

## CHAPTER 16

### THE ORTHOPEDAGOGIC EVALUATIVE REPORT

#### 1. THE AIM IS AN IMAGE OF THE PROBLEMATIC EDUCATIVE EVENT

The orthopedagogic evaluative investigation culminates in an image of the problematic educative event in which the child restrained in becoming adult is involved. This necessarily includes a description of a **personal image** of a child. Van Strien (302, 108) views this as the primary phase of the evaluative activity. It involves as complete a description as possible of the unique child's experiential world—his/her possessed experience, meanings, feelings, thoughts, volitional life, behaving, etc.

However, a **complete** image of the child's experiential world can never be given; and Heraclitus (see 301, 9) noted long ago that there is no way to find the limits of the soul, whatever path one follows, because its foundation is too deep. Also, such an image cannot be established by the mechanical application of fixed rules.

Lubbers says a personal image is nothing more than "the image the child him/herself has made of the world" (149, 12 [in Dutch]). Thus, it is an image of his/her world relationships which he/she has established over time in his/her educative situation.

With respect to this image, especially relevant are aspects such as the structure of the child's psychic life, and the quality of its actualization; the meanings he/she gives to life contents; and the nature of the relationships established within his/her educative situation. The essentials of the problematic educative situation of the restrained child also must be indicated, as well as how they are related to his/her personal structure, which is qualified by Van Strien as "the structure of the relevant individual and constant characteristics" (227, 282 [in Dutch]) which the investigator must accept to make the child's actions intelligible.

In such an image, all available data are united into a "theory" " ... which tries to unite in one comprehensive concept" the person's

past, present, and future, according to Van Strien (302, 251). Thus, the orthopedagogic report must clearly show the level of the child's becoming adult as such, and what his/her pedagogically achievable level now is, in terms of what his/her abilities allow him/her to attain--i.e., what his/her **expected level of becoming adult** now is; what the nature is of the **discrepancy** (between the attained and the attainable level), and what has given rise to it.

The investigator now distances him/herself from the intersubjective involvement required while implementing the various exploratory media, and he/she objectively analyzes, interprets, and evaluates the various data in terms of orthopedagogic criteria (see 299, Chapter 6), and determines the nature of and reasons for the discrepancy between the level of becoming adult, which has been attained, and the level which is attainable.

It is precisely this **discrepancy** which calls **orthopedagogic** actions into existence because it establishes the fact that the child does not actualize his/her psychic life **pedagogically** as he/she should, and that the fundamental pedagogical structures are not being implemented as they ought to be.

## 2. ORGANIZING THE DATA

### 2.1 General

After exploring the restrained child's experiential world, via the various media, the first step in writing an orthopedagogic report is to select and organize the salient aspects of this world. Those aspects which have a real connection with the child's current personal actualization are integrated, and the fundamental reasons for the constituents of his/her problematic educative situation are indicated.

Regarding each individual exploratory medium, a **summary** is given of the salient, or primary aspects of the disharmonious actualization of the child's psychic life, as well as of the problematic educative situation. Thus, for example, the striking aspects arising in the historicity conversation are written down; the same is done regarding the performance media, the expressive, and projective, as well as the intelligence media.

A **summary sheet** is drawn up for each medium on which the salient aspects of the child's experiences, volitional life, lived experiences, knowing, and behavioral life, of his/her exploring, emancipating, distancing, differentiating, and objectifying; etc. are recorded.

For example, whether the child considers his/her world to be insecure, or unsafe; if there are feelings of inadequacy, of helplessness, of being threatened; the presence of anxiety, aggression are recorded.

Also recorded is the structure of his/her anxiety, his/her affective life, e.g., in terms of lability or stability, or even impulsivity; if this is under cognitive control; also, when possible, to whom his/her aggression is directed, with whom he/she identifies, and with whom he/she doesn't. Moreover, each indication of educative failure with each medium is recorded, e.g., indications of affective neglect because of rejection, overprotection, disturbed interpersonal relationships. Are there indications of bodily lived experiences, perceptual losses, etc.?

