Registered psychological counsellor training at a South African faculty of education: Are we impacting educational communities?

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The study reported on in this article explored the perceived psychosocial and educational impact on educational communities by alumni of the North-West University who completed their Bachelor of Education Honours degree in Educational Psychology. This programme has been running since 2003 and aimed at training registered counsellors who need to pass the Board of Psychology examination of the Health Professions Council of South Africa to be qualified as registered counsellors. To achieve the aim of this study, telephone interviews were conducted to gather data from the counsellor alumni of the 2007, 2013, 2014 and 2016 cohorts. In total, 18 participants voluntarily participated in this qualitative research study. The participants’ perceptions were analysed using inductive content analysis; the findings suggest that counselling is an add-on skill for these alumni, utilised only on a part-time or secondary basis, as the overwhelming majority work as teachers in educational settings. The psychosocial and educational impact from a registered counsellor’s perspective seems to be limited as most of them are teachers and only some provide counselling services in the educational environment where they work. The implications are that some adjustments in the training of registered counsellors – from a holistic wellbeing framework – need to be made, as that the category should be intensively marketed.

Keywords: alumni; educational impact; mid-level communities; psychosocial; registered counsellor

Introduction and Background

Various South African (and international) contextual challenges, such as HIV/AIDS, poverty, divorce and other psychosocial risks, generate a need for well-trained counsellors who have a serious impact regarding mid-level psychological support to communities (Khanare, 2012). In South Africa, this need was seemingly addressed when the Health Professions Council of South Africa (HPCSA, 2019) launched the category of registered counsellor in the early 2000s, subsequent to groundwork done since the end of the 1990s. The purpose of this registration category was to create a mid-level psychological support category to implement basic primary and preventative psychological interventions in order to alleviate the need for more advanced psychological services, which were regarded as scarce. In this regard, students often are not in a good financial position to pursue master’s studies to become psychologists; training up to this level is labour-intensive and expensive to higher education institutions and a relatively small percentage of the population can afford high-level psychological services. All these factors are familiar to the developing world (Van Nickerk & Hay, 2009).

This scarcity of high-level psychological services in developing countries is emphasised in a South African study conducted by Hay (2016, 2018), where it was found that approximately 5,708 psychologists focus on mental health and serve around 55 million people. Furthermore, only 18.7% of the population has medical aids and thus approach privately registered psychologists. More specifically, in Education Support Services, the average ratio of psychologists to learners in the Free State Department of Education is 1:108,333 and in the North-West Department of Education and Sport Development it is 1:193,260. It is apparent from these numbers that there is a substantive need for registered counsellors to serve as primary and mid-level psychosocial support providers in (educational) settings. These figures may look somewhat different in developed countries, as Cook, Jimerson and Begeny (2010) report that access to professional psychological services was more likely in these countries.

Psychosocial and educational support may be described as the support given in advancing the general wellbeing of the community and addressing the educational needs of learners by guiding them towards the access of networks (Buyukgoze-Kavas, Taylor, Neimeyer & Güneri, 2010). More specifically, psychosocial support may include promoting better interpersonal relationships, focusing on holistic health or intervening in dysfunctional family systems. Educational support may provide attention to aspects such as career advancement or providing support when barriers to learning are experienced. The preceding examples of support are in line with the functions described by the Professional Board for Psychology for the category of registered counsellor (HPCSA, 2019).
Contextualising the Category of Registered Counsellor

According to the Professional Board of Psychology (HPCSA, 2019), one of the functions that registered counsellors are allowed to implement is short-term psychological intervention for the general wellbeing of the community. When severe and prolonged interventions are needed, which fall outside of the scope of registered counsellors, the counsellor must be able to refer to more specialised or advanced psychological support. One fundamental similarity between registered counsellors and registered psychologists is that both are allowed to operate a private practice. In terms of qualifications for a registered counsellor, the HPCSA expects a registration requirement of an accredited four-year Bachelor of Psychology degree or equivalent honours degree in Psychology or Educational Psychology, with practicum period of six months, as well as the successful completion of the Professional Board of Psychology examination (HPCSA, 2018). The different practice fields in which counsellors could register were Community mental health, HIV/AIDS, Family counselling, Human resources counselling, Pastoral counselling, School counselling, Trauma counselling, Sport counselling, Employee wellbeing, Career counselling, Trauma counselling, Primary mental health, Family therapy, and Employee wellness (HPCSA, 2017), but these have since been revoked.

