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Comparing Maltese School-based Counselling with Nine other Countries

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Abstract

This research identifies activities that Maltese School-based Counsellors (MSC) engage in and perceived as appropriate for their role. The article also compared Maltese school-based counselling with counselling in other countries. The results reflect both (a) the influence of the American and British models of counselling and (b) the unique cultural context. MSCs evidenced congruence with regard to perceptions of appropriateness and actual activities carried out. However some activities, which they considered as appropriate, were not being carrying out. This may mean either that counsellors' workloads were untenable, or that the job descriptions, remits and boundaries of the psychosocial team in the Maltese model may be limiting practice. Recommendations include reflecting on the Maltese psychosocial system so that students can best benefit from all the teams' professionals, at the same time, allow for flexibility and trans-disciplinary teamwork to reduce fragmentation (e.g., Klein, 2008; Liao, 2016; Vyt, 2015).

Keywords: counselling in schools, counselling activities, comparative study, factor analysis, Malta, advocacy

The present research addressed activities Maltese School-based Counsellors (MSC) engage in and perceived as appropriate for their professional role. The study forms part of an international research on school-based counselling (SbC). It also compares Maltese SbC with nine other countries which participated in the research project. To our knowledge and up to date of publication, such research has never been carried out at a national Maltese level and such international comparisons have never been made.

Rationale, Aim and Motivation of the Research

Given the complexity regarding definition, training, and job description of SbC in different countries, the International Society for Policy Research and Evaluation in School-Based Counseling (ISPRESC) perceived a need to map the role and activities of SbC across the world. ISPRESC chair. Dr. John Carey organized an international study of school-based counselors' activities using an instrument developed specifically for this purpose (Fan et al., 2019b). Malta was one of ten countries which agreed to participate. This quantitative research presents MSCs' views of 40 activities and priorities that have been grouped into five dimensions

(Fan et al., 2019b). As reported in the lead article of this special issue, Fan et al. (2019b) carried out a factor analysis of the research tool employed and noted that

> [w]hile clearly not exhaustive of the more than 90 countries where school counselling is currently practiced (Harris, 2013), the 26 national contexts from which item content was drawn ensure that ISSCA [International Survey of School Counselors' Activities] has encoded into it a wide range of perspectives on school counselor role and activities. (p. 344)

This study presents the Maltese results and compares Maltese activities and roles with these ten countries. In order to understand the data of this study, it is important that one understands the Maltese context and the development of SbC in Malta.

Need for School-based Counselling

The international literature reveals an increased demand for SbC (e.g., Briggs & Kelso-Wright, 2012; Curtis et al., 2004; Moyer, 2011). According to the Maltese 1988 Education Act, schools must "cater for the full development of the whole personality" (Government of Malta, p. 4). Sultana (1992) noted that this act echoed the trend of the times - schools should support careers, personal and social skills and other competencies. As happened in Europe and America, the growth of industrialization and urbanization augmented the need for and led to a process where school counselling evolved in response to national needs (e.g., Bauman, 2008; Galea, 2012; Sultana, 1997).

Anderson (2007) noted that, although all European Union (EU) member states offer some form of counselling and guidance, most EU countries seem to follow the American model of SbC (American School-based Counselors Association [ASCA], 2012, 2016) and focus on choice of studies, careers and guidance for further education and employment. Further, from an infrastructure perceptive, SbC services within the EU are either:

> highly centralised and run as organisational entities placed outside the institutions, [or] embedded in the individual institution and taken care of by professional administrative staff or teachers, performing this task as part of their responsibilities in line with tutorial work and teaching specific topics. (Anderson, 2007, p. 350)

Not all European countries have clear and established boundaries between counselling and life coaching (Reid, 2015). Consequently, this may lead to unrealistic expectations and outcomes for clients and hence

international clear distinction among professions is important in the best interest clients and appropriate referrals.

Setting the Context

The Mediterranean Maltese archipelago lies 80 km south of Sicily, 284 km east of Tunisia and 333 km north of Libya. With an area of 316 km and a population of just over 450,000 living on the two main islands Malta and Gozo, this southern European Union (EU) island is one of the world's smallest and most densely populated countries. The mother tongue of most (90%) is Maltese, whilst the rest are either totally English speaking, bi-lingual or use Maltese and English interchangeably (Borg, Mifsud, & Schiriha, 1996; Camilleri, 1996). Malta was under British rule from 1800, became independent in 1964, and a republic in 1974. Its justice system, educational system and the profession of Counselling are based on the British model (e.g., Cauchi, Falzon, Micallef, & Sammut, 2017; Farrugia, 1992; Sultana, 2006). Further, these last five years have seen a significant increase of migrants from African countries, Northern European Countries and lately from Sicily (Eurostat, 2020).

The Maltese educational system. Compulsory education is up to 16 years and is carried out in state, church or private (independent) schools. Most Maltese children attend state schools, which are geographically divided into ten colleges. These colleges were set up in 2006 to create decentralization and more autonomy in school leadership (Cutajar, 2007). Galea (2005) explained that these colleges represented "the formation of networks, driven by collaborative and competitive endeavor, [which] can play a vital role in creating a first-class system of education and of schools" (p. xi). Each college has around 4000 students and its own psychosocial team, which includes career advisors, counsellors, guidance teachers (GTs), psychologists, psychotherapists, social workers, and youth workers. Ten colleges share 62 state primary schools (ages 4-11), and one middle (ages 11-13) and one secondary school (ages 13-16) each (Ministry for Education and Employment [MEDE], 2020). A centralized pastoral team supports 33 Church schools and the 13 private (independent) primary and secondary schools would have their own pastoral teams.

A unique feature of the Maltese educational system is that it has Personal and Social Development (PSD) as a statutory subject and PSD teachers facilitate content addressing emotional literacy, inter/intrapersonal skills and career choices in a classroom setting (Falzon & Muscat, 2009). Lately, its syllabus increased its career-choice education element, such that the subject is presently called Personal, Social and Career Development ([PSCD]; Cauchi et al., 2017). GTs, as assigned by the principal counsellor in each college, utilise helping skills. Until academic year, 2016-2017, there was around one guidance teacher for every 200 students. However, the ratio is now less. Due to shortage of teachers, for the last two years, there were no new calls for GTs. Further GTs are being given heavier teaching load to the detriment of sessions they can allot for guidance. This is then affecting students' services.

The British legacy. In 1798, the French succeeded to take over Malta from the Order of St. John. Grandmaster Ferdinand von Hompesch had to leave the island with the rest of the order. The Maltese were not happy under French rule and sought help from the British, who assisted the Maltese to oust the French. The 1802 Treaty of Amiens (Grainger, 2004) established that Malta would be passed back to the Order of St. John, but the Maltese were not keen to return to their former rulers and requested to remain under British protection, the latter at first uncertain as to whether they should retain the territory (e.g., Frendo, 1998; Hardman, 1909; Hough & Davis, 2009).

Malta was part of the British Empire for over 150 years (1800-1964). It is therefore hardly surprising that Maltese systems of commerce, finance, laws, road construction, driving, education, names of businesses, and beer measurement and consumption embrace British ways and culture. Indeed, the British Empire also influenced the Maltese Mediterranean diet, such as the introduction of roast beef and potatoes in the late 19th century (Billiard, 2010). Contemporary Maltese daily living has a particular profile that has been termed as "Mediterranean Britishness" (Malta Tourism Authority, 2020, para.7). Not only are both Maltese and English our official languages, but most Maltese use English vocabulary as they are talking or switch from "Malti" to English in mid-sentence. Malta, as an ex-British colony (1800-1964), developed its education and other infrastructures such as law and commerce, under British rule and the British legacy is still reflected in Modern Malta infrastructure

Development of Maltese School-based Counselling

The uniqueness of this small-island-community archipelago affected how school counselling developed. Its size makes it easier for implementations to be taken on board by all. Boissevain (1974) based his friends-of-friends-networks theory using Malta as a case study as "everyone is, at most, three steps away from the President or the Prime Minister, [it] tends to be much easier for a good idea to spread and be implemented" (Cauchi et al., 2017, p. 365). It is therefore possible for young professional counsellors to know the whole network of counsellors within a few months. However, such close proximity includes two major limitations: high density and high complexity of links (Boissevain, 1974) "where multiple roles are played out and links are entangled beyond kinship" (Cauchi et al., 2017. p. 366).

A Historical bird's eye view. Mifsud (2004) reported that, up to 1968, counselling was only practiced within the Catholic Church, the dominant Maltese religion (Abela, 2001); and focused on spiritual direction and pastoral care for families and couples (De Giovanni, 1997). In 1959, the Catholic Church established the Cana Movement to help couples prepare for Catholic marriage. It quickly extended

its scope and started supporting married couples in difficulty. During this period, counselling targeted spiritual direction and pastoral care within marital relationships (De Giovanni, 1997).

With regard to counselling in schools, specifically vocational guidance and counselling, the need was perceived very early on. The 1918-1930 Superintendent of Immigration, Casolani, complained that the educational system in Malta produced only "clerks to work with the British forces and did not take into consideration the emerging needs of the local economy or the economy of the countries that the Maltese immigrants were migrating to" (as cited in Sultana, 1992, pp. 130-131). De Giovanni (1987, 1997) and Sultana (1992) interpreted this report as the first ever document noting the need for guidance towards employment and the job market. Economic development impinged on the way guidance, particularly career guidance, developed locally.