As with the findings from each medium, the salient aspects of the structure of the different modes of actualizing the psychic life, as this occurs within the educative event--particularly as a coherent totality--are written down. Thus, for example, a summary is made of the data from the investigation of intelligence regarding its quality; if there is an inability to arrive at a comprehensive overview, or to globalize, etc.

The careful organization of the historicity data also usually leads to clear guidelines regarding the underlying reasons for the child's current being a person and, thus, this shows what is at the basis of his/her anxiety, insecurity, tension, aggression, etc.

Especially, there is accurate reference to possible aspects, such as slow early physical development, affective neglect, inadequate authoritative guidance, rejection by the father, the mother or both, inconsistent educative actions.

Only after the orthopedagogic evaluator has dealt with the data from each medium can he/she proceed to write the report. Then, he/she usually allows him/herself to be led by the following guidelines:

- a) All available data are now pieced together. That is, after cross-comparing, the data, available in the form of little summaries, are "compiled" into a "theory", or "explanation" which tries to unite, in one comprehensive conception, the meanings of the restrained child's past, present, and future (see 302, 251).
- b) This always involves establishing a clear image of his/her so-called "problem" in his/her situation--the real essentials of his/her under actualizing his/her psychic life must be indicated. Thus, the report must clearly point out what is **inadequate** about the child's becoming adult.
- c) It is a qualitatively structured, descriptive image of how the restrained child, at present, constitutes his/her world. Thus, the reporter also must not allow him/herself to lapse into a mechanical application of rules. The creative, synthesizing thought of the orthopedagogue is an indispensable component of his/her method (302, 108). Therefore, this can be nothing but interpreting test scores and tabulating results (243, 78). Creativity does not mean sensational embellishments; on the contrary, the sensational is best excluded entirely.

## 2.2 The Primary Aspects of the Report

### 2.2.1 Identifying information

Name:  
Date of birth:  
Date of study:  
Age:  
Grade level:  
Referred by:

### 2.2.2. Statement of the problem

Phrase this as the parents would, but incorporate the salient aspects from the entire study, which further clarify, or supplement the **problem** (with reference, e.g., to irresponsibility, rejection of authority).

### 2.2.3 Summarized person image

The following sequence is recommended:

#### 2.2.3.1 The educative relationships

The salient aspects relevant to the child's becoming adult within his/her educative situation, as acquired with the help of the historicity conversations, and interpreted in terms of orthopedagogic criteria (120; 299, Chapter 6), are repeated without the problematic as such, being indicated, for example:

The early physical development of the child is described briefly, and "problems" indicated, e.g., impairments of his/her **biological aspects** such as poor vision, hearing problems, awkwardness, sickliness, traumas; his/her longitudinal progress as a baby, toddler, and pupil, and conspicuous events, and data in these respects, the parents' general approach to educating are very briefly written down, especially if **obvious** educative approaches are advocated; findings regarding the child's scholastic progress are noted, and whether he/she actively participates in activities outside school and the home, and if he/she has a wide or limited circle of friends, and how they relate to him/her as a **person**.

#### 2.2.3.2. Actualizing the psychic life

##### 2.2.3.2.1 Intellectual ability

- a) Highlight the quantitative data.
- b) Give a qualitative evaluation of the above.
- c) Present findings regarding the adequate and inadequate actualization of intelligence, as a potentiality. (The relevant data acquired with the help of other media, such as the Rorschach and Wartegg, also are integrated here).

##### 2.2.3.2.2 The structure of the psychic life

###### a) General

The salient aspects disclosed by **pedagogical observation**, in connection with the media, are integrated and such matters as carelessness, neatness, perfectionism, insecurity, defective exploratory attitude, self-confidence, boldness, friendliness, modesty, animosity, confusion, indecisiveness, and despair are of relevance.

###### b) The gnostic-cognitive structure

Here, the condition of the gnostic-cognitive structure is stated, and whether there is an ordered or unordered quality. The conspicuousness of the actualization of the gnostic-cognitive modes of learning are indicated, such as attending, perceiving, imagining, and fantasizing, thinking and remembering. Aspects of under actualization, and their nature, are referred to.