Challenges Faced by Registered Counsellors

After graduating with the indicated honours or B Psych degree, various challenges exist, such as non-completion of the Board examination, inadequate recognition for counsellors, insufficient job opportunities and difficulty in creating financially viable careers (Abel & Louw, 2009). In contrast to South Africa, in First World countries (such as the United State of America) support from communities seems to be an invaluable resource for those professionals depicted as counsellors (DeLorme, 2010; Loveless, 2010; Windle, 2009). Support systems in these countries enable counsellors to find ways of both meeting the needs of the community and improving personal self-efficacy (DeLorme, 2010; Loveless, 2010; Windle, 2009). In these communities, counsellors seemingly receive positive recognition which contributes to them feeling capacitated.

Cook et al. (2010) theorise that countries that are respectful of equity, autonomy and individual choices are more likely to recognise the value of counselling. In South Africa, registered counsellors might not impact educational communities optimally as the value of counselling may not be appreciated by all communities, partially because counselling has not been extended adequately to all. Owens, Simmons, Bryant and Henfield (2011) report that poorer American communities are often not provided with enough counsellors. Similarly, in South Africa, there is an inadequate number of registered counsellors who are probably not valued. Inadequate recognition of the value of professional registered counsellors (along with resource constraints) prevent many South African communities from recognising that registered counsellors can be a valuable source (Du Preez & Roos, 2008; Elkonin & Sandison, 2010; Pretorius, 2012; Van Niekerk & Hay, 2009). Inadequate recognition of registered counsellors is reflected by the limited number of advertisements placed in the public sector (e.g. hospitals, police, army, community mental health and education) that fit the scope of practice for registered counsellors (Abel & Louw, 2009; Du Preez & Roos, 2008; Elkonin & Sandison, 2010; Van Niekerk & Hay, 2009). According to Elkonin and Sandison (2006), one of the reasons for the scarcity of positions is a lack of knowledge about the scope and practice of registered counsellors and thus the lack of recognition of the profession. However, Abel and Louw’s (2009) findings show that the education sector provides most of the work for registered counsellors, employed as professional counsellors. This may indicate that the education sector is more informed about the category and scope of registered counsellors.

Pretorius (2012) argues that another reason for the inadequate recognition of registered counsellors is that there is still an assumption that clinical psychologists can do everything. Thus, any other category of registration pertaining to psychology is perceived as being inferior to that of clinical psychology. Another perception regarding the category of registered counsellor is that students who fail to obtain admission to the master’s programme in psychology choose to become registered counsellors, contributing to negative connotations of being second-rate mental health-care workers in the South African context (Rouillard, Wilson & Weideman, 2016). This perception that all registered counsellors aspire to being registered psychologists is probably not founded as many counsellors see their role in the mental health profession as mid-level service providers. Furthermore, in South Africa, with its economic restraints, it is necessary to compensate for the lack of other professional mental health support, such as clinical psychologists (Van Niekerk & Hay, 2009). It is also necessary to adapt to the needs of a diverse population by utilising other categories of registration, such as registered counsellors (Pretorius, 2012).

Registered counsellors, therefore, seem to play a necessary supportive role in communities, but often do so without the necessary support and network of resources (Pillay, 2011). Some examples of limited resources include limited opportunities that are needed for training in basic technological skills or the newest counselling practices (Pil-
lay, 2011). Furthermore, Joseph (2007) found that registered counsellors will not necessarily utilise their primary counsellor functions in their jobs and often do not adequately comply with job market requirements. An example of a study conducted in support of Joseph’s (2007) notion, is that by Kotze and Carolissen (2005), who studied the whereabouts of Bachelor of Psychology alumni of the University of Stellenbosch and the University of the Western Cape until 2004. The findings show that of the 69 graduates, only 15% worked as registered counsellors.