Following a recommendation by a UNESCO consultant (Lewis, 1967), the Guidance and Counselling Unit (GCU) within the Education Department was launched in 1968 (Sultana, 1998) and SbC was introduced in the seventies by two teachers. Teachers were sent to train as school-counsellors in Britain, Canada, New Zealand, and America. Between 1974 and 1975 The Maltese Guidance and Counselling Services (GCS) were formally set up directed by an Education Officer (Guidance and Counselling), namely Mr. Joseph Sammut, who passed away in 2019. By 1984, the GCS had its own premises - the GCU - in Floriana, a suburb of the capital city Valletta (Sammut, 1997; Sammut, undated). These services targeted the secondary (ages 11-16) and post-secondary (ages 16-18) sectors. For the first time, boundaries between two similar yet different professions were echoed in government posts (Sammut, undated). Notwithstanding, Galea (2012) asserted that "the confusion of boundaries continued to predominate the local scene when the first Diploma course in Educational Guidance and Counselling was offered by the University of Malta (UM) in 1985" (p. 30). Sammut (2016) explained this is also due to the similarity and overlap of roles and responsibilities between guidance and counselling since "counselling skills underpin good guidance practice" (Watts & Kidd, 2000, p. 493). This is elaborated on below.

Professional training. During the late seventies and eighties of last century, qualified teachers were sent to Britain to read counselling courses. Needs for more qualified personnel was urgent and the UM organised the first Diploma Course in Educational Guidance and Counselling in 1985 (De Giovanni, 1997). During the nineties, the UM offered three post-graduate diplomas; and in-service training and continued professional development (CPD) started to be provided, (De Giovanni, 1997). In January 2002, the Malta Association for the Counselling Profession (MACP) was founded and organised its first annual CPD in September 2004 (MACP, 2020). The UM then launched two master's programmes - a part-time Master in Counselling and a full time Master of Arts in Transcultural Counselling in 2008 and 2010 respectively, whilst MACP was lobbying for the Counselling Profession Act (CPA). This 2015 law (CPA, 2015) states that counselling-supervisors need to have a 30-ECTS (European Credit Transfer and Accumulation System) post-master's specialisation course. The first cohort of ten such professionals graduated in December 2018.

The UM's two master's courses neither specialize in SbC nor include any study units in this area. Further, candidates do not have to be teachers to read these two masters. Cauchi et al. (2017) reflected that:

Our experience also indicates that a specialisation in school counselling would be very beneficial for professionals who aspire to work in this field. The Department of Counselling indicates that it intends to design and run post-master's certificates (30 European Credit Transfer System – ECTS) in specialisation areas, as also required by the CPA. (p. 368).

Maltese SbC thus has a shorter history than other countries. Although emerging from the British model (Cauchi et al., 2017), the Maltese model is evolving independently. The diverse contextual needs are forging Maltese SbC's own identity within the local psycho-social team in schools.

Further, MACP opted to warrant the counselling profession and worked for it to become a law (CPA, 2015), as is the case of other helping professionals in Malta. Alternatively, counselling in the United Kingdom (UK) is not under statutory regulation. Dryden, Mearns, and Thorne (2000) noted that in the UK "the most influential agency for the professionalisation of counselling today is undoubtedly the British Association for Counselling [and psycho-therapy] (BAC[P]). The work done by the Association…has resulted in a burgeoning professionalisation with respect to training, supervision, accreditation/registration and ethics/complaints" (p.471). The "BACP Register was the first psychological therapists' register to be accredited by the Professional Standards Authority for Health and Social Care (2020). It is governed by the Public Protection Committee and supported by a team of specialist staff" (BACP, 2020, para. 2-3).

The Anglo-Maltese Model

The British model influenced the birth and model of Maltese SbC (e.g., Cauchi et al., 2017; Galea, 2012; Micallef, 2016). The model is based on Carl Rogers' 1940s emerging school of thought where clients' empowerment on personal needs and destiny was central (Rogers, 1989; Zunker, 2008). Thus, Maltese SbC embraces a person-centred, humanistic approach (e.g., Egan, 2013; Kirschenbaum & Jourdan, 2005; Rogers, 1989) where MSCs mostly carry out individual sessions and advocacy during case conferences and meetings.

Sammut (2016) noted that "[t]he way counselling evolved had an effect on the expectations of the roles that different stakeholders have about school counsellors" (p. 26). Sultana (1998) pointed out that teachers, parents and

administrators may have particular and incorrect expectations of counsellors' role in schools. Such misperceptions lead stake-holders to regard counsellors as inefficient and reveal a need for more awareness about Maltese SbC services and MSCs.

The development of counselling yielded different perceptions of MSCs. Teachers, parents and administrators may have had particular and inaccurate perceptions of this role in schools. These divergences could be interpreted as a limitation and lack of efficacy. Further, they emphasize the need for more awareness about MSCs and their service (e.g., Cuomo, 2014; Sammut, 2016; Sultana, 1998).

Whilst the inclusion of a number of different professionals in psychosocial teams is positive and reflects the importance given to mental wellbeing and not just academic outcomes, boundaries and role-descriptions may become blurred for both professionals and service-users. This was also evident amongst researchers and professionals when the roles were being defined. The Maltese model of counselling is particular as it embraces the related work of other professionals, mostly GTs and career advisors, and thus includes an intricate system of referrals and boundaries, which can have both benefits and limitations, as also evidenced by the data of this research.

Guidance teachers. Considerable similarities and overlap between guidance and counselling could be considered positive as it lends to professionals understanding each other and working together, particularly since helping skills underpin good practice of both professionals (Watts & Kidd, 2000). On the other hand, similarities and overlap can lead to challenges with regard to boundaries and referrals. Hui's (2002) differentiates between the two. He describes guidance as addressing the development of the whole person, while counselling helps students cope with distress and confusion. One can then infer that counselling embraces a more therapeutic and personalized intervention, whereas guidance includes a larger range of activities (Camilleri, 2005; Herr, Cramer, & Niles, 2004). In the Career Guidance Policy for Schools, Debono, Camilleri, Galea, and Grabina (2007) interpreted Hui's (2002) description of these two terms for the local situation and job profiles: (a) guidance - helping students in the development of the whole person; (b) counselling-helping students cope with personal challenges and ambiguity.

This description does not reflect the local evolving counselling scenario. Maltese GTs usually address cases which can be tackled with basic helping skills. These include relationship issues between students or students and teachers, and other relatively "easy" cases, where these skills are effective. The praxis is to then refer complex cases to counsellors or relevant helping professionals. One can state that GTs are at the forefront and are the main referral system for MSCs. Furthermore, GTs have now evolved into two streams - to aid MSCs and career advisors. GTs either focus on helping skills or career guidance skills. This is an evolving field which is becoming more complex due to

teacher shortage which necessitates increased teaching loads for GTs, as detailed above.

Presently, the roles of GTs and MSCs roles continue to overlap, even though it is clear to all professionals that counselling reflects a more therapeutic and personalized intervention than guidance. The boundaries have become murkier, since some guidance teachers are also fully trained and warranted counsellors who chose not to apply for counselling posts due to work conditions. This also highlights the difference in training and the need for awareness, shared knowledge regarding boundaries and remits with professionals and service users.

For example, in 1998, Sultana concluded that Maltese "guidance teachers will be less called upon to guide students in the choice of particular subject clusters and groupings, given that flexible futures in a high-ability society demand that specialization comes later in one's educational career" (p. 12). He acknowledged that their role would be more relevant: "to improve interpersonal and intrapersonal skills, and so on, taking increasing responsibility for the personal and social education element in and across the curriculum" (p. 12). This is, in effect, the present role description of guidance teachers (Ministry of Education, Youth and Employment [MEYE], 2007), who take on lighter cases as referred by the school's principal MSCs and, lately, by career advisors, as explained above.

Locally, guidance teachers need five years' teaching experience to be able to apply and be interviewed for this post. Their job would then include teaching their subject and guidance sessions. They would also get in-house training on helping skills. Sultana (1998) noted that Maltese "guidance teachers will be less called upon to guide students in the choice of particular subject clusters and groupings, given that flexible futures in a high-ability society demand that specialization comes later in one's educational career" (p. 12). Fourteen of these state school guidance teachers are also warranted counsellors who chose not to apply for counselling posts.

Career advisors. The Debono et al. (2007) policy report shaped the present psycho-social system which includes career advisors. This shift allowed MSCs to focus on social and emotional aspects, as issues on academic development and careers, were supported and guided by career advisors and guidance teachers (Micallef, 2016; Sammut, 2016). Sammut (2016) noted that these changes had a direct impact on roles and perceptions, as "[t]hese changes in the counselling service had a direct impact on counsellors' role in school and how Maltese teachers perceive counsellors' role" (Cauchi et al., 2017, p. 368). This may also be due to the case typology Malta is experiencing (England & Buttigieg, 2019; Office of the Deputy Prime Minister and Minister for Health, 2019). For the last six or seven years, there has been a significant increase of mental health issues in pre- and early adolescence and even before. MSC are therefore being constantly challenged not only with very heavy case-loads but also very intense and demanding cases which may lead to a need to readdress the Master's training

programme and organized relevant Continuous Professional Development. Indeed, a communication with MACP president Mr Ryan Portelli (February 19th, 2019) confirms that the association is already addressing this need.

Originally, the role of career advisors was to be teachers and who retained teaching hours and operated from the central office. School-based trainee-career advisors with administration hours first started working in state schools in September 2009. This coincided with the recruitment of other psycho-social professionals, including youth workers, trainee-counsellors and psychologist, with the same working conditioning. Career Advisors are accountable to their College Career Advisor, the Education Psycho-Social Service Manager of Student Services and the Director Student Services. These professionals do not need to be teachers and are trained at post-graduate level. The MEDE specifies the responsibilities of this profession:

- managing career guidance services at primary, secondary schools and post-secondary;
- designing careers programme;
- keeping up to date with labour market information;
- promoting career guidance services in the school context;
- monitoring trainee career advisors and guidance teachers;
- establishing strong collaborative partnerships and working in close collaboration with relevant professionals in school and other stakeholders;
- ensuring that records and logging systems are well kept while respecting confidentiality;
- responsible for annual reports. (MEDE, 2015, p.2-3)

New Posts and Profiles

By 2012, qualified counsellors were recruited with a shift in nomenclature - from "school counsellors" to "counsellors working in schools" - and training background. They did not need to be teachers. This was also the year of graduation for the first cohort of counsellors with master's training. Post 2012, counselling posts required that MSCs work administrative (up to 17:00) rather than teachers' contact hours (up to 14:30). Further, MSCs also have to be on school premises during school holidays, using their leave allowance throughout the calendar year. This discouraged teachers with counselling training to apply for the post and these remained guidance teachers. We consider the 14 qualified counsellors who chose to remain in their teaching job as a loss of human resources. These 14 professionals informally use counselling skills during their sessions with pupils and liaise with counsellors and principals with regard to cases and issues arising. GTs, irrespective of their qualification, fall within the remit and responsibility of the Principal Counsellor who needs to assure that the distribution of cases is processed according to competence which includes, but is not exclusive of, qualifications and training. Notwithstanding, we are still concerned, as this means that some students are seen by guidance teachers with counselling skills and others by GTs who are not qualified as counsellors (Cauchi et al., 2017).

