the high school. The sign language teachers were included to capture the promotion of wellbeing from a classroom perspective. All the teachers were invited to participate but only the teachers who gave their consent were included.
House parents (N=6), with representatives from the senior and junior boys and girls hostels participated. Three house parents from the foundation phase and three house parents from the high school participated. All the house parents who were employed at the school participated.

Support staff (N=4), comprised the school nurse, the audiologist, the speech therapist, and a volunteer who provides psycho-social support to the learners. All the support staff employed at the school participated.

Other participants were: the parent who coordinates the support group for parents (N=1), and a teaching assistant (N=1) who plays various roles in the school setting, namely parent, member of the school governing body, and representative of HI HOPES (early intervention program for the Deaf).

The school maintenance team was represented by the bus driver (N=1), and the PRO representative (N=1). A school governing body representative who is also the parent of a learners participated (N=1), to represent school leadership. For a perspective beyond the school setting, the director of education at DeafSA participated (N=1). The Department of Education was invited to participate and two representatives were expected on the day but no representation from the Department was available for the actual event.
Phase 3- Overview of Participants Involved In the World Cafe Event

<table>
<thead>
<tr>
<th>Participants</th>
<th>Numbers (N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learners</td>
<td>18</td>
</tr>
<tr>
<td>Management</td>
<td>5</td>
</tr>
<tr>
<td>Teachers</td>
<td>10</td>
</tr>
<tr>
<td>House parents</td>
<td>6</td>
</tr>
<tr>
<td>Parent support group</td>
<td>1</td>
</tr>
<tr>
<td>Governing body</td>
<td>1</td>
</tr>
<tr>
<td>Teaching assistant</td>
<td>1</td>
</tr>
<tr>
<td>PRO rep</td>
<td>1</td>
</tr>
<tr>
<td>Nurse, speech therapist, audiologist</td>
<td>3</td>
</tr>
<tr>
<td>Volunteer who conducts psych-social intervention</td>
<td>1</td>
</tr>
<tr>
<td>Maintenance</td>
<td>1</td>
</tr>
<tr>
<td>Bus driver</td>
<td>1</td>
</tr>
<tr>
<td>Organisations for the Deaf</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>50</strong></td>
</tr>
</tbody>
</table>

*Table 4.6. Indicating participants in world café event*

Phase 3- Data gathering

In the third phase, following the analysis of the results obtained in phases one and two, a conversation was initiated between a group of participants who represented the various subgroups in the school community namely teachers, parents, house parents, learners, teaching assistants, management staff, administrative staff, therapists, volunteers, maintenance staff, representatives of organisations for the Deaf, and the school governing-body.
A World Café event was originally planned by the researcher. This is described by Brown and Isaacs (http://www.theworldcafe.com) as a conversational process that helps groups to engage in constructive dialogue around important questions, to build personal relationships, and to foster collaborative learning. The World Café is powerful because of the cross-pollination of exchanged information through the movement between tables made possible because of a café-style social context that allows for the sharing of information in a friendly, relaxed, and non-threatening manner (http://www.theworldcafe.com). This process encourages group dialogue around issues experienced in a specific community where the event is held. The thinking behind hosting a World Café event was to gain a better understanding of an individual case; in this case, the promotion of wellbeing in a School for the Deaf. To ensure a shared vision, a representative sample of people in the school community were invited to participate in the event, based on their ability to contribute to a deeper understanding of the process of promoting holistic wellbeing in the school community. The authors point out that this method is suitable for people with disabilities, thus making it a method suitable for working within the Deaf community.

Brown and Isaacs (http://www.theworldcafe.com) recommend a suitable context and a hospitable venue. Questions that matter need to be discussed and all participants’ contributions valued which allows for diverse perspectives to be shared; in this way insights are achieved and patterns in the context identified. The advantages of a variety of participants in this study allowed for a broad understanding of the promotion of wellbeing at the school. Prilleltensky (2012), comments on the value of including the perspectives of all participants in the setting regarding the promotion wellbeing. For change to happen, it is suggested that the viewpoints of all community members need to be included. Change and transformation need to develop from a basis of equity and collaboration. As stated by the literature, the Deaf often a group for whom decisions are often made without their involvement; the World Café event thus provides a
means to create an inclusive process for sharing the viewpoints of the community as a whole (Mertens, 2009).

*World Café process on the day*

The World Café event is described by Brown and Isaacs (http://www.theworldcafe.com) as a conversational process that helps groups to engage in constructive dialogue around important questions, to build personal relationships, and to foster collaborative learning.

The researcher used this methodology to facilitate conversations between the participants about the promotion of holistic wellbeing in the School for the Deaf. The concept is intended to enhance individual thinking, and allow ideas to develop collectively. The conversations developed organically from the four statements for discussion which were developed out of the theme analyses from phases one and two.

The World Café event was held in the school hall; a context familiar to the participants with suitable lighting and space for approximately 50 people. Suitable lighting is necessary to ensure the visibility of signed conversations. The researcher also had access to a large screen which a power-point presentation was projected onto. The researcher set the tables with table cloths, arranged flowers, provided eats and drinks on the tables, and had tea, coffee, and water available on a separate table in the hall. The researcher made a range of writing materials available to the participants to scribe their ideas, namely A1 and A4 blank white paper, felt-tip pens, and wax crayons. Following suggestions made by the school management team, the researcher prepared two large tables for participants to be seated at. This was requested by the
management team to facilitate interpretation for the Deaf. The researcher had explained the process of the World Café to the management team but they felt that two tables with fewer interpreters would be the most effective arrangement for working with their school community.

To maintain an effective collaborative working relationship with the gate-keepers, the researcher accepted their decision despite the fact that this different from the specifications of a traditional World Café event in which participants move between tables allowing for conversations to flow and ideas to be generated. On reflection, smaller tables with more interpreters would be suggested for future events. Despite challenges, this methodology nevertheless allowed for large groups to work together and share ideas, allowing for ideas to emerge.

On the day of the event the participants arrived at the school hall at 8:00am, and the event ran until 11:00am. Refreshments were served as part of facilitating a friendly, relaxed atmosphere. The seating arrangements and participant responsibilities were clarified before the event started. These activities included scribing during the discussions, recording the discussions on Dictaphones and i-pads, photographing the event, and interpreting for the Deaf. As the participants had been briefed on their roles and responsibilities, the process ran smoothly.

The researcher made use of an interpreter to explain the World Café process to the whole group via a power-point presentation prepared by her (see Appendix P). The findings from phases one and two were briefly discussed and summarised into four statements which were used as the starting point for phase three. The power-point presentation included text and visual images to ensure understanding. The information was presented in SASL, written text, and spoken English in line with the school’s educational policy of signed bilingualism.
The participants were seated at two tables using random selection placement. The researcher asked participants at each table to volunteer to act as a host.

The researcher presented the participants with four statements about wellbeing promotion which had been derived from the data gathered in phases one and two (see Appendix O). These statements were used as starting points for the participants to working collaboratively on developing ideas for the promotion of wellbeing at the school. Each of the four statements was then presented for discussion. The researcher asked the participants to first discuss each statement in small groups of two or three and then give feedback to the larger group. The participants were initially reserved about sharing their ideas but once a few started the others became more confident and joined the discussions. They started to share their thoughts more openly and the conversation and energy levels gradually increased; it was clear that the learners were mostly happy to share their ideas, and they contributed meaningfully to the discussion.

To capture the data, scribes in each group made extensive notes on A3 posters. Audio-recording was also used although limited because interpreters who were supposed to be voicing-over for the Deaf did not always do so and thus recording was not meaningful as some information was not captured. The researcher and an assistant moved between the two groups, listening to their discussions, asking questions, and encouraging the participants to extend their thinking.

As this methodology had never been used in the School for the Deaf before, and the researcher did not have prior understanding of how the complexities of a large group would manifest, a suggestion to make use of more interpreters and smaller groups is recommended for
future activities and discussions of this nature. A further suggestion would be to video-record rather than audio record data collection as there were times when the interpreters did not voice-over for the Deaf making this method of data collection ineffective. The participants in this event had however specifically asked not to have the event video-recorded and their wishes were respected, this type of recording was not used.

4. 7. DATA ANALYSIS ACROSS THE THREE PHASES

The data in this study was both visually and thematically in phase 1 and thematically analysed in phases 2 and 3.

4. 7. 1. Visual Analysis

Visual data analysis is used when data is collected in visual form, for example drawing, collage, and concept-mapping in this study. The researcher examined the images drawn by the learners in terms of positioning on the page, the quality of the lines and the size of the images (Mitchel et al., 2011).

Concepts can be difficult to explain verbally therefore drawing allows for meaning to be captured in an alternative way and allow for aspects of the self to be revealed (Ibid, 2011). The researcher employed the technique described by the authors of talking about the drawings with the participants to elicit deeper meanings embedded in their work in a collaborative way. The researcher made notes of the comments made by participants.
4. 7. 2. Thematic Analysis

According to Attride-Sterling (2001) thematic analysis is a useful and malleable method for identifying, analysing, and presenting patterns or themes in data sets to reveal rich detail. Braun and Clarke (2006) describe a theme as something important about the data in relation to the research question which is common throughout the whole data set. According to Vaismoradi et al. (2013) thematic analysis is a suitable approach for answering questions that explore peoples’ concerns or beliefs about an occurrences or events.

Thematic analysis requires moving back and forth between the data sets with the researcher making notes and assigning possible coding schemes in the process. Braun and Clarke (2006) describe six phases of thematic analysis. The first phase involves becoming familiar with the data through reading and re-reading. This is followed by phase two: the creation of initial codes and setting out the data into meaningful groups. Phase three involves identifying themes which requires the researcher to look at the data from a broader perspective. Different codes combine to form a main theme. Connecting ideas and themes takes place at this point of the process resulting in themes and sub-themes. Phase four involves re-examining the themes, verifying their connections and validity to the data set which leads to an understanding from a holistic perspective. Phase five involves identifying the essence of the themes and revealing what aspect of the data is captured in each theme. Each theme needs a written analysis which takes into consideration the theme in itself, and its relation to other themes and the data as a set. Theme names need to be concise and give an immediate sense of what the theme represents. Phase six involves the final analysis and writing of the report. Here the researcher needs to present ideas to others to confirm the validity of the themes. This needs to be a clear, to the point, simple, and accurate review of
the story the data tells. The write-up requires evidence of the themes and examples from the data that represents the themes (Braun & Clarke, 2006; Babbie, 2013).

The analysis requires going beyond the surface of the data; questioning the meanings of the themes, what assumptions underpin them, what would cause these to arise, why they are revealed in this manner, and what the overall story is (Braun & Clarke, 2006). This requires the researcher to be flexible, clear, and explicit in their approach, with rigorous application of both theory and method to produce insightful analysis that can help to answer particular research questions.

Vaismoradi et al. (2013) explain how the quality of the analysis is dependent on the quality of the data collection, which is the researcher’s responsibility. Quality data collection involves accurately capturing participants’ words, feelings, and behaviours (Braun & Clarke, 2006).

Collage-making and concept-mapping are described as interpretive tools that allow researchers to obtain and understand visual data to create new knowledge (Butler-Kisber & Poldma, 2010). The authors describe how using collage allows for ideas to become explicit because of the co-construction of understanding between the researcher and the participant; described as visual-listening. Ideas are conceptualised through reflection. Their creations were discussed with the participants to enhance meaning, and to generate ideas.

Concept-mapping is described by Butler-Kisber and Poldma as a visual means of expressing ideas held in the mind. The new ideas that developed out of the concept maps were used to understand the participants’ ideas surrounding their experiences the promotion
of wellbeing in the School for the Deaf. Themes emerged in the collages and were included in the analysis.

In this study the researcher employed inductive analysis; the data collected from the drawings, collages, concept maps, and discussion in the work-groups was coded without trying to fit it into a pre-existing coding frame or the researcher’s analytic preconceptions. The thematic analysis was data-driven.

The researcher worked alongside the participants and explored the work they produced. The content was described through the pictures drawn and chosen by the participants, and further confirmed by words and sentences which the added to the work. The researcher used these statements and the content of the pictures to develop themes which described the entire data set, and created sub-themes created under main themes.

4. 8. RIGOR OF THE STUDY

To ensure the trustworthiness of this research study through crystallisation, the researcher applied the work of Ellingson (2009), Guba and Lincoln (1985), Tracey (2010), and Mertler (2012) in all three phases of study.

The eight criteria identified by Tracey (2010) as markers of quality in qualitative research were applied. They are: a worthy topic, rigor, sincerity, credibility, resonance, significant contribution, ethics, and meaningful coherence. Each criterion is discussed below with reference to Tracey’s work, followed by an indication of how the criterion is adhered to in this research project.
**Worthy topic:** The topic of the research in this study is relevant since the Deaf population often have decisions made on their behalf (Mertens, 2009), without their involvement. This study was designed to include the perspectives of the Deaf in the promotion of holistic wellbeing in a School for the Deaf addresses this concern and to promote social justice and equity. The Deaf were included in phases one, two, and three of the study.

**Rich rigor** is generated through variety. To ensure such rigor, qualitative researchers need to use appropriate and complex theoretical constructs, spend sufficient time in the field to collect abundant data, conduct appropriate sampling, and consider the context in which the research is conducted to ensure depth in the data collection and analysis (Tracey, 2010; Mertler, 2012).

To ensure rich rigor in this project the researcher established a theoretical basis for the research through a study of the relevant literature on community psychology, the holistic wellbeing framework, and various perspectives on the Deaf as a group with specific reference to their needs, challenges, and strengths. Furthermore, sufficient time was spent in the context. The research was conducted over a period of six months in which the researcher spent at least 150 working hours in the context. The researcher was also employed in the context for a period of 4 years prior to the year of data collection and was therefore familiar with the research context. Engagements with the participants involved reflexive discussions that further added to the richness of the data. The data collection for phase one in the foundation phase took place over a two week period with an hour time slot allocated to each of the following classes: Grades 1, 2, and 3, the remedial class, and the special needs class. A two and a half hour time slot was allocated to the intermediate phase and a two hour slot to
the senior phase. The teachers and teaching assistants were allocated two separate 45 minute time slots and follow up activities including one-on-one discussions, telephone calls, emails, and sms correspondence, to ensure that the participants’ meanings were accurately captured and to allow for member-checking of the findings. Representatives of the staff including management, a Deaf teacher, and a hostel parent were each allocated between one and two hour interviews. A three hour World Café event was hosted to capture ideas for the promotion of the holistic wellbeing of the whole school community and relevant stakeholders.

Rigorous data analysis was conducted by transcribing all the data according to set guidelines, applying appropriate data analysis models, and being transparent about how the data was chosen and organised into the research report. Photographs were taken of each piece of work in phases one and three and a representative sample of these was added into the addendum. Notes and the transcribed interviews were added into the addendum along with lists of questions and activities conducted in all the phases, as well as the vignettes, statements for discussion in phase three, copies of consent letters, and all the relevant documentation pertaining to the study.

**Sincerity** in research implies that the researcher’s biases and weaknesses and how these impacted the research are honesty and transparently recorded (Tracey, 2010). Sincerity is achieved through self-reflexivity, and transparency by considering one’s own subjective values, biases, and inclinations; and how these impact on the research process and on the participants. Member checking means meeting with all the participants to ensure that their meanings had been accurately captured, and meeting the representatives of the school management to discuss the data collection at each of the three phases of the study to ensure
accuracy and transparency. The researcher worked one-on-one with each participant in phases one and two to ensure that participant meaning was accurately captured. The procedures and findings were shared in discussion with the research supervisor throughout the research process. The researcher was also aware that being familiar to the participants had a positive effect on gaining access to the site and being able to develop a study based on community need, as was identified during her previous employment at the school; at the same time the researcher was also aware that the participants might have been keen to please her and to be seen in a favourable light. The researcher explained the value of honest responses to the participants, and made sure they understood that their names would remain confidential and their responses would not be shared with other staff members; they would remain anonymous.

**Transparency** refers to honesty about the research process; it includes disclosure of the study’s challenges, unexpected experiences, and revelation of the ways the research foci transform over time (Ibid, 2010). Transparency also means that credit is given where due in terms of author order, and acknowledgements of the participants, funding sources, research assistants, and supportive colleagues. The primary researcher conducted the data collection independently but each aspect and phase of the study was planned and conducted in close collaboration with her research supervisor.

Details of the research, including details of the activities in all three phases, the interview questions, arrangements, photographs, and transcribed data are provided with clear documentation of the whole process. The challenges experienced in phase three in the way the World Café event evolved, were clearly reported. The primary researcher gave credit is given to all the participants and the participating researcher as well as all to those who
assisted with the research process. This was achieved by thanking everybody for their participation. The researcher will provide feedback to the school where the data was collected, the organisations for the Deaf who participated in the study, and the DoE who granted permission for the study to be conducted. The researcher explicitly acknowledged the name of the research supervisor who guided her throughout the process.

**Credibility** refers to the trustworthiness and plausibility of the research findings. Lincoln and Guba (1985) suggest that credible reports are trustworthy enough to act on and inform decisions. Qualitative credibility is achieved through thick descriptions that include concrete detail, explication of tacit knowledge, and showing the complexity of the data. Crystallisation helps to ensure the plausibility of findings (Tracey, 2010). Member checking further enhances rigor in a study (Mertler, 2012).

Providing detailed data regarding the context and the process enables readers to reach their own conclusions about the findings of a study. Tacit knowledge was noted and confirmed through discussion before inclusion in reports, since hidden assumptions and meanings can guide actions relating to the facilitation of sustainable and holistic wellbeing. It is believed that a researcher is able to go beyond the surface to explore issues which are assumed, implicit, and have become part of the participant’s common sense, all critical to understanding interactions and behaviours relating to the research. Working one-on-one with each participant in phases one and two ensured that a deeper level of understanding was reached between participant and researcher. Representatives of the whole school community likewise participated in phase three to ensure a deeper level of understanding about the promotion of holistic wellbeing at the school; all the relevant voices were heard.
Crystallisation is a process that encourages researchers to gather multiple types of data, and employ various methods and theoretical frameworks to open up a more complex, in-depth, but still thoroughly partial, understanding of phenomena (Ellingson, 2009). Crystallisation is used to replace the concept of triangulation that assumes a single reality triangulated by different data sets which does not lay neatly over the research from interpretive, critical, or postmodern paradigms which view reality as multiple, fractured, contested, or socially constructed. Mertler (2012) reinforces the use of multiple sources of information to help establish accuracy in the data and subsequent findings of a study.

To ensure crystallisation of the data in this project, the researcher applied various data gathering methods. Various theoretical frameworks were applied to ensure a complex, in-depth, yet partial understanding of the process as opposed to finding one single truth. Since the data was collected from five classes in the foundation phase, as well as throughout the school in a variety of ways including drawing, collage, and essay, multiple types of data added to the complexity of the findings. Each class in the intermediate phase participated, as did a large sample of participants in phase three. This included a representative sample of staff, learners, and stake-holders which gave breadth to the sample and allowed for in-depth and complex findings.

Multivocality provides space for the emphatic understanding of a variety of opinions (Tracey, 2010). Qualitative researchers attend to viewpoints that diverge with those of the majority or of the author. Multivocality also suggests that authors are aware of cultural differences between themselves and participants. This is particularly relevant in the context as recognition of Deaf culture as well as recognition of the different cultural backgrounds; Africa, Indian, Coloured and White cultures have on participants’ experience and their
understanding of wellbeing. Since learners from a variety of races and cultures are accommodated at the school, the opportunity for a variety of perspectives is evident. Since the sample included Deaf participants, the perspectives of Deaf culture were also captured.

Multivocality was ensured through the inclusion of a variety of opinions from various groups including teachers, parents, learners, principals, departmental officials, and stakeholders involved in the schools. All opinions were valued and acknowledged and the participants were presented with a variety of ways to express themselves throughout the process. The cultural identity of the participants was respected and the researcher made sure that they obtained information about the cultural practices represented in the population from which the participants were selected. The researcher acknowledged Deaf culture by making sure that all information was presented in SASL, as well as written and spoken English. SASL interpreters were made available at the large group discussion. The learners were invited to participate in the study in response to the statement made by Nelson and Prillelstedtensky (2010) that the voices of children in educational settings are seldom heard, and that transformational practice in wellbeing promotion needs to be inclusive of all participants, including learners.

Member reflections enhance qualitative credibility as they are an opportunity for collaboration and reflexive elaboration by allowing the participants the opportunity to react, agree, or find problems with the research, and to ensure that their involvement in the research is a meaningful process in which they are actively involved at various phases of the study.

**Resonance** refers to the meaningful affect that research has on an audience, achieved through transferability to create opportunities for empathy, identification, and reverberation
of the research from readers who were not directly involved in the process (Tracey, 2010). Transferability aims to apply a study to contexts beyond the site where the research took place. The primary researcher will make the findings of the study available to the DoE and organisations for the Deaf who participated in the study so that dissemination of the results targets as wide an audience as possible.

**Significant contribution** points to ways in which research will facilitate deeper understanding and generate insight (Ibid, 2010). Contributions in research can be theoretical, practical, moral, methodological, and heuristic in nature. This research project will make a significant contribution to current research by:

- Developing a theoretical basis for the facilitation of sustainable holistic wellbeing in the South African context
- Establishing an integrated process to facilitate holistic wellbeing in a sustainable manner and describing how current processes in the school can contribute to the facilitation of increased holistic wellbeing promotion in the school community, and
- Providing substantive suggestions for future research and policy makers to engage in action that can lead to second order change

**Meaningful coherence** is achieved when a study accomplishes its goals, uses methods and practices that correlate well with relevant theories and paradigms, and interconnects the research foci, methods, and findings to existing literature. In line with a transformative approach, the design and method is selected to provide space for reflection and understanding of the complexity of the process under investigation. By including the opinions of learners in the foundation, intermediate, and senior phases; staff and representatives of the school governing body; as well as the parent support group and
organisations for the Deaf; the goal of inclusive research to achieve social justice was achieved.

4.9. ETHICAL CONSIDERATIONS

For the purpose of this study, an appreciation of the values stipulated by the Constitution of South Africa (1993), namely human dignity, equality, and freedom was adhered to. The philosophy of the DeafSA constitution which advocates respect for Deaf Culture, equalisation of opportunities, and a commitment to the holistic empowerment of the South African Deaf achieved through non-discrimination in terms of race, gender, education, and social standing, and through a focus on unity, transparency, accountability, and integrity, is acknowledged (DeafSA, 1999).