**c) The pathic-affective structure**

Here, the state of the child's emotional lived experiencing is described in terms of stability, lability, or impulsivity; whether there is mention of affective blunting; if there are indications of tension, anxiety, and insecurity, and what their nature is, also with respect to the child's cognitive control over them; if he/she is ready to explore the educative contents; if there is a strong or weak willingness; if there are feelings of inadequacy, etc.

**d) The normative-meaning giving structure**

Here, the state of the child's meanings of life contents are presented; i.e., what his/her particular, **different** meanings include; e.g., he/she doesn't accept authority; does not have insight into demands of propriety (relate, e.g., lying, running away, is irresponsible); his/her conscience is lax (steals, lies); also indicated are the nature of his/her self-image, how he/she views others, etc.

**e) The problematic educative event**

Here, one relates the child's current deficient actualization of becoming adult to the educative event in which he/she and the adults participate jointly. It must be clearly shown where and in what respect educating miscarries. Educating can fail only if it deviates from the essentials of the educative event (120), and one stipulates their **confused** and **attenuated** appearance by describing the **practical** establishment of pedagogical relationships, an inadequate sequence, poor activities, a "distorted" educative aim, and why they are judged to be inadequate.

There must be an accurate view of the relationships between the child and the parents in general, but also between the father and the child, the mother and the child, other adults (including teachers), and the child:

### **i) Possible inadequate trust**

The state of actualizing mutual pedagogical trust in the particular educative situation must be indicated, and matters such as the following can be relevant: inadequate care; affective neglect; perhaps the child is rejected, overprotected; inaccessibility--perhaps the parents are too busy with other activities, and have no time for their child; deficient intimacy--the father and/or mother never talk alone with the child about things he/she is interested in; insufficient opportunities for exploration--the child is not allowed to go out of the house alone because the parents are too worried; excluded from family activities; unfavorable comparisons—he/she can't do anything well, other children are continually held up to him/her as examples, there is mention only of his/her failures, every afternoon he/she must give an "account" of his/her "failures" at school; inadequate room is made for him/her at home; disinterested father-educating is viewed as the mother's responsibility; the father and child, perhaps, are often with each other, and yet live past each other—e.g., they go to watch rugby, fishing, etc. but, e.g., while the father watches the match, the child enjoys ice cream and cold drinks behind the stadium the whole afternoon ...; he/she is incessantly told to behave him/herself, and to "assure" his/her parents that he/she won't do anything behind their backs; he/she is never allowed to go anywhere without supervision; he/she doesn't experience the joy of a welcoming greeting; etc.

### **ii) Possible inadequate understanding**

It must be specified how the mother and father understand, or perhaps **don't know** their child, and how he/she understands them. Here, the following matters are relevant: Underestimation--perhaps his/her parents underestimate his/her potentialities, and merely accept that he/she is not capable of much; overestimation--perhaps there is no allowance for his/her limitations, and unrealistically high demands are made of him/her; a particular future-ideal is prescribed by the parents to their child without considering his/her feelings about it; a faulty definition of the course and aim of educating, because of his/her parents' distorted educative expectations; an over-ambitious program for the child—he/she must participate in everything possible, and often he/she is not compared favorably with others; etc.

### **iii) Possible inadequate authority**

Here, the following matters are relevant: Deficient authority--the child is permitted to be disobedient, and to have his/her way in everything; he/she is never prevented from doing anything; his parents do not accept authority themselves; excessive demands are set; deficient exemplifying--the parents' examples do not illustrate the rejected values, and their child does not appropriate the norms for him/herself, their view of life is not clear to him/her, or perhaps it is precisely too clear; little opportunity to make an effort; no appeal to exert him/herself--the child is not obligated to persist, and has little opportunity to accept responsibility (perhaps his/her mother has done his/her homework for him/her since first grade), maybe too many things are done for him/her; there are too many warnings from his/her father or mother; there are prohibitions not followed up; there is too much or too little punishment, too much interfering; there is lack of agreement--the parents don't agree about what their child does, and his/her point of view is chronically ignored.