Maltese School-based Counsellors' Complement

The 1994 Guidance and Counselling Services (GCS) report stated that its services included "nine counsellors [who were all trained teachers], 103 guidance teachers and 113 personal and social education teachers with guidance-related functions serving 48 state secondary schools and one post-secondary institution, and a 2% share of the total Education Budget" (GCS report, 1994, p. 2). Cauchi et al. (2017) reflected that "the birth and growth of school counselling falls within these sociological and anthropological constructs. One could conclude that, in Malta, school counselling was actually responsible for the growth of the counselling profession" (p. 366).

The 1994 Reorganization Agreement extended the school counselling services to include primary school students, such that counselling was now offered to all students in compulsory education (Guidance & Counselling Services, 2016). In 1996, SbC services started in church schools with three counsellors. In 2010, Falzon and Camilleri (2010) reported that, by 2009, there were 34 professionals working as school counsellors in all schools: 15 worked in state schools, 11 in Church schools and 8 in private schools. However, only 18 were trained as school counsellors, the rest were either psychologists or psychotherapists. By 2015, the Maltese State educational system had a complement of 13 counsellors and 13 trainee counsellors, whilst the Church hosted a team of nine counsellors, each of whom took care of four to five church schools. Private schools continued to have one-to two counsellors in their primary to secondary sectors.

By 2019 the church school team had increased to 14 and then decreased to 12 up to publication of this paper. The Church is aware that this complement is not enough to cope with the demands of its 33 church schools. MSCs working in state schools mushroomed to 49 in 2017: 11 principal counsellors who headed counselling services of state college and 38 counsellors, including trainees. This increase was mostly due to the two UM master's courses which led to the state being able to issue calls for applications (Cauchi et al., 2017).

Unfortunately, during 2018, five MSCs resigned from state schools. During the 2019-2020 academic year and up to date of publication of this paper, this complement had further decreased to 23 counsellors and trainee counsellors, two of whom are a psychotherapist and family therapist but working within the nomenclature of counsellors, which is technically against the present law (CPA, 2015). Further one MSC works at post-secondary level. A call for counsellors was also issued, but nobody applied.

Work conditions. This decrease is most likely due to the heavy caseload and to conditions of work in schools. Further, the fact that counselling posts with better conditions of work, such as supervision offered at the

workplace, are opening in other sectors of society is a further enticement. Other reasons noted during informal conversations with MSCs and a communication with Mr Ryan Portelli, MACP president (February 19th, 2019), include challenges with regard to school cultures and contexts that counsellors with no-teaching background were encountering, as well as burn-out, lack of support, no provision for supervision, and limitation of progression in career leading to less pay in the long run, due to change of nomenclature. We therefore consider the present situation for MSCs in state schools as dire and changes in work conditions need to be very urgently addressed (Micallef, 2016) in order to hopefully increase the complement. In July 2019, this was considered a dispute and school counsellors were given specific work directives by their unions (Malta Union of Teachers, 2019).

Maltese School Counsellors' Duties and Activities

MSCs' job description considers the profile of the psychosocial team and other related professionals both at the prevention (PSD teachers) and intervention (e.g., GTs, careers advisors, psycho-therapists, youth workers) level. One then also needs to distinguish between principal (pMSC), Senior (sMSC) and trainee (tMSC) MSCs. MSCs' activities (MEDE, 2017) include

- managing the counselling services in the primary, secondary and post-secondary sectors (pMSCs);
- carrying out counselling sessions on an individual or group level as part of an integrated preventive (pMSC) and intervention service (pMSC, sMSC, tMSC);
- ensuring that the counselling services are well promoted in the school context (pMSC);
- monitoring GTs, sMSC and tMSC (pMSC);
- working in close collaboration with all professionals working in schools and with other stakeholders to ensure maximum utilisation of resources for the benefit of the students (pMSC, sMSC, tMSC);
- keep students' records and logging systems updated (pMSC, sMSC, tMSC) and ensuring that such records and logging systems are well kept by the GTs, sMSCs andtMSCs regarding all interventions carried out with each student while ensuring confidentiality at all times in accordance with existing legal provisions;
- compiling of annual reports (pMSC);
- collecting and analysing information to assist in professionals' meetings or case conferences (pMSC, sMSC, tMSC);
- meeting Senior Management Teams, together with GTs and other members of schools' multi-disciplinary teams, for case reviews and other related work to the counselling services;
- adopting preventive measures that empower students to avoid problems as much as possible (pMSC);

- providing a continuum of preventative, developmental, "remedial, and intervention services, planning and organising programmes, and facilitating referral to resources and services at both community and national levels (pMSC; sSMC; tMSC);
- being accountable to the pMSC (tMSCs, sMSCs);
- being accountable to the Counselling Education Officer, the Education Psycho-Social Service Manager and the Director of the Student Services Department for counselling and quality of work standards (pMSC, tMSCs, sMSCs);
- being accountable to the college principal for administrative issues (pMSC, tMSCs, sMSCs) (MEDE, 2017, p.2-3).

On the one hand, this list of duties and activities seems quite daunting when taking the context described. On the other hand, the different remits for accountability, also factoring in that GTs are accountable to their schools, present a rather complex top-heavy system. Further, the present (up to date of publication) lack of MSCs makes it even more difficult for each professional to carry out their work properly, focus on each client, cope with administration, as well as leave space for the self-maintenance required to prevent burnout. Further, we have concerns that MEDE still follows a multi-instead of a transdisciplinary team model, which is more student-centered. Trans disciplinary teamwork involves professionals working in concert, thus avoiding fragmentation of support and repetition of experiences (e.g., Klein, 2008; Liao, 2016; Vyt, 2015).

Method

This study was part of an international quantitative research across ten countries. The study addressed activities school-based counsellors are involved in. The tool used was the ISSCA survey which includes 42 activities and priorities (Fan et al., 2019b). Questionnaire items were grouped into five dimensions using factor analysis (Carey, Fan, He, and Ying, 2020).

Context

School-based counsellors experience different realities across these ten countries. For example, our collaboration revealed that in Nigeria and China administrative activities are part of the job description of school-based counsellors. On the other hand, in the United States, Malta, and Turkey these activities are not included in the job description and, further, are considered inappropriate for this role. This is of particular relevance in Malta due to dual relationships and conflicting roles and boundaries (Boissevain, 1974; Syme, 2003). The international data yielded significant cross-national difference on this issue (Carey et al., 2020).

Data Collection

The on-line ISSCA was distributed amongst local school-based counsellors. This survey measures MSCs' perceptions of appropriateness and implementation of activities. A detailed description of this instrument has already been published (Fan et al., 2019a). The content of the survey was informed by the literature (e.g., American School Counselor Association [ASCA], 2005, 2012; Bardhoshi & Duncan, 2009; Carey & Martin, 2017). The international survey included 42 items. The Maltese survey did not include the 41st and 42nd item which referred to college education as these are locally addressed by Maltese Career advisors. At the time, these were considered outside the remit of MSCs. In hindsight, these items should have been retained as they could have yielded data on perception of appropriateness. Responses included the use of a 4-point Likert scale ranging from "very inappropriate" to "very appropriate", Yes-No responses, as well as space to write comments. We, like other researchers involved in the project, then ensured that vocabulary and language of the ISSCA items were culturally and linguistically appropriate for MSCs through an iterative consultation process with the survey developers.

Participants and Response Rate

Participants had to be MSCs (pMSC, sMSC, tMSC). At the time of data collection, there were 49 counsellors across all schools in Malta. Ten MSC were on leave of absence, maternal leave or had just retired. Out of 49, 37 participated, yielding a response rate of 76%. The response rate was as expected from surveys involving such populations (Limberg, Lambie, & Robinson, 2016)

Procedures

After UM ethical clearance for the study had been granted, respondents could be approached. MACP, the MEDE Students' Services' Manager, the Church Secretariat and Heads of Independent schools acted as gatekeepers. These were sent a recruitment letter with relevant information for participation. The survey was built in Google Form and included a fully-informed consent page, a demographic section and the questionnaire items. Demographic data included age, gender, years of experience, profile of training, school level and professional identity.

Measure

The International Survey comprised items that had either a dichotomous (nominal) scale or a Likert (ordinal) scale. To validate the tool, Carey et al. (2020) used factor analysis to identify latent structures within the data, namely the Bartlett (1937) Factor Scores (BART). This analysis grouped questionnaire items into five factors: namely counselling services, advocacy and systemic improvement, prevention programmes, administrator role, and educational and career planning (Carey et al., 2020).

Data Analysis

Data were analyzed using the Statistical Package for the Social Sciences (Version 24). Means and standard deviations were computed for items having an ordinal scale, whilst frequency and percentages were computed for data having a nominal scale. Moreover, several statistical tests were carried out to investigate the relationship between variables. The Chi-squared test was used to test for association between two categorical variables. The independent-sample T-test was used to compare mean rating scores measuring level of appropriateness of counselling activities between two independent groups, clustered by activity implementation (Yes, No). For each test, a 0.05 level of significance was adopted.