Permission to conduct this research has been obtained from the ethical commission of the North West University NWU-00060-12-A1, as well as from the Department of Basic Education, the principal of the school, and the school governing body. Finally the children gave assent to participate after being informed that the information would be kept confidential and that their anonymity was protected by not using their names when the data is reported, as suggested by Lapan et al. (2012). (See Appendix A, B and C).

The ethical principles adhere to are discussed below.

The researcher explained to the participant that voluntary participation meant they had the right to choose to participate, that it was acceptable for them to change their minds at any stage, and that no one would be angry or disappointed if they did not want to participate or wanted to withdraw (Marvasti, 2004).
Avoidance of potential harm or risk to the participants was upheld. Since the research sample is a potentially vulnerable population, it was an important requirement that participants not physically or emotionally harmed. In this regard, the researcher ensured competency at all stages of the research process. She implemented regular discussion and feedback with the management team of the school and her research supervisor (Lapan et al., 2012). Avoidance of potential harm (Johnson & Christensen, 2012) was further facilitated by making sure that the participants clearly understood the researcher. In addition to the learners, the researcher also took other vulnerable groups like the house-parents and teaching assistants into consideration.

Confidentiality was assured and the anonymity of all the participants who were involved in the research protected as proposed by Johnson and Christensen (2012). Their identities remained confidential and they were asked not to discuss each other’s work but to keep it confidential. The researcher used reference numbers for the participants in the research report to ensure their identities were not disclosed thereby achieving partial anonymity since the participants were known to each other.

All the data collected in this study was kept on a laptop belonging to the researcher and is protected by a password thus preventing others from accessing the material. Notes were typed up and photographs of the data were taken. The data was stored in the researcher’s home. The researcher and the promoter are the only people who have access to the raw data.
Compensation for participation was not offered in phases one and two, but all the participants were thanked (Marvasti, 2004). Refreshments and eats were provided in phase three.

Regarding the publication of the study, the researcher undertakes to present the findings accurately and objectively. The information will be presented clearly and unambiguously to avoid misappropriation by participants, the public, and colleagues (Kawulich, 2005).

The researcher will present the findings of the study to the school once the study has been completed. The researcher made a suggestion to the school that the findings be shared in school assembly, with representatives from the organisations for the Deaf and the DoE being resent as well. A further suggestion to share the findings with parents at a parent meeting in the school hall was made. If the researcher presents the findings of the study at seminars and conferences, she will continue to uphold the confidentiality of the school and the participants.

The data obtained in this study will be securely stored by NWU at the Centre for Child Youth and Family Studies in Wellington for a period of seven years. After this time, the data will be destroyed.

4.10. SUMMARY

In this chapter, the research design and methodology were presented. The study comprises three separate but interconnected phases. Phase one involved an exploration of
the learners’ experiences of wellbeing as well as their ideas about the promotion of wellbeing by applying draw and talk, collage, and essays. Phase two included staff perceptions of the promotion of wellbeing at the school as well as their ideas about the promotion of wellbeing in focus groups where teachers and teaching assistants responded to vignettes describing the challenges faced by Deaf learners. The participants produced collages to describe the ways in which the school currently promotes wellbeing as well as their ideas for future wellbeing promotion. In-depth interviews were conducted with three staff members. The findings from phases one and two were analysed using visual and thematic analysis, and the salient themes were used to develop four statements which were used as the starting point for discussions in phase three; the large group discussion involving a representative sample of participants including learners, staff, the governing body, the parent support group, and organisations for the Deaf about the promotion of wellbeing based on community strengths.
CHAPTER 5

RESEARCH RESULTS

5. 1. INTRODUCTION

In this chapter the results of each of the three phases of the study are reported and separately discussed, followed by an integrated discussion of the findings as revealed by the visual and thematic analysis conducted on the collected data.

5. 2. RESEARCH RESULTS: PHASE 1

In the first phase of the study the voices of the learners in the School for the Deaf were incorporated into the research. The research question that guided this investigation into their experiences was: “How do learners in a School for the Deaf experience the promotion of their wellbeing?” - With specific reference to the activities and interventions that facilitate or could facilitate this promotion.

Three themes with sub-themes were identified and are presented in the diagram below:
5.2.1. **Theme 1 - The provision of opportunities for learning and development**

This theme refers to opportunities to learn and develop that are present in the learners’ everyday activities and through which they are allowed to obtain new skills and knowledge that will eventually enable them to reach their long-term goals which they defined as passing matric and getting a good job.

The sub-themes refer to various opportunities identified by the participants in the foundation, intermediate, and senior phases.

**Sub-theme 1.1. Exposure to technology**
As indicated previously in the literature, Besio and Salminen (2004) who testify to the importance of technology in children’s lives. Facilities in the school which allow the learners to gain access to technology include a computer in each classroom, a computer suite, and three interactive white boards located in the special needs class, in the library, and in the deputy principle’s classroom. The interactive white boards in the library and the deputy principal’s classroom are available for all classes to use. A timetable for the computer suite and the interactive white boards helps the staff to control access. Access to technology enables the learners to get involved in learning activities, and develop their technological skills including using the computer, key-board, mouse, and internet. The learners can access games and movies as part of a reward system for good behaviour.

Participants across the spectrum from the foundation to the senior phase indicated that the exposure to technology contributes to a sense of happiness, as a learner in the foundation phase said, “Using the computer makes me happy” (P19,SNC,FP). A learner in the high school recognised that being computer-literate might open up career opportunities for him: “I enjoy learning computers, maybe one day it will be a career for me” (P51,SP).

Sub-theme 1.2. Outings arranged by the school

Individual wellbeing, as referred to by Keys in Chapter 1, is promoted when learners experiencing novel opportunities outside the school when outings are arranged (Wheeler, 2011). This is part of current school practice made evident by the school arranging outings related to the curriculum each term. These outings facilitate learning and social interaction. The type of outing arranged by the teacher is matched to the age and level of development of the learners. The outings are usually only day outings but on occasion, longer outings are arranged and learners sleep away from home and school. Such trips have included outings to
the Drakensburg mountain range and to Johannesburg. These trips are linked to learning and cultural development; visiting art galleries in different cities, going to the zoo, visiting natural heritage sites. Funding is often sought to allow these activities to take place.

The participants experience outings as a valuable source of learning as it allows them the opportunity to obtain new information. A learners said, “Outings are opportunities to learn new things” (P40,G4,IP). Another learner similarly said, “I like to go on outings and camp with my friends and have fun together. Outings have opportunities to see and learn new things” (P54, SP). The picture in Figure 1 drawn by a participant in the foundation phase shows a group of children on an outing, highlighting how they acknowledge outings as a contributor to their experiences of wellbeing.

Figure 1. Picture of learners on an outing drawn by a Grade 3 learner

Some learners indicated that opportunities to socially engage with the wider Deaf community would help to promote their wellbeing. This is made evident by the following comment: “I want to visit other schools for the Deaf and to meet new friends” (P12,SNC,FP).
Sub-theme 1.3. Involvement in sport activities

As indicated by Surkees (2010) sport provides an opportunity to engage with others and to foster opportunities for relational wellbeing as indicated in Chapter 1 by McCubbin et al. (2013). The school offers learners the opportunity to participate in a range of sporting activities such as soccer, netball, swimming, cycling, athletics, volleyball, and dancing. Off-site afternoon activities in the intermediate and senior phase include golf. Learners participate in triathlons across the country and receive training from the school staff. They participate in cycling competitions hosted at the school against schools in the province and at events held at other schools in KZN. Some learners have developed their skills to a high level and have been able to participate in the South African National Team and travelled internationally to compete. These experiences were described as life-changing.

The participants indicated that sport activities such as soccer, netball, volleyball, cycling, and triathlons enhance their individual wellbeing. The benefits of participation in sport activities were recognised even by learners in the foundation phase who commented that being healthy as a result of continued participation in sporting activities promotes wellbeing: “Sport makes you strong and healthy. Bicycles and triathlons; sport makes you strong” (P41, G3, FP).

Other learners mentioned that they would like to continue participating in sports activities such as triathlons because it helps them to develop self-confidence. The activities also facilitate opportunities to develop social skills since they require team-work. In this regard one learner said, “Triathlons build self-confidence” (P42, G4, FP). Another learner confirmed: “Triathlons are opportunities for team-work with my friends” (P41, G3, FP).
The participants also indicated that participation in sporting activities enhanced their relational wellbeing: “Netball provides opportunity for social interaction and team-work” (P50,G5,IP), as illustrated in Figure 2.

![Image of a Grade 5 learner's drawing of netball](image)

*Figure 2. Social interaction and teamwork in netball made by a Grade 5 learner*

A few learners reported positive experiences as a result of opportunities brought about through their participation in school sports activities: “Sport provides a healthy life-style and opportunities for socialisation and to meet new people and for friendships” (P52,SP). They also mentioned that it opens up possibilities for future careers: “If we learn to play rugby, one day we can have a career with the Sharks (the National rugby team for name of KwaZulu-Natal province)” (P46,G4,IP).

**Sub-theme 1.4. Celebration of special days and events**  
Collective wellbeing, as described in Chapter 1 by Prilleltensky (2005) is promoted through whole-school engagement in activities. The school regularly celebrates a diverse range of cultural and religious days. This allows for learning and development and opportunities for the learners to gain an understanding of the practices and beliefs of a range of cultures and religions. This is seen to facilitate a sense of acceptance and tolerance. The
participants were clear about the value of celebrating special days for the promotion of their wellbeing. Special days which are nationally celebrated such as Valentine’s Day and Heritage Day were mentioned: “Everyone in the school doing things together like the Valentine’s Day celebrations makes me happy” (P29,G1,FP). In addition to these special days, other events that bring the whole school together were also experienced as enhancing their wellbeing as they involve interaction with others: “Whole school initiatives, like the projects the Interact Club run (a school club linked to Rotary) make me feel happy” (P54,SP). The learners expressed how much they enjoyed the school-wide celebration days such as Heritage Day because all the learners get to dress up in traditional clothes and eat traditional South African food.

Sub-theme 1.5 Mastering of skills for independence

The participants in the intermediate and senior phase referred to the opportunities to master skills as promoting their wellbeing on individual level. They believe that obtaining skills will enable them to be independent when they leave the school setting, as stated: “I would also like to participate in practical training with artists in their places of work because I think this will help me get into university on day” (P55,SP) and “I want to learn to cook at school because this this will help me in the future when I need to be able to take care of myself and my family one day” (P44,G4,IP). This is highlighted in Figure 3 where the learner demonstrates how being taught to cook and develop first-aid skills will enable her to experience a sense of wellbeing and independence as she feels the need to be able to care for herself. Other learners also indicated the value they placed on staff and learners developing first-aid skills which enable them to take care of themselves at school and in their homes. This is shown in the collage below.
Theme 1 points to the fact that being involved in everyday activities such as using technology, going on outings, doing sport, celebrating special days together, and mastering skills to enhance independence, are experienced as opportunities to learn and develop and enhance their capacity to be happy and to do well.

Reference to the value of these activities for the promotion of wellbeing is confirmed in the research literature; the role that technology can play in the enhancement of wellbeing has been explored by Besio and Salminen (2004) who testify to the importance of technology in children’s lives. Going on outings is perceived as an extension of learning opportunities. The benefits of field trips for learners are described, including job networking experiences, exposure to unfamiliar environments, and reinforcement of classroom learning (Wheeler, 2011). The value of sport activities is emphasised in research conducted by Buchan, Ollis, Thomas, Malina, and Baker (2012) who state that physical education within schools is often cited as an ideal setting to implement exercise interventions and encourage healthy behaviours among children. They argue that incorporating brief, high intensity exercises into school curricula is feasible and will lead to health benefits for children, while celebrations of
fun days are not specifically indicated. The mastering of skills although often viewed as developmental tasks, are also seen to concurrently promote wellbeing in learners (Rose-Krasnor et al., 2005). With respect to individual wellbeing the learners emphasised that the mastery of skills promotes their self-esteem as affirmed by Seligman (2002). They specifically indicated that the mastery of skills helps to provide them with psychological strength to survive despite the challenges they face due to their Deafness.

The value of such everyday activities for the enhancement of happiness and wellbeing is also confirmed by Kitching, Roos & Ferreira (2011). The authors affirm the value of connectedness to others; relationships formed in daily social interaction opportunities in schools are understood as every day ways of relating.

5.2.2. Theme 2- Connectedness to other people in the context

This theme refers to the bonds which the participants form through friendships as well as the shared experiences of the Deaf and Zulu culture; which together facilitate sense of belonging in the context in which they find themselves, and contributes to their wellbeing.

Sub-theme 2.1. Developing friendships through social interaction

The learners in the study clearly indicated the value of friendship in their experience of wellbeing and considered this a prominent way of promoting wellbeing in the future through more social engagement with friends. The value of friendship was noted in various contexts; in the classroom, in the hostel, in sports activities, and on outings.
The learners specifically commented on how they interact socially when they are in the hostel, on the playground, and on outings. Connecting with other people in their context and developing friendships contribute to a sense of happiness and wellbeing: “Friends makes me happy” (P34,G2,FP); “Playing games with friends makes me feel happy” (P36,G2,FP); “My friends make me happy because they are kind and happy and they share with me; we play together, they help me, I love them” (P32,G2,FP); “Playing with my friends on the jungle-gym makes me happy” (P38,G2,FP). The detailed drawing of the jungle gym in Figure 4 indicates the significance of this space for facilitating connectedness between friends.

Figure 4. The jungle gym made by a Grade 1 learner

Learners in the senior phase reported that connecting with their friends on a daily basis facilitates a sense of trust that allows them to share on a more personal level:

“Friendship makes me feel happy because of the experience of trust and because it provides the opportunity for emotional support and laughter” (P55,SP); “Friends provide opportunities for sharing ideas; we never fight, we trust each other. We share jokes and dream about our future” (P56,SP).
Sub-theme 2.2. A sense of inclusion through the recognition of their culture and language

This sub-theme underpins the experience of wellbeing at school and was seen as significant in the promotion of wellbeing in the future; the learners indicated a desire to continue learning about Deaf and Zulu cultures from their housemother in the foundation phase hostel: “I love to learn about the Deaf and Zulu culture in the hostel when my housemother teacher me” (P43,G4,IP). Communication in SASL in all school activities was seen as vital to the experience of wellbeing.

In Chapter 1, Robertson and Shaw (2011) discuss the feelings the Deaf have towards their deafness. This is confirmed by the findings of the study, reflected through the feeling of inclusion experienced by the learners through recognition of their culture and language which facilitated a sense of identity and belonging. The acknowledgement of the language of the Deaf in South Africa, namely SASL (SASL) also makes them feel proud of who they are: “I get support in the hostel where we communicate in SASL which I can understand” (P40,G3,FP); “I like to learn about Zulu and Deaf culture which I do in the hostel when my house-mother teaches me” (P44,G4,IP).

During discussions of their experiences of wellbeing, the learners expressed the need to have more opportunity to engage with the wider community and to meet Deaf people outside of the school. They thought this would open up opportunities for new friendships and new avenues for development. This highlights the value the learners place on identifying with those who share a Deaf identity. The participants made the following statements: “I want to have opportunities to meet new Deaf people” (P12, SNC,FP) and “I would like to go to the gym for exercise to keep healthy and I can get to meet new people and make new
friends” (P51,SP). Theme 2 suggests that connectedness to others achieved through social interaction and the development of friendships with people who are from the same culture, or appreciate their culture, contribute to the wellbeing of learners in the School for the Deaf. Prilleltensky (2005) states that wellbeing comprises a relational domain that involves embeddedness in supportive relationships and participation in social networks which in turn impact on individual wellbeing. This is made evident in the findings of this study; learners commented on the importance of opportunity to engage with others who share a Deaf identity or by engaging with those who understand and respect the ways of the Deaf. According to Erlich (2012), Schools for the Deaf provide an arena where Deaf children and adolescents feel a sense of belonging since these schools are often small and intimate which allows for participation and integration of all the learners. This sense of belonging is understood to help buffer the development of mental health challenges in the learner population.

5.2.3. Theme 3 - Being cared for and supported on a continuous basis

This theme refers to the participants’ feeling cared for and supported on an on-going basis in their school and in the hostel. The learners who participated in this study expressed enthusiasm about the provision made by the school to support and care for them. They indicated that they feel cared for and supported when they are accepted and appreciated by others, when they have a sense of being at home, and when the peers whom they consider role models are willing to support them.

Sub-theme 3.1. Being accepted and appreciated by others
This sub-theme was incorporated in the learners’ experience of wellbeing and resulted from the way in which they were treated and the belief that the staff members have in them.

In short, the participants felt cared for and supported when their teacher treated them in ways which confirm to them that they are accepted and appreciated: “I feel happy because the teachers always encourages me and explains things to me” (P54,G9,SP); “My teachers want me to do well and this inspires me to want to try to work hard” (P49,G6,IP).

The presence of Deaf teaching assistants who understand the needs and ways of the Deaf and are therefore able to assist learners effectively in the classroom setting, also makes them feel accepted and appreciated. This is confirmed by a foundation phase learner: “I want to have the same Deaf teaching assistant next year because she helps me in class” (P24,G1,FP).

Due to the acceptance and acknowledgement learners experienced because teachers understood their concerns and responded by consoling them, a participant stated, “Praying in class makes me happy because I can share my worries and the teacher understands what I am thinking and feeling” (P50,G5,IP).

In the school context the acceptance and acknowledgment that the learners receive from teachers and friends contribute to their wellbeing: “When my teachers and friends know me and understand me and accept me, this makes me feel well and feel happy” (P54,SP).

Sub-theme 3.2. Having a home away from home:
Many learners come from backgrounds where poverty and social isolation are common. In the hostel, learners are sheltered, have amenities, and are provided with food and care. The learners also benefit from house-parents who are able to communicate in SASL. Learners in the foundation phase more than the intermediate and senior phases indicated a positive regard for the hostel.

The hostel to a large extent contributed to a sense of having a home away from home. The learners in the foundation phase experienced the hostel as a safe space in which they are loved by the house-parents. The love they receive in the hostel is made evident by the following comments: “In the hostel, I feel happy and safe because my housemother is kind” (P16, SNC, FP). This care and support is consolidated by the house-parents’ acknowledgement of the language needs of the learners: “I get support in the hostel where we communicate in SASL which I can understand” (P40, G3, FP). The importance of the care and support receive from the house-mother is also evident in the following statement: “I love it when my house-mother is in the hostel not when she is sick and not here” (P34, G2, FP). In this space the access to facilities such as television and comfortable bedrooms is also associated with a safe and loving environment.

Some learners indicated how access to medical assistance made them feel cared for. The promotion of wellbeing in this regard can be enhanced by the following suggestion: “I know the nurse helps to take care of me if I am sick but I would like the teachers to be first-aid trained so that if the nurse is not here, I will still feel looked after” (P47, G6, IP).

There is furthermore evidence that the firm discipline in the school contributed to a sense of feeling loved and safe. The learners indicated the value they place on in firm
discipline to guide learner behaviour at school since it was raised as something positive:

“They need to take the lead when children are naughty and not being nice to each other. If they make a mistake the teachers must shout, especially the principal. In a perfect school, the children would listen well and work hard” (P47,G6,IP).

Sub-theme 3.3. Peers as role models

Due to their common experience of being deaf, the learners in the school understand the value of friends who understand what it is like to be Deaf. Because older learners understand the specific challenges faced in learning, the value of peer support offered by them to younger learners was proposed for the promotion of wellbeing. As indicated in Chapter 3, Magongwa raises awareness to the value to Deaf role models and this is understood to contribute to individual and relational wellbeing as reported by Keys (1989) and McCubbin et al. (2011).

Some learners felt that they are able to support other learners by being good role-models. This can be achieved by a demonstration of appropriate behaviour. The following comment bears this out: “I am a good role-model to my friends because I know how to interact with people because I was taught by school and my mom” (P51,SP).

The participants reported that they felt supported both socially and academically by the older learners. The younger learners expressed appreciation for the love and care shown to them by learners in the high school: “I want the High School children to help me with my homework because they are kind to me and they are good role-models” (P32,G2,FP); “I want to have more opportunities for interaction with other classes, and I want opportunities
for interaction with high school learners because they help me, especially with homework because they are kind to me and there are good role models in high school” (P32,G2,FP).

5.2.4. Discussion of Phase 1 Results

To answer the question, ‘How do learners at a School for the Deaf currently experience the promotion of wellbeing in their context?’, the results indicate that the learners in the School for the Deaf in this instrumental case study experience three prominent ways in which their wellbeing is enhanced.

Firstly, the opportunities they have to learn new skills through technology, to develop skills and abilities for potential career development in the future, and to participate in activities and outings organised by the school, create a sense of enjoyment. This sense of enjoyment generates a love of being part of the school community. Going on outings is described as opportunities for learning and seeing new things, and for social interaction with their friends. The learners expressed a desire to go on more outings but attributed limited opportunities to a lack of funding.

They also expressed a desire to visit places of work of both Deaf and hearing adults to gain an understanding of the work force and opportunities available to the Deaf. They felt that participating in school-wide activities created opportunities to learn about different cultures and to experience interaction with teachers and learners throughout the school. They indicated that they wanted to continue and extend their skills development in a variety of sports that may provide opportunities for the future, such as playing for national sport teams in volley-ball, rugby, and swimming. What is interesting is that the learners, despite
the many challenges they face in their daily lives, display an overall sense of positivism at school, in class, in the hostel, and when they participate in after-school activities.

The results presented above suggest that connectedness to others achieved through social interaction and the development of friendships with people who are from the same culture or who appreciate the Deaf culture, contribute to the wellbeing of learners in this School for the Deaf. The results concur with Prilleltensky (2005) who also states that wellbeing comprises a relational domain; embeddedness in supportive relationships and participation in social networks which impact on individual wellbeing as indicated in Chapter 2. This is evident in the findings of this study since the learners commented on the importance of opportunities to engage with others who share a Deaf identity or by engaging with those who understand and respect the ways of the Deaf.

Secondly, through their connectedness with other people in the context, wellbeing is promoted because of friendships that develop as a result of social interaction and by learners experiencing being part of Deaf culture. The value of school-wide initiatives, where learners and staff participate in celebrations promotes wellbeing through connectedness and highlights the importance of belonging to and being an active participant in a community.