### 3. RECOMMENDATIONS

#### 3.1 Interdisciplinary panel discussion

If the orthopedagogic evaluator has organized the results of his/her investigation, and verbalized them, he/she has a reliable image of the unique restrained child's problematic educative situation.

However, this is not sufficient, since the results are now also analyzed and evaluated from different points of view by presenting them to a panel of other experts. In this connection, in the first place, this involves **intradisciplinary** work when there is discussion among theoretically- schooled and practically-oriented pedagogues (see 198, 76). Because the orthopedagogue is not a **super** pedagogue, there is a close alliance with those who have specialized in specific pedagogical and orthopedagogic perspective, such as psychopedagogics, didactic pedagogics, fundamental pedagogics, vocational orientation pedagogics, and orthodidactics.

In addition to the **intradisciplinary** procedure, **interdisciplinary** work is involved by including non-pedagogical specialists on the discussion panel, such as a psychiatrist, a social worker, occupational therapist, endocrinologist, neurologist, ear, nose and



throat specialist, optometrist, in accordance with the child's particular needs.

However, the interdisciplinary approach to orthopedagogic evaluation deserves further elaboration, since current practice of exploring the restrained child often is still characterized by a "diversity of techniques, formulae, methods, aids, classifications, fixed-rules, and practical theories" (258, 5).

It cannot be denied that each of these specialists can contribute to understanding a unique child's problematic educative situation, and its exploration. Ter Horst also emphasizes that: "A multi-disciplinary approach not only recognizes that medical doctors, economists, psychologists, sociologists, human ecologists, theologian, and others can view the miseries of parents and children from their points of view, and fields of action, but also that their aims, analyses, and methods can be indispensable for effectively influencing the problematic educative situation" ((258, 28).

However, not one of these experts, in the first place, is attuned to the problematic **educative aspects** as such, and the child's educative situation can be generally and easily overlooked by them. However, that a so-called **gray** area often exists is equally true. In this regard, one thinks of poor hearing, poor vision, states of illness, etc. For example, it is irresponsible to attribute all anxiety to educative neglect. There is always the possibility of organic or other problems which might be relevant to a particular child inadequately actualizing his/her psychic life and, in this connection, the different authorities participate in the necessary exploratory work and assistance regarding these other problems.

One must guard against falling into the trap of **labeling** the child as a "social misfit", or an "emotionally disturbed" child without viewing him/her as being in an **educative situation** (see 231, 71). Even when he/she is weighed down by a state of illness, sensory, and motor loss, it must not be forgotten that he/she is not at the mercy of these factors, since he/she also is directed to actualizing his/her becoming adult under the guidance of adults, says Sonnekus (231, 72).

The roles of the specialized pedagogue and specialized non-pedagogue do not involve mutual assistance in the evaluation, but their assistance during the panel discussion is extremely important

when it can contribute to attaining deeper insights into the child's total situation.

Possible additional research can flow from aspects of the child's personal image, such as, e.g., an orthodidactic, vocational orientation, neurological, psychiatric investigation. Where such research is undertaken, the orthopedagogue has the task of interpreting the meaning of the results in terms of the child's concrete **orthopedagogic situation** because **accelerating** his/her **becoming adult** remains his/her point of departure (see 299, 73, 74).

Sonnekus (231, 72, 73) says that all findings by the subject specialists must be interpreted as contributions to or hindrances of the child's becoming adult. "Thus, on the one hand, the question is to what extent have the particular factors had a restraining effect on the child's becoming adult; i.e., to what extent are they co-determinants of the attained level of becoming adult, in relation to the attainable level. On the other hand, the question is providing help or therapy; to what extent can such subject specialists contribute to promoting the rectification, or elevation of the child's level of becoming adult?" He also indicates how these questions can be answered in terms of pedagogical criteria.