The local context. When interpreting the results within the local state-school counselling scenario, two realities need to be taken into consideration. All colleges have their own culture and their own unique composition and dynamic. No one psychosocial team is like the next, both with regard to numbers and profile of professionals. For example, Saint Theresa College has two Principal counsellors, a senior counsellor, a trainee counsellor, two educational psychologists, two social workers, one social support worker, two career advisors, a part-time psychotherapist, two early intervention specialists, and no youth worker or prefect of discipline. On the other hand, Maria Regina College, an even larger college, had its team depleted to only one Principal counsellor, a part time social worker, one trainee career advisor and a prefect of discipline, due to resignations. Obviously, the different team compositions would have an adverse effect on the work of the counsellor. Whilst most of the depletions occurred after collection of data, there were always discrepancies in team compositions and no one team was ever alike. Further, the differences in duties of the three categories of state school MSCs would also impact on the results and their interpretation. For example, sMSCs and tMSCs have the sole responsibility of their own caseload, whilst the pMSCs have a middle management role and spend a good part of their operational time ensuring the smooth running of the service.

As noted in the job description above, pMSCs also compile statistics, supervise guidance teachers, co-ordinate with the diverse school teams, attend and organise case conferences, organise transition activities and parenting skills sessions or support groups, and liaise with the rest of the psychosocial team amongst other work. These different roles would definitely impact on what counsellors consider to be appropriate or not in their role. The number of counsellors within the team would also determine the case load and whether the counsellor would be intervening on crises or whether there is enough human resource power to conduct sessions whilst also attending to crises and to other responsibilities which traditionally fall within the job descriptions of counsellors working within a school system.

Not including such demographic data in the questionnaire was therefore a limitation.

Results

We first present and discuss the local results compared with the nine countries that participated in the project; and then present and discuss salient results of the Maltese survey.

Comparing Maltese School-based Counselling Activities with the Nine Nations

The International Survey carried out a factor analysis (Carey et al., 2020) and elicited five dimensions of Counselling using the BARTS analysis (Bartlett, 1937). Tables 1 and 2 present this data.

Dimension 1- counselling services. All mean scores for Counselling services were > 3.00. This reflects the importance these ten countries give to one-to-one and group counselling. The means of eight countries ranged between to 3.4 to 3.7, whilst Venezuela and Costa Rica ranked the lowest ($M = 3.1$). MSCs scored this factor between appropriate and very appropriate ($M = 3.4$). However, one needs to consider that this factor included both individual and group counselling. We infer that the latter activity lowered the Maltese mean, since MSCs' workload bears heavily on one-to-one work and leaves little time for group counselling interventions. Malta scored the same as Turkey and closest to the United States and Nigeria ($M = 3.5$). The BARTs analysis places South Korea, Kenya, India, and Nigeria with a more central role to counselling services than the United States, Malta, and Turkey, with Costa Rica, Venezuela, and China yielding the lowest scores. Carey et al. (2020) attribute this to more emphasis on professional practice. Additionally, some countries may have more restricted views of a counsellor's role in schools, whilst others may be in dire need for more staff and therefore counsellors end up doing work other than individual counselling to reach more students.

Dimension 2 - Advocacy and systemic improvement. The United States ($M = 3.5$), India ($M = 3.4$), and Malta ($M = 3.3$) scored the highest and China ($M = 3.0$) and Nigeria ($M = 2.9$) the lowest for these activities. The means here are not as homogeneous as in Dimension 1. Malta ($\underline{M} = 3.3$) and the United States ($M = 3.5$) scored the highest followed by Costa Rica and Turkey ($M = 3.2$). Respondents from Nigeria regarded this dimension as least appropriate ($M = 2.9$). This result indicates that MSCs are very aware that counselling is not a linear activity and that advocating for the rights of students and tackling issues within the system are part and parcel of a successful counselling intervention. When considering this result within the local scenario, where human resources are very limited, it is clear that MSCs would feel frustrated and limited in their interventions and that they would be split between the perceived appropriateness of their role and how they can realistically achieve it.

Dimension 3 - prevention programmes. With regard to prevention programmes, means of the countries ranged between 3.4 (India, Nigeria, Turkey, and the United States) and 2.7 (Costa Rica). MSCs agreed with this dimension ($M = 3.0$) to a lesser extent than other counselling services. One notes that this may be due to PSD teachers who deal with prevention programmes through the PSCD syllabus. This could also be due to GTs who also work on the prevention aspect - for example anti-bullying prevention campaigns, child protection and substance misuse prevention campaigns. In the local context, this dimension falls under the responsibility of the pMSCs and is specifically listed in the job description. The fact that there was no distinction between the different categories of MSCs in the collection of data would surely impact the result of this dimension. Additionally, crises and intervention always take precedence over prevention when human resources are limited.

Dimension 4 – administration. All countries except Nigeria agreed that administration was not an appropriate activity. Malta ($M = 1.8$), Costa Rica ($M = 1.9$) and the United States ($M = 2.0$) were the three countries who mostly regarded this activity as inappropriate. This dimension also included discipline.

Dimension 5 - education and career planning. This last dimension presents a sharp difference between Malta and the other nine countries. Malta is the only country where respondents regarded this activity as inappropriate ($M = 2.0$). The other nine countries yielded a mean that was >3.0, indicating that school counsellors from the other nine countries considered this as an appropriate activity. This concurs with the Maltese Educational system that uses Career Advisors and GTs to address Education and Career plans. Some MSCs perceive these activities as falling within their remit. One can infer that MSCs may regard education and career planning are part and parcel of identity development and formation and therefore necessarily tackled during counselling sessions. Other MSCs may have inferred that, since the main focus of counselling is not career development and the education process per se, then they felt that this was not within their realm. The result is therefore open to interpretation and requires further in-depth research.

Educational and career planning scored high in all countries except for Malta. It seems that most countries have adopted the American model (ASCA, 2005, 2012) which includes academic and career counselling, and prevention, and intervention programs, whilst the Maltese model is influenced by the British model. This is interesting as Malta is not the only one of these ten countries which was a British colony. India was a British colony (c. 1800-1947) as were Nigeria (c.1880s-1960) and Kenya (1920-1963).

It seems that Malta has a unique profile where issues related to career and education are dealt with by Maltese Career advisors and/or GTs respectively. Training courses at the University of Malta have also contributed to the separation of counselling from career-related work. The

UM Master courses for Counsellors and Career Advisors fall under different entities which define their professional identity from each other. UM Counselling training falls under the Department of Counselling within the Faculty for Social Wellbeing, a faculty which also takes care of training in criminology, disabilities, family therapy, gender studies, gerontology, psychology, social work and social policy, and youth work. Training for career guidance (Master in Lifelong Learning and Career development) is carried out by the UM Centre for Labour Studies, which includes degrees in Human Resource - Development, Occupational Health and Safety.

Maltese School-based Counselors' Activities - Results

Table 3 presents what the 37 MSCs who completed the questionnaire considered as most appropriate in order of appropriateness. Table 4 then compares means of appropriateness between those respondents who carried and those who did not carry out particular activities. These differences give rise to queries regarding activities which were considered important but not implemented. This is discussed further below.

Reflection and self-development (Item 40). Personal reflection (see Table 3) was considered the most appropriate and the activity carried out by most (97.3%, n = 36). This evidences the importance given to reflection and self-development in local and British training which then spills over to practice. To 37th participants left this item blank.

One-to-one counselling. MSCs perceived one-to-one counselling activities (Item 4) dealing with personal issues a priority ($M = 3.95$). Table 4 indicates that even the two MSCs (5.4%) who noted that they were not carrying out this activity, noted appropriateness for this activity ($M = 4.00$) and difference was insignificant ($p = .737$). One can infer that such respondents may have a managerial role (pMSCs). We could also feel the frustrations of such counsellors as all marked this activity as most appropriate. This evidences the need for increased human resource in all levels of counsellor posts so that MSCs might increase their hands-on work (counselling clients).

Respondents rated counselling on career development (Item 3) as inappropriate ($M = 2.32$). Notwithstanding, a third noted that they carry out this activity (35.1%, $n = 13$). This reply mirrors the Maltese model and the different realities among state, church and independent schools, apart from reasons given earlier on in the Results section. Career advisors are present in state schools but not in most church and private schools. Table 4 indicates that respondents who carried out this activity regarded it as appropriate ($M = 3.08$) whilst those who did not regarded it as inappropriate ($M = 1.92$). The difference is significant ($p < .005$). This finding may indicate that MSCs who do not have career advisors in schools consider this as appropriate, whilst their counterpart feel bound by their job description. Again, including this demographic data in the questionnaire could have yielded richer results. Further, those who regarded it as appropriate

and actually practiced this activity may be reflecting situations where the presenting problem (Career issues) may be affected by, or concealing, underlying issues which would then surface during counselling sessions.

Personal counselling addressing social development (Item 5, $M = 3.78$) issues and crisis counselling (Item 7, $M = 3.76$) were also considered appropriate. The low Standard Deviations (0.543 and 0.435, respectively) also infer that answers were consistent among respondents. On the other hand, whilst those who carry or do not carry out such activities considered crisis counselling as appropriate ($p = .974$), those who did not carry ($M = 3.00$, $n = 2$) out counselling for social development considered this activity as significantly ($p = .015$) less appropriate than their counterparts ($M = 3.83$, $n = 35$). Given our knowledge about the present MSCs' situation, one is haunted by lack of human resources that leads MSCs fighting for time to prioritise according to urgent needs (Falzon, Galea, Galea, Galea, & Muscat, 2020). One of us, Muscat, reflects that her team used to colour-code referrals using the traffic light system (red: urgent and serious, amber: can wait, green: referred to the guidance teacher/career advisor) in order to cope. The concern is that such frustrations were present when the complement in state schools was almost double what it was up to date of publication.