The desire to interact with a wider Deaf community is indicative of the learners’ sense of belonging to the Deaf community. The affiliation to those who share a similar language and cultural identity apparently contributes to feelings of wellbeing. These findings correspond to previous research described in the literature in Chapter 2 and 3, which states that a sense of belonging to Deaf culture, which provides a shared language and cultural
identity, promotes wellbeing amongst the Deaf (Erlich, 2012; Groce, 2004; Oluwatoyin, 2013).

In terms of how wellbeing can be promoted in future, the learners envision more opportunities to engage with other Deaf learners to widen social networks which could potentially allow for friendship and networking. What is interesting is that the learners, even those in the foundation phase and remedial class, as well as some learners in the special needs class, expressed how friendship experienced in every aspect of school, leads to experiences of wellbeing. The characteristics which were seen to contribute to friendships are kindness, honesty, and acceptance of individuals, love, and the ability to share.

Further suggestions to enhance wellbeing were to expand opportunities for social interaction with other Deaf learners in sport and social settings, highlighting the importance of belonging to the wider Deaf community (Erlich, 2012) in which a sense of belonging is strengthened through shared language and identity. The learners commented on the enjoyment they derive from engaging with other Deaf school and communities which answers the question of how wellbeing can be promoted beyond the school setting.

A concern was raised about communication challenges in the wider community which limit the learners’ abilities to engage independently in study or work. They thus expressed a desire to develop skills that foster independence in preparation for leaving school. The value of preparing Deaf learners for effective participation in society through meaningful education is also highlighted by Storbeck and Martin (2013).
Thirdly, being cared for and supported as well as accepted and appreciated on an ongoing basis both in class and in the hostel, allows for wellbeing enhancement. This is experienced through effective teaching and through love and care received in the hostel, predominantly noted by learners in the foundation phase. In the comments made by the learners, enabling spaces in which their specific learning and communication needs are acknowledged, allow them to feel cared for and supported. Storbeck and Martin (2013) highlight the value of recognising the unique learning needs of Deaf learners in delivering quality education for all. This was made apparent in the significance the learners placed on being able to communicate in SASL in the hostel, with their house-parents, and with friends and peers. They signaled the value of teachers’ accommodations in the classroom to meet their specific learning needs and indicated that this makes them feel recognised and valued. The accommodation of their needs through appropriate teaching and learning activities indicate the teachers’ desire for them to learn and to achieve. These findings mirror Magongwa’s (2010) findings which highlight the importance of the effective use of SASL in the educational context and the value of Deaf role models to young Deaf learners.

With reference to experiences of care and support the learners indicated the value they placed on the school assisting them in the development of real-life skills such as cooking that would facilitate their integration into society outside the school for the Deaf. Their gratitude seems related to the realisation that participating in the hearing-world outside of the school for the Deaf presents specific communication challenges as the majority of people do not communicate in SASL. They might therefore be faced with inequality in education and employment opportunities, as well as unequal opportunities to engage socially in the wider society as emphasised by Mogongwa (2010) which impacts individual, relational and collective domains of wellbeing as described in Chapter 1, 2 and 3.
Peer support was discussed as a potential support mechanism in class by some learners who struggle academically. The intermediate phase learners expressed a desire to engage socially with older learners in the school, interacting with them in a peer and mentoring capacity. A desire to have assistance during homework time from older learners was expressed by the foundation and intermediate phase learners. They indicate that older learners are able to assist them effectively with homework as they understand the needs and the ways of the Deaf. These older learners were described as good role-models to the younger learners. Magongwa (2010) highlights the need for effective role-models for young Deaf learners, yet comments that there are few Deaf role models who can provide good examples to younger Deaf children. Support from the school in facilitating this support to younger learners can address this lacuna.

A concern raised in relation to being cared for and supported in the hostel was expressed by some learners in the intermediate and senior phases who feel that there needs to be more effective, open dialogue in the senior hostel between house-parents and learners, where the voices of the learners need to be heard, as indicated by Nelson and Prilleltensky (2010) in Chapter 1. An ethos of quick discipline without effective listening to all voices tends to dominate the practice in this particular setting. An appreciation of being heard is valued by learners.

The findings in this study mirror the ecological perspective of human development. The individual learner cannot be perceived as an isolated entity if we intend to promote holistic wellbeing. What clearly emerged from the investigation into the experience of learners across all the grades is the importance of everyday interactions between people
which we often take for granted in the enhancement of wellbeing. It is through these everyday interactions on various levels of interrelatedness that learners experience a sense of being well.

5.3. RESEARCH RESULTS: PHASE 2

Inquiry into teachers’ and staff members’ experiences and perceptions of promoting wellbeing in a School for the Deaf

The research question asked in this phase of study was, “How do teachers and other staff members employed at a School for the Deaf perceive the promotion of wellbeing?” with reference to current (existing) and future (anticipated) practices in the school.

Diagram 2. Themes and Sub-themes from Phase 2
5. 3. 1. Theme 1- Facilitating enabling spaces for the promotion of learners’ wellbeing

This theme refers to the staff members’ perceptions of ways in which spaces are created or can be created for the promotion of learners’ wellbeing. The results revealed that staff members perceive that the learners’ wellbeing in the School for the Deaf is promoted through experiences of unconditional acceptance and compassion; recognition of their communication needs, provision of safe and secure facilities, supportive interventions, a positive reward system, and teamwork amongst staff members.

Sub-theme 1. 1. Unconditional acceptance and compassion

This sub-theme indicates how teachers and other staff members place value on the way the learners in the school are treated by staff. The Deaf face discrimination and isolation in the wider society as a result of their deafness and the staff therefore believes that their acceptance of the learners, in addition to the accommodations staff members make to use SASL, allow for learners to experience acceptance.

With reference to unconditional acceptance and compassion, the participants argued that by virtue of their deafness, they have a mutual understanding of each other’s challenges and therefore, “Wellbeing is promoted as everyone’s disabilities are accepted” (P2,T,IP). Acceptance and support of those with multiple disabilities by other learners served as an example of their inclusive attitude: “The children in the intermediate phase always help Thabo (pseudonym) who has cereal palsy by helping to carry his swimming kit and waiting for him when they walk up the hill back to class” (P6,T,IP).
Teachers who love their learners unconditionally contribute to learner wellbeing: “The children should be and are loved unconditionally” (P6,T,IP). Unconditional love facilitates boundary setting in class which helps to regulate behaviour and facilitates positive experiences in the classroom which too impact on learner wellbeing. Boundaries are accepted because they are based on love and the learners’ understanding of the teachers’ intention for learners to do well, and to be well.

A loving and caring environment created through unconditional acceptance allows for learners to share their insecurities, problems, and ideas with some teachers. “Children will share their problems with their teacher if they feel loved and happy. This has been a way for me to reach the children in my class, through the use of humor in class” (P1,T,F). Prayer in class and assembly is seen to make learners feel supported because they can share their worries with their teacher who in turn understand what they are experiencing.

Figure 5. Teacher’s collage of wellbeing

Inclusion is practiced regardless of race, religious, or cultural differences: “Wellbeing is promoted through respect for cultural and religious difference” (P4,T,FP). In addition, a
sense of belonging is created through structure provided at school: “Wellbeing is promoted through the school structure; following through the grades, wearing school uniforms. This gives the child a sense of belonging” (P7,T,SP). Celebration of special days as a school, such as Valentine’s Day or Heritage Day, create feelings of unity and belonging for the learners. This finding speaks to relational wellbeing referred to by McCubbin et al., (2011) in Chapter 2.

Erlich (2012) comments that Schools for the Deaf provide opportunities for experiencing equity in a social setting which contributes to wellbeing promotion; a reality not always possible in the hearing world due to language barriers and stigmatisation. The facilitation of inclusive spaces provides learners with a sense of belonging because the school is a closely knitted community in which: “Everyone knows each other, nobody is a stranger” (P2, T, 1). Close relationships between learners and staff members confirm this sense of belonging. Gascon-Ramos (2008) also identifies a sense of belonging as a component of learner wellbeing in a School for the Deaf. Residential schools therefore play an important role in the academic and social education of Deaf and hard-of-hearing students worldwide (Moffett, 2009), as is evident in this research context. In the hostel setting, where house-parents are familiar with the ways of the Deaf, their language, cultural and social needs can be effectively met. Having language, cultural and social needs met speaks to holistic wellbeing described by Prilleltensky (2005) in Chapter 1.

**Sub-theme 1.2. Recognition of learners’ communication needs**

This sub-theme reveals the importance the staff place on recognition of the unique communication needs of the Deaf. The experience of communicating in SASL allows for the learners to feel recognised. The Deaf face communication barriers in hearing contexts and
therefore being able to communicate with all members of the school community in SASL is understood to impact on learner wellbeing.

![Teacher's mind map of wellbeing](image)

**Figure 6. Teacher’s mind map of wellbeing**

As far as the recognition of learner communication needs are concerned, the school policy of signed bilingualism is deemed relevant by the staff. The policy stipulates the uses of SASL as the primary language of communication, with written English used in text. The staff communicates with learners in SASL but encourage them to express themselves in English using communication boards in the school. The intention is to encourage language fluency and the ability to communicate in a variety of languages as ease of communication is understood to impact on learner wellbeing. This confirms the statement made by Gascon-Ramos (2008) who comment on the importance of Deaf learners developing fluency in communication as indicated in Chapter 2.

The importance of all staff being fluent signers was raised. Storbeck and Martin (2010) comment on the value of specifically trained teachers in Deaf education for raising the standard of teaching and learning. Supporting this sentiment in the promotion of wellbeing: “All staff [need] to become fluent signers” (P2,T,I).
Sub-theme 1.3. Safe and secure spaces

Some learners come from backgrounds characterised by violence, crime, abuse, neglect, and poverty which negatively impact on their experiences of wellbeing. The school provides a safe and secure environment where learners’ health and safety needs are met and staff members understand this provision to contribute to learner wellbeing.

The participants also perceived the provision of facilities that provide safety and security to the learners as contributing to their wellbeing in the School for the Deaf. According to the staff the learners have access to the hostel which is a safe clean environment where healthy food is provided as well as sports and technological facilities: “Wellbeing is promoted through the homely environment at school, clean laundry and bathrooms” (P9,T,SP).

Wellbeing is also seen as consisting of access to school insurance and medical care: “Medical assistance; glasses, doctors, audiology as well as school insurance paid by the school to cover all equally” (P9,T,SP)

In concurrence with Erlich’s (2012) argument that there is an increased likelihood of Deaf learners experiencing mental health problems compared to their hearing peers, the staff members indicated that the support offered to learners to address these challenges is an important dimension of learner wellbeing.
Sub-theme 1.4. Strengthening learners’ resilience

The Deaf are more vulnerable to the development of mental health problems than their hearing peers because of the many challenges they face as a result of being deaf including, for example, low self-esteem and isolation. In response, the school has developed means to increase learner resilience.

Special reference needs to be made to the memory-work programme. In this programme, learners have the opportunity to share their life stories with a trained memory work facilitator which can bolster self-esteem as a result of being listened to, and through the opportunity of identifying the forms of resilience they have access to in their lives. The impact of memory work and play therapy previously offered at the school was noted by the principal: “At school, there are avenues to promote wellbeing. Psycho-social support offered to pupils at school through play-therapy and memory work. Since the two staff members trained to do psycho-social is no longer at school, the loss is felt” (P58, P).

Deaf role models were also identified as a resource of support for learners: “The qualified Deaf teachers are positive role-models for the Deaf learners” (P3, DP). Past pupils who are involved in further study or sport or employed by the school, provide examples of good role models for the learners.

A positive reward system in which learners are praised and rewarded was also perceived as contributing to their wellbeing. The learners show clear signs confidence and happiness, identifiable through their body language when they receive praise or rewards even amidst the many challenges they face.
Gascon-Ramso (2008) raises awareness of the value of recognising Deaf learners’ achievements which boosts self-esteem. At the school for the Deaf, there is an ethos of celebration of the individual learner. The staff who participated in this study indicated that the recognition which learners receive allows them to feel acknowledged, promoted, and encouraged: “The children are proud of who they are, they look confident, which you can see in their body language and the vibe they have” (P8,T,F).

5.3.2. Theme 2 – Facilitating enabling spaces for teachers

The staff members who participated indicated that wellbeing promotion for learners in the school is not separate from wellbeing promotion of the staff. The staff members recognise that there are opportunities for them to experience wellbeing and suggested that these opportunities be made inclusively available and not to only select members of staff.

Figure 7. Teacher’s mind map of wellbeing
Sub-theme 2.1. Team-work among staff members

There is an attitude of support and team-work amongst the staff. This is evident in relationships between teachers and assistants who support each other in class and by teachers who mentor and support new members of staff; they share ideas and resources. This support amongst fellow teachers is understood to benefit them as well as the learners since resources and teaching ideas are shared. This equitable sharing leads to personal, relational, and collective wellbeing as described in Chapter 1 by Nelson and Prilleltensky (2010) and impacts positively on classroom teaching, which directly benefits the learners. Motivation amongst the teachers is noted as having an impact on their experience of holistic wellbeing: “There is a sense of team-work amongst the whole school and this helps to create a feeling of holism in the school. This sense of team-work extends though the different phases and extends to classrooms where teachers help the children and the children help the teachers” (P8,T,F).

Sub-theme 2.3. Mentorship

Teachers as learners, recognise the value of the care and support of fellow teachers. The importance of supporting new staff is highlighted because Deaf education is different from teaching in a mainstream environment and the majority of new teachers have very limited experience in Deaf education. Supporting teachers in this way is understood to impact positively on both teachers and learners.

Support is provided to new staff by teachers and teaching assistants who are employed at the school and are familiar with the needs and the ways of the Deaf. The hearing and Deaf teachers support each other in terms of sign language for the hearing teachers, and written English for the Deaf teachers. This is confirmed by a Deaf teacher who
supports teachers with SASL resources and benefits form their support with written English: “I like to prepare lessons with others teachers when I am doing my planning” (P57, T,FP).

**Sub-theme 2.3: Motivation and encouragement**

The principal promotes an ethos of hard work, dedication, and commitment amongst the staff. This is understood to facilitate wellbeing for the whole school community as staff are requested to continuously give their best continuously for the optimum development of the learners.

In terms of the promotion of wellbeing, the staff members are motivated to give their best through encouragement from the school management: “I want the staff to go the extra mile. There is no place for mediocre service delivery here as we have the best interests of the children at heart. The dedication of the staff makes me experience a sense of wellbeing, this is not a one man band” (P58,P).

It was noted was that this attitude of collaborative support does not extend to all the teachers. Some staff members raised concerns about strained relationship between some teachers and the hostel staff and limited engagement between the teaching staff and the grounds staff. One Deaf teacher commented on the division between hearing and Deaf staff members; made explicit by the fact that the hearing and Deaf staff sit separately in the staffroom at tea time: “Teachers and assistants should mix in the staffroom, Deaf and hearing” (P57, T,FP). This teacher indicated the value in setting a good example at school of integration between hearing and Deaf staff members rather than replicating the experience of alienation and division between the two groups as is often experienced by the Deaf in the
wider community. Encouragement from management to bridge this gap to facilitate a greater ethos of cohesion and team-work was suggested.

5.3.3. Discussion of Phase 2 Results

In answering the questions “How do teachers and other staff members employed at a School for the Deaf perceive the promotion of wellbeing?” and “What current and anticipated activities and interventions are collectively identified as facilitating the promotion of holistic wellbeing in a School for the Deaf?”, the results of this study indicate that the staff in the School for the Deaf used as an instrumental case study, experience two prominent ways in which their wellbeing is enhanced: facilitating enabling spaces for learners, and facilitating enabling spaces for teachers.

The results of this study indicate that the staff members perceive the inclusion of all the learners in the school as contributing to wellbeing. Inclusion in this context firstly implies unconditional acceptance of and compassion for all learners. This is in line with the inclusive policy frameworks established at the Dakar Framework for Action (2000). This framework states a commitment to ‘education for all’ globally, which proposes that all children have the right to receive an education which will at least meet their basic learning needs. The framework proposes that this type of education should help children to understand how to live with others so that individuals and communities can develop (Dakar Framework for Action, 2000).

In the South African context, as discussed in Chapter 1, The Education White Paper 6 on Special Needs Education (DoE, 2001) calls for a supportive and inclusive psychosocial
learning environment in schools. The Education Act (DoE, 1996) and the White Paper 6 (DoE, 2001) propose the same principles as the Dakar Framework for Action (2000) and the Salamanca Statement (2004) where education designed to meet the needs of all learners needs to be delivered. The school’s policies thus align with international policies guiding education.

Secondly, inclusion is ensured by recognising the communication needs of the learners. Inclusion, achieved through adherence to the educational policy of signed bilingualism results in differences being acknowledged, accepted, and addressed, and making education for the Deaf supportive and educationally effective. The use of SASL promotes ‘education for all’ because learners are included in an educational setting that suits their learning needs. The staff members understand that learner wellbeing is impacted on by the inclusion of all learners from different religions, cultures, and socio-economic backgrounds rather than understanding learner wellbeing to be impacted on by the collectivist concept of sameness as a result of belonging to Deaf culture. Belonging to Deaf culture, living a Deaf-oriented life, using sign language, and interacting with the Deaf community rather than simply being Deaf, is linked to self-esteem which is seen as key to Deaf learner wellbeing (Gascon-Ramos, 2008).

With reference to the practices associated with the promotion of wellbeing, it was evident that the facilitation of safety and security for the learners as a way to enhance their wellbeing is critically important if we consider the fact that many learners come from unstable backgrounds. The value placed on emotional safety and security is evident in the emphasis placed on the importance of relationships in the school context between learners as well as between staff members and learners, which are understood to impact on wellbeing.
Teacher and learner relationships in special education are understood to be significantly important for learners due to heightened risk of mental health problems (Wolters, Knoors, Cillessen & Verhoeven, 2012). The authors conclude that smaller classes and intimate relationships with teachers facilitate opportunities for wellbeing enhancement for learners in specialist Schools for the Deaf, as is the case in this particular school. The hostels also play a significant role in the provision of safety and security. Furthering the discussion on importance of relationships within the school, the hostel is regarded as a home away from home. The school is seen as a stable environment for many because a high number of learners come from backgrounds where violence, abuse, poverty, and frequent relocations are common. A family environment is further promoted by house-parents acting as substitute parents in the hostel during the week. An encouraging finding in regard to relational wellbeing as referred to by Prilleltensky (2005) in Chapter 1 and 2 is that a family environment is created at the school when older learners interact with younger learners at duty time. Meal times in hostel are a time when learners and house-parents all come together, thus emulating a family environment and creating a sense of belonging for the learners with their ‘pseudo brothers and sisters’. This accommodation allows for many learners to experience a sense of belonging which is often missed in families that do not understand the ways and needs of the Deaf, a finding highlighted by Erlich in Chapter 1 (2012).

The provision of support is furthermore emphasised as an important practice that contributes to the wellbeing of learners. Learners at risk across the school are identified and interventions are planned by the staff. Weekly meetings are held, consisting of a holistic team of staff members who collaboratively discuss learners of concern. Here the intervention are planned and followed up by meetings to discuss progress. Specific supportive measures
at school for learners identified to be at risk includes memory work, play therapy, prayers, and the development of caring relationships between the staff and learners. The provision of support is in line with the proposal in the Ottawa Charter (WHO, 1986) that schools become enabling environments which promote healthy lifestyles for all school community members, achieved by creating supportive environments in schools and by policies that support health and wellbeing. This is mirrored by the health promoting schools movement in South Africa. The current provision of support at the school for the Deaf creates opportunities for adherence to the principles stipulated by the policies. However, the lack of a qualified mental health practitioner limits the support offered. This is often exacerbated by the fact that the school faces challenges in gaining family support. The need to develop preventative and transformative support measures is therefore highlighted as the existing support provided at the school is ameliorative in nature and based on a medical, illness perspective. A call to change the way in which problems are identified and understood with a move to transformative preventative health based support is called for, as indicated by Nelson and Prilletensky (2010) in Chapter 3.

The employment of teaching assistants who can act as role models as part of supportive practice is valued, and the importance of the role of Deaf teaching assistant are acknowledged for their potential support in the delivery of fluent SASL in the classroom setting. Yet this practice is criticised by the participants based on the fact that the teaching assistants do not have access to further education opportunities and therefore remain in the school for the Deaf; opportunities for employment beyond the Deaf community are also limited, as Magongwa (2010) emphasises.
A third practice identified by the participants as contributing to learner’s wellbeing is the recognition of academic, social, sport, and cultural achievements. Deaf learners are provided an opportunity to boost self-esteem, which impacts on their experiences of wellbeing. The example of a house-parent who believed that continued praising of a learner who was struggling to achieve in the sporting arena would inspire him, which eventually lead to sporting success for the learner, illustrates the value of this practice.

The staff highlighted how the school ascribes to a positive reward system which is understood to significantly impact on wellbeing. Learners are praised for their achievements in class, in assembly, and in the annual prize giving. The ‘good deeds book’ weekly recognises learners’ non-academic achievements, including cultural achievements and acts of courtesy and kindness.

Finally teamwork amongst staff is identified as contributing to wellbeing amongst staff members which also contributes to learner wellbeing as new teachers are mentored and staff members share their resources which directly impacts on learners in a positive way.

However the staff members revealed a lack of teamwork between parents and the school. A marked decline in support has been noted over the years by staff members who have been employed at the school for a significant period of time. Lack of clarity about this decline in parental involvement in the school was noted. Lack of parental support in a variety of contexts was also noted, including parent and teacher meetings, school sporting events, the annual school play, and whole-school meetings.
The staff members indicated the value of interacting with the wider community. Opportunities for Deaf awareness are seen to foster opportunities to create links between the school and the wider community. This was also seen to provide opportunities for Deaf learners to engage in the kind of activities available to learners in hearing schools such as fund-raising events, markets, social, and sporting activities.

5. 4. RESEARCH RESULTS: PHASE 3

In this phase of the study a World Cafe Event (WCE) that included representatives from all the participant groups was initiated to discuss a way forward with reference to the promotion of holistic wellbeing through existing and anticipated activities in a School for the Deaf.

➢ The question asked in this phase of study was: “What current and anticipated activities and interventions are collectively identified as facilitating the promotion of holistic wellbeing in a School for the Deaf?”