This interdisciplinary communication also makes increased dialogue possible with the non-pedagogical sciences. However, the orthopedagogue must always ask what the data from the non-pedagogical disciplines imply regarding helping the child in his/her concrete problematic educative situation, and he/she must integrate these data into his/her total orthopedagogic thought about the child (198, 69).

During the panel discussion, the orthopedagogue can offer **means of expression** which the other experts can integrate into their own ways of thinking (195, 69). Also decided during the panel discussion, is the nature and form of the pedotherapy, and other assistance which must be given.

Thus, the **orthopedagogue** must carry out the entire **orthopedagogic** activity, i.e., evaluating, and giving assistance, or therapy. As a specialized pedagogue, the orthopedagogue's training includes schooling in general pedagogics, particular schooling in

implementing exploratory media, and employing pedotherapeutic procedures.

So-called **child psychodiagnosis** then, indeed, has no right of existence alongside **orthopedagogic evaluation**, because they are not two alternative, exclusive, separate ways of research. Orthopedagogic evaluation refers not only to the pedagogical foundation of the activity as such, but also to the child-in-a-pedagogical-situation, and the role in it of his/her current being a person, and giver of meaning. After the panel discussion is ended, the orthopedagogic evaluator must integrate accessory insights into his/her **recommendations**.

### 3.2 Planning orthopedagogic assistance

In the light of such a report, the orthopedagogue now has a synoptic image of the unique child's problems of becoming adult, and the underlying educative impediments, and there can be responsible planning of how the child should be handled so that he/she will arrive at the level of becoming adult where he/she ought to be, in accord with his/her potentialities. This is an additional normative aspect of the orthopedagogic evaluation, i.e., not only is the nature of the child's situation looked at, but it is related to what **ought** to be.

By way of **recommendations**, it is indicated in the report what steps must be taken, e.g., that the child should receive pedotherapeutic support; that the essentials of the problematic educative event be discussed with the parents and/or teachers, with an emphasis on their role in **re-educating** the child; that perhaps further medical, neurological, psychiatric study should be done.

## 4. THE DISCUSSION WITH THE EDUCATORS

After each orthopedagogic evaluative study, the educators are fully informed about where matters have gone wrong, and are given practical advice on what actions should be taken.

A pedagogical advisory discussion, in which the orthopedagogue presents the parents with a previously compiled, standard list of points seldom has hope of success.

To the degree that the parents also attain insights, there is a consideration **with them** of how to change their educative interventions. Usually, the "solution to the problem" is obvious to the parents, as soon as they have gained insight. Such a conversation must be an **authentic** one, and not a **monologue** by the orthopedagogue.

It also is desirable to get the parents to talk. One can begin by asking them, once again to state the **problem** so that it can be put in true perspective for them. Often, the parents see nothing but the **symptoms** as the "problem", and don't see the **child** behind the "problem".

Next, the personal image of the child is elucidated for the parents in **understandable** language. One can begin with his/her ability, and the quality of its actualization. It should be explained to the parents why, e.g., he/she under actualizes his/her intelligence, and why his/her **talents** cannot be used as they ought to be. The role of the emotions, in this respect, must be sketched out, and the state of his/her emotional life explained.

From this emerges an explanation of the connection between educating and personal actualization, and the role played by the inadequately implemented pedagogical structures in the child's becoming adult, also is systematically explained.

After this discussion, its main aspects are incorporated into the report by writing down the most important recommendations made to the parents, and what they will **attempt** to do.

The following is an example of an orthopedagogic report.

## 5. AN EXAMPLE OF AN ORTHOPEDAGOGIC EVALUATIVE REPORT

### ORTHOPEDAGOGIC REPORT

#### 1. IDENTIFYING INFORMATION

**Name:** Andrew Peterson  
**Date of birth:** July 14, 1981  
**Date of study:** March 23, 1997  
**Age:** 15-years, 8-months

**Grade level:** 10th  
**Referred by:** School principal

## **2. STATEMENT OF THE PROBLEM**

Andrew's mother says that he is a very poor reader, and she attributes this to the fact that he never reads stories, or magazines. He shows no willingness to learn, his concentration is poor, and his school marks average 49 percent from the beginning of grade 7 to the end of grade 9. Allegedly, he could not have achieved this without the help of his mother.