Group counselling. MSCs also perceived group counselling for personal (Item 11, $M = 3.54$) and social (Item 12, $M = 3.57$) development as a very appropriate intervention, whether they practiced ($M = 3.70$ and $M = 3.63$) it or not ($M = 3.35$ and $M = 3.46$), such that the difference is not significant ($p = 0.58$). However only 54.1% ($n = 20$) and 64.9% ($n = 24$) respectively noted that they actually engage children and adolescents in such activities. This may be due to lack of human resources and to the fact that counsellor loads are overwhelmingly high. Whilst group therapy might paradoxically reduce the waiting list, it entails much preparation, reflection and processing which would take a further toll on the already overwhelmed practitioner. Therefore, waiting lists for one-to-one counselling, as well as the presence of PSD teachers who always work with groups of 16 or less students and address emotional literacy with the curriculum provided (Falzon & Muscat, 2009), may have affected this score. It is important to stress that PSD teachers do not carry out group therapy or group counselling. They process activities and address emotional literacy, which may include immediacy issues (Falzon, Frendo, & Muscat, 2019). To note is that most GTs are PSD teachers and this may create blurred boundaries.

Participants considered consultation to the school administration on effective school counselling programmes (Item 33) as appropriate ($M = 3.57$) and 73% ($n = 27$) noted implementation of such an activity. These respondents considered this activity significantly ($p < .005$) more appropriate ($M = 3.81$) than those who never consulted ($M = 2.90$). The research did not distinguish between different categories of MSCs and their different workloads and job descriptions. For example, we do not know how many of the

respondents are pMSCs, who are responsible to liaise with Senior School management teams, to organize activities and to supervise over GTS whilst counsellors and senior counsellor's dedicate most of their working time on case work. Another possible inference is that respondents either have no time or are not given the opportunity to carry out this activity, and thus may not be aware of its benefits. This aspect of counselling needs to be addressed and promoted more during training as it is currently not part of the training programme.

Referrals, teamwork and cooperation. MSCs also considered it most appropriate (Item 36, $M = 3.81$) to refer to outside mental health professionals and coordinate with the outside providers and most (91.9%, $n = 34$) practice this activity. Further, this was considered an appropriate practice by those who referred (M = 3.85) and those who did not ($M = 3.33$), with no significant difference between the two groups ($p = .61$). This reflects the importance given to referrals in the Maltese context and MSCs' awareness of their competencies and limitations.

MSCs valued cooperation from all stakeholders (Item 23, $M = 3.49$) and agreed that they advocated for all students (Item 28, $M = 3.49$). Those who did not carry out these two activities, (16.20%, $n = 6$ and 18.9%, $n = 7$, respectively) considered these activities significantly less appropriate ($p < .005$; $p = 002$, respectively).

Primary prevention programs for parents/guardians to address parenting skills and related issues (Item 20, $M = 3.38$) and for students to support their mental health (Item 16, $M = 3.35$) were reported as appropriate but only half of the respondents (43.2%, $n = 16$ and 51.4%, $n = 19$, respectively) carried out these activities. This may also be due to the fact that this is carried out by pMSCs and may actually be reflecting this practice. All participants considered prevention programmes for caregivers as important, whether they implemented them or not ($p = .179$). On the other hand, those who did not carry out such an activity with the students, considered this activity as significantly less important ($p = .004$). Again we infer the important of experiencing activities in order to understand and appreciate their value and effectiveness. Further, we infer that the presence of PSD teachers and GTs in the Maltese system is also being reflected here.

Consultation. Respondents valued consultations with school administrators (Item 27, $M = 3.35$) and teachers (Item 25, $M = 3.3$) to improve relationships and school climate and to address issues. Those who did not consult with school administrators, considered this activity as significantly less important ($p < .005$). Further they noted that they considered advocating for improvements in school policies and procedures as appropriate (Item 32, $M = 3.16$) but only half of them (54.1%, $n = 20$) implemented this activity. These considered this significantly more important (p = .004). It is clear that some MSCs want to also work at a systemic level but their workload may not permitting them time for this advocacy aspect of counselling; whilst other

thought that this was not within their remit or within their responsibility.

Child abuse and neglect. Investigation of cases of child abuse and referral to the authorities (Item 30) was also considered appropriate ($M = 3.05$) and implemented (70.3%, $n = 26$) activities. Difference in perception of appropriateness, as affected by practice, was then significant ($p < .005$). Those who did not carry out this activity considered it inappropriate (M = 1.64, $n = 11$), whilst those who investigated and referred considered it appropriate ($M = 3.65$, $n = 26$). This is of concern as Malta has a very clear policy for immediate referral in such cases (Mallia, Schembri Wismayer, & Sciberras, 1999), and we consider 70.3% a low percentage. On the other hand, one needs to factor in that there is a memorandum of understanding (MoU) which stipulates what kind of abuse needs to be immediately referred and what needs to be first tackled by sMSCs or pMSCs, in collaboration with MEDE's Child Safety officer allocated to the college (Education Division, 1999). Outside referrals are made to the Child Protection Services (CPS), which form part of the National Agency for children, families and the community (Aġenzija Appoġġ, 2019) which is within the National Foundation for Social Services (2019). This internal MoU between MEDE and Aġenzija Appoġġ was put in vigour in 2016 to compensate for the lack of resources experienced by these national agencies and due to the amount of schools' referrals. In practice, pMSCs organise monthly meetings with CPS, wherein borderline cases are discussed and where pMSCs update themselves on referred cases.

Apart from the results of this survey, there is concern that Maltese educators might not refer cases of alleged abuse to counsellors or to their respective Heads of Schools who are ultimately responsible for the wellbeing of students within their school, due to fear of reprisals by family members or abusers, given our small-island community. This causes apprehension, concern and needs to be addressed in the local context and through further research (Boissevain, 1973).

Inclusion issues. Less than half of the MSCs (43.2%, $n = 16$) do not deal with inclusion issues (Item 29) and agree that this should not be part of their profile of duties ($M = 2.06$, $n = 16$). Those who carry out this activity (56.8%, $n = 21$) consider it as significantly ($p < .005$) more appropriate ($M = 3.57$, $n = 21$). Here we can infer that there is a difference of opinion between MSCs. It seems that those who deal with inclusion issues understand its value and usefulness, but those who do not probably consider this the remit of another professional. The concern is that this is part of the child's wellbeing and there should be less fragmentation of services so that the professionals can address all issues more cohesively, rather than referring students to different professionals depending on the issue. One also wonders whether burnout and lack of resources affected some responses.

This result might also be due to the fact that locally there are three separate service managers within the MEDE National Students Support Service (NSSS), namely

inclusion, Psycho-social team and learning centres. These manage different professionals who are assigned distinct yet complementary roles. Moreover, since counsellors prioritize cases according to urgency of need, students who fall within the remit of the Inclusion Co-ordinator (INCO) would not score high on their priority list, due to awareness that such students are getting some support. Additionally not all students falling under the category "Inclusion" need counselling.

Inappropriate activities. Respondents perceived activities involving discipline (Item 15) or administration (Item 26) highly inappropriate ($M = 1.27$ and 1.19, respectively) and did not engage in such activities (94.60% and 97.3%, respectively). MSCs also regarded group counselling ($M = 2.41$; Item 9), prevention programmes addressing academic issues ($M = 2.41$, Item 17), and career development activities in a group (M = 2.00; Item 10) and individual level ($M = 2.32$; Item 3) setting as inappropriate. This is expected, given the Maltese Model. In the local context and up to date of publication, MSCs neither assessed ($M = 2.49$; Item 35) nor evaluated schools ($M = 2.14$, Item 37). They do not involve themselves in disciplinary issues as this practice is considered to be counterproductive to the therapeutic relationship. It would be interesting to understand how counsellors in other countries, where discipline is part and parcel of the counsellor job description, perceive this role vis-à-vis the therapeutic relationship with the client. What is interesting is that, during a 2018 ISPRESC workshop held during the annual conference of the International Association for Counselling in Rome, American school-counsellors expressed their concern over being disciplinarians and then having same clients for counselling.

Discrepancies Between Role Appropriateness and Implementation

Table 3 evidences some discrepancies between activities deemed appropriate but then not carried out. For example, whilst respondents considered parental training (Item 20) appropriate ($M = 3.38$), irrespective of whether they carried out this activity or not, only 43.2% implemented this activity. Evaluation of counselling activities ($M = 2.92$; Item 34), primary prevention programmes for teachers ($M = 2.73$; Item 21), and family therapy ($M = 2.51$; Item 22) were considered as somewhat outside their remit. The majority of respondents (32.4%, 27%, and 37.8%, respectively) also do not engage in such activities. Whilst respondents considered it somewhat inappropriate ($M = 2.70$) to counsel staff (Item 6), 54.1% feel the need to support their colleagues. Our experience in this matter is that MSCs find it difficult to refuse a helping hand for teachers but feel uncomfortable due to dual relationship and issues of balance of power. In addition to the above, all staff working within the Church and government sector are entitled to free counselling at a central location which falls within the auspices of the Public Management Commission. Another voluntary organization

Richmond Foundation also offers an Employee Assistance Programme which incorporates counselling and advocacy at the place of work. MSCs are expected to refer any educators to these services and not to see them themselves, as this would undoubtedly impact on their already tight workloads and would therefore not benefit their direct clients.

Table 4 presents that the respondents evidenced congruence with perception of non/appropriateness and non/implementation of activities on 27 items of the questionnaire. On the other hand, for 13 items of the questionnaire, there was no significant difference between perception of non/appropriateness and whether the activity was implemented or not, as already discussed above. These data warrant reflection and further research in order to identify reasons for such results. Some inferences include: There was incongruence on four items addressing one-to-one counselling to support social development (e.g., developing good relationships with peers) (Item 5); facilitate academic development (Item 2); deal with personal issues (Item 4) and support mental health (Item 1). Table 4 indicates that the number of respondents who did not carry out this activity were 2, 3, 2 and 3 respectively but these respondents all regarded this activity appropriate ($M = 3.00$, 3.67, 4.00, 3.00, respectively). These can be considered as outliers and there is no inference that can be made. Notwithstanding, further qualitative research should be employed to understand why these counsellors are not implementing one-to-one counselling, in a context where this is the bulwark of the Maltese School Counselling model.