The advantages of the variety of participants included in the WCE event allowed for a broad understanding of the promotion of wellbeing at the school. For change to happen, it is suggested that the viewpoints of all community members need to be included (Nelson & Prilleltensky, 2010). Change and transformation need to develop from a point of equity and collaboration. As stated by the literature, the Deaf are a group who often experience decisions being made on their behalf, without their involvement (Mertens, 2009) and thus inclusive practice in the WCE event addressed social justice in this regard. This method encourages the development of a shared vision amongst all community members to gain a better understanding of the individual case because all participants’ perspectives are equally included.
In response to a presentation of the themes from the first two phases of the study, the participants identified ten focus areas which they associate with the promotion of wellbeing in the School for the Deaf. They also identified current and anticipated activities that would promote wellbeing in each of these focus areas.

These activities are summarised in the table below to provide an overview of the data generated during the discussion (see Appendix R).

An extensive discussion of each focus area follows.

### 5.4.1. 10 focus areas for the promotion of holistic wellbeing

<table>
<thead>
<tr>
<th>Area of Support</th>
<th>Facilities available currently</th>
<th>Ideas for promotion of wellbeing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Access to technology</strong></td>
<td>Computer room and media labs (recording lessons/assessments and reviewing for improvement)</td>
<td>Development of staff I.T. abilities</td>
</tr>
<tr>
<td></td>
<td>Revision/assessment in the media centre</td>
<td>Learner career development opportunities</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ease of communication for the Deaf using Skype, sms, WhatsApp and email</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Learning tools – CAPS materials available electronically</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Connect with other schools via the Internet (Skype, email)</td>
</tr>
<tr>
<td><strong>Skills Development</strong></td>
<td>Skills program in place</td>
<td>Resource centre at school</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Vocational placements – community links through Deaf awareness</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Additional staff to co-ordinate the vocational programme</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Career development opportunities – extend current opportunities – awareness</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Life skills support (licenses etc.)</td>
</tr>
<tr>
<td><strong>Subject choice offered at school</strong></td>
<td>7 subjects offered to grade 12</td>
<td>Increase choice – equity to hearing peers</td>
</tr>
<tr>
<td><strong>Communication according to the needs of the Deaf</strong></td>
<td>Language policy signed bilingualism</td>
<td>Increase staff, parents and extended family’s ability to communicate in SASL</td>
</tr>
<tr>
<td></td>
<td>Hearing aids, cochlea implants, FM System</td>
<td>Speech therapy for all learners made possible by an extra therapist on site</td>
</tr>
<tr>
<td></td>
<td>Speech therapy - 1 full-time speech therapist</td>
<td>More effective communication between staff</td>
</tr>
<tr>
<td><strong>Parent involvement and support</strong></td>
<td>Parent support group currently operational</td>
<td>More parental involvement in the school setting</td>
</tr>
<tr>
<td></td>
<td>Current communication via sms, WhatsApp email more effective than before</td>
<td>Inclusion of Black families in free SASL weekend classes – access via location</td>
</tr>
<tr>
<td><strong>Relationships between learners and hostel parents</strong></td>
<td>Weekly boarding facilities in the school hostel where staff communicate in SASL</td>
<td>Improvement in communication, social interaction, relationship, development, equality in the hostel Extra time and support for homework for learners</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>Learner support through peer mentoring</strong></td>
<td>Inclusion and opportunity allows for the possibility of learners engaging in social interaction opportunities which makes the development of friendships possible Therapy (volunteer play therapy and memory work) Academic support in class</td>
<td>More connection to other Deaf people Learn about different cultures, experiences, and opportunities Deaf awareness so Deaf included in wider society Learner to learner support – mentors Self-esteem development Life skills facilitation (driver’s licenses, bank accounts opened etc.) More social activities which will help to build confidence and foster relationships Mutual attitude of respect between learners and staff Teenager support group run by the Deaf</td>
</tr>
<tr>
<td><strong>Participation in sport</strong></td>
<td>Sport at school and interschool competitions School sport, triathlons – matches with other schools Confidence building</td>
<td>More interaction via sport – Deaf and hearing schools Deaf clubs compete Visit other schools for the Deaf – exposure</td>
</tr>
<tr>
<td><strong>Community engagement for awareness</strong></td>
<td>Some interaction with wider community Vocational training Outings Extra mural activities offered within school and from the community</td>
<td>Markets days and other fundraisers, same as hearing schools More exposure and support for life after school Encourage learners to benefit maximally thorough positive attitude Develop skills from extra-murals at a young age – martial arts, bead-work, dance, drama</td>
</tr>
<tr>
<td><strong>Collaboration with stakeholders</strong></td>
<td></td>
<td>More opportunity to engage with DoE and organisations for the Deaf – vocational training, additional staff (speech therapy, vocational class), parent-support Organisations for the Deaf to promote technology: hearing aids and cochlear implants</td>
</tr>
</tbody>
</table>

*Table 5.1. Table indicating the 10 focus areas for the promotion of holistic wellbeing*

Each focus area is discussed below with reference to the value that it holds for the promotion of wellbeing as indicated in the discussion and confirmed by the research literature.

**Access to technology**

Technology can provide the Deaf with opportunities to engage with both the hearing and the Deaf world as it provides a means of communication accessible to both. As highlighted in the WCE event, there are facilities currently available at school that aid teaching and learning for
Deaf learners: “We can use the computer lab for learners to use SASL Caps curriculum This will allow for online learning because learners expresses interest in technology” (Group 2). Some staff members lack confidence and enthusiasm due to a lack of ability to use the equipment effectively. The development of staff technological skills is thus recommended and made supported by the following comment: “Teachers need training and motivation to use resources in school that are currently available” (Group 1).

Besio and Salminem (2004), comment on the value of the use of technology in children’s lives. The authors indicate the value of including technology into teaching and learning opportunities to support both learning and participation. The participants made reference to the available resources at the school, including computer labs and interactive white boards which support visual learning. These technological facilities increase opportunities for the learners to participate meaningfully in their educational opportunities because of the support this type of learning provides to meet their unique visual learning needs. Technology can facilitate principles posed by global policy in education and tailor educational opportunities to learner needs, to ensure that it is appropriate and meaningful.

Skills development

The vocational class was identified by the learners and staff as a valuable means to develop learners’ ability to gain access to the hearing world as they are provided the opportunity of working in hearing contexts supported by the school. The following comment highlights this sentiment: “There are a variety of skills developed at school but there is room for development which will allow for more opportunity to do other things when leave school” (Group 2). The learners and staff expressed a desire to expand these opportunities further but the challenge lies in funding and staff. A suggestion to the DoE is made for an additional staff member to be
employed at the school to co-ordinate this programme since the school’s primary focus is on learners who are enrolled to complete a mainstream Grade 12 qualification. The skills programme has developed in response to learner need. Due to the many challenges faced by the Deaf in South Africa (Magongwa, 2010) as indicated in Chapters 1 and 2 many learners are not able to pass the Grade 12 academic qualification. The co-ordinator of the skills programme could focus on in-school co-ordination coupled with securing placements for tertiary study or employment opportunities.

Subject choices offered at the school

A recommendation is made to the DoE to increase the number of subjects offered to the learners at the School because there are currently only seven subjects available to them in the senior phase. A suggestion to increase their choice to mirror the opportunities available to their hearing peers was made: “Opportunities must be equal to hearing children’s opportunities at school in terms of subject choice” (Group 1). “The DoE should create an opportunity to implement science in school” (Group 2).

Rasebopye (2010) raises a concern about the limitations faced by Deaf learners in South Africa with regard to educational opportunities, and the limited subjects offered in schools for the Deaf. This parent struggled to have her deaf child accommodated in a pre-school which catered for her needs since there are a limited number of special schools in rural areas. It resulted in the child having to live away from home for formal schooling. Coupled with the historical disadvantages of a lower quality of education for black learners, Rasebopye maintains that the child’s education which was inferior, and craft not academic based, limited her opportunities after school in terms of gainful employment opportunities.
The participants raised the important point that Deaf learners do not have the same subject choices as learners in hearing schools. This is due to the fact that the staff employed in the senior phase whom have specific skill-sets based on subject specialism. The participants suggested that the DoE increase staff numbers in the senior phase to allow greater opportunity for learners to develop wider areas of interest: “Increased subject choice” (Group 1). This is confirmed in the literature by Magongwa (2010) who raises awareness of the inequalities in Deaf education in South Africa.

*Communication according to the needs of the Deaf*

Schools for the Deaf have been identified as environments that can promote and sustain holistic health and wellbeing for Deaf learners (McKee et al., 2013). This becomes possible when schools for the Deaf support the language needs of the Deaf and promote Deaf culture. Acculturation into Deaf culture occurs with the development of sign language for communication and the development of a shared identity in the Deaf community (Aarons & Akach, 1998). At the School for the Deaf where the research was conducted, the educational policy stipulates the use of signed bilingualism in accordance with which educators use SASL as the primary language of communication. The value of this is confirmed by the following statement: “Communication from teachers helps develop good communication skills” (Group 2). Having the language needs of the Deaf met in the school as well as accepting all learners’ disabilities contributes meaningfully to the promotion of wellbeing. The value of communicating effectively in SASL is noted as referred to in Chapter 1 (Parkin, 2010).

Improvements in staff, parent, and extended family signing abilities is encouraged for understanding concepts taught in class and for the development of relationship in the home setting, revealed by: “Sign language needs to improve” (Group 2).
Difficulties in lip-reading in social and educational contexts in South Africa are raised by Koen (2003). She promotes mastering the skill of effectively lip-reading and understanding the shapes the mouth makes when sound are omitted. Speech therapy is currently available to some learners in the school. A surprising finding was that learners in the senior phase expressed the desire to have access to speech therapy to enhance their ability to communicate and not to rely on SASL alone. This is substantiated by the following statement: “Conversation between hearing and Deaf people needs to be encouraged; access to the hearing world then increases” (Group 1). The school has limited opportunity to provide access to speech therapy to all learners because there is only one speech therapist employed at the school; a suggestion was therefore made for collaboration between the DoE and organisations for the Deaf to help facilitation of greater access: “More speech therapists required to give children individual speech sessions” (Group 1).

Parent involvement and support

The value of having parental involvement in the lives and education of the Deaf child is noted by Krige (2010). Limited parental involvement in the school in this study is noted as negatively impacting on learner wellbeing. Parents are care-givers in the setting seem to struggle to communicate with their children in SASL despite the fact that the school offers free SASL classes to families of the learners enrolled in the school: “Parent commitment seems low” (Group 1). It was suggested that the parents need to access the free SASL classes and become more involved in the school. Offering classes in areas close to where the parents live in satellite sites was suggested by some participants: “Sign language classes need to be more accessible in terms of cost and locality” (Group 2). This desire from the WCE stems from the hope that it will
help facilitate more communication between learners and their family members, and foster collaboration between home and school.

*Relationships between learners and hostel parents*

As the learners in the hostel spend a significant amount of time at school and in the hostel, the relationships in this setting are understood to be significant for the learners’ developments. The relationships between hostel parents and learners are identified as impacting learner wellbeing because increased opportunity for communication, social interaction, and support for learning is encouraged in the setting: “*Relationships in the hostel important*” (Group 1).

Nelson and Prilleltensky (2010) raise awareness of the value to relational wellbeing comprising an aspect of holistic wellbeing. The learners said, “*We want hostel parents to help us with homework and engage socially with us in the hostel after school*” (Group 1).

*Learner support through peer mentoring*

As indicated above, the value of relationships impact on the experience of holistic wellbeing (Nelson & Prilleltensky, 2010). A suggestion to create opportunities for more interaction between phases was thus made. Mentors from the senior phase supporting younger learners in the foundation and intermediate phases, socially, and during homework time, is encouraged. This is borne out by the following comment: “*A specific hostel homework program to be developed to offer support for learners*” (Group 2).

Opportunities to engage with successful Deaf role models socially, in sport, and in the workplace, is suggested for learners to gain awareness of how success can be obtained despite
facing barriers in the wider hearing community: “Learners who attended the school previously act as role-models to the learners if they are employed or studying. The learners who attended the school previously still visit” (Group 1).

Due to the many challenges faced by the Deaf and the subsequent development of mental health difficulties in the Deaf community (Erlich, 2012) a suggestion is also made to the DoE to provide access to a qualified mental health practitioner at the school, who would be able to communicate in SASL as the need to provide intervention to learners and their families is apparent: “Play therapy offered voluntarily and it is not enough” (Group 2).

Participation in sport

According to Louw and Surtees (2010) sport is another way in which the Deaf community in South Africa experiences wellbeing. The value of sport at school was raised by teachers and learners: “Sports build our confidence” (Group 1). A suggestion to collaborate with other schools, both hearing and Deaf, to increase social interaction opportunities and to gain access to the wider hearing world, is made.

Community engagement for awareness

Deaf awareness is identified as impacting on wellbeing and thus opportunities such as market days, fund-raisers, and sporting events are encouraged to create equal opportunities at school. This is confirmed by the following statement: “Create Deaf awareness” (Group 2). Nelson and Prilleltensky (2010) raise awareness of the fact that in educational settings, the voices of children are not always heard. Responding to the learners’ call for more engagement in the hearing and Deaf world, opportunities to fulfil these wishes is suggested: “Hearing kids will then know that Deaf kids do the same things as them” (Group 1).
Collaboration with Stakeholders

The value of working collaboratively with stakeholders was raised by the participants in response to suggestions made to increase subject choices offered at the school which would require additional staff allocations from the DoE. Funding support for outings which are seen as integral to learner development, is require from the DoE and organisations for the Deaf. Parent support is currently developing in the school. Suggestions were also made by participants to partner with organisations for the Deaf. As Deaf education in South Africa is reported to be influenced by decision-makers with limited or no experience in Deaf education (Parkin, 2010), the value of having DoE representation at the World Café event was acknowledged by the school community. Despite confirmation of attendance, no DoE representation was available on the day of the event and thus an opportunity for the DoE to experience the challenges and the successes for the School for the Deaf was missed.

A need to engage with stakeholders is revealed by the following comments: “Outside body like DeafSA need to take an opportunity to set up videos for parent SASL training for example, as it’s important to focus on our core jobs at Fulton” (Group 1) And “Opportunities at school but the school gets left with the responsibility of coordinating the program” (Group 2)

5.4.2. Discussion of Phase 3 Results

The cumulative findings in Phase 3 indicate that the participants identified a range of ways in which wellbeing is currently experienced at the school. They also revealed ways in which wellbeing could be further promoted. The findings identified ten focus areas for development.
The participants described how access to technology can sustain and promote wellbeing as it allows learners to develop communication skills, access learning materials on-line, and develop skills and abilities that could potentially be used in the work force once they leave school.

The participants described how skills development contributes to learner wellbeing as it allows them to gain access to the hearing world thus boosting their self-confidence, and the possibility of finding gainful employment when they leave school. This can be enhanced through additional DoE funding for materials and staff to manage the programme.

A call for increased subject choices was made to ensure that Deaf learners experience the same opportunities as hearing learners. The existing subject choices for matric are limited. Increased staff to address this call was made to the DoE.

Communication in SASL was identified as fundamental to the experience of wellbeing for the Deaf. As the school has a policy of signed bilingualism and promote the simultaneous use of SASL for communication and English for written text, the communication needs of the Deaf are addressed. As a means to further enhance this provision, the fluency of staff members was raised by teachers and learners as impacting on learner ability to fully grasp concepts taught, and that a higher level of fluency of all staff was called for. Increasing the ability of parents and families of the Deaf was also suggested as was access to free SASL classes in areas where parents can attend the classes.
Coupled with parental signing fluency was the suggestion to increase parental involvement and support in the school. A decline has been noted in parental involvement by staff employed in the school. To encourage more parental involvement in the school and as a means of providing support to families, active involvement of the parents in the parent support group was suggested. Communication using instant messaging was suggested to increase access to information for parents.

The hostel was identified as a place where wellbeing is experienced by some learners but the quality of the relationships between learners and senior phase learners was identified as requiring intervention to bolster communication, care, and support. More support for homework and social engagement was called for by learners. Some house-parents were identified as engaging with learners and teaching them about Deaf and Zulu cultures as well as supporting them in sports training. These experiences are highly valued by the learners, and ways in which to support house-parents in this regard is suggested to enhance wellbeing promotion.

The learners value their interactions with friends and peers at school. The learners made a call to access peer support from older learners at homework time as these learners have an understanding of the needs and ways of the Deaf and can communicate in SASL. As many learners access the weekly boarding facilities, this intervention could be made possible.

Participating in sports was identified as facilitating wellbeing due to the social interaction opportunities it provides within the school and the wider community, the benefit is has on the health of the learners, and the opportunities it offers to travel and possibly gain employment after school in this field since some learners participate in the South African national teams. Further opportunity to engage with other schools for the Deaf as well as with hearing schools was called
for by learners in the promotion of wellbeing. Additional funding for outings related to sport was also proposed to the DoE.

By engaging with the wider community, opportunities for Deaf awareness become possible. This allows society to become familiar with the Deaf community as well as providing opportunities for the Deaf to develop their abilities to engage effectively in the hearing world. Greater opportunity for Deaf awareness was thus identified as a means to promote wellbeing within the school.

A vital component of the experience of wellbeing within the school community is related to collaboration with stakeholders. The DoE is responsible for the development of educational policies affecting Deaf education and for funding staff and resources in the school. As the DoE did not attend the event despite confirmation of attendance, their opportunity to develop an understanding of the needs of the school for wellbeing promotion was missed. Other organisations for the Deaf were identified as stakeholders who could play a role in parent support by facilitating SASL classes and resources to further enhance parents’ abilities to communicate with their children.

5. 5. SUMMATIVE OVERVIEW OF THE RESULTS OF THE STUDY

A summative overview of the results reported separately for the three phases is presented in the table below:

In phase one the learners who participated identified the following factors as contributing to their wellbeing:
1. The provision of opportunities for learning and development such as exposure to technology, organised outings, involvement in sport activities, celebration of special days, and mastering skills for independence.

2. Their connectedness to people in the school and the broader community. This connectedness is visible in the friendships they have developed through social interaction and through a sense of inclusion experienced through the acknowledgement of their culture and language.

3. Being cared for and supported on a continuous basis is important. Within this main theme the following sub-themes emerged: being accepted and appreciated by others, and being allocated safe and enabling spaces.

In phase two the results indicated that the teachers and other staff members consider the facilitation of enabling spaces for both teachers and learners as a way to promote wellbeing in the school community. The following sub-themes emerged under the main theme of inclusive spaces for learners: unconditional acceptance and compassion, recognition of communication needs, provision of safe and secure facilities, strengthening learner resilience, and a positive reward system.

In phase three of the research, ten areas for development based on current community findings were identified. These identified areas developed from the findings in phases one and two as a point of departure.
Areas for development include: access to technology, skills development, subject choice, communication, parent support, the hostel, learner support, sport, community engagement, and collaboration with stakeholders.

We can conclude from these findings that there are currently opportunities available in the school context that allow for the experience of wellbeing in everyday practices which include community members and raise awareness of the value of inclusion and connectedness to others in the setting. The learners describe how belonging to Deaf culture coupled by accommodations made by the adults employed at the school to meet the unique language needs of the Deaf, and accommodations made in the curriculum to enhance access for Deaf learners, is understood to promote wellbeing. While many opportunities exist in the school to experience wellbeing, areas for development based on current practices were identified, and include wider access to both the hearing and the Deaf community, work experience, vocational development, enhancement of technological aptitudes of both staff and learners, enhanced collaboration between parents and learners to promote engagement and support at home and school, and greater collaboration between the school and the DoE and organisations for the Deaf.

The findings from phases one, two, and three were used as a basis for the development of guidelines to facilitate the promotion of holistic wellbeing in a School for the Deaf in South Africa. The guidelines are discussed in Chapter 6.
CHAPTER 6

GUIDELINES FOR PROMOTING HOLISTIC WELLBEING

IN A SCHOOL FOR THE DEAF

6.1. INTRODUCTION

In this chapter guidelines for the promotion of holistic wellbeing in a school for the Deaf are presented. The guidelines were theoretically informed by a multi-level community psychology approach which embraces an ecological perspective of the promotion of holistic wellbeing to enable a shift from an ameliorative to a more transformative approach involving all the members of a school, considered a community, in which wellbeing is prioritised. The relevant literature on the promotion of health and wellbeing in schools and the associated challenges of such an endeavour was studied to provide a basis for the development of the guidelines.

The guidelines are based on the understanding that the promotion of holistic wellbeing is a multi-level process (Ng and Fisher, 2009) which should simultaneously focus on the promotion of individual, relational and collective wellbeing (Prilleltensky, 2005) in a particular context; in this case a School for the Deaf in South Africa.
The diagram below presents an overview of the guidelines developed in this study:

Diagram 6.1. Guidelines for the promotion of holistic wellbeing

6.2. GUIDELINES FOR THE PROMOTION OF INDIVIDUAL WELLBEING IN A SCHOOL FOR THE DEAF

The promotion of individual wellbeing as a critical aspect of human flourishing is evident in research. Ryff and Singer (1998) understand individual wellbeing to mean engagement in living which constitutes having a purpose in life, having good relations with other people, and having self-regard and mastery. The authors describe this construct as including feelings of self-acceptance, having positive relations with others, having autonomy,
experiencing environmental mastery, having purpose in life, and experiencing personal growth. Keyes (1998) includes social dimensions to the construct, namely social integration, social contribution, social coherence, social actualisation, and social acceptance.

Based on the empirical work in this study the following guidelines are set for the promotion of individual wellbeing.

6.2.1 Provide opportunities for all learners to develop to their full potential

The Deaf as a group continue to face limited opportunities for development beyond the Deaf community in South Africa. In response to this reality faced by the Deaf, providing opportunities for the development of their full potential was revealed to be significant in the cumulative findings of this study.

Exposure to new experiences:

The learners were clearly enriched by exposure to new experiences which included outings. The opportunity to connect with others was emphasised on these outings arranged by the school. The learners indicated that they felt connected to their friends and teachers in these opportunities to learn and experience new things together. More outings arranged by the school was suggested but financial constraints in terms of the school’s limited budget, coupled with the fact that many learners come from poverty-stricken backgrounds reveal the need to work collaboratively with the DoE and organisations for the Deaf to support the school and the learners with funding in this regard.

Facilitating access to technology:
The learners across all phases indicated the high regard they place on being able to engage with technology. Such access included using the computer in class for learning and reward, using interactive white boards for learning, watching movies, and playing learning games. The learners and staff indicated the value they ascribed to developing such skills which can assist learners in securing employment opportunities after school. Communication and language skills are also promoted through the use of email and skype facilities. Technology can thus be used to gain access to a wider community beyond the school, and the suggestion to develop contacts with other schools for the Deaf through skype was made. Deaf learners can communicate through SASL via the internet and a social network can develop. Encouraging teachers to allow learners to use the computers in class, and to take their classes to the computer room and library to access the interactive white board is therefore seen as necessary.