She wants Andrew to be able to do his homework unaided, and generally be able to stand on his own feet. She views him as "lazybones" and sees the reason for this in her husband's more indulgent behavior toward him, compared with what he had displayed with their other children.

## **3. SUMMARIZED PERSONAL IMAGE**

### **3.1 Historicity**

Andrew has an older brother and sister who no longer live at home. His birth came after the death of a baby girl. His physical development progressed well, and he reached his milestones (walking, talking, etc.) at the normal ages. From the age of six months, his mother began working nights, and while at work, the father took care of the children.

Andrew's mother is Afrikaans speaking, and his father is English speaking, although Afrikaans is the language primarily spoken in the family. The mother maintains an unbending attitude, and believes this is the only way Andrew will learn to hold his own in a "hard-handed" world. Academic qualifications are important to her, and she is strongly attuned to norms, as is evident from the fact that she insists the family hold religious ceremonies (e.g., after dinner prayer, bible reading). She believes that only she can guarantee the upbringing of the children, and that her husband does not carry out his responsibilities. It seems that she is dissatisfied with certain trivialities, and interferes too much with Andrew, e.g., by arranging his karate classes and cricket training at the country club.

Religion is not important to the father, and since he feels the same opposition to academic training, he does not provide financial support for the children's further studies.

In elementary school, Andrew showed relatively good achievement. A drop was noticeable beginning with grade 7. His mother helps him daily with his studies, while his father writes his English compositions for him.

Although Andrew participates in extramural activities, he does not do so with enthusiasm. His circle of friends consists of children mostly younger than he is. His mother says he is "more himself" with them.

### **3.2 The actualization of the psychic life**

#### **3.2.1 Intellectual ability**

On the **New South African Individual Scale (NSAIS)** [like the WISC], he obtained a score of 96 on the **Full Scale**, a **Verbal** score of 93 and a **Non-Verbal** score of 101.

He achieved his best on the "Form Board" subtest, which indicates good perceptual-motor coordination.

"Absurdities" is the subtest on which he was weakest, which can indicate anxiety and emotional problems.

The quality of his intelligence appears to be average, but there are indications that it is inadequately implemented as a potentiality. The pathic-affective lived experiencing, which is present, as shown by his focus on the immediate, the concrete, and the simple, restrain his taking a gnostic-cognitive perspective.

#### **3.2.2 The structure of the psychic life**

##### **3.2.2.1 Intentionality**

Andrew is a pleasant, well-groomed boy. At first he appeared reserved, but over time, he found it easier to talk. His insight is directed to the content, and he shows a good venturing attitude. His intentionality is poorly directed. He maintains a careful, tense work attitude.

### **3.2.2.2 The gnostic-cognitive structure**

It appears that he takes a disordered gnostic-cognitive perspective which, on the one hand, is a result of an inadequate affective foundation and, on the other hand, of his restricted language. Because of the presence of affective restraints, "sensing", an emotional mode of learning, is labile, and his attending fluctuates. He can solve concrete problems. but finds it difficult to deal with abstractions on a gnostic-cognitive level.

### **3.2.2.3 The pathic-affective structure**

Andrew's pathic-affective lived experiencing displays lability, as shown in the fact that he manifests an uncertainty about life, with a strong search for security. A lived experiencing of being lost, and of inadequacy are present.

On the one hand, he is sensitive to criticism, and revolts against it and, on the other hand, he continually seeks approval.

He displays an infantile image, and a degree of dependence on his mother is present. However, there also are indications of aggression directed at her.

The sexual tensions which have come to the fore in the study can be viewed in the light of a puber-adolescent's changing body.

The demands of the formal school situation distress him, but he shows a willingness to direct more attention. He has a positive orientation to the future.