Incongruence was also noted in the case of primary prevention programmes for children and adolescents to support personal/social development (e.g., social skills, life skills, leadership; Item 19), for parents/guardians to help them develop more effective parenting skills and more productive relationships with their children (Item 20), and for teachers to help them develop more productive relationships with students and manage a broad range of discipline and classroom management issues (Item 21). For these three activities 54.1% noted that they implemented prevention programmes for children and adolescents, 43.2% noted that they implemented programmes for the parents/guardians, whilst 27% implemented programmes for the teachers. Notwithstanding, respondents regarded such an activity as appropriate and the rating means for those who did and did not implement this activity indicate no significant difference. All respondents regarded such activities as appropriate. One infers that counsellors are aware that counselling can be truly effective if there is a whole school approach and that counselling needs to be supported by the home and school environment. On the other hand, only 27% noted that they engage in primary preventions programmes for children and adolescents to facilitate academic development (Item 17). Further, all respondents, whether they carried out this activity ($M = 2.80$) or not ($M=2.26$), considered this activity rather inappropriate ($p =.185$). The respondents' perception is in

line with the local scenario, as such themes (time-management and study skills) are part of the PSD curriculum and/or referred to GTs. It is actually surprising for us that 27% ($n = 10$) actually engage in such an activity. However, there could be difference reasons, such as lack of PSD teachers in the school, which necessitates such an activity, given the importance placed on examinations in the local educational system.

The next group of activities that indicate incongruence involve group counselling to support mental health (Item 8), personal (Item 11), and social development (Item 12). On average around half of the respondents carry out these three activities: 43.2% (Item 8), 54.1% (Item 11), and 64.9% (Item 12). Notwithstanding all respondents regarded this activity as appropriate and the mean ratings range between 3.29 and 3.7 and differences between groups are insignificant ($p \geq .05$). One can infer that counsellors want to do more but are constrained by their workloads

Most respondents (91.90%) referred to and coordinated with outside mental health providers to maximize students' experience of success and wellbeing in school (Item 36). Respondents considered these activities as highly appropriate, whether they implemented ($M = 3.85$) these activities or not ($M = 3.33$), where difference between the two groups is insignificant ($p = .61$). It is inferred that MSCs regard this as an important activity and are highly aware of their professionals remit and boundaries. The data indicate that three counsellors do not engage in such referrals and, even though a small number, further research into the matter is important to understand why and process recommendations accordingly.

The last item which evidences incongruence addresses effective crisis counselling with students who need immediate attention due to traumatizing events (Item 7). Most respondents (89.2%) engage in this activity and also regard this activity as highly important whether they implement ($M = 3.76$) crisis counselling or not ($M = 3.75$), where difference between the two groups is insignificant ($p = .974$). One can infer that in some situations, either other professionals, such as psychologists and psychiatrists, would be brought in and perhaps the counsellors not involved; or the family would refer to outside private professional support. Another possible inference could be that In Malta, there seems to be an unwritten incorrect understanding that counsellors may not be equipped to deal with trauma. We are aware that MACP is striving to increase awareness and understanding of the counselling profession.

Discussion

The Maltese results reflect the local situation as seen from an infrastructure perspective. In general, we can infer that MSCs approve of the tasks that they are carrying out and vice-versa. One is reminded that in the local context there are other professionals who take care of student issues: career advisors, GTs, PSD teachers, psychologists, psycho-

therapists, social workers and youth workers, who all work as a team. Discrepancies between perceptions of appropriateness and actual-carrying-out-of-activities may echo MSCs' frustrations of being understaffed and therefore overloaded. Falzon et al. (2020) refer to such frustrations continuously in their auto-ethnographic accounts.

Roles and Job Description

These results reflect local practices, priorities and needs. The state's School Counselling Services presently falls under the NSSS. NSSS's responsibility within the Directorate of Educational Services (DES) and includes not only counsellors, but also psychologists, psychotherapists, social workers, youth workers and other mental health professionals who function as a team and collaborate with administrators, educators, students and the general community (McGannon, Carey, & Dimmitt, 2005; Sammut, 2016). As also mirrored in the survey results, the NSSS promote holistic development through on-going prevention and intervention services in schools.

The results need to be interpreted within a context where job descriptions of school counsellors in other countries include activities that in Malta are carried out by different professionals (Cauchi et al., 2017). Whilst this can prove beneficial, as it gives more space and time for counsellors to work on intervention, the results indicate that there is need to ensure that the students' support is not fragmented (Falzon et al., 2020). At a theoretical and ethos level, MSCs agree that collaboration and synergy across professionals in school settings both benefit students and families with challenging life-situations (e.g., Goldstein & Brooks, 2007; Levine, 2007; MacBeath, Galton, Steward, MacBeath, & Page, 2006) and strengthen counselling and other support services which address emotional health and wellbeing (Hill et al., 2011). This is reflected in the Maltese school-based counsellor's job description (MEYE, 2007).

Advocacy

Respondents also regard as highly appropriate (e.g., Items 8 and 23) advocacy for the child at the school level, irrespective of what the issue may be and in spite of the fact that there are other professionals who also carry out such duties. In such instance, they then noted that they did not carry out these activities as much as they wished. One can infer concern for students having to see more than one helping professional and repeating their stories, as also lamented in the Falzon et al. (2020) ethnographic accounts.

Prevention Programs

MSCs do not regard prevention programs as an appropriate activity for their profession. It is inferred that MSCs may feel comfortable with the work carried out by PSD teachers (Falzon et al., 2019). It should be noted that most MSCs would themselves have experienced PSD during their

schooling and therefore are aware of its effectives and the skills' set such professionals would have (e.g., Falzon et al., 2018; Falzon & Muscat, 2009; Muscat, 2006). This then releases them to do work which PSD and GTs professionals are not trained for. In a sense, one is here reminded of the American Multi-Tiered Model (ASCA, 2012). As trainers of both professionals, we regard this model of prevention (PSD teachers) and intervention (MSCs) as effective (Falzon et al., 2018). This also seems to be the respondents' opinion.

One then finds another significant dip with regard to issues of misbehaviour, administration and career, which MSCs consider as significantly highly more inappropriate when compared to all other activities.

Further, MSCs seem to be satisfied with the British model adopted but at times may feel frustration due to fragmentation of continuity due to remits of professionals within the psychosocial team. However, when comparing the number of students and the number of counsellors, it is clear that counselling services cannot be delivered to all who need them and that there is a present dearth of MSCs. Lack of appropriate complement of MSCs is a significant limitation within Maltese schools. Our engagement with state school concludes that, on average, there are presently one pMSC and one sMSC/tMSC for around 4000 students (National Statistics Office, 2016) and a couple of colleges actually one counsellor only.

It seems that, following the positive increase of counsellors up to 2016, where Maltese students' support needs were much better catered for than they used to be in the past, we are now returning to a past scenario where, due to high staff turnover, much more needs to be done to ensure that no waiting lists hinders students' access to regular and consistent counselling sessions. Further, apart from counsellor shortage, and guidance teacher shortage, case typology has also changed and there are more students and their families who suffer from mental health issues (National Health Strategy, 2018) and who need immediate and consistent counselling sessions and follow ups and regular liaison with other professionals (e.g., psychiatrists, clinical psychologists and mental health nurses). Unfortunately we do not envisage an improvement in service provision unless working conditions are revised.

Limitations of the Study

The questionnaire did not include an item on supervision specifically but only on self-reflection and development. In the local context, this is a bone of contention as state schools are not providing supervision and MSCs are going to and paying for supervision privately. Alternatively, Church Schools support MSCs financially for bi-monthly supervision with a supervisor of their choice, apart from informal peer supervision. This was a limitation.

Items 41 and 42 dealt with college choices and should not have been taken off the Maltese questionnaire as they could have yielded insight with regard to perceptions of appropriateness of activities.

The inclusion of more countries in the study, such as Italy, Germany, New Zealand, Canada, France, Spain, Argentina, Uruguay, Botswana, and Malaysia would have yielded richer comparison for the future of SbC a global level.

Further, we did not analyze the results by type of school or college and this may have yielded important data, given the specific needs of the different schools and colleges and given that MSCs in independent schools work within one school, whilst those in Church and State schools work in more than one school. Additionally no distinction was made between the different MSCs' roles and how these roles in turn would impact on this research. The data present activities MSCs considered appropriate but did not implement. We therefore recommend that, given the different professionals in psychosocial teams, the present job descriptions for all should further stress the importance for the implementation of clear boundaries. Further there is need for trans disciplinary teamwork for more effective and non-fragmented intervention for students and support for parents and staff.

Whilst the use of different professionals allows MCSs to focus more on students' personal and social needs, the data infer frustration with regard to fragmentation. We therefore recommend analysis of how such fragmentation may be diminished.

It is also recommended that an agreement to utilize the 14 professional counsellors within state schools who are carrying out relevant counselling work in their roles as GTs but continue to teach due to their contract. The main difficulties anticipated in this regard is that GTs who hold a counselling warrant will not give up their teacher-working conditions which include shorter days and longer vacation leave. These professionals were not included in this survey as their formal role was not that of a counsellor. If they are allowed to become MSCs but retain their present contact hours, the situation would already be significantly better. Such a suggestion could, however, bring resentment by present MSCs, due to the different contact hours, working conditions and salary scales. This issue is very complex. Other counsellors work within the safe schools programme, comprising of Child Safety services, Anti-bullying and Anti-substance (Career Guidance and Counselling Services, undated). Cauchi et al. (2017) reflected that MEDE needs to understand the effectiveness of their counselling services within this context. We recommend that the MACP, as a trade union, should request

a. compromise between counsellors' current working conditions and those of teachers who do counselling work. Ideally counsellors should benefit from the working hours of the teachers as otherwise those working administrative hours will continue to breed more frustration at the system and will strive to look for work elsewhere. However, services during

summer are still required and all should continue to offer a limited service during summer;

b. better working conditions including financial compensation for supervision.