Another example of such a study is that by Abel and Louw (2009), who did a survey of 256 counsellors who, at that stage, were registered with the HPCSA, of whom 82 responded. A total of 38 (46%) were working as counsellors. Of the 38 registered counsellors, 36 indicated their places of work. A quarter of them (23.6%) worked in the Western Cape Education Department in schools and colleges, 19.4% in private practice, 18.1% in non-governmental organisations and 16.7% at universities. The education sector (40.3%) provided most of their jobs. Most of them worked in urban areas: Johannesburg (34.2%), Cape Town (23.7%), Port Elizabeth (15.8%) and Pretoria (10.5%); four of the other six in bigger towns; and two in rural areas. Furthermore, Elkonin and Sandison (2006) studied the employment patterns of Bachelor of Psychology graduates of the Nelson Mandela Metropolitan University. Of the 84 graduates, 62 were interviewed telephonically; 16 of them had written the Board examination, but only 12 (19%) were registered. Of the 12, only six (9.6%) worked as registered counsellors.

The studies mentioned above focused mostly on Bachelor of Psychology graduates, but cautious similarities may possibly be drawn to Bachelor of Education Honours (BEd Hons) students in Educational Psychology.

Problem Statement
Although all the above-mentioned studies suggest that some graduates of Bachelor of Psychology, Honours in Psychology or Educational Psychology do register as counsellors and perform certain counselling functions, it seems doubtful that the ideal of the HPCSA for the category of registered counsellor – to have a serious impact in terms of mid-level psychological support in communities – is reached. Based on the literature reviewed, the research reported on in this article was guided by the following research question: What is the perceived psychosocial and educational impact of counsellor alumni of the North-West University (NWU) on communities?

The study was grounded in the following theoretical framework.

Theoretical Framework
Three theoretical frameworks linked strongly with the possible psychosocial and educational impact of registered counsellors, namely wellness theory, the ecosystemic perspective and positive psychology. In terms of the wellness theory, from a community psychological perspective (of which Prilleltensky is probably the biggest exponent), the holistic wellbeing of communities needs to be recognised when the possible psychosocial and educational impact that registered counsellors could have on communities, is considered. A holistic wellbeing paradigm and thrust encompass a multi-level approach on an individual, interpersonal and community level (Prilleltensky & Nelson, 2002). It includes, for example, support to communities on aspects such as educational and psychosocial wellbeing to ensure the mental health of individuals.

A multi-level wellbeing approach, as mentioned, also considers the different systems of the registered counsellor and the community that needs engagement, which is mirrored in Bronfenbrenner’s ecological systems theory of child development (1979). When applied to the world of counselling, it can be reasoned that registered counsellors and systems within the community influence one another in either a positive or negative manner. The relational impact between the counsellors and the community can have a positive outcome when counsellors are given an opportunity to work collaboratively with communities within an ecosystemic approach to provide the necessary psychosocial and educational support to the community.

Linked to the above, the possible psychosocial and educational impact that registered counsellors could have on communities also relates to the conceptual framework of positive psychology, which focuses on personal strengths and assets within individuals and communities (Seligman, 2005). Some positive psychology constructs include concepts such as coping, well-being, competence or good mental health (Rutter, 2012), which can be viewed as an important framework for registered counsellors to work in and have a positive impact on communities. In order to provide a positive influence on communities, a community-based action research method can be an important part of executing an ecosystemic approach within a positive psychology framework for registered counsellors. Community-based action research is “a flexible spiral process of systemic enquiry” (Costello, 2011:6). This step-by-step process starts with counsellors and a community representative working together to understand problems of interest related to the community. Once counsellors and their community partners understand the problematic issues within the community through systemic reflection, interventions aimed at supporting and im-
proving the community are carried out collaboratively with the community. Interventions are then evaluated and changed by the counsellors and community partners to improve practice (Piggot-Irvine, 2012).

The three theories mentioned above provide some theoretical grounding for the impact that counsellors may have on communities – in terms of supporting wellbeing, facilitating development through a holistic view, and focusing on strengths of communities and individuals.

Research Method
Aim of the Research
The aim of the research was to determine what the perceived contribution of BEd Hons Educational Psychology alumni of the NWU was to the psychosocial and educational wellness of diverse communities.

Research Paradigm and Design
In order to discover the perceptions of the NWU alumni on their perceived contribution to the psychosocial wellbeing of communities, an interpretivist paradigm (cf. Creswell, 2012) was used. An interpretivist paradigm is based on the belief that the systemic context in which people are situated/linked will influence how they make meaning of their situation or that meaning will differ from system to system (Maree & Van der Westhuizen, 2010). For this reason, we needed to choose a research design that was flexible and allowed for deep exploration of participants’ meaning making. A qualitative research design, with elements of biographical details, which was regarded to be an appropriate approach, was deployed (cf. Jemielniak & Ciesielska, 2018).