*Facilitating access to the curriculum:*

The way in which teachers facilitate access to the curriculum was noted by learners as a positive contribution to their wellbeing on individual levels. Recognition of the unique language needs of the Deaf which require visual teaching methods as well as specific adjustments made to the curriculum is appreciated by the learners. The acknowledgement and acceptance associated with the way in which teachers deliver learning activities also contributes to feelings of wellbeing and seemingly impacts on their educational achievements. It is therefore deemed appropriate for all staff members to develop their competencies in technological equipment at school, including the use of the interactive white boards for visual teaching which the Deaf learners was proposed as a way to further enhance the ways in which teachers can support the unique learning needs of the Deaf. Staff members who are competent in the use of technology utilise their skills train those less competent across all phases. In addition to further enhance the skills for those who already feel competent, training by professionals outside the school can be used to upscale competent
staff further. This training can be shared with other members of staff in staff meetings and training workshops.

**The development of skills:**

The learners revealed that they specifically value the development of life-skills that will help them to facilitate independent living once they leave the Deaf school. Such skills include cooking, running a home, and caring for their own health. To enhance these opportunities, suggestions were made to network with community organisations to provide training in first-aid. This calls for funding allocations from the DBE or partnerships with organisations for the Deaf to allow for the extension of training possibilities in the school. Opportunities to learn and to succeed furthermore facilitate feelings of self-worth and self-confidence.

In concurrence with the above-stated, the teachers and staff members employed at the school emphasised the importance of learners having access to vocational development which they understand to contribute to the promotion of wellbeing. The vocational programme allows learners who are not able to complete Grade 12 to develop skills that can be applied in the workplace. Training takes place in a variety of settings, including the school and the public sector.

A suggestion is made by Parkin (2010) to accommodate the needs of Deaf learners; this proposition includes the enhancement of a skills development programme in school to accommodate a wider range of settings which will ease the transition from school to the workforce. As proposed by Richardson (2014) opportunities for the Deaf to make informed choices that affect their lives is pivotal for the development of self-esteem.
However, the labour-intensiveness of managing this programme raised concerns about the wellbeing of teachers involved in the programme. Thus the inclusion of the DoE and organisations for the Deaf to facilitate development in this regard is identified as a guideline as the school for the Deaf does not have additional staff or funding for the development of such a programme. The vocational programme grew out of a need in the school; many learners experience challenges in their academic development and need support. This support is in line with the principles proposed in the Ottowa Charter (WHO, 1986) where schools are encouraged to become enabling health and wellbeing promoting environments.

It is believed that the provision of opportunities will allow learners to develop the skills they need to be able to cope better with the challenges they face on a daily basis.

The findings also emphasised the value of providing opportunities for learners to connect with the wider community in both Deaf and hearing settings. The learners experience such connections as equipping them with skills to interact socially beyond the boundaries of their peers and friends at school. They are also strengthened to network and negotiate access to further studies and/or employment once they have completed their schooling. In addition they develop the confidence to assert themselves in the world of work where they do not have the security of being in a Deaf environment but have to engage with those who are likely not to be able to communicate in SASL. This finding speaks to the resilience described by Theron and Theron (2010); the bouncing back from adversity which speaks to the learners’ abilities to make use of opportunities to develop. Suggestion to facilitate such opportunities include sporting events with hearing and Deaf learners, fund-raising days at the school where local schools and community members are invited to participate in activities, and Deaf awareness events such as signing choir performances where the Deaf learners sign the words of songs to an audience in
local venues. Continued opportunities to empower learners in schools in the local area to
develop basic SASL skills will allow for the enhancement opportunities for communication with
the Deaf community at school. This could take the form of short demonstrations in school
assemblies or after-school clubs or in language lessons where teachers from Deaf and hearing
schools could work collaboratively. Providing opportunities for Deaf learners to teach hearing
peers in local schools is suggested to empower the Deaf, to foster relationships in the hearing
community, and to create Deaf awareness. Working relationships could be fostered with schools
and principals in the local area to create opportunities for such interventions.

6.2.2. Provide support to ensure that every learner can thrive

As confirmed in the literature, the Deaf face many challenges that impact on their
wellbeing and as a result are more likely to develop mental health problems than their hearing
peers (Erlich, 2012). In response, according to the empirical data from phase three, focus on
further academic and psycho-social support is called for because although support through the
use of SASL is dictated by educational policy, not all staff at the school sign fluently.

Parkin (2010) also emphasises the importance of providing academic support to the Deaf
in teaching and learning through proficient use of SASL. Academic support in class is already
made to meet the needs of the Deaf, including the use of SASL plus spoken English, the use of
visual teaching aids, and adaptations to the delivery of the curriculum. These wellbeing
promoting actions should be continued and all the educators should be equipped with the skills to
incorporate and implement them. At present learners express frustration at not being able to
understand concepts taught in class due to some teachers’ limited signing abilities. The fact that
staff members are provided lessons in SASL by Deaf SASL teachers at the school is a sustainable way to enhance learner support.

However, support needs to go beyond academic support to include psycho-social support. As indicated by Oluwatoyin (2013), the Deaf are a group vulnerable to self-esteem problems as a result of alienation, isolation, and prejudice, and thus often experience self-pity. In response to the difficulties faced by the Deaf and as a means to support them in this regard, the limited therapeutic intervention at school was raised by the staff as an area for development. Learners have access to psycho-social support offered by a volunteer who was previously employed as a teacher in the school. This teacher completed short courses in play therapy on a weekly basis and memory work by trained memory-work facilitators to assist the children with social and emotional challenges. Whilst these interventions are acknowledged as valuable, the involvement of the DoE and organisations for the Deaf is challenged to assist with the development of alternative ways to ensure support for all learners and their families, not only for learners and families who experience serious problems. Employment of a registered psychologist or counselor who is able to communicate in SASL is identified as valuable by the staff. Alternatively, providing access for the learners to work with counselors affiliated to organisations for the Deaf is proposed.

The cumulative findings clearly reveal the important role that the school hostel can play in supporting learners. Here, through communication in SASL and through enculturation into Deaf culture where the needs and ways of the Deaf are acknowledged, is a site for the promotion of wellbeing. Through the provision of a safe and secure environment where shelter and food are provided thus facilitating a feeling of a home away from home, the hostel is seen as a significant aspect of wellbeing promotion in the School for the Deaf.
To further enhance wellbeing promotion in the hostel, a suggestion was made to extend the provision of basic needs like safety and shelter to offering psycho-social support to the learners, made possible through greater interaction between hostel staff and learners. The learners in the intermediate and senior phases indicated that they would benefit from more social interaction, more communication, and additional support with homework from their hostel parents. A suggestion was therefore made to enable and empower hostel staff to provide such support to learners. As all house-parents had been previously trained as memory-work facilitators to enable them to offer psycho-social support to the learners, but the majority of house-parents choose not to apply their training and engage in memory work with the learners, it is important to allow space for house-parents to discuss their understanding of learner wellbeing promotion, to share these ideas with the school management, and to find out how they think it might be implemented. This will shift suggestions from a top-down approach to a collaborative approach and allow hostel parents to become an integral part of the process, as suggested in the WCE.

The teachers and other staff members employed at the school indicated that unconditional acceptance of and compassion for learners by the staff contributed to their experience of psycho-social wellbeing, and was included in their ideas for the promotion of wellbeing. Feelings of being loved and supported facilitate acceptance of rules put in place in the school and learners understand that these are upheld by love and care for them learners and not punitively.

A positive reward system is currently sustained through a weekly celebration of learner achievements in assembly and in the annual prize giving. The continued
implementation of a positive reward system which encourages all staff across all phases including the hostel staff, to focus on positive praise and reward rather than on punitive measures is identified as an important way to enhance wellbeing. The overall practice at school is to focus on achievement but as this is not consistent across all staff, the suggestion was made to ensure this practice takes precedence over punishment, especially since the learners indicated in the WCE that some teachers and hostel staff are quick to punish resulting in a feeling that equity does not guide practice and that some learners are favoured over others. Senior management staff and HODs are called on to ensure that positive reward is used to encourage learners rather than punitive measures meted out in response to learner behaviours.

6. 2. 3 Motivate and support teachers and other staff members

The results obtained in phase two indicated that some teachers in the school support each other on an ongoing basis and share ideas and resources. This support strengthens them and motivates them to continue their work despite the many challenges that they face on a daily basis. This practice should be expanded to encompass a process of ongoing support to include all the teachers and staff members in the school as a way to enhance the wellbeing of teachers and staff. Opportunities for staff to develop their relationships through team-building activities and school-wide events where teachers can relax and engage socially are identified as necessary way to foster effective relationships.

Another practice reported in phase two that should be maintained is support provided to new staff members through mentorship. This support allows new teachers to learn effective ways of teaching the Deaf and engaging respectfully with regards to Deaf cultural
practices. Since some staff members were identified as more motivated than others, efforts to motivate all staff to do their best on a continuous basis is necessary. This is envisioned through events such as the school hosting fun days in which all school community members are involved, namely learners, staff, and parents. Such opportunities to engage and share with each other were envisioned as a way to develop enthusiasm and motivation for all staff members to develop feelings of belonging rather than isolation.

What is important to note from theory is that the individual wellbeing of the learners, teachers, and other staff members should be promoted together as their wellbeing is interwoven. Deliberate planning for the promotion of the individual wellbeing of all these groups should therefore be conducted as part of the effort to promote holistic wellbeing in the school to make sure that the school is an enabling space.

6.3. GUIDELINES FOR THE PROMOTION OF RELATIONAL WELLBEING

McCubbin et al. (2013) maintain that relational wellbeing refers to the enjoyment of a quality life, where the individual has food, housing, and is part of family and a community; where feeling good and positives in life are more prominent than negatives, and highlight the importance of community in their definition of relational wellbeing which is understood to create a sense of belonging for the individual. The relational perspective highlights that the individual, family, community, and society are interconnected and inseparable. Relational wellbeing therefore mediates between individual and holistic wellbeing.

Based on the empirical work in this study the following guidelines are set for the promotion of relational wellbeing.
6.3.1. Maintain the sense of belonging and connectedness between all those involved in the school

The findings of the study across all three phases revealed that a sense of belonging is apparent in the school community; learners are affiliated with each other through their deafness and by belonging to Deaf culture (McKee et al., 2013). This sense of belonging is confirmed on a daily basis through the use of SASL in teaching and learning opportunities and for social communication between learners and between learners and staff.

The use of SASL allows learners to communicate openly with their teachers and peers, a reality not always experienced in their home environments because, as already mentioned, many family members of Deaf South African learners are unable to sign (Krige, 2010). In order to increase the opportunity for learners to feel connected to others in their school, increased fluency in SASL is necessary for all staff and parents. Continued staff participation in SASL lessons to progress to a level of fluency, as well as extending sites for parents to participate in, free SASL classes, is proposed. Conducting classes in areas closer to where parents reside is envisioned.

The finding reveal the important role the hostel plays in the learners feelings of connectedness to others in the setting. Through the use of SASL learners gain access to care and support as they are able to make then needs known. The learners raised awareness of the value they place on being able to sign with their house-parents as many face barriers to communicating with their own families at home and learners in the senior phase called for more interaction between learners and hostel staff for support with their homework, and to engage socially after
the end of the school day. The need to work collaboratively with the hostel staff to explore ways in which they would be willing to engage with learners is reported.

The celebration of special days at school was further highlighted as a way in which connectedness to others in the setting was enhanced. The value in celebrating diverse cultural and religious days allowed for learners and staff to interact despite differences in race, culture, or religion. Opportunities to understand each other’s cultural backgrounds were also identified as important by learners and staff. Continued celebration of special days is therefore proposed.

6.3.2. Enhance collaboration between staff members across professional boundaries

The staff members clearly value team work. They emphasised the value of collaborative working relationships where staff members support each other to the benefit of the learners; sharing of resources, supporting new staff members, and assisting their the transition of the latter into Deaf education. The value some teachers place on being supported by other teachers and managers in areas where they feel under-confident, was noted. Supportive relationships within and between the teachers who work in different phases can be fostered and encouraged by the school and phase management staff though the organisation of team-building activities and relaxation opportunities not focused on work-related matters.

However, since not all staff members are involved in team work the school needs to address this and involve more members in teamwork. This may enhance connectedness and also address strained relationships between staff members who are not engaged across the boundaries created by positions in the school, for example teaching assistants, teachers, and hostel parents. Opportunities for staff members to participate in discussions where they are
free to share their thoughts and feelings openly is identified as a necessity, where ideas and experiences are made explicit in a controlled but open and reflective manner.

6.3.3. **Allow time for active engagement between learners within peer groups and across peer groups**

Learners experience multiple opportunities to engage with their friends and peers at school at play times, in after school activities, and in the hostel. These opportunities foster the promotion of wellbeing in close friendships, united through belonging to the Deaf community, and a shared identity and language which allow learners to feel well and be well, as indicated by Groce (2013).

Mentoring and peer support was revealed to be a significant source of support for the younger learners in the school. More opportunities for learners to connect are therefore suggested. This can take the form of mentors in the senior phase to support learners in the foundation and intermediate phases with their homework, role-modeling appropriate behavior, and fostering social and emotional support. Deaf learners are seen to understand the needs and the ways of the Deaf and are therefore able to support younger learners effectively. The younger learners also expressed a desire to engage socially with the older learners in the school. The phases have classes in different parts of the school grounds, reside in separate hostels, and their afternoon duties are grouped separately; more opportunities for learners from different phases to mix was therefore proposed. This can be achieved at break-time under adult supervision and in duty time where older learners could arrange activities for younger learners. As many of the learners in the school make use of the boarding facilities, the possibility of developing homework support from senior learners for younger learners can be easily established.
The findings of the study also revealed the value the school community places on opportunities to engage with the wider community. Interaction with both Deaf and hearing communities outside the school is proposed. This can be achieved through the continuation of sporting events with local schools and through buddy-systems where opportunities to develop relationships with hearing peers are proposed. The schools can collaborate to teach basis signing skills which can be enhanced through social interaction opportunities in organised events such as athletics or cultural celebration days. This can be achieved by the school management developing relationships with other schools in the local area. These local schools might be willing to participate in such interventions was made. Those who participated in the WCE suggested more connection to other Deaf people, socially, academically, and in sporting events. As indicated by Oluwatoyin (2013) the Deaf are often excluded and isolated from the wider hearing community. This needs to be addressed to enhance relational wellbeing, the value of which is described by Prilleltensky (2005).

6. 3. 4. Make deliberate efforts to involve parents instead of blaming them

A decline in parent involvement in the school was noted by long-standing staff members. However, whilst noting this decline, a proposal was made by a participant in the WCE that the school should focus less on blaming parents and rather focus on finding inclusive ways to support and encourage them. In the past a parent support group existed at the school but had not been operational for the past few years. Recently, a new parent school had however re-instated the parent-support group and it was gaining membership. The group was led by a pro-active parent who has found effective ways of communicating with the group. One such means is instant messaging. The parent encouraged other parents to participate more actively in
opportunities that support them to deal with the challenges associated with parenting Deaf children (Sardar et al., 2012).

Limited parental involvement in the free SASL classes offered by the school was acknowledged by the teachers. The limited ability of parents and family members to use SASL to communicate with their Deaf children was identified by learners and staff as negatively impacting on learner wellbeing, and leading to isolation and boredom at home. To address this problem, a house-parent proposed an idea to offer the free SASL classes offered in the school by sign language teachers to parents more accessible. This could include offering classes in a location closer to where they live as the cost of travelling to the school on a weekend is not a possibility for many poor families. The house-parent raised the point that many families have domestic responsibilities to take care of on a Saturday and the time it takes to travel from their homes to the school might be an additional reason why the classes are not well supported. The continuation of the free SASL classes offered to parents at the school on Saturday mornings in addition to offering free classes in locations closer to where some of the parents reside is identified as a way forward. In addition, involvement of organisations for the Deaf to facilitate support for the school in regards to parent SASL classes including the development of resources and the delivery of classes in more accessible areas is necessary.

6. 3. 5. Increase the ability to communicate with the hearing world

As a means to address the communication barriers the Deaf face outside the Deaf community, and to facilitate equitable participation in society, the importance of enabling Deaf learners to engage with the world by creating opportunities for all of them, was strongly emphasised in this study. Facing barriers to communication outside the Deaf community limits
the development of self-worth and self-confidence (Erlich, 2012). More social activities where opportunities to engage socially with friends, peers, and other Deaf people is suggested as this helps to build relationships and self-confidence. A way in which to achieve this is to develop activities for the afternoon duty time. Here learners across phases can have the opportunity to engage with peers across phases under adult supervision.

Evidently technology can play a significant part in the enhancement of wellbeing. Authors Besio and Salminem (2004) comment on the important role that technology can play, namely providing the Deaf with an opportunity to engage with the world of the hearing as it is a means of communication accessible to both the hearing and the Deaf. By increasing the teachers’ abilities to effectively utilise the equipment currently available at the school through in-school training in staff meetings and in phase meetings coordinated by the HODs can facilitate the staffs’ skills development. Learner capacity to work competently with the equipment to support learning can potentially be enhanced by on-line teaching tools made available by the DBE linked to the curriculum. The development of their competencies in communication skills can also be facilitated through the use of email, skype, and the use of cell phones with instant messaging facilities. Skype allows written text and the possibility of signed communication. As the learners have access to a computer in each class, a computer room, and interactive white boards, sustainable up-scaling of the teachers’ abilities to use the equipment confidently, is possible.

A concern was raised about access to technology because many learners from poor backgrounds lack personal resources. They do however have access to technology in the school setting where it is a sustainable intervention for the promotion of wellbeing.
Use of email and instant messaging to communicate is identified as a way to achieve more effective communication between the school and the parent body. Communication between the school and parents had been difficult to sustain in the past and this method offers a solution.

The value of being able to communicate with the outside world in an effective way will increase the Deaf learners’ ability to connect with people whom they would normally be distanced from due to communication challenges. The importance of communication and connectedness between people to promote the wellbeing and relational wellbeing of individuals is emphasised in the literature (Nelson & Prilleltensky, 2010). In practice the school community should therefore not merely support learners who do not communicate well but pro-actively encourage all members of the school community to take responsibility for communicating with the outside world.

6.4. GUIDELINES FOR THE PROMOTION OF COLLECTIVE WELLBEING

Cognisance is taken of the individual and relational conceptualisations of wellbeing described by Ryff and Singer (1998), Keys (1998, and McCubbin (2001), and an integration of these perspectives is taken in this study through the application of a holistic conceptualisation of wellbeing proposed by Evans and Prilleltenksy (2007). Holistic wellbeing, defined by the authors, is as a positive state of affairs where personal, relational, and collective needs and aspirations of both individuals and communities are met. Wellbeing is therefore found in three domains, namely personal, relational, and collective, and is highlighted through sites, signs, sources, and strategies of wellbeing (Prilleltensky, 2005).
The framework of this study recognises the oppressive forces which limit Deaf individuals’ and communities’ opportunities to experience equity and social justice. The ecological framework applied in this study also recognises the various systems that influence human development (Bronfenbrenner, 1979). This calls for the recognition that health and wellbeing promotion is not concerned with the individual alone but to the wider social system of which the individual is part. The Deaf are a group of people who often face barriers to equitable participation in society because of language barriers and misunderstandings about Deaf culture (Groce, 2004).

Based on the empirical work in this study the following guidelines are set for the promotion of collective wellbeing.

6. 4. 1. Sustain a shared identity through the acculturation of deaf culture

Schools for the Deaf have been identified in the literature as environments that can promote and sustain the holistic health and wellbeing of Deaf learners (McKee, et al., 2013). This becomes possible when schools for the Deaf support the language needs of the Deaf and promote Deaf culture. Acculturation occurs with the use of sign language in the school setting as well as through the development of a shared identity with the Deaf community (Aarons & Akach, 1998).

At the School for the Deaf, the educational policy stipulates the use of signed bilingualism in accordance with which educators use SASL as the primary language of communication. In dialogue SASL and spoken English are used simultaneously, while written English is used in written texts. Inclusion guides teaching and learning practice at the school
where all the learners’ learning and communication needs are taken into consideration with an attitude of respect for the needs and ways of the Deaf, making it an environment that can promote and sustain the wellbeing of Deaf learners (Parkin, 2010). Staff in the research setting accepts the learners’ affiliations with the Deaf and hearing community, since respect for the ways of the Deaf is crucial to facilitate a shared identity.

In response to the promotion of wellbeing, the development of staff fluency in SASL is identified as pivotal. This finding was evident in all phases of the study. This will contribute to learner development as teaching and learning will be improved. Learners described feelings of frustration at staff inability to convey the meaning of complex concepts due to limited fluency in SASL. Both Parkin (2010) and Druchen (2010) raise awareness in the literature of the need to provide equity for the Deaf in educational opportunities with recognition of the importance of using SASL proficiently in the school setting. Continuing SASL classes and through encouragement and support from school management is proposed.

The learners indicated the value of being taught about their cultures in the hostel, meaning Zulu and Deaf culture. This fosters the development of identity which helps learners to develop a stronger sense of self, and they seem to recognise the significance thereof.

Developing close relationships impacts on individual wellbeing. Such relationships can be friendships amongst learners, as well as relationships with teachers and hostel parents. This underscores how relational wellbeing underpins individual wellbeing. As highlighted in the literature, the Deaf struggle to connect on a deeper level with many family members and the wider community due to communication barriers (Krige, 2010) and thus the school setting is a place where connection between individuals in the Deaf community is strengthened. A
sense of belonging is fostered through close relationships formed in the school. This is noted to be achieved through the use of SASL to communicate in the classroom with teachers, in the hostel with the hostel staff, and with other learners in all settings. A link between relational and collective wellbeing is fostered through acculturation and therefore continued opportunities to develop a Deaf identity is made and believed to be achievable through accepting and promoting Deaf culture within the school setting.

It is necessary to enhance the support which learners receive from the hostel staff and includes motivating hostel staff to extend the ways in which they engage with the learners. Hostel staff members have displayed resistance to offering psycho-social support such as memory-work with learners in the hostel and offering assistance with homework. Offering house-parents themselves the opportunity to decide in which ways they would like the school to support them, is suggested; non-threatening, supportive discussions around learner support can take place. This can be achieved if the school management supports house-parents in the development of skills that will enable them to support the learners more effectively.