Cauchi et al. (2017) reported that MACP has already voiced concerns as newly qualified counsellors who had been teachers preferred to remain teachers and apply to be GTs. Work conditions have led to a dearth of MSCs. Paradoxically, as counselling becomes more known in other areas of Maltese society, MSCs are decreasing at a dramatic rate. The emergence of those professions under the umbrella of psychotherapy also needs to be taken into the equation. Lack of counsellor availability may open doors for those professions who traditionally were not employed within schools. Whilst, undoubtedly, there is a place for diverse professionals within psychosocial teams, it would indeed be a pity if a decline in MSC willing to work in schools will actually results in less jobs for the future. Schools have traditionally been the main employment opportunity for counsellors and one might want to reflect on how shortage of counsellor jobs would impact on counsellor training and on the counselling professional identity.

Recommendations for Future Research

Further qualitative and longitudinal research into the particular model used in Malta would inform for better servicing. It would also be interesting to explore what issues MSCs are facing and how these change over time. Further, what issues are dealt with by MSCs and when and why referral are considered necessary by MSCs would give insight for future profiles of pastoral teams as well as prevention programs. This would then give insight for further training and future needs. Training on referrals regarding child neglect and abuse should be implemented. Burnout and lack of resources are paramount to address in the best interest of students. Roles of different professionals need to be better defined to avoid fragmentation. The more informed stakeholders are, the clearer the expectations. Other issues which need further research include lack of management structure, possible burn out for psychosocial professionals and lack of training and awareness for other professionals who do not recognise their limits of competence, thus not referring cases.

Most respondents referred to and coordinated with outside mental health providers to maximize students' experience of success and wellbeing in school. Respondents considered these activities as highly appropriate, whether they implemented these activities or not. Further research into the matter is important to understand why and process recommendations accordingly.

The results of this survey may have been affected by the overload experienced in Maltese schools and by the different experience of MSCs who may work in one or many schools. Thus we recommend further studies with counsellors working in one or in several schools. The declining number of MSCs, particularly in State schools, warrants further research into the matter. A further study could explore MSCs' perceptions of adequate staffing and what activities they would consider appropriate in such a scenario. One can also carry out a study comparing in/adequately-staffed. Another study could compare MSCs' activities for MSCs working in the three types of Maltese schools – state, church and independent.

Conclusion

The results present comparative practices across nations. The results also reflect the dominance of the American and British models of counselling, particularly with regard to input on academic and career issues. Unique cultural contexts are also presented in the data, which is healthy since it is in a context where activities across the ten nations also indicate similarities. The only concern we have is the administrative role Nigerian Counsellors consider appropriate, as we see this as a conflicting role to counselling.

Finally, the results show that MSCs are performing an important function, have a broad role and set of professional responsibilities, and are doing a lot of effective and essential work on the personal and social, which is essential for students' wellbeing. The fact that counsellors consider some activities important, even though they are not currently implementing them, may infer either that MSCs are finding it challenging to retain the level of professionalism, continuity and efficiency expected due to workload; or that there is need for clearer boundaries and roles within the psychosocial team; or frustration at the fragmentation experienced by students due to the difference roles and remits of the pastoral team. Although not addressed in the present survey, one also needs to factor in the lack of MSCs in schools. We urge MACP to address this urgently and forcefully in the best interest of students, our future generations and the profession of counselling.

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Table 1.

Means and Standard Deviation for Items for Five Dimensions of Practice for Ten Countries

Countries	N	Counselling Services		Advocacy and Systemic Improvement		Prevention Programs		Administrator Role		Educational and Career Planning	
		M	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*
USA	390	3.5	0.40	3.5	0.42	3.4	0.45	2.0	0.5	3.5	0.58
Malta	37	3.4	0.36	3.3	0.52	3.0	0.65	1.8	0.6	2.0	0.93
Costa Rica	107	3.1	0.47	3.2	0.47	2.7	0.56	1.9	0.5	3.2	0.69
Venezuela	30	3.1	0.45	3.1	0.48	2.8	0.59	2.1	0.5	3.1	0.74
South Korea	1687	3.7	0.32	3.1	0.54	2.9	0.63	2.4	0.7	3.3	0.59
Turkey	185	3.4	0.38	3.2	0.44	3.4	0.42	2.1	0.5	3.4	0.53
China	209	3.2	0.38	3.0	0.42	3.1	0.46	2.4	0.5	3.1	0.55
Kenya	47	3.6	0.47	3.1	0.48	3.1	0.47	2.3	0.6	3.7	0.66
Nigeria	176	3.5	0.34	2.9	1.02	3.4	0.54	3.2	0.5	3.7	0.50
India	45	3.6	0.58	3.4	0.69	3.4	0.72	2.4	0.6	3.3	0.76

Note. 1 = Very Inappropriate; 2 = Inappropriate; 3 = Appropriate; 4 =Very Appropriate

Table 2.

Means and standard deviation for BART Scores for 5 Diminutions of Practice for 10 Countries

Countries	N	Counselling Services		Advocacy and Systemic Improvement		Prevention Programmes		Administrator Role		Educational and Career Planning	
		M	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*
USA	390	-0.347	0.976	0.643	0.632	0.688	0.648	-0.959	0.930	0.494	0.900
Malta	37	-0.329	0.763	0.318	0.726	0.165	0.897	-0.904	0.855	-2.134	1.475
Costa Rica	107	-1.138	1.143	0.462	0.796	-0.555	0.854	-0.617	0.714	0.744	0.950
Venezuela	30	-1.213	1.072	0.133	0.746	-0.149	0.807	-0.219	0.647	0.779	1.042
South Korea	1687	0.373	0.780	-0.096	0.867	-0.355	0.980	0.137	0.828	-0.233	0.918
Turkey	185	-0.433	0.942	0.118	0.690	0.716	0.495	-0.337	0.754	-0.116	0.779
China	209	-0.935	0.958	-0.195	0.594	0.427	0.518	0.178	0.769	0.065	0.672
Kenya	47	0.224	1.160	-0.383	0.725	0.103	0.390	-0.071	0.613	1.134	0.712
Nigeria	176	-0.231	0.838	-0.737	2.214	0.699	1.107	1.666	0.588	0.802	0.676
India	45	-0.005	1.397	0.189	0.939	0.641	0.679	-0.097	1.027	-0.477	1.062

Table 3.

Appropriateness and Implementation of Activities

Number	Item	*M*	*SD*	"Yes" Responders	"No" Responders
40	The SC continuously improves their practice through personal reflection, seeking consultation and developmental supervision.	3.95	0.229	97.30%	2.70%
4	The SC engages children and adolescents in one-on-one counselling in order to deal with personal issues (e.g. self-esteem, identity crisis).	3.95	0.229	94.60%	5.40%
5	The SC engages children and adolescents in one-on-one counselling in order to support their social development (e.g. developing good relationships with peers).	3.78	0.479	94.60%	5.40%
24	The SC consults with parents regarding problems experienced to enable them to have more constructive relationship with their children and be more effective in parenting them.	3.73	0.560	94.60%	5.40%
14	The SC helps students resolve their interpersonal conflicts with peers.	3.57	0.603	94.60%	5.40%
31	The SC advocates for vulnerable children in order to safeguard their rights and protect them from abuse, bullying and/or exploitation.	3.84	0.442	91.90%	8.10%
36	The SC makes appropriate referrals to outside mental health providers and coordinate with the outside providers to maximize students' experience of success and well-being in school.	3.81	0.462	91.90%	8.10%
1	The SC engages children and adolescents in one-on-one counselling in order to support their mental health (e.g. dealing with anxiety, depression, suicidal ideations, and/or addiction).	3.68	0.530	91.90%	8.10%
2	The SC engages children and adolescents in one-on-one counselling in order to facilitate their academic development (e.g. developing self-motivation; engagement with school).	3.43	0.689	91.90%	8.10%
7	The SC engages in effective crisis counselling with students who need immediate attention due to traumatizing events.	3.76	0.435	89.20%	10.80%
39	The SC monitors the efficacy of their work and uses this information to improve practice.	3.62	0.492	89.20%	10.80%
25	The SC consults with teachers regarding problems they are experiencing to enable them to have more constructive relationships with their students and be more effective in teaching them.	3.30	0.845	86.50%	13.50%
23	Coordinates with parents to support students' issues in ways that respect students' confidentially and parents' rights to make decisions about their children's education.	3.49	0.804	83.80%	16.20%
28	The SC advocates for all students so that they will have access to needed supports and programs.	3.49	0.768	81.10%	18.90%
33	The SC provides consultation to the school administration on how an effective school counselling programme has to be implemented.	3.57	0.689	73.00%	27.00%

Table 3.

Appropriateness and Implementation of Activities, continued

Number	Item	*M*	*SD*	"Yes" Responders	"No" Responders
30	The SC investigates possible instances of child abuse and neglect and determines whether the authorities should be notified.	3.05	1.153	70.30%	29.70%
12	The SC engages children and adolescents in group counselling in order to support their social development.	3.57	0.555	64.90%	35.10%
38	The SC documents their work and the impact it has on students, families and the school community.	3.27	0.871	64.90%	35.10%
27	The SC consults with school administrators to help ensure that school policies and procedures create a climate that is conducive to the education and well-being of all students.	3.35	0.857	62.20%	37.80%
29	The SC advocates for children with special needs and ensure they receive the accommodations that are necessary for them to be successful in school.	2.92	1.140	56.80%	43.20%
11	The SC engages children and adolescents in group counselling in order to support their personal development.	3.54	0.558	54.10%	45.90%
19	The SC plans and delivers effective primary prevention programs for children and adolescents to support personal/social development (e.g.,social skills, life skills, leadership).	3.22	0.886	54.10%	45.90%
32	The SC advocates for improvements in school policies and procedures so that the school is an equitable institution that is able to effectively educate all its students.	3.16	1.041	54.10%	45.90%
6	The SC provides counselling services teachers and school staff to help them deal effectively with personal issues and concentrate on their work educating students.	2.70	1.051	54.10%	45.90%
16	The SC plans and delivers effective primary prevention programs for children and adolescents to support their mental health (e.g.,stress management).	3.35	0.633	51.40%	48.60%
8	The SC engages children and adolescents in group counselling in order to support their mental health.	3.43	0.689	43.20%	56.80%
20	The SC plans and delivers effective primary prevention programs for parents/guardians to help them develop more effective parenting skills and more productive relationships with their children.	3.38	0.721	43.20%	56.80%
22	The SC provides family therapy services to help trouble families develop effective communication patters and boundaries.	2.51	1.17	37.80%	62.20%
3	The SC engages children and adolescents in one-on-one counselling in order to facilitate their career development (e.g. dealing with career indecision).	2.32	1.002	35.10%	64.90%
34	The SCs conducts evaluations of the impact of school counselling activities and interventions and reports the results to administrators, teachers, and parents.	2.92	1.038	32.40%	67.60%

Table 3.