Ethics Procedure
This research was a subproject of the encompassing research project approved by the Institutional Ethics Committee of the NWU (approval number NWU-00244-16-A2). Four BEd Hons Educational Psychology students of the 2016 cohort were trained as fieldworkers to collect data from participants of the 2007, 2013 and 2014 cohorts. A research assistant collected further data from the 2016 cohort. The trustworthiness of the procedure was enhanced, given that the fieldworkers and research assistant used the same interview schedule.

Sampling of Participants
To achieve the aim of recruiting participants, a list of names of the BEd Hons Educational Psychology alumni of 2007, 2013, 2014 and 2016 was obtained. Only alumni who graduated in the above-mentioned years could participate in the study.

As they met the inclusion requirements, all candidates on the list were contacted via email and telephone for recruitment purposes. A small number of the 2007, 2013 and 2014 alumni declared themselves willing for interviews, with a larger number of the 2016 alumni. More specifically, two alumni from 2007, three each from 2013 and 2014 and 10 from the 2016 cohorts participated in the study. The most pertinent reason provided by the majority of the early cohort participants for not participating was that they were too busy. Another factor may have been that some of them never registered as counsellors and felt somewhat embarrassed to take part in the interview. In total, 18 participants from the four cohorts of alumni voluntarily participated in the study (see Table 1 for some detail regarding the participants).

Data Collection
Semi-structured individual telephonic interviews and document analysis were used to gather data (cf. Jemielniak & Ciesielska, 2018) on the psychosocial and educational impact that registered counsellors have on communities. The main data collection method in this study was semi-structured individual telephonic interviews, as most of the data were generated from the interviews. Document analysis was only a small part of how the data were collected in order to infer biographical detail on the status of the alumni in terms of registration with the HPCSA. We felt that the interview was the most appropriate method to collect data for the research question to be answered. Semi-structured interviews ensure that answers to the questions direct the aim under investigation (Creswell, 2012). Individual interviews are deemed most suitable as they ensure that each question is addressed clearly and comprehensively, thereby avoiding the likelihood of any data being misinterpreted or lost during communication. Telephonic interviews were also convenient as some of the participants lived far away from the Potchefstroom Campus of the NWU.

More specifically, the interview schedule comprised two sections: Section A included the personal details of the participants in terms of registration with the HPCSA and Section B consisted of questions about services to the community. Table 1 offers a visual overview of the interview schedule.
The HPCSA have method to determine themes. This method led to a deeper understanding of the participants’ perceptions regarding the psychosocial and educational impact made on communities. We aimed to conduct a trustworthy data analysis and were satisfied with the validity of the findings that emerged (cf. Maree & Van der Westhuizen, 2010).

Findings and Discussion
The following conclusions can be drawn from the document analysis as retrieved from the HPCSA website in terms of registration of alumni of 2007, 2013, 2014 and 2016.

We found that for the 2007 group of eight alumni, only three were registered counsellors, with one being active and two erased. Of the 2013 group, four of the 12 alumni were registered, one as an educational psychologist and seven were not registered as counsellors under their maiden names. Of the 2014 group, four of the 13 alumni were registered as counsellors under their maiden names, while seven were still registered as student counsellors under their maiden names and two were not.