6. 4. 2. Acknowledge the silenced voices

The transformative paradigm and community psychology perspective which guided this research allowed for the current status of wellbeing promotion in a residential school for the Deaf, to be challenged. Research highlighted by Russinga (2013) reveals that the Deaf often experience a sense of powerlessness, especially in making decisions which affect their lives. Parkin (2010) raises awareness of the fact that the Deaf are capable of the same achievements as their hearing peers, but due to society’s low expectations regarding their abilities to achieve, are often not provided with opportunities to do so. Nelson and Prilleltensky (2010) point out that the
voices of the children are seldom heard in education systems and that decisions are made on their behalf without consultation. To address power and inequality in the research setting, all community members were invited to participate in to explore and develop guiding principles for the promotion of holistic wellbeing.

In the WCE the majority of learners who participated were happy to share their ideas and concerns honestly, and enjoyed being given the opportunity to express their concerns. All the learners were respectful and important issues were raised. Because this was done in a respectful and controlled manner, it potentially allowed for these matters to be addressed at the school.

Comments from the learners included the fact that teachers cannot sign fluently, and the negative impact which this has on learner understanding of concepts taught in class. In addition, the learners raised the issue of favouritism and inequitable treatment of learners in the school hostel. House-parents were described as quick to shout and punish before learners were given an opportunity to explain themselves. While these findings do not allocate blame, they do raise the important point that all learners’ voices need to be heard and that a space needs to be created for inclusive and fair ways of sharing points of view for all staff and learners. The learners should equally participate in processes that affect their lives. Where concerns are raised, solutions can be developed. This does not imply that all learner requests should be granted but that a space should be provided for the school community to work together and to create equal opportunities rather than oppressive forces which privilege some on the basis of rank.

Although the participants had been briefed on the process of a WCE in which perspectives are shared openly but respectfully, some of the adults struggled to let the learners speak freely, and when some learners raised concerns some of the adults felt uncomfortable or disagreed with the learners, gently reprimanding and telling them that their concerns were not legitimate. This was addressed and as a result the voices of the learners were heard and
acknowledged. Despite experiencing some initial challenges in this regard, the WCE provided an platform for the voices of Deaf learners to be heard in processes that impact on their daily lives and thus on their experiences of wellbeing. In terms of social justice and equity, and the principles required for change and transformation within a community (Nelson & Prilleltensky, 2010), all voices need to be heard. The way in which learners responded to the opportunity to have their concerns raised indicates that the WCE can be used as a sustainable way to promote wellbeing in the community in a way in which allows for silenced voices to be heard. Further opportunity for expression in controlled but transparent ways is suggested. Regular events where voices of all community members are heard are identified as necessary. This will allow for freedom of expression and the continued development of opportunities for wellbeing promotion. The events do not have to be catered for, as was the WCE, but simply be offered in settings where collaborative discussion can take place.

At the WCE, the house parents arrived late and had to be encouraged to join the groups. They did not share their thoughts freely and only answered questions when asked directly. Lack of participation and a sense of belonging were apparent; a matter that needs to be addressed. Racial tensions were highlighted in the responses of some house-parents who were critical of suggestions made for the use of technology as a means to encourage communication between learners, parents, and the wider Deaf community. As indicated by Nelson and Prilleltensky (2010), in communities where power relations are not based on equality, tensions arise. It is however possible for problems to be addressed, and change can, happen as a result of inclusive co-operation and engagement. Again, opportunities for transparent and honest dialogue in controlled and respectful ways are proposed to listen to silenced voices. Ensuring that house-parents experience equity and inclusion in these discussions is fundamental for them to feel that
their perspectives will be acknowledged. School management need to ensure this provision is made, and to provide overall encouragement and support for the hostel staff.

Learners in the hostel in the intermediate and senior phases raised an important point, namely the desire for more social interaction and communication between learners and house-parents. Since the learners spend a considerable amount of time at school and the hostel is the place where the use of SASL facilitates communication between adults and learners, opportunities for increased interactions are encouraged. Although learners in the foundation phase expressed positive relationships between house-parents and themselves, no senior phase learner did the same. The valuable role house-parents can play in learner wellbeing promotion is noted even though parents and significant care-givers are seen as the primary context for the child’s development (Bronfenbrenner, 1979). It is important to engage the hostel staff in discussions about learner wellbeing promotion to facilitate understanding and expectations between learners, hostel staff, and school management.

6.4.3. Facilitate access to resources through the involvement of partners

The ecological framework included in this study raises awareness of the many influences that impact on the development of the individual who is not seen in isolation but is understood to be part of a constantly evolving system with multiple layers which expand from the individual, to their family, to the wider social environment including the home, local neighbourhood, and society as a whole.

Examining the literature that supports this understanding of the individual as being impacted on by forces in the wider environment, includes education policy which globally and
locally impacts on wellbeing promotion in schools (Dakar Framework for Action, 2000; The Salamancer Statement, 1994; the Education Act, 1996 & the White Paper 6, 2001). The literature raises awareness of a reality faced in South Africa where DBE representatives who create educational policy in that affects Deaf education, do not always have an understanding of the needs and ways of the Deaf (Parkin, 2010). To address this matter, the researcher invited the DBE to participate in the WCE to facilitate effective partnerships.

The lack of DoE representation at the WCE was however noted, despite confirmation of their attendance prior to the event. Opportunity for DoE representatives to participate in collaborative discussion-making practices regarding wellbeing promotion in the school for the Deaf was an opportunity for them to gain an understanding of realities faced in the school from many different perspectives; the staff, the learners, and organisations for the Deaf. This was a disadvantage in the data collection process since as it would have been valuable to have perspectives from a governmental level. Many suggestions made at the event would need to be addressed at a national level, for example the possibility of additional staffing for speech therapy, and obtaining additional funding for technology, sport, art, and outings. The learners expressed a desire for increased work-related training, so a call was made to the DoE and organisations for the Deaf to assist the school in the development of such a programme. At the WCE, connections between the school and organisations for the Deaf, including the DoE, were made. This collaborative working partnership is understood as a way in which to promote the development of opportunities for the school, the parents, the DoE and organisations for the Deaf. A suggestion was made by to the school management to encourage DoE involvement through invitations to events, meetings, class observations, and after school activities to develop an understanding of the realities faced by the school. This can also support the DoE in effective policy development and funding allocations.
6.5. A COMPLEXITY PERSPECTIVE ON THE IMPLEMENTATION OF THE GUIDELINES

The guiding principles which emerged from the cumulative findings in the three phases of the research can be applied to the school context for the promotion of holistic wellbeing. In conclusion, it is revealed that the development of guiding principles for the promotion of holistic wellbeing in a School for the Deaf include suggestions in all three domains of wellbeing described by Prilleltensky (2005), namely individual, relational, and collective. These three domains are understood as interdependent and therefore require concurrent interventions. In addition a complexity theory approach to change and development calls for the promotion of holistic wellbeing on a continual basis.

Complexity theory is a theory of change that occurs because of a need for survival in an organic, and follows a non-linear and holistic approach that recognises the interconnectedness of people, systems, and networks; the whole which is greater than the sum of the parts (Morrison, 2006). Guiding principles developed from the cumulative findings of the study which applied this approach to change and development to lead to new possibilities and new ways of being in the school. This thinking is in line with the conceptualisation of holistic wellbeing (Prilleltensky, 2005) where the personal, relational, and collective domains of wellbeing are understood as mutually interdependent.

School contexts are described as dynamic, hard to predict, but able to change (Jörg, 2004). Because of this ability to change, a complexity theory perspective matches their malleable way of functioning. Individuals are understood to react to the environment based on their own past experiences, taking in what corresponds to their understanding, and
rejecting what does not thus, engaging in a process of trying to make sense of chaos while at
the same time moving to a new place of knowledge and development (Morrison, 2006). This
perspective facilitated the development of guiding principles for the promotion of holistic
wellbeing in a School for the Deaf.

A summary of the research is presented in Chapter 7 as well as conclusions,
recommendations and limitations.
CHAPTER 7

SUMMARY, CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS

7.1. SUMMATIVE OVERVIEW OF THE RESEARCH

Schools for the Deaf, as all other schools, have to provide enabling environments for learners. To obtain this goal Schools for the Deaf have to deal with the same challenges that normally impact on the wellbeing of people in schools (Jamal et al., 2013). Such risk factors include exposure to peer pressure, drug and alcohol use and abuse, witnessing of and being victims of violence, to name a few (Mash & Wolfe, 2010). In South Africa, in addition to these global risk factors impacting learners’ experiences of wellbeing, some learners face living with HIV/AIDS often resulting in child-headed house-holds, poverty, violence, and crime (Pharoah et al., 2004). In addition, the Deaf face challenges which impact on their wellbeing, including discrimination, isolation, and difficulties communicating with people who are unable to converse in sign language (Krige, 2010). The Deaf also often experience barriers to achieving independence and often have decisions made on their behalf, usually be a hearing population (Mertens, 2009).

In South Africa, the DoE, whilst beginning to acknowledge the needs and the rights of Deaf learners, is still a long way away from providing appropriate and equitable education opportunities for the Deaf since SASL is still not recognised as an official language (Druchen, 2010). Many schools for the Deaf in South Africa are understaffed and
significantly, teachers are not able to sign fluently which impacts learners’ abilities to understand concepts taught (Magongwa, 2010).

In the School for the Deaf selected as an instrumental case study, limited ameliorative support is provided by the school in response to the many multi-faceted challenges faced by the learners. The reality faced by the school is that support is limited; only certain learners benefit from the available interventions; weekly psycho-social intervention being offered on a voluntary basis, and memory work offered by a limited number of in-school trained staff, are insufficient to address all the Deaf learners’ needs. These learners also face challenges at home and in the wider environment.

Colquhoun (2005) suggests that schools should focus on support measures are based on current practices already available in the school. This is understood as a shift from ameliorative to transformative support. Prilleltensky (2012) refers to this as a move from languishing to flourishing in the school context (Prilleltensky, 2012).

In order to contribute to the promotion of holistic wellbeing in Schools for the Deaf, the research study was undertaken to develop guidelines for a more transformative approach to the promotion of holistic wellbeing in a School for the Deaf in the South African context.

The aim was achieved by investigating:

- How learners in a School for the Deaf experience the promotion of wellbeing
- How teachers and other staff members employed at a School for the Deaf currently experience wellbeing and how do they perceive the promotion of wellbeing
Current and anticipated focus areas collectively identified as important for facilitating the promotion of holistic wellbeing in a School for the Deaf

Ecological and the community psychology perspectives formed the conceptual framework for this study as described in Chapter 2.

A qualitative design instrumental case study design yielded rich and detailed data based on multiple experiences, aimed at achieving an in-depth understanding of the promotion of holistic wellbeing, whilst recognising the importance of the participants’ viewpoints (Denzin & Lincoln, 2013). The study was inductive and naturalistic which helped to ensure that the complexity of the phenomenon was understood, namely the development of guiding principles for the promotion of holistic wellbeing at a school for the Deaf (Lapan et al., 2012).

The data collection in the study comprised three distinct phases. In phase one, learners in a School for the Deaf described their experiences of wellbeing. Learners in the foundation phase (Grades 1 - 3, the remedial, and the special needs class) were asked to describe their experiences of wellbeing at school and to project ideas for how they envisioned wellbeing to be promoted in the future. Learners produced drawings and written statements to answer the research questions. Learners in the intermediate phase (Grades 4, 5 and 6) worked in partners or individually to produce collages and written statements, and learners in the senior phase (Grades 8, 9 and 12) produced collages and written essays.

In phase two, teachers and other staff members employed at the school were asked how they perceive the promotion of wellbeing and to describe both current and anticipated
activities and interventions to facilitate the promotion of holistic wellbeing. In phase two, the staff members who participated in the study were presented with vignettes depicting scenarios of Deaf children and adolescents which reveal challenges representative of those faced by Deaf learners in schools, at home, and in the wider community. The staff members were asked to use these vignettes as a point of departure to describe how they understood learner wellbeing to be promoted at the school in response to the many challenges. Concept maps were created by the staff to answer the research questions.

In phase two, in-depth interviews were conducted with a representative of the school management team, a Deaf SASL teacher, and a house-parent. The findings from phase one and from the teachers and teaching assistants, were used as an introduction in the interviews and allowed for a point of departure for discussion.

In phase three, an integrated understanding of the learners’ experiences, teachers’ and other staff members’ perceptions, and the participatory process which involved representatives of all the stakeholders in the School for the Deaf were explored as an instrumental case study.

In phase three the findings from phases one and two were used to develop four statements for discussion at the WCE. Representatives of the learners, staff, the school governing body, the parent support group, and organisations for the Deaf, all worked cooperatively to discuss how participants envision wellbeing promotion at the school. The statements were developed from how wellbeing was currently experienced at the school, made explicit from the findings in phases one and two. The statements which developed represented current community strengths linked to learner wellbeing.
The results of phase three which included the findings from phases one and two culminated in the development of guidelines which emerged from an integrated understanding of the learners’ experiences, teachers’ perceptions, and a participatory process which involved representatives of all the stakeholders in the School for the Deaf.

The diagram presented below indicates the guidelines developed from the cumulative findings of the three phases of the study.
Guidelines for holistic wellbeing promotion at a school for the Deaf

Diagram 7. 1. Indicating guiding principles for holistic wellbeing promotion at a school for the Deaf
7.2. CONCLUSION

Based on this study, the conclusion was drawn that the promotion of holistic wellbeing emerges in interactions between people in their contexts, as suggested by the complexity theory perspective. This perspective calls for complex adaptive systems such as school to examine the environment, based on the environmental conditions, make internal adjustments to thrive. Taking heed of this perspective, it is suggested that wellbeing promotion should therefore be facilitated from within the school context and not been seen as the work of mental health professionals; it should be a collaborative effort between those outside and inside the school.

What seemed critically important for the promotion of holistic wellbeing is that enabling spaces have to be created for all the members of the school community and not only for learners. A naive sense of wellbeing described by learners is understood to encompass more than just the wellbeing of the individual. This is made evident, by their conversations where the value of relationships between learners, teachers and other staff employed at the school was seen to underpin both individual and collective domains of wellbeing. Relational wellbeing underpins individual and collective domains of wellbeing, as indicated by McCubbin (2013) who states that the individual, family, community and society are interconnected and inseparable.

Considering collective wellbeing in the school community, the cumulative findings suggest that the participants place value on equitable treatment of all learners, raising awareness of the value the school places on achieving social justice. This was made evident by the high regard placed on inclusive practice, and valuing Deaf culture by upholding and promoting the needs and the ways of the Deaf. Tolerance and acceptance of all despite differences is seen to
underpin the ethos of care and concern which is necessary to facilitate the opportunities provided by the school to learn and develop.

Health promoting schools link health and education which allows schools to become better places (Buijs, 2009). Schools which are described as better places are schools where learners are excited to be, where learning is a pleasurable experience, where teachers are happy to work, and finally where the school environment is inclusive, with the whole school community involved and invested in the health promotion of the school. These attitudes lead to schools building health knowledge and fostering the development of cognitive, social, and behavioural skills. The aims of the health-promoting school, as indicated by Buijs includes enhancing learning outcomes, valuing of social justice and equity, providing safe and supportive environments for all, and encouraging learner participation and empowerment.

In South Africa the health promoting schools network mirrors the sentiments proposed by Buijs (2009) who states that learner wellbeing is understood to be linked to the construction of safe and supportive teaching environments, school partnerships, curriculum interventions which focus on skills development, and accessible education support services with a focus on preventative health promotion (Lazarus, 2007).

The findings of this study correlate with the findings pertaining to health promoting schools globally and in South Africa where learner wellbeing is understood to be impacted on by acknowledging and addressing learner needs in a collaborative, inclusive environment. This is made evident in the findings from the WCE which indicates focus areas incorporating individual, relational, and collective domains of wellbeing (Prilleltensky, 2005) which in this study resulted in the development of eight guiding principles as already indicated.
What the findings of the study reveal, is that in addition to identifying and addressing learner needs in a supportive environment, whilst focusing on preventative measures to facilitate wellbeing, the suggestion to further extend this framework of support. The suggestion is to extend health and wellbeing promotion to a transformative perspective. Within this transformative perspective the current status quo in the community is challenged. This challenge will to include listening to the silenced voices in the school community. Individuals affected by power differentials through discrimination on the broader social scale were afforded the opportunity to participate equitably and to experience their opinions being valued. The contributions made by the learners in the study allowed for the voices of children to be heard. Nelson and Prilleltensky (2010), state that this is a rarity in educational settings that children are consulted on processes which affect them in the school setting. Mertens (2009) raises our awareness of the need to include perspectives of those marginalised by society, including the Deaf. Thus the findings of this study provided opportunity for silenced voices to be heard, for social justice to be promoted, and for inclusive collaborative practice to facilitate social change in the school through the development of the guiding principles for the promotion of holistic wellbeing based on strengths and transformation.

7.3. LIMITATIONS OF THE STUDY

Specific limitations to this study are discussed with reference to their impact on the process as well as suggestions on how to address these limitations in future research.
The study was conducted in one location and the findings therefore pertain specifically to this setting. However, in the case of qualitative research the findings of a study can be applied to other contexts by stating the theoretical parameters of the research. This can be achieved by referring to the original theoretical framework to show how the data collection and analysis was guided by concepts and models (Cohen et al., 2007).

The researcher furthermore acknowledged that familiarity with the participants due to being previously employed at the school might have had an impact on the research process. Familiarity can blind a researcher to seeing alternative ways of being and new ways of understanding. A further potential concern was participants experiencing the halo effect and wanting to please the researcher due to being familiar with each other and working in a psycho-social support capacity in the past. To compensate for potential limitations in these regards, the findings were checked with the participants via member-checking to ensure that they were accurately understood and captured participant meanings. This was conducted after the pilot study was conducted with the remedial class in the foundation phase and with the remedial class teacher. The researcher engaged in member checking with each learner in their individual discussions with the researcher. Member checking also took place with teachers after their work sessions. The researcher in addition confirmed participant meaning through emails, telephonic instant messaging, and through conversation with each teacher to ensure that participant meaning was accurately captured and to probe further if necessary.

A limitation was experience in the data capturing of the WCE (phase three) when some participants refused to be on video, although they initially agreed when the researcher explained that the ethical guidelines upheld in the study would prevent identities of the
participants to be revealed. The researcher accepted the resistance and the event was audio-recorded.

The researcher had briefed all participants on their right to share their ideas openly in the event. Despite this explanation, some staff struggled to let learners express their ideas freely when criticisms of the school were made. After further explanation to the participants of the need to allow all participants the right to share their ideas openly without criticism, the learners experienced more freedom to express themselves.

Representation from the Department of Education was not available on the day of the planned event despite KZN DoE confirmation of attendance. This was a disadvantage to the data collection as it would have been useful to have perspectives from governmental level included in the discussions, particularly since many of the suggestions made at the event would need to be addressed at a national level, including the possibility of additional staffing for speech therapy, funding for more resources, and funding for a skills programme, technology, sport, art, and outings. The presence of DeafSA and HI HOPES counter-balanced the lack of DoE because these organisations for the Deaf lobby for the rights of the Deaf and fight for equity for the Deaf population in South Africa.

7. 4. RECOMMENDATIONS IN REFERENCE TO THE APPLICATION OF THE DEVELOPED GUIDELINES

7. 4. 1. In Practice
The findings reveal that the promotion of wellbeing is part of everyday activities and interactions between the people in the school. These activities and interactions should however be an integrated process which can facilitate the implementation of the guidelines. The researcher will arrange a feedback session to the school in a staff meeting where teachers, teaching assistants, management staff, other staff employed at the school, governing body representatives, representatives of organisations for the Deaf and representatives of the DoE will be invited. In this meeting, feedback on the process and the findings of the study will be shared with a focus on the guidelines for the promotion of holistic wellbeing in a residential school for the Deaf in South Africa. The researcher will meet with the learners in a school assembly to share the findings of the study. The school will be encouraged by the researcher to action the guidelines with the support of the DoE, organisations for the Deaf and the school community by working collaboratively with the school.

7.4.2. In Policies

Recommendations regarding policies stress that promoting the need for wellbeing should be prioritised in Deaf education. It is suggested that additional attention should paid to policy implementation processes to ensure that policies become practice. As indicated, SASL, the language of the Deaf, is not yet recognised as an official language in South Africa (Druchen, 2010). However the results of this study suggest that the acculturation of Deaf culture and in particular the use of sign language is imperative in the Deaf community and as the language of teaching and learning. In this school, the educational policy of signed bilingualism guides practice and it is suggested that all schools for the Deaf in South Africa follow this practice since SASL was identified as a pivotal component of wellbeing promotion. Its use recognises the needs and the ways of the Deaf and sustains acculturation into Deaf culture in schools.
The DoE and organisations for the Deaf such as DeafSA and HI HOPES can play an important role in wellbeing promotion in schools. To promote social justice to enhance equity within Deaf education, the DoE and organisations for the Deaf need to ensure that resources and policy promote the rights of Deaf learners. Partnerships between the school and the DBE and organisations for the Deaf are encouraged to create further opportunities for the Deaf once schooling is completed. The feedback session and the researcher making the findings of the study available to all representatives who participated in the study will allow for the possibility of the findings of the study to be practically applied in the school and for the DoE and organisations of the Deaf to take cogniscent of in the development of policies related to Deaf education in South Africa.

7.4.3. In Future Research

With reference to future research it is recommended that studies focusing on the perspectives of the Deaf are conducted where participants contribute directly and not via parents, teachers, or practitioners but rather collaboratively and inclusively with the Deaf school-going population.

The value of the school hostel in learner wellbeing promotion is noted. Difficulties faced in the relationships between senior phase learners and hostel staff, are noted. Developing an understanding of the how house-parents understand their roles in learner wellbeing promotion, is suggested. Research into the ways in which school management can further support the house-parents in this regard is called for.
The findings of this study reveal disengagement between the house-parents and other staff members in the school, as well as disengagement between senior phase house-parents and the learners in their hostel. Research into barriers to effective engagement between hostel staff and learners and hostel staff and teachers is recommended because the hostel is identified as a site for wellbeing promotion where the learners receive care and where they can communicate in SASL. Barriers to effective social interaction, communication about daily experiences, and support for homework were identified as negatively impacting on learner wellbeing promotion and thus a deeper understanding of the barriers, as well as ways in which the school can effectively support hostel staff and learners more effectively, is called for.