Appropriateness and Implementation of Activities, continued

Number	Item	*M*	*SD*	"Yes" Responders	"No" Responders
13	The SC helps students develop a course of study and choose appropriate courses that further their academic and career goals.	1.97	1.013	29.70%	70.30%
21	The SC plans and delivers effective primary prevention programs for teachers to help them develop more productive relationships with students and manage a broad range of discipline and classroom management issues.	2.73	1.146	27.00%	73.00%
17	Plans/delivers effective primary prevention programs for students to facilitate academic development (e.g. time management, study skills).	2.41	1.092	27.00%	73.00%
9	The SC engages children and adolescents in group counselling in order to facilitate their academic development.	2.41	1.117	24.30%	75.70%
18	The SC plans and delivers effective primary prevention programs for children and adolescents to promote career development (career interest identification; college choice).	1.73	1.045	24.30%	75.70%
35	The SC uses psychological assessments effectively to facilitate progress in counselling and to promote students' mental health, academic development, career development and personal/social development.	2.49	1.044	18.90%	81.10%
37	The SC leads a data team to analyse school data and determine directions for school improvement initiatives.	2.14	1.134	16.20%	83.80%
10	The SC engages children and adolescents in group counselling in order to facilitate their career development.	2.00	0.972	13.50%	86.50%
15	The SC determines the appropriate disciplinary sanctions for students who have misbehaved.	1.27	0.652	5.40%	94.60%
26	The SC assumes the administrative role of the principal in their absence.	1.19	0.518	2.70%	97.30%

Table 4.

Independent Samples T-test - Comparison of Level of Appropriateness with Implementation and non-Implementation of Activities

Number	Item	"Yes" Responders			"No" Responders			
		M	*SD*	*n*	*M*	*SD*	*n*	*p*
1	The MSCs engages children and adolescents in one-on-one counselling in order to support their mental health (e.g. dealing with anxiety, depression, suicidal ideations, and/or addiction)	3.74	0.448	34	3.00	1.000	3	.019
2	The MSCs engages children and adolescents in one-on-one counselling in order to facilitate their academic development (e.g. developing self-motivation; engagement with school)	3.71	.701	34	3.67	.577	3	.546
3	The MSCs engages children and adolescents in one-on-one counselling in order to facilitate their career development (e.g. dealing with career indecision)	3.08	.577	13	1.92	.717	24	<.005
4	The MSCs engages children and adolescents in one-on-one counselling in order to deal with personal issues (e.g. self-esteem, identity crisis)	3.94	.236	35	4.00	.000	2	.737
5	The MSCs engages children and adolescents in one-on-one counselling in order to support their social development (e.g. developing good relationships with peers)	3.83	.543	35	3.00	.000	2	.015
6	The MSCs provides counselling services teachers and school staff to help them deal effectively with personal issues and concentrate on their work educating students	3.15	.875	20	2.18	1.005	17	.003
7	The MSCs engages in effective crisis counselling with students who need immediate attention due to traumatizing events	3.76	.435	33	3.75	.500	4	.974
8	The MSCs engages children and adolescents in group counselling in order to support their mental health	3.62	.619	16	3.29	.717	21	.140
9	The MSCs engages children and adolescents in group counselling in order to facilitate their academic development	3.67	.707	9	2.00	.903	28	<.005
10	The MSCs engages children and adolescents in group counselling in order to facilitate their career development	3.40	.894	5	1.78	.792	32	<.005
11	The MSCs engages children and adolescents in group counselling in order to support their personal development	3.70	.470	20	3.35	.606	17	.058
12	The MSCs engages children and adolescents in group counselling in order to support their social development	3.63	.495	24	3.46	.660	13	.400

Table 4.

Independent Samples T-test - Comparison of Level of Appropriateness with Implementation and non-Implementation of Activities, continued

Number	Item	"Yes" Responders			"No" Responders			
		M	*SD*	*n*	*M*	*SD*	*n*	*p*
13	The MSCs helps students develop a course of study and choose appropriate courses that further their academic and career goals.	3.00	1.000	11	1.54	.647	26	<.005
14	The MSCs helps students resolve their interpersonal conflicts with peers.	3.63	.547	35	2.50	.707	2	.008
15	The MSCs determines the appropriate disciplinary sanctions for students who have misbehaved.	3.00	1.414	2	1.17	.453	35	<.005
16	The MSCs plans and delivers effective primary preventions programs for children and adolescents to support their mental health (e.g. stress management)	3.63	.597	19	3.06	.539	18	.004
17	The MSCs plans and delivers effective primary preventions programs for children and adolescents to facilitate academic development (e.g. time management, study skills)	2.80	1.229	10	2.26	1.023	27	.185
18	The MSCs plans and delivers effective primary preventions programs for children and adolescents to promote career development (career interest identification; college choice)	2.56	1.333	9	1.46	.793	28	.005
19	The MSCs plans and delivers effective primary preventions programs for children and adolescents to support personal/social development (e.g. social skills, life skills, leadership)	3.35	.875	20	3.06	.899	17	.326
20	The MSCs plans and delivers effective primary preventions programs for parents/guardians to help them develop more effective parenting skills and more productive relationships with their children	3.56	.629	16	3.24	.768	21	.179
21	The MSCs plans and delivers effective primary preventions programs for teachers to help them develop more productive relationships with students and manage a broad range of discipline and classroom management issues.	3.50	.850	10	2.44	1.121	27	.011
22	The MSCs provides family therapy services to help trouble families develop effective communication patters and boundaries.	3.50	.650	14	1.91	.996	23	<.005

Table 4.

Independent Samples T-test - Comparison of Level of Appropriateness with Implementation and non-Implementation of Activities, continued

Number	Item	"Yes" Responders			"No" Responders			
		M	*SD*	*n*	*M*	*SD*	*n*	*p*
23	The MSCs coordinates with parents to support students', mental health, academic development, career development and personal/social development, in ways that respect students' confidentially and parents' rights to make decisions about their children's education.	3.71	.529	31	2.33	1.033	6	<.005
24	The MSCs consults with parents regarding problems they are experiencing to enable them to have more constructive relationship with their children and be more effective in parenting them.	3.83	.382	35	2.00	.000	2	<.005
25	The MSCs consults with teachers regarding problems they are experiencing to enable them to have more constructive relationships with their students and be more effective in teaching them.	3.44	.669	32	2.40	1.342	5	.009
26	The MSCs assumes the administrative role of the principal in their absence	3.00		1	1.14	.424	36	<.005
27	The MSCs consults with school administrators to help ensure that school policies and procedures create a climate that is conducive to the education and wellbeing of all students	3.70	.470	23	2.79	1.051	14	.001
28	The MSCs advocates for all students so that they will have access to needed supports and programs.	3.67	.479	30	2.71	1.254	7	.002
29	The MSCs advocates for children with special needs and ensure they receive the accommodations that are necessary for them to be successful in school.	3.57	.598	21	2.06	1.124	16	<.005
30	The MSCs investigates possible instances of child abuse and neglect and determines whether the authorities should be notified.	3.65	.485	26	1.64	1.027	11	<.005
31	The MSCs advocates for vulnerable children in order to safeguard their rights and protect them from abuse, bullying and/or exploitation.	3.91	.288	34	3.00	1.000	3	<.005
32	The MSCs advocates for improvements in school policies and procedures so that the school is an equitable institution that is able to effectively educate all its students	3.60	.754	20	2.65	1.115	17	.004
33	The MSCs provides consultation to the school administration on how an effective school counselling programme has to be implemented	3.81	.396	27	2.90	.876	10	<.005

Table 4.

Independent Samples T-test - Comparison of Level of Appropriateness with Implementation and non-Implementation of Activities, continued

Number	Item	"Yes" Responders			"No" Responders			
		M	*SD*	*n*	*M*	*SD*	*n*	*p*
34	The MSCs conducts evaluations of the impact of school counselling activities and interventions and reports the results to administrators, teachers, and parents	3.67	.492	12	2.56	1.044	25	.001
35	The MSCs uses psychological assessments effectively to facilitate progress in counselling and to promote students' mental health, academic development, career development and personal/social development	3.43	.535	7	2.27	1.015	30	.006
36	The MSCs makes appropriate referrals to outside mental health providers and coordinate with the outside providers to maximize students' experience of success and wellbeing in school	3.85	.436	34	3.33	.577	3	.061
37	The MSCs leads a data team to analyse school data and determine directions for school improvement initiatives	3.67	.516	6	1.84	.969	31	<.005
38	The MSCs documents their work and the impact it has on students, families and the school community	3.67	.565	24	2.54	.877	13	<.005
39	The MSCs monitors the efficacy of their work and uses this information to improve practice	3.70	.467	33	3.00	.000	4	.006
40	The MSCs continuously improves their practice through personal reflection, seeking consultation and developmental supervision	3.97	.167	36	3.00		1	<.005