### **3.2.2.4 The normative-meaning giving structure**

It appears that Andrew displays an image of a docile child, and he does not fully identify with the normative. For example, he promptly keeps appointments with his parents (especially his mother) for fear of punishment, but he does not show the same sense of responsibility toward his schoolwork.

Because of his parents' inconsistent exercise of authority, and his mother's excessive meddling with him, there are signs that he is unwilling to accept her authority.

The parents subscribe to contradictory views on religious practices, and this leads to ambivalent feelings in him.

Andrew feels inferior and, as his mother says, he takes "no pride in his world".

### **Aspects of personal under actualization in terms of distorted meanings**

The attribution of distorted meanings, which are prominent in his life, are seen in the following:

- a) Represents his mother as **unapproachable**
- b) Experiences his mother as **demanding**
- c) Sees his mother as a **destructive critic**
- d) Experiences his mother as **too meddling**
- e) Represents his mother as **looking for achievement**
- f) Experiences his mother as someone with **unrealistic expectations of the future**
- g) He **rejects** his mother's **authority**
- h) Experiences his father as **disinterested**
- i) Sees his father as **not exerting effort**
- j) Experiences his father as **not setting clear norms**
- k) Views himself as **inferior**
- l) Experiences **norms as meaningless**, and shows a **docile attitude**
- m) Shows an attitude of **not making effort**, and **docility**.

#### **4. The Problematic Educative Event**

Because of fundamental differences in their approach to educating, his parents have lost trust in each other as educators. Andrew has become the target around which their disagreements turn.

His mother's dissatisfaction with him stems from the fact that she educates him according to her own wishes, and not according to his real potentialities.

Because he is not favorably compared with the other children, and because he does not satisfy her demands, she is not proud of him, and devalues him as a "lazy bone". She expects him to be



independent but doesn't give him the opportunity to be so. There is too little consideration for his wanting to be someone himself. She fixates her attention so much on trivial matters that she is cannot spontaneously associate with him, and she does not acknowledge him for his good qualities.

His mother has unrealistic future expectations for him. Academic qualifications are important to her, and she is humiliated because she thinks Andrew must follow a practical course after grade 12. In this respect, Andrew is ambivalent, since his father makes no such demands.

She shows little regard for Andrew's point of view, as is seen in the fact that **she** decides which extramural activities he is going to participate in, and where he can do so.

Even though she labels his father "a strict man", she expects him to be stricter with Andrew than he is. Therefore, she accuses him of being disinterested in educating the children, while she also says that her husband is appropriate for Andrew.

There is a favorable relationship of trust between father and son and, in doing things together, they are present **with** each other. However, the father's exercise of authority is through threats which are not carried out.

It appears that the parents do not stand together in their approach to educating Andrew, but are in opposition to each other. The mother's "taken for granted" assumption that Andrew, just like the other children, will further his studies on his own initiative, now is shocked because she has come to realize that perhaps he is not going to be able to do so. Now she describes him as a "lazy bone".

## **5. Recommendations**

- i) A penetrating pedagogical conversation will be had with the parents.
- ii) A report will be forwarded to the school principal.

## **6. Report of the Conversation with the Parents**

In conversing with the parents, Andrew's potentialities are pointed out, as well as what can be expected of him.

Aspects (of the educative situation) which have a restraining influence on his actualizing his potentialities are pointed out. The essentials of educating are elucidated for the parents, and it is suggested that:

- a) his mother stand back more in her intervening with Andrew, and give him the opportunity to be independent;
- b) the father stand more in the foreground as an identification figure, and that he present a clear future-image for his son;
- c) the parents must support and understand each other in their actions with and their expectations of their son.

## **7. Planning**

### **7.1 Pedotherapy**

In some sessions of pedotherapeutic conversation, Andrew will be helped in giving a different meaning to:

- a) his relationship with his mother
- b) his relationship with his father
- c) his self-image
- d) his identification with norms
- e) his being responsible
- f) his deciding and acting independently.

### **7.2 Parental guidance**

The parents must be guided regarding the acceptance of their (educative) task by implementing the fundamental pedagogical structures.