Research into understanding how D/deaf learners perceive their education and their learning opportunities can help us to understand resistance to D/deaf advocacy and Deaf rights in terms of access to equal educational opportunities compared to their hearing peers.

7.5. REFLECTION

What was revealed in this study is that despite the many challenges the Deaf face at home, at school, in the wider community, in personal, relational, and collective aspects of wellbeing, the day-to-day experiences at the School for the Deaf where they learn and participate inclusively in activities, provides opportunities for the development of wellbeing. Relationships in this setting appear to be connected to the experience of both individual and relational wellbeing. The findings of the study highlight the pivotal role day-to-day experiences have on learner wellbeing promotion. This finding are encouraging as
opportunities for wellbeing promotion in the school are available to all learners and often occur spontaneously in the way the school community functions.

Reflecting on the research process, the willingness of the learners to share their experiences and ideas regarding wellbeing promotion was noted. Some staff members and some organisations for the Deaf showed willingness to participate. Limited input from the DoE, some members of the school management team, the hostel parents, and the parent body indicates that there are barriers in the school context related to participation in research. The researcher acknowledges that this could be due to racial difference between the researcher and the participants, perceived difference in status between the researcher and the participants because the researcher had previously been employed in a management role in the school, differences in culture since the researcher is hearing and not Deaf, participants not seeing the value in sharing their own experiences for research purposes, time constraints faced by the staff, and participants not understanding the value of the research. To try and understand this lack of willingness to participate, participants will be given an opportunity to give anonymous feedback through a feedback form when the researcher provides feedback to the school and stakeholders involved in the setting, including the DoE, DeafSA, HI HOPES and the parent support group. These findings can be used to guide future research projects in the school and other Schools for the Deaf as to help researchers gain effective access into the Deaf community in schools for the Deaf.

The dearth of available research on transformative practice linked to wellbeing promotion in schools for the Deaf where the voices of learners are included highlights the need for more research opportunities to be created. This study attempts to address the gap in the provision of support in Schools for the Deaf in South Africa, and address the gap in the
literature; a need for similar research in other schools for the Deaf in South Africa is called for.

**A FINAL WORD**

Reflecting on the process of working with the Deaf community and negotiating the many challenges this brings including specific language requirements for communicating with Deaf participants, and understanding and upholding Deaf cultural practices, I am inspired by the cumulative findings of the study. The participants having shared openly and reflectively have contributed to the development of guidelines for the promotion of holistic wellbeing, inclusive of the school community. To have included the perspectives of representatives of the school community is an exciting result for me. Being able to include multiply-disabled learners, learners from Grade 1 to matric, the remedial class, staff, and representatives from organisations for the Deaf, leaves me feeling satisfied that a broad understanding of experiences and ideas was achieved. I am encouraged by the success of working with Deaf learners, and encouraged to think that more research inclusive of the perspectives of special needs learners could result from my research.
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ASSENT: FOUNDATION PHASE

Dear learners,

I want to learn more about what you enjoy about your school and what you would like people to do to make the school a place where you can be happy and feel well. I need to know if you would be willing to help me learn more.

We will draw pictures of what makes you feel happy at school. We will then talk in small groups about what you would like us to do to make you feel happy and to feel well at school. You can choose if you would like to join in these activities. You can stop working at any time and it is fine if you do not want to finish the activity. I will not tell other people who said what.

Theresa Meisch.

MARK YES (thumbs up) IF YOU WANT TO PARTICIPATE

MARK NO (thumbs down) IF YOU DO NOT WANT TO PARTICIPATE

WRITE YOUR NAME HERE
Appendix B – Intermediate Phase Assent

Centre for Child, Youth and Family Studies
Corner of East and College Street
Wellington
7655

Tel: 0218643593

January 2014

ASSENT: INTERMEDIATE

Dear learners,

I want to learn more about what you enjoy about your school and what you would like people to do to make the school a place where you can be happy and feel well. I need to know if you would be willing to help me learn more.

You can draw pictures and write words or sentences of what makes you feel happy and feel well at school. We will then work in small groups to make a collage about what you would like us to do to make you feel happy and to be well at school. You can choose if you would like to join in these activities. You can stop working at any time and it’s fine if you do not want to finish the activity. I will not tell other people what you said.

Theresa Meisch.

-----------------------------------------------------------------------------------------------------------------------------------

YES - TICK IF YOU WANT TO JOIN IN...........................................................................................................

NO – MAKE A ‘X’ IF YOU DO NOT WANT TO JOIN IN................................................................................

WRITE YOUR NAME HERE

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Appendix C – Senior Phase Assent

Centre for Child, Youth and Family Studies
Corner of East and College Street
Wellington
7655
Tel: 021 8643593
January 2014

ASSENT: SENIOR PHASE

Dear learners,

I want to learn more about what you enjoy about your school and what you would like people to do to make the school a place where you can be happy and feel well. I need to know if you would be willing to help me learn more.

You can draw pictures and write words or sentences of what makes you feel happy and feel well at school. We will then work in small groups to make a collage about what you would like us to do to make you feel happy and to be well at school. You can choose if you would like to join in these activities. You can stop working at any time and its fine if you do not want to finish the activity. I will not tell other people what you said.

Theresa Meisch.

.................................................................

YES - TICK IF YOU WOULD LIKE TO JOIN IN..........................................................

NO - MAKE A ‘X’ IF YOU DO NOT WANT TO JOIN IN.............................................

WRITE YOUR NAME HERE

.................................................................
Appendix D – Parent Consent

CONSENT: PARENTS

Dear Parents and Care-givers,

I request permission for your child _____________________________ (name of child) to participate in the study ‘Promotion of holistic wellbeing at a School for the Deaf in South Africa’ conducted by Theresa Meisch, student number 23288930 at NWU as part of my doctoral studies.

Your child will also be asked to give their permission to participate in the study if your consent is given. The decision to participate is voluntary. Your child’s name will not be used in the study and their confidentiality will be protected. They are allowed to stop participating at any time.

There is no financial reward for participation but your child might benefit from participation as a result of sharing their experiences of what makes them feel happy at school and helps them to be well, as well as sharing their ideas on what they feel they need to feel happy and to be well. The responses from the children will be used to conceptualise a strategy for the promotion of holistic wellbeing in the school.

Please feel free to contact me or my supervisor if you have any questions or concerns.

Theresa Meisch

Ansie Kitching
PLEASE COMPLETE THE FORM BELOW AND RETURN TO THE SCHOOL

I ………………………………………………………………..(name of parent/care-giver) giver permission for my child ……………………………………………………..(name of child) to participate in the study.

Signature
………………………………………………………………..Date………………………………………………
Appendix E – Learner Consent

Centre for Child, Youth and Family Studies
Corner of East and College Street
Wellington
7655

Tel: 0218643593

January 2014

CONSENT: LEARNERS

I, [Name], Principal at [School Name] School for the Deaf, give consent on behalf of the parents and care-givers of the children at [School Name] school for the Deaf to participate in the study ‘Promotion of holistic wellbeing at a School for the Deaf in South Africa’ conducted by Theresa Meisch, student number 23288930 at NWU as part of her doctoral studies.

I understand that participation is voluntary and that the children have the right to withdraw from the study at any point. I understand that the children’s confidentiality will be maintained by anonymity. I understand that there is no financial reward for participation but that the children may benefit from participation when sharing their experiences of wellbeing and their ideas on the promotion of wellbeing in the school for the Deaf. I acknowledge that support will be provided to children who may experience difficulties as a result of participation by talking to and counselling the child.

Principal

Signature .................................................................................................................. Date .................................................................
Dear management, teachers, house-parents, therapists and teaching assistants,

My name is Theresa Meisch. I am a PhD student at the North-West University. I will conduct research at your school. The title of my study is ‘The promotion of holistic wellbeing in a school for the Deaf in South Africa’.

I will ask you to participate in my study. Your participation will involve the discussion of current and future practices to promote wellbeing in the school. You will be asked to respond to scenarios and describe your experience of wellbeing in the school for the Deaf.

Participation is voluntarily, meaning that you have the right to withdraw from the study at any point. Confidentiality will be protected by maintaining anonymity. There will be no financial reward for your participation in this study although you might benefit from participation due to sharing your thoughts and experiences with the researcher regarding the promotion of holistic wellbeing at a School for the Deaf in South Africa.

Please feel free to contact me or my supervisor if you have any questions.

Theresa Meisch 0728028199 or theresa@lenta.net

Ansie Kitching

………………………………………………………………………………………………………………

IF YOU AGREE TO PARTICIPATE, PLEASE COMPLETE THE FORM BELOW AND RETURN IT TO THE SCHOOL

I …………………………………………………………………………………………………………..(name) give my consent (permission) to participate in the study ‘The promotion of holistic wellbeing in a school for the Deaf in South Africa’.

Signature………………………………………………………………………… Date……………………
Appendix G – Invitation to WCE

To whom it may concern,

My name is Theresa Meisch. I am a PhD student at the North-West University. I will conduct research at a school for the Deaf as part of my doctoral studies. The title of my study is ‘The promotion of holistic wellbeing in a school for the Deaf in South Africa’.

I will ask you to participate in a World Café Event where, as a team, we will collaboratively discuss ways in which to initiate a process for the promotion of holistic wellbeing at a school for the Deaf in South Africa. Themes identified from Phase 1 and 2, where participants described their experiences of wellbeing at the school, as well as their ideas for the promotion of wellbeing will be used as starting points for discussion in the World Café Event.

The event will take place on Thursday 16th October, 2014 at Fulton School for the Deaf from 8:30am to 10:30am. Please ensure that you are seated and ready to work by 8:30am. Refreshments will be provided during the event.

Please can I ask you to confirm whether you will be able to participate in the study via email or via telephone. The consent form will be available for signing on the day of the event or it can be emailed to me prior to participation.

Please feel free to contact my supervisor or me if you have any questions.

theresa@lenta.net or 0728028199

Theresa Meisch
Dr Ansie Kitching.
IF YOU AGREE TO PARTICIPATE, PLEASE COMPLETE THE FORM BELOW

I ……………………………………………………………………………………………………………………………………………………………...(name) give my consent (permission) to participate in the study ‘The promotion of holistic wellbeing in a school for the Deaf in South Africa’.

Signature…………………………………………………………………………………………………………………………………………………Date……………………
CONSENT: CHILDREN

I give consent on behalf of the parents and care-givers of the children at [redacted] to participate in the study “Promotion of holistic well-being at a School for the Deaf in South Africa” conducted by Theresa Meisch, student number 23288930 at NWU as part of her doctoral studies.

I understand that participation is voluntary and that the children have the right to withdraw from the study at any point. I understand that the children’s confidentiality will be maintained by anonymity. I understand that there is no financial reward for participation but that the children may benefit from participation when sharing their experiences of well-being and their ideas on the promotion of well-being in the school for the Deaf. I acknowledge that support will be provided to children who may experience difficulties as a result of participation by talking to and counseling the child.

Signature: [redacted] Date: 6.2.2014

Department of Education KZN

06 FEB 2014
Dear Mrs. Campbell,

I request permission to conduct my empirical research for my Doctoral studies at the University for the Deaf. I am currently enrolled for a PhD in Psychology at the North-West University (Centre for Child Youth and Family studies).

My student number at NWU is 23288930. My research supervisor is Dr. A. Küching Email address: Aniss.Kuching@nwu.ac.za

The proposed title of my thesis is: "Promotion of holistic wellbeing in a School for the Deaf in South Africa". Permission was granted by the NWU to conduct the research. The ethical clearance no is: NWU-00069-12-A1

Permission to conduct the study has been given by Mr. Shezi from the Department of Education in KZN.

I require permission to conduct a three phase study using participants from Fulton School, including children, teaching staff, support staff and therapists at the School for the Deaf. I will also involve representatives from South African Organisations for the Deaf and representatives from the Department of Education involved with the school, in the study.

The sessions will take place on the school premises, however, the interviews and interactive work-sessions will not disrupt the children's teaching time or the duties of any staff members.

The study will benefit the deaf children with regards to the promotion of wellbeing of the children at our school.

Many thanks,
Theresa Melsch

[Signature]

O.W. Campbell

Principal at Fulton School for the Deaf grant permission for Ther. 23288930 at NWU to conduct her research study at Fulton School for the Deaf.

Date: 29 JUL 2013

Department of Education KZN
Theresa Meish, student number: 23288930, North West University

After consultation with [redacted] for the Deaf, I have pleasure to inform you that you have been granted permission to conduct a study at the school [redacted] for the Deaf towards your PhD degree.

May I take this opportunity the best in your studies and hope that the knowledge and experience you acquire with also benefit the whole school community.

Good luck.
Appendix I - Inquiry into learners’ experiences

Phase 1
How do learners in a School for the Deaf experience the promotion of wellbeing? What current and anticipated activities and interventions are collectively identified as facilitating the promotion of holistic wellbeing in a School for the Deaf?

Learners in the Foundation Phase

Activity 1:
Please can you draw pictures to show me:
What makes you feel happy at school?
What helps you to do well at school?
What makes this a nice place to be at?
What makes you feel part of the school?

Activity 2:
Please can you work in groups to make a collage showing me what you think needs to happen at school to make things even better? What would make people feel happy and do well and make school a nice place to be?

Learners in Intermediate Phase and Senior Phase

Activity 1:
Please can you write or draw your experience of wellbeing (feeling well, feeling happy) at the school. You can use the following questions to guide your responses.

Individual wellbeing
What makes you feel well and feel happy at school? What makes this a nice place for you to be?

Relational wellbeing

Can you tell me what your best experience was in relationships with your friends, peers and teachers at school?

Please describe what happened and who was involved?

Why was it so important?

Collective wellbeing

What makes this a nice place to be in?

What facilities do you have that makes this a place that you want to be in?

What makes you feel well here?

How does the school help you to learn well?

How does the school help you to share your ideas and thoughts about what makes you feel well and happy?

Activity 2:

Please can you work in groups to make a collage showing me what you think needs to happen at school to make people feel well, be happy and for school to be a nice place to be?

If the school tries to make sure everyone at school is well and happy, what will happen?

If everyone at school is doing well, how would you describe the school?

What do you think would need to happen for everyone to do well and to feel well, individually, in their relationships and in the school community?
Appendix J - Phase 1 data

Participant 18
(Special Needs Class Foundation Phase) Remedial Class (Foundation)

Participant 20

Participant 12
Special Needs Class (Foundation) Remedial Class (Foundation)
Appendix K – Inquiry into teachers and staff members’ perceptions

**Phase 2 - Inquiry into teachers and staff members’ perceptions of promoting wellbeing in a School for the Deaf**

How do teachers and other staff members employed at a School for the Deaf perceive the promotion of wellbeing?

What current and anticipated activities and interventions are collectively identified as facilitating the promotion of holistic wellbeing in a School for the Deaf?

**House parents, teachers, teaching assistants, therapists, managers**

**Introduction:**

Wellbeing means that people and communities have their needs met, in their own lives, in their relationships and in their communities. Wellbeing of one person is linked to the wellbeing of his or her relationships and of his or her community (Prilleltensky, 2005). If we think about the wellbeing of the children at the school for the Deaf, many children experience problems that make it difficult for them to feel and be well. Here are some examples for the problems some of the children in the school might experience.
Appendix K – Vignettes

Vignette 1/story 1:

A young girl is enrolled in a South Africa school for the Deaf in Kwa-Zulu Natal. She is 11 years old. She is currently been placed in the Grade 1 class. She was enrolled in the school for the deaf after an NGO working in her community found that she was not yet enrolled in a school even although she was 10 years old. She lives with her grandmother as both parents are deceased. Her grandmother suspected that her granddaughter presented some type of developmental delay but she was not sure of the child’s exact condition. The grandmother looks after 4 other children of relatives. Grandmother is elderly and struggles financially. She has had limited education opportunities.

The young deaf child is now in a weekly boarding facility at the school for the Deaf. She is beginning to learn SASL but due to her lack of communication with care-givers and those in her community, her development is delayed; cognitively, socially and emotionally.

Vignette 2/story 2:

A seventeen year old boy in the high school has been struggling with his school-work in the last few terms. He has been demotivated and unresponsive in class. His homework has regularly been incomplete and is of a lower standard than he used to produce. He has been disrespectful to his teachers, house-parents and peers. He has also had a significant number of days absent in the last few terms. These current behaviours are different to the behavior that the young boy displayed in previous years at school.

Vignette 3/story 3:
A young girl in the Foundation Phase has not made significant progress academically, socially or emotionally due to a dysfunctional home environment where abuse and neglect are common. The child displays inappropriate behaviour at school. She regularly experiences illness and periods of absence from school.
Appendix L – Phase 2 Activities

Activity 1:
Using the vignettes/stories as a starting point, think of the realities faced by many children in the school for the Deaf. Think about how the school tries to help children feel well and be well.

Make a collage, drawing or written statements describing your experience of the promotion of holistic (individual, relational and collective) wellbeing, describing the ways in which children are supported and their various needs attended to at the school. There is no right or wrong way to answer, so be creative and have fun!

You can use the following questions to guide your responses if you want.

How do you understand wellbeing to be promoted at the school? (how does the school try to help the children feel happy and be well?)

What is your understanding of the support measures to promote wellbeing at the school? (what does the school do to help the children feel happy and be well?)

How do you think the children feel connected to each other?

What makes this a nice place to be in?

What makes the children feel part of the school?

Activity 2: (just a thinking exercise)

When you have finished activity 1, think about how wellbeing can be promoted in the future at the school for the Deaf. What activities do you think would help and improve the
promotion of holistic wellbeing at the school? What support and resources do you think are needed to promote holistic wellbeing?

**Activity 3:**

Create a **visual map** (drawings and written statements) **or collage, or a drawing or sentences or words** that would describe the way forward regarding the promotion of **holistic wellbeing in the school for the Deaf**. Again, be creative and answer as you like.

You can use the following questions to guide your responses.

What do you think would enhance the promotion of holistic wellbeing at the school?

What support and resources would enhance the promotion holistic wellbeing
Appendix M - Phase 2 Data

**Phase 2 data**

Participant 3
Management

Participant 5
Teacher

Participant 7
Teacher

Participant 8
Teacher
Appendix N - Phase 2 Interviews

**In-Depth Interviews**

Principal, Deaf teacher, house-parent

**Inquiry into teachers and staff members’ perceptions of promoting wellbeing in a School for the Deaf**

*How do teachers and other staff members employed at a School for the Deaf perceive the promotion of wellbeing?*

*What current and anticipated activities and interventions are collectively identified as facilitating the promotion of holistic wellbeing in a School for the Deaf?*

What do you think makes the children feel happy and do well at school?

What promotes their wellbeing currently?

What ideas do you have for the future promotion of wellbeing at school?

What makes you experience a feeling of wellbeing?

**Interview – Participant 58**

22/07/2014

**What do you think makes the children feel happy and do well at school? What promotes their wellbeing currently?**

Wellbeing promoted through stability, belonging and acceptance.
Acceptance for whom and what they are. These are principles the school should work towards. Many children do not experience that feeling of belonging at home. At school communication takes place through SASL therefore the children feel a sense of belonging as they are able to express their wants and needs freely.

The children know that there is an open-door and sympathetic ear for them at school. The children know that they can turn to the staff (not all but most). The children have an opportunity to open their hearts and share their feelings. This is not always possible at home as many families are not able to sign so no deep issues, thoughts and feelings are discussed. At school, there are avenues to promote wellbeing. The psycho-social support offered to pupils at school through play-therapy and memory work. Since the two staff members trained to do paly therapy are no longer at school, the loss is felt. The one teacher has agreed to do play-therapy on a weekly basis on a voluntary basis. The need for constant support is made obvious.

Memory work is good and beneficial for the children. The principal recognises that the school needs to encourage the trained staff members to continue their work. The children do not all experience stability at home; they are not all cherished and loved.

Parents need support and guidance in coming to terms with their child’s deafness because if the parents do not feel confident about the child’s deafness the child will be able to pick this up. The parent needs to be a role-model for the child.

As a school, we need to provide support and understanding for the children’s feelings and worries. We need to provide opportunities to empower them for them to be able to accept their difference, to understand the implication of deafness but to teach them how to work with
this challenge. We need to show them that they can succeed. Deafness does not mean that they can’t have full lives and future prospects. As a school we need to help them prepare for this.

Teachers need to try and bring out the best in each child, to make their strengths known and use this as ways to support their weaknesses. This will help them to feel confident when they grow up.

In each phase, the support required is different and teachers know what the children in the different phases need. In the High School, we need to look carefully to ensure that we are providing sufficient support to the children:

Subject choice – this is so important in terms of career prospects. There is stress attached to earning a living and we need to help them to make the right choices.

The move from school to the real-world is a huge transition for them and must be quite overwhelming as school is very small and sheltered and everyone signs. We need to make sure that they feel ready to face the real world. There are pupils who do not have support or family so the school owes it to these pupils to help them prepare for the real-world. We need to foster skills that will help the pupils develop independence, real-life skills such as budgeting.

The school must try to empower the children.

Not all the families are able to offer support to their children, such as food and clothes when they leave school so school must help the children prepare for this reality even although this is not nice. At school, it can feel like a fools-paradise as it is very easy and comfortable here, nice food, TV, beds, war etc. Not necessarily going to be like that in the real-world. The
children need to be made aware of this. The staff needs to be aware of the background of each child.

The children experience feelings of wellbeing though the safety and security at school. They feel a sense of belonging. They are recognised as individuals. Their achievement is recognised. These achievements can be big or small. Each child is praised and recognised for what they achieve. This includes the special needs classes.

The sporting events, especially the triathlon, allows for lots of different children to achieve and to participate at their own pace. The special needs children join in and stay in the afternoon to practice, creating opportunities for them to feel that they are part of the school community.

Catching the school bus allows for feelings of independence to develop, especially for the special needs learners.

Appropriate parental involvement allows for the children to feel loved and accepted. Parents who embrace having a deaf child and learn to sign makes the child feel confident and helps them to achieve.

Having the special needs classes helps the children to find a place where they belong and are accepted for their individuality. Their needs are catered for appropriately. The school is sensitive about labeling children as this often leads to children being defined by this.
Many parents do not attend sports days; parent meetings etc. and their children are aware of this and feel the loss.

Some of the Deaf children at school have said that their families talk about them not to them. This is because of the communication challenges faced. It is respectful to learn to sign so that families can communicate with their child.