### Table 1 Personal particulars of participants

| Participant | Alumni year | Primary job description | Counselling functions in community | Status regarding registered counsellor |
|-------------|-------------|-------------------------|------------------------------------|---------------------------------------|
| Participant 1 | 2007        | Lecturer                | Uses registration for ethical clearance for research studies | Registered counsellor                |
| Participant 2 | 2007        | Lecturer                | No counselling functions           | Not registered                        |
| Participant 3 | 2013        | Teacher                | No counselling functions           | Not registered                        |
| Participant 4 | 2013        | Teacher at school for autistic learners | Part-time work with learners with sensory difficulties and at hospitals | Registered counsellor                |
| Participant 5 | 2013        | Teacher at school for mentally challenged learners | Part-time work with learners | Registered counsellor                |
| Participant 6 | 2014        | Teacher                | Part-time work with learners       | Registered counsellor                |
| Participant 7 | 2014        | Teacher                | No counselling functions           | Registered as student counsellor     |
| Participant 8 | 2014        | Teacher                | No counselling functions           | Registered as student counsellor     |
| Participant 9 | 2016        | Teacher                | Part-time work with learners       | Registered counsellor                |
| Participant 10 | 2016       | Full-time student for honours degree in clinical psychology | Only at church | Registered counsellor                |
| Participant 11 | 2016       | Teacher                | Part-time work with learners – provides support in terms of scholastic performance | Registered counsellor                |
| Participant 12 | 2016       | Teacher                | Part-time work with learners       | Registered counsellor                |
| Participant 13 | 2016       | Teacher                | No counselling functions           | Registered counsellor                |
| Participant 14 | 2016       | Teacher                | No counselling functions           | Registered counsellor                |
| Participant 15 | 2016       | Teacher                | No counselling functions           | Registered counsellor                |
| Participant 16 | 2016       | Teacher                | Part-time work with learners       | Not registered                        |
| Participant 17 | 2016       | Full-time student for honours in clinical psychology | Private projects | Not registered                        |
| Participant 18 | 2016       | Full-time counsellor at special school | Provides counselling services to other schools as well | Registered counsellor                |

The reason why document analysis was also used for data collection was to get independent confirmation on the registration status of all cohort members of the different years (including the participants) via the HPCSA website. As stated earlier, the data collection methods were used by four trained fieldworkers and a research assistant to collect data that focused on obtaining answers to the perceived impact that registered counsellors might have on communities (cf. Creswell, 2012).

Data Analysis
The use of semi-structured interviews generated 18 data sets. The data were transcribed and analysed using inductive content analysis (cf. Creswell, 2012). The inductive data analysis relies on the constant comparative method to determine themes within the data before comparing the themes across the data sets (cf. Jemielniak & Ciesielska, 2018). This method led to a deeper understanding of the participants’ perceptions regarding the psychosocial and educational impact made on communities. We aimed to conduct a trustworthy data analysis and were satisfied with the validity of the findings that emerged (cf. Maree & Van der Westhuizen, 2010).
found under their maiden names. Lastly, of the 2016 group, eight of the 25 alumni had completed the Board examination successfully and eight had registered, according to the website. This was a total of 16 of the 25 for the 2016 group, which seemed to be a more promising conversion rate than presented by the other cohorts. These findings support the data collected from the semi-structured interviews.

Findings from the Document Analysis and Semi-structured Interviews

The following themes were drawn from the document analysis done and the personal particulars gleaned from Section A of the interview schedule in terms of registration with the HPCSA (refer to Table 2 for the questions asked in the interviews).

### Table 2 Interview schedule

| Interview schedule for individual semi-structured interviews |
|---------------------------------------------------------------|
| **Section A: Personal particulars**                           |
| 1) In what year did you complete your BEd Hons in Educational Psychology at the NWU Potchefstroom Campus? |
| 2) Have you successfully completed the Professional Board of Psychology examination? If you have, when was this? |
| 3) Are you currently a registered counsellor with the HPCSA? Describe if there was a break in registration, or if you were deregistered, or if you are currently registered in another capacity at the HPCSA. |
| 4) Are you practising the career of registered counsellor part-time or full-time? If you are a practising counsellor, in what work capacity? Please describe fully. |
| 5) What are the reasons if you are not currently practising the career of registered counsellor? Please explain more, for instance, how seriously you tried to find a counselling post after your studies, what challenges you experienced that prevented you from practising counselling, etc. |
| **Section B: Only complete if you are practising full-time or part-time counselling as a registered counsellor** |
| 6) For which community do you provide services as a counsellor? Please describe in detail. |
| 7) What do you consider to be the most important contributions to the community in which you work? Please explain fully. |
| 8) How would you describe your contribution as counsellor in terms of support to the community on a psychosocial level? |
| 9) How would you describe your contribution as counsellor in terms of support to the community on an educational level? |
| 10) How would you describe your contribution as counsellor in terms of support to the community in terms of mental health? |
| 11) In what ways, do you think, do your services to the community make a difference? |