**What ideas do you have for the future promotion of wellbeing at school?**

Social worker, especially for the older children to assist with entering the real-world and to provide support to families – counseling, careers, support services etc. and for assistance for orphans at school.

Play-therapy in school, as the staff understand the ways of the Deaf and can sign.

Psychologist but needs to be employed full-time so that they are a part of the school and know and care for the children.

Passion from all staff members, this is not just a normal teaching environment, we only want staff who will go the extra mile and do more than what would normally be expected.

Work experience – we provide as much as we can at school but it is beyond our scope of practice as a school.

**What makes you experience a feeling of wellbeing:**
Being with the children helps me to experience a feeling of wellbeing. I miss them when I am not with them. I experience wellbeing when I get a sense that I am making a difference in their lives, that I am assisting in some way.

The dedication of the staff makes me experience a sense of wellbeing, this is not a one man band. We don’t feel sorry for the children because they are deaf, we want them to be empowered. They have so many odds against them so we can contribute to them feeling loved, supported, and grow their self-confidence. I want to encourage the staff to have the same passion or desire to work with the children.

Overall, I feel that the staff is motivated. Those who are not need to be encouraged to be motivated. I have a high expectations, I want the staff to go the extra mile. There is no place for mediocre service delivery here as we have the best interests of the children at heart. It is not about the individuals here that may have issues on the staff but it is about the children and what is best for them.

**Deaf teacher**

Interview 8 July 2014

**Perceptions of how school promotes wellbeing of the learners**

Teachers being able to sign fluently promotes wellbeing of learners. The children then understand better. Having SASL combined with English lessons with both teaches team-
teaching promotes increased understanding of learners and helps the teachers to improve their fluency.

Teachers love the children and provide them with support. Teachers who know and accept the children’s backgrounds help the children feel well. This is not so for every teacher as some are not understanding and some are not fully aware of background of each child.

Technology supports the children as projectors and interactive white boards are good resources to use with the Deaf as they are visual.

The school offers free classes to parents to learn SASL. Those that attend and are then able to communicate with their child promote the child’s experience of wellbeing as they feel included, recognised and have a means by which to make themselves understood to their parents.

As the school community uses SASL to communicate with the Deaf, the children often don’t want to go home because they have people who can understand them at school.

**Ideas for the promotion of wellbeing**

Therapy encouraged her as a child – speech therapy. The school could try and make more effective provision for access to therapy.

The school needs to try to inspire the children to feel passionate about their future – role-models in the wider community – Deaf who are achieving in their careers. Visits to these
Deaf adults working in the wider community or posters about them at school. Not just Deaf teachers at school, need to make known the wide variety of jobs they can do.

More subjects – wider choice of career or study options. Skills such as hair-dressing, wood-work etc. English language proficiency – reduce access to engaging effectively in community/workplace. More interaction with other deaf schools – more people to inspire them. Greater number of learners at school, more opportunity to get leaders who the children can look up to.

SASL for parents. Relationships with the parents and school need to be fostered. The lack of parental involvement reduces the experience of wellbeing of the children.

Staff need to bridge the gap between the hearing and the Deaf as well as racial and gender divides. If the staff are not being good role-models of how the hearing and the Deaf can interact the school is sending out a negative message to the children. We need to lead by example.

Understanding of the child’s background is very important so that teachers can support the child effectively.

Need strong management team who sign fluently, promote Deaf culture, bridge the gap between hearing and Deaf, culture and gender.

Maybe combined Matric dances to allow for access to other Deaf children/schools/teachers. Bridge gap between teachers and house-parents.
Possibly black or Indian SASL teacher for parent classes as a way to encourage parents.

Parental attitude – accepting of Deaf child – language, culture. This will help the child to feel confident to be who they are and to try to achieve because they are valued by their parents.

**What makes you feel well/happy at school?**

I feel better well prepare and discuss with another teachers, share idea how help to teach children. I feel good that some teachers help me a lots how planning and prepare before. I feel more confident to do and right follow all the plan and understand clear. Interesting for me that I learnt lots from other experienced teachers. I am blessed that they had been great patient and help me to guide all plan and prepare etc. I realised that I should have qualified teacher long time ago... Wait time right I will do... Scary me that lots of work and language barriers for me. I wish that mom force me to read or extra time to teach me language better then today I will be okay. I will be great achievement as others. Pity I am bit struggle with language barriers - READING - most important. I wish to swap your brain to my brain. My language will be great and beautiful. So pity but I am feel great. Ha. I am happy where I am now.
Interview House-parent

24/07/2014

11am – 12:00pm

Perceptions of how school promotes wellbeing of the learners

Having school rules helps the children experience wellbeing as things run smoothly but the house rules need to be decided upon jointly, they cannot just be imposed on the children. If they are decided upon through collaboration and with understanding of why the rules need to be made and followed, they will be more meaningful to the children. It is very important for the children to be involved.

The hostel parent is not a guard; their word does not need to be final. The house-parent needs to be flexible. If the children want to change something for the good, the house-parent needs to listen.

For the older children, the school needs to prepare them for leaving school. If the school is too strict with them the children will rebel when they leave. The children spend 5 days out of 7 at school. They need to feel at home in the hostel as this is where they spend most of their time. If they don’t feel at home, there will be conflict.

In the hostel, I tell the boys to behave like they would at home, exactly the same. I will correct when necessary, like a father. From 3pm, this is their home. The children spend most of their time in the hostel, if they are not happy there, that is a problem.
The children don’t want to go home on weekends because they can’t communicate with anyone as their families cannot sign. They should be excited to be at school and excited to go home and see their families but they are not. This is a problem.

**Ideas for the promotion of wellbeing:**

The wider community is different to school and the hostel. Our children are restricted in opportunities to engage with the wider community. We could try and prepare them more efficiently by teaching them about sex and drugs and the real-world. As a house-parent, I have to explain difficult things to the children if they see something on TV about sex or drugs. I am not always prepared. It would be a good idea to have people from organisations etc. coming to talk to the school to teach them about safely and how to know what to do in situations. Teachers could also address these issues in class more directly. As a school, we need to discuss how we can meet this need and act on it.

The Deaf have stories to tell and they don’t always have a platform to do this. The children could run a newspaper, run by the children, for the children. They can share their stories, report on things they have seen and heard on TV etc. They can teach others and share their experiences. They can decide who will write, edit, put together etc. This can be done every week if they like.

Sport plays a role in wellbeing of the Deaf. It is the opportunity of playing in a team, the connection to others not just the specific sport. The children have allocated times for activities, such as class work, homework, social time, sport time. They must use the time wisely.
The experience of wellbeing through sport is influenced by the person who is running the activity. If the heart of the coach is not there, it does not matter what the sport is, the children can sense the lack of interest and they too will not be motivated.

If a child is trying, even if they are not doing well at the sport, you need to cheer them and celebrate them. This will encourage them to come back again tomorrow and to try again. They may not be getting 100% but they will feel that they are achieving 100%!

There needs to be a connection between the coach and the children and between the children themselves.

Some staff has the ability to connect and give 100% effort but some need to be encouraged. Some have an innate desire to give freely of their time and energy.

Some staff let their pride get in the way of accepting support and guidance from other staff. They feel that they ‘own’ a sport and feel threatened when others try to give advice etc. They feel possessive about who is the boss. This shouldn’t happen but it does. We should all want to see the fruit of our efforts; the children succeeding. It is not about the staff, it is about the children.

In special schools, I have often seen hearing people come to help or work in schools for the Deaf. Many hearing people achieve well as a result of being part of these special schools, they progress far and their efforts are recognised and celebrated but often the Deaf children that they are working with do not benefit as much as the hearing person. We need to ask why this is and what we are doing about it? This needs to change.
We also have to ask if we are really promoting the Deaf properly. As hearing people, are we holding the Deaf back by not offering them opportunities to achieve because we thing that the Deaf cannot do some things, for example, playing music? What would happen if we gave the Deaf instruments and left them to make music alone and we recorded it. I wonder what it would sound like? Maybe it would be good? We don’t; give them the chance because we don’t think they can do it. What other things are we holding them back from?

We need to think about the poverty-stricken families who cannot afford to travel to school for the free SASL classes on Saturday mornings. Many families use Saturday mornings for cleaning and shopping. Taking that much time to travel to school and back and for the classes is a bit too difficult for many families. We need to look at the areas where the families live and set up classes in that area, maybe 4 sites. Schools in the townships would most likely be happy to lend us a classroom. It will be in the day so we won’t even need to use electricity. Families come from Pinetown, PMB, KwaMashu, we need to look into those areas.

The children seem to have no oomph. I want to know how to inspire them. I think we spoil them and baby them too much at school. They think that a hearing person will always just fix my problems for me. We need to teach them to be more independent and to look after themselves in the real world. We need to foster independence. We don’t do enough of that at school.
Teachers need to be bold in the classroom, to get the respect of the children but treat them and teach them the same as they would hearing children. The children need to express what they need to say.

In the hostel, we need to be parents not teachers. The hostel is the children’s home. The rules often end up being the same in class and in the hostel. We need to think clearly about our rules and expectations to make sure hostel is a home where the children have the space to be themselves.

**What makes you feel happy and do well at school?**

The children, it’s about the kids. I love kids. I had experience working with the Deaf so that is how I ended up working here but the school setting is not the important thing, it is the opportunity of working with children who need my help and with who I can make a difference. I am here for them. I like to start something and see it through; I don’t like to do half a job. If there is a problem along the way, you have to look as to how you can fix it.
Appendix O – Phase 3 Statements

Phase 3 - Initiating a conversation to identify current and anticipated activities and interventions to promote holistic wellbeing

How can the learners’ experiences and the teachers’ perceptions inform our understanding of the promotion of holistic wellbeing in School for the Deaf used as an instrumental case study?”

Statements for discussion in group-work in the WCE

1 It seems important to provide opportunities for the learners to learn and develop.
How we can build on opportunities we already have at school?
Share your ideas for new ways of making opportunities for learners to learn and develop.

2 It seems important to provide opportunities for people to connect; learners to learners; learners to teachers; teachers to teachers; parents to teachers and even parents to parents.
Please discuss ways to make this possible at school, not once, but always.

3 It seems important to provide care and support for learners on an on-going basis. How can we keep up and expand the ways in which we care for and support the learners in this school?

4 Schools should be places in which people can do well and feel well all of the time.
What do you do to help this happen at school?
What do you think needs to happen in this school on an ongoing basis to make sure that holistic wellbeing is achieved?
- for **individuals** (personal control, self-esteem, choice, competence, independence, political rights and a positive identity),

- in **relationships** (supportive relationships and joining in in social networks)

- and **collectively** (access to resources that contribute or add to wellbeing)?
World Café Event

16 OCTOBER 2014

Introduction

• Good morning and welcome to you all
• Thank you for being here and for your willingness to participate in the event
• I hope that today will be an enjoyable event and that it will be beneficial to the school
• Please help yourself to eats and drinks
• Before we begin to work, I would like to run through the ethical guidelines that have been followed in this study
Ethical guidelines

- Permission
- Confidentiality
- Avoidance of harm
- **Informed consent (sign consent form please)**
- **Right to withdraw**

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**Informed consent:** this means you agree to participate and that you understand what participating means. In this context, in groups, you will discuss experiences of well-being at school and share your ideas on what we can do to promote well-being at school in the future. Please can I ask you to sign the consent forms if today is your first time to participate in this study. This is very important so please don’t forget to do so.

**Right to withdraw:** this means that your joining in the discussions today is voluntary and that you have the right to stop working at any point.
What is a world café event?

PEOPLE HAVE CONVERSATIONS ABOUT THINGS THAT ARE IMPORTANT TO THEM, IN A RELAXED SETTING.

THERE ARE NO WRONG RESPONSES!!!

World Café
World café guidelines

The literature

- Barriers to well-being experienced by learners
- Barriers to well-being experienced by the Deaf
- Deaf culture
- Promotion of well-being in schools for the Deaf – what can we do?
The literature

To be able to develop a strategy to promote well-being we need to understand some of the challenges that children face.

Globally children are exposed to risk: lack of effective parenting, peer pressure, drug and alcohol use and abuse, underage sexual activity, to name a few. This impacts their ability to focus on their opportunities for teaching and learning.

In South Africa, children are often exposed to violence, crime, illness, poverty, which can result in emotional and behavioural disturbance, all of which impact children’s ability to focus on teaching and learning.

In addition, Deaf children face challenges with barriers to communication, lack of opportunity for work and study as a result of communication barriers and barriers to interaction with the wider community, as most people cannot sign.

Deaf culture has been identified as a way to promote well-being because by belonging to the Deaf culture, Deaf people are not seen as defective hearing people but rather as a group of people joined by a shared Deaf identity and a language, both of which they are proud of.

Recognising the Deaf culture and the language needs of the Deaf in the school environment are seen as ways to promote well-being, globally and in SA.

Phases 1, 2 and 3

- In phase 1 and 2, I explored current experiences of well-being at school

- as well as ideas for future well-being

- in phase 3, we will put ideas into place, based on the findings so far, to initiate or start a process for the promotion of holistic well-being at school
Learner themes

- Theme 1: Opportunities to learn and develop
- Theme 2: Connecting with other people
- Theme 3: Being cared for and supported

Adult themes

- Opportunities
- Being cared for and supported
Group work

HOW WE CAN INITIATE A PROCESS TO PROMOTE WELL-BEING?

Group work

We will discuss 4 statements
Each statement will be discussed for 15 minutes.
A scribe can jot ideas down and feedback in the discussion

*I have asked some people to scribe already but please try and *share* the responsibility between *4 people* in the group*
Group work

What to do

Focus on what matters.
Share your thoughts.
Speak your heart and mind.
Look and listen to understand.
Link and connect ideas.
Look and listen together for insights and deeper questions.
Have fun!
Feedback
Appendix Q – Phase 3 Data

Research results Phase 3

The following vision emerged from the engagements:

Theme 1: opportunities to learn and develop

Technology

Use computer lab for learners to use SASL Caps curriculum -asynchronous – online learning re as learners expressed an interest in technology
Set up more media labs e.g. Tessa’s room – filming for visual assessment, revision etc.
More exposure for IT technology for teachers and learners
Hostel staff not equipped to support learners in the computer room. Training to be made available to up-skill hostel staff
Teachers need training/motivation to use resources in school that are currently available – improve attitude of staff through motivation and training
Increase subject offered
Think outside the box to develop opportunities for increased subject choice at school
Create an opportunity to implement science in school
Opportunities must be equal to hearing child opportunities

Skills program

Variety of skills developed at school but room for development which will allow for more opportunity to do other things when leave school
Opportunities to build skills that create independence/work opportunity: photography, fashion
Design resource center, more central so that ll classes can easily access the resource center
**Life experiences**

Careers - need more exposure for learners to experience more career opportunities and Deaf adults employed or successful entrepreneurial business.

Outings to foster awareness of the wider community.

Learner attitude towards opportunities important – gain maximum benefit from outing if positive attitude, desire to learn and develop.

Barriers: strong personalities and agendas.

**Extra mural activities**

Community links to share their skills such as sport, hobbies, art and craft.

Start developing skills from young.

Skills development, such as a craft or hobby would build confidence.

**Speech therapy**

30 minutes a week per child not enough.

‘Live talk’ – vocal discussions need to be extended to foundation and intermediate phase.

Conversation between hearing and Deaf need to be encouraged – access to hearing world increased.

Basic communication skills/oral skills for the Deaf.

Sharing speech therapy time, even as class.

Need access to speech therapy for all.

More speech therapists required to give children individual speech sessions.
Communication

Blackboards for communication are positive (chalk a problem – always missing)

Communication from teachers helps develop good communication skills

Sign language needs to improve

Parental support

Need to involve parents to support teacher’s ideas

Need more parental involvement in creating opportunities for outings

Attitude of respect

Teachers and children

Acceptance of each other – continue to promote this attitude

Keep working on relationships - especially between staff

Accept mistakes, shouting doesn’t help

‘’Do it yourself’ is scary. Deaf children need support

Punish too quickly

Respect for everyone

Sports

Use facilities we already have

More options for sports are suggested. Suggestion to visit other schools for the deaf to get ideas of different sports suited to the Deaf

Squash competition between schools, inter-school events (hearing too)

Deaf clubs – access to communication with other Deaf learners
Hostel

House parents often wrongly accuse
Hostel prefect needs to allowed more responsibility
More social time with Deaf and H/h
Fair punishment for all
No favouritism
House-parents not socializing with kids
Encouragement from teachers, support from teachers
Learners are encouraged to complete their homework, taking responsibility for their own work but there is a request from learners for support for homework, including extra time to work in the day as they are not allowed to stay up at night after the hostel parents have gone to bed. A suggestion to stop sports to do extra homework between 2pm and 3pm, with teacher support.
Early childhood development opportunities for babies/community development
Need staff – deaf and hearing but all must sign
Early parent involvement
Good time for parents to learn to sign – when children are babies
Improvements in technology slowly improving (digital hearing aids etc)

Theme 2 – opportunities for connecting with others

Connecting to parents
Sign language classes need to be more accessible – cost, locality
Parent commitment seems low
Need more resources for parents i.e. HI HOPES video
**Parent support group**

Including support for babies

Open to all parents not just one school

Explore opportunities for greater exposure

Good space to vent

How to include parents from Black areas?

Already looking at alternative communicating ways (sms, WhatsApp, email) to address the challenge of reaching some parents who live far away and cannot readily access parent support meetings at school Facebook group for parents to contribute events, info, ideas and support

Open to all parents, not only deaf

Make more resources for parents, e.g. videos

Parents need to want to communicate

Children to encourage parents

Outside body like DeafSA to take an opportunity to set up videos etc. as it’s important to focus on core job at Fulton

**Teenage support groups**

Previously held once a month

Opportunity for teenagers to share

Logistic issues with afternoons; staff duty and learner homework

Try start again

Need young, Deaf person to co-ordinate/manage group

Past pupils shared their dreams and aspirations
Connecting with other schools and teachers

**Technology**

Skype, connect with other countries

Did connect via blog before (worked well)

During school time technology should be available

Careful not to put pressure on learners for technology equipment

**Sports**

Competitions in school and with other schools, networking

Create opportunities to meet deaf thorough sporting venture

Socialisation will happen

**Connecting to teachers**

Social function not well supported

Activities planned but need each individual teacher to decide if they in or not

Have to respect personal time

Teachers to teacher – needs lots of motivation to connect together

People need to decide if they want to be involved or not – personal choice

Meeting teachers from high schools for moderation very positive – learn a lot

Need more teacher interactions with teachers from other schools for intermediate phase especially

Teachers meet other teachers of the Deaf to share ideas and experiences and resources
Connecting school to organisations

School cannot take responsibility for videos etc. - connect to organisations such as DeafSA

Poverty minimizes learner opportunities to utilise technology at home but there is no pressure from school to use technology at home

Learner connections

Connection to Deaf peers valued

Learners from different backgrounds socialize here at school

School provides the opportunity for these learners to connect

Good to have exposure to know other cities, share and connect

Pupils to connect with learners from other parts of the world via skype

Interesting for learners to be exposed to other learners’ cultures

Ways to connect

Brainstorming on use of limited opportunities

Exposure of deaf to every opportunity

Barriers

Children can’t visit Deaf friends because of transport /costs

Hearing people forget to include Deaf people

Limits of technology - don’t always have emails, webcams, don’t always have computers

Theme 3 care and support for learners

Support for learners

Look for ways to encourage self-confidence in learners
Teacher support for academics

Learners and drivers’ licenses support
Empower learners to stand up for their rights and to be confident in their rightful environment

Learner to learner support
Learners go to psychologist for support (1 clinical psychologist who signs in the area but financially prohibitive for majority of learners)

Support for parents
Important to support parents so they can support their child once they leave school
Care and support of entire family unit – link to support group

Communication
Need to encourage teachers’ to develop their signing skills to match the learners’ needs
Family unit relies on SASL to have adult conversation

Support in the hostel
Little ones want to interact more with the older pupils
Smaller children want/need support and encouragement from high school
Sometimes senior pupils assist intermediate phase with homework
Specific hostel homework program to be developed to offer support for learners
More opportunity to talk about what is happening
More communication needed with parents and children
Sponsorship, fairness in sharing in the hostel
**Vocational work**

Opportunities at school but the school gets left with the responsibility of coordinating the program

Empower parents to take over for child to take the initiative for further studies

Creative ideas needed for funding

**Theme 4 – school are places where people do well and feel well**

**Staff**

Staff room – hearing and deaf sit separately

Share own positive attitudes with each other

**Deaf role models**

Continuous support between peers and ex-learners and current learners as this fosters greater independence

Volunteer deaf ex pupils

**Learner peer support**

Friends encourage peers to join in

Positive reinforcements, positive relationships

Share own positive attitude with each other

Share and communicate with their peers

Social once a year

Lots of base for the music for the Deaf to feel

More social events to build confidence and relationships
**Sport**

Sport helps to support community

Build our confidence

**Hostel**

Build on trust between learners but need to find ways to increase trust in hearing hostel staff

Feels like family

Hostel parents feel children trust them to help them

Relationships in the hostel important

**Support for learner challenges**

Need to increase memory box program again

Memory box and play therapy set up at school

Memory box yields positive results

Play therapy offered voluntarily (not enough)

Need psychology and funds

Boost confidence to make children more enthusiastic some days up, some days down, accept that

Feel good at the moment, not a problem.

Lots of help and support

Previously counselors at school, now taken away

LO replaced it but not the same

Funding issues

Encourage independence
Assistive devises

Hearing aids

Can help, some find it irritating

FM can help but not for all learners, some no difference as can distort sound

Start from young to use it to get used to it

Listening skills to encourage use of FM

Barriers to wellbeing at home

Pupils: bad communication at home; makes them feel low, therefor not happy at home because no communication, even parents who sign but not well.

Better relationships between siblings

Bored at home

Pupils don’t understand family culture (lack of communication)

Culture influences the wellbeing of the child in the family

Important, parents need to learn to sign

Lack of sign language from parents – inhibits communication

Parent support so important for hearing and deaf children

Deaf awareness

Raffles, market days to raise funds

Hearing kids know that Deaf kids do the same things

Create Deaf awareness

Go outside
Career development opportunities

Exposure to a variety of career options

Hard to find work, don’t know where to work

Encourage entrepreneurial skills
Appendix R – Phase 3 Data

Phase 3 Data