**Counselling utilised as an add-on skill**

Of the 18 participants across the four years, 12 were actively registered as counsellors. One was a full-time counsellor at a special school and 13 of the participants were teachers, with only seven using their counselling skills on a part-time basis. Two participants were employed at higher education institutions and two were studying to become clinical psychologists and using their counselling skills in churches or in projects. Eight of the participants stated that they were not counselling at all. Approximately 41% seemed to be registered as active counsellors with the HPCSA. A minute percentage of these seemed to be in a full-time counselling position – in fact, only one of the 18 participants (6%) in this survey. From the findings, it seemed that some recognition and value were ascribed to registered counsellors in the education sector, as 15 of the 18 participants (83%) were employed in education – as teachers or lecturers. However, the counselling inputs mostly related to learners on a part-time basis, as teaching was their primary focus.

The findings from the document analysis and Section A of the interview schedule suggest that NWU BEd Hons Educational Psychology alumni were not prepared to register for this category after completion of the honours degree, as counselling might not be their primary job description, but an add-on skill for the teaching profession, as confirmed in the literature (cf. Abel & Louw, 2009; Joseph, 2007; Kotze & Carolissen, 2005). Some alumni expressed the sentiment that counsellors were often not remunerated adequately and that, as graduates, they often felt that they did not have enough practical experience; these sentiments contributed to them not registering as counsellors. For example, Participant 7 said: “I did try to start my own practice, but it was not financially viable for me, I also realised I need more experience.” This sentiment was echoed by Participant 8: “Experience must first be gained.”

From the answers to the questions in Section B of the interview schedule, the following deductions, which were categorised into two themes, could be made.

**Counselling services rendered to the community**

Only one participant worked as a counsellor on a full-time basis (Participant 18). Services provided by the full-time counsellor showed that she worked at a special school but also provided services at other schools in her district. Participant 18 replied: “to a special school and also other schools in my district ... we are big source for the community even old age homes or if there is a need then my services are available.”

This is an example of the ideal of the HPCSA
when this category was created. The participant’s services were extended to the broader community where possible, and not only at her school. The seven participants (4, 5, 6, 9, 11, 12 and 16) who were offering part-time counselling services, rendered services to their schools only. For example, Participant 4 rendered counselling services to autistic learners and provided trauma counselling at hospitals. Participant 5 rendered counselling services to severely “mentally challenged learners and Down syndrome learners.” The other five participants provided counselling services to ordinary school learners.

Participant 10 worked with families struggling with coping, stress and burnout, and especially with the youth at her church: “I work under my pastor at the church where one of my portfolios is counselling, especially to youth.” When the participants were asked how the services they rendered made a difference, Participant 6 stated: “to contribute to raise a child for the next generations – that is something.” Participant 1 added: “if you support a child, you create a ripple effect to the family.” Participant 4 responded: “I try to support the community – quite a poor environment – so they cannot afford psychologists.”

The main focus of most of the participants was on learners and some parents in the school context of two special schools, one ordinary school in a disadvantaged environment and four ex-Model C schools. Only one participant focused on hospital clients, and this was mainly on a part-time basis – over and above her teaching responsibilities.

**Psychosocial and educational contributions to communities**

From the findings it seemed that the most important contributions to communities were on a psychosocial and educational level in the school context, and was probably limited in terms of wider communities, except for the full-time registered counsellors. From the data collected, it seemed as if counsellors provided psychosocial support for aspects such as balanced socialisation, demonstrating socially more acceptable behaviour, holistic health, family issues and substance abuse. Participant 6 explained her contribution to tutoring learners towards more balanced socialisation as follows: “The ways they speak to one another bothers me. I try to work on the manner on how they communicate with one another as well as with teachers.” In terms of demonstrating socially more acceptable behaviour, Participant 15 said: “I would say via the children – to help them experience emotions that are socially acceptable.” Furthermore, the participants’ contribution to holistic health in their community could be summarised in terms of self-concept and respect for themselves and others. Participant 9 explained the situation at her school as follows: “The boys do not have respect for themselves. We try to work on how they behave towards one another.” Participant 16, who supported parents and learners in coping with family issues such as children being homosexual, said: “Most people that I work with are homosexual. It is about how they have to work with their parents and how their parents are with them. Also, how to deal with the situation.”

Examples of how support was provided for learners dealing with substance abuse were summarised by Participants 6 and 4. Participant 6 explained the situation at her school: “It feels like children socialise a lot over weekends ... they get drunk and smoke ... thus I deal a lot with substance abuse at our school.” Participant 4 responded: “I try to support the community with the drug problems they have.”

It was also found that learners were provided with education skills such as predicting the consequences of, for example, substance abuse and the effects thereof on academic progress. For example, Participant 6 replied: “Drug issues have a big impact on education. I try to help learners not to get caught up with their circumstances. That they have to work for their future and the opportunities that they have to go to university.”

Participant 9 explained that her educational contributions to her community were mainly focused on students with regard to aspects such as time management and subject and career choices:

... some subject and career choices ... but also when you give learners time in class to do their study work, they tell you they have study time tonight in the hostel. They would rather do nothing in class and spend 2 hours tonight to do their work. They do not manage their time effectively.

Even though some positive psychosocial and educational contributions were found, the registered counsellors’ educational impact may have been limited. For example, Participant 5 mentioned that she conducted a few school readiness tests: “Educational? Much less ... more emotional at this stage. Perhaps a few school readiness tests.”

The conclusion drawn from the findings confirms that NWU alumni who had completed the BEd Hons degree in Educational Psychology were predominantly teachers or lecturers, of whom some were engaged in part-time counselling. An overwhelming majority of registered counsellors seemed to be in school and higher education positions (83%) and providing counselling on a part-time basis (39%). This may be due to the fact that the participants’ chosen for this study were from the Faculty of Education, with teaching being part of their training. This might not have been the case if the participants were chosen from other courses, such as the bachelor’s degree in psychology. The psychosocial and educational impacts from a counsellor perspective seemed to be limited to the educational environment within which they were
teaching, with one participant providing part-time trauma support in hospitals. Being a registered counsellor only serves a secondary role in most of the participants’ work lives. This secondary role might prevent counsellors from optimally impacting communities. The findings confirm that the ideal of the HPCSA for registered counsellors to have a serious mid-level psychological impact on communities was probably not reached (at least not via NWU alumni).

Deducted from the findings, it seems as if registered counsellors might need to work more collaboratively within an ecosystemic approach to improve the psychosocial and educational impact they make within communities. We suggest that in the training of registered counsellors, it is the lecturers’ obligation to train future registered counsellors with a holistic wellbeing approach (or other similar approaches) in employing their counselling skills from a more encompassing stance within their communities. This might encourage students towards a participatory action research mindset, engaging all the different systems within the community in resolving various psychosocial and educational issues (Prilleltensky & Nelson, 2002). Not only will registered counsellors be empowered to make serious contributions within their communities, but the stakeholders working with the registered counsellors will also be empowered in developing their own strengths as part of capacitating the communities where they work (Seligman, 2005).

Conclusion
A decade ago, Abel and Louw (2009:99) stated that “the current situation of this profession (in South Africa) is in a highly controversial state” and “unless the identified problems are addressed within the near future, it is likely that there will be no light at the end of the tunnel for registered counsellors.” It seems from the findings of this 2016 and 2017 study, as well as other studies (mentioned in the literature review), that even after sixteen years of producing registered counsellors, the category remains underutilised and in crisis. This was evident from the relatively large percentage of NWU BEd Hons Educational Psychology alumni who were not registering as counsellors and the small percentage that were rendering counselling services, mainly as add-on to their teaching positions. Very limited psychosocial and educational impacts were probably made in the educational communities that they served. These disconcerting findings may also have applicability in other developing countries where limited psychological services are rendered, and where mid-level psychological support is envisaged and/or practised.

The findings of this study call for urgent interventions by registered counsellors, the Health Professions Council of South Africa, employers, and universities offering the training programmes—with regard to the status, marketing and full-time positions of the profession of registered counsellors. With these urgent interventions, newly registered counsellors will hopefully then initiate their counselling careers fully engaged and pro-actively rather than stagnating into a secondary counselling role as found in this study.

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Authors’ Contributions
Carmen Joubert conducted all thematic analyses and developed the original manuscript. Johnnie Hay executed the empirical research and contributed in adjusting, re-focusing and re-writing the original manuscript. All authors reviewed the final manuscript.

Notes
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