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Developing capacity amongst adolescents attending a leadership camp

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ABSTRACT

There is a need to reduce risk-taking behaviour amongst adolescents and for them to become involved in promoting their own health and wellbeing, as well as that of their communities. One aspect of a promoting health in schools approach is to develop young people's competencies in understanding and influencing, their lifestyles and living conditions. This article focusses on how leadership capacity was developed in a group of learners who attended a leadership camp as part of a health promoting school project in the Western Cape. The aim of the study was to explore a group of learners' experiences of their participation in a leadership camp and how this developed their leadership skills. The study was conducted using an explorative qualitative approach. Two focus groups were conducted with six learners who attended the camp. Four themes emerged from the thematic analysis of the data: (1) Becoming myself; (2) Learning life's lessons; (3) I can take on the world; and (4) Health promoting schools make a difference in my life. The findings of the study indicate that developing leadership capacity is embedded within, and part of, a broader process of empowerment. Occupational therapists' understanding of the link between health and occupation enables them to make a valuable contribution to planning and implementing appropriate leadership camps for adolescents.

Key words: Adolescents; health promotion; leadership camp

INTRODUCTION

Many adolescents in South Africa, and particularly those living in low socio-economic contexts, are faced with a variety of challenges on a daily basis. These contexts often include societal problems associated with poverty such as violence and gangsterism¹ which place adolescents at risk of engaging in behaviours such as substance use.

The national Department of Basic Education is concerned about the academic performance and progress of learners from schools in low socio-economic contexts and how their community and economic status impact on their learning and progression in school². According to Broman, Nichols and Kennedy, cited in Kheswa³, children from low socio-economic backgrounds often have disorganised



families and may experience parental neglect. The adolescents are frequently left to take care of the home resulting in them neglecting their academic activities or other responsibilities as learners. This situation may contribute to the fact that 60% of learners in South Africa do not complete high school⁴.

Therefore, to encourage learners to continue attending school, it is important to provide a secure and caring school environment, as in a health promoting school, to promote health and wellbeing and reduce risk-taking behaviour amongst adolescents, particularly in those adolescents from a low socio-economic environment. Schools are a key setting to reach school-aged adolescents. The World Health Organization^{5,2} described a health promoting school as one which is "constantly strengthening its capacity as a healthy setting for living, learning and working". Key strategies, developed from the Ottawa Charter for Health Promotion⁶, to enable a school to become a health promoting school include:

- ❖ developing skills of all in the school community,
- ❖ developing appropriate school policies,
- ❖ creating healthy school environments,
- ❖ building school-community linkages and
- ❖ reorienting health services with the involvement of all stakeholders including educators, learners, parents and community members.

This is intended to be a democratic learning process that aims to develop young people's competencies in understanding, and influencing, lifestyles and living conditions.

Cargo et al.⁷ provide a theoretical framework of youth empowerment in the context of a participatory community health promotion intervention. Youth empowerment is seen as a transactional process whereby adults create an empowering environment through facilitating, teaching, mentoring and providing feedback for youth to become empowered⁷. Leadership camps provide a good opportunity for adults to facilitate adolescents' leadership capacity. As leadership capacity is developed, they are empowered and this paves the way for other learners to follow their example. Hammond, Krista and Walsh⁸ argued that more programmes need to see the youth as human resources to be developed. Adolescents who are leaders are considered to be able to make a difference in their school if they are granted independence to make important decisions⁹.

Equity and democracy are considered a priority^{7,8} in the health promoting school movement. According to Barnekow et al.¹⁰, in Europe the education sector increasingly realised the importance of the active involvement of learners in their own learning, including the promotion of their own health. Jensen and Simovska¹¹ indicated the need for students to experience ownership of their learning and take part in decision making in a health promoting school. Thus developing leadership capacity amongst the learners will contribute towards enabling a school to become a health promoting school¹².

In this article we focus on how leadership capacity was developed with a group of learners who attended a leadership camp, addressing the following research question: how did participation in a leadership camp enable a group of learners to develop their leadership skills? The findings can assist the reader to understand how developing leadership capacity in learners as part of a process of empowerment, contributes towards developing health promoting schools.

SETTING

From 2008 until 2012, the Health Promoting Schools (HPS) Project at the University of the Western Cape (UWC) was involved with a cluster of three high schools in a low socio-economic area in Cape Town. The aim of the HPS Project was to assist these schools to become health promoting schools. Part of the project was to implement an annual four-day leadership camp for a group of twelve learners from each of the three schools. The learners were previously identified by educators for their leadership skills and were active participants in the HPS Project at their respective schools. As part of the broader HPS Project the learners had specific roles in their school group, for example, secretary, administrator, events

coordinator. Each school group of HPS learners together with an educator, initiated health promotion projects such as recycling, healthy food at the tuckshop, sports and fun days. Each project was a small step in the process of becoming a health promoting school as they involved different stakeholders in the school community, including learners, school personnel, parents and other community members.

At the end of each school year a camp was organised. The goal of the camps was to develop the learners' leadership capacity. The camps were held at safe, peaceful, youth friendly religious-based settings away from the community in which the learners lived. Although an inclusive, non-religious approach was taken by the camp organisers, it was emphasised that health is a broad concept involving physical, social, psychological, cognitive and spiritual aspects. Male and female adult facilitators were present at all times. There were no costs for the learners and each learner was given a small parcel of toiletries and a towel. All bedding and food was provided.

To develop leadership capacity, camp activities such as public-speaking and talent shows were used to facilitate intra- and inter-personal development and skills. This included building self-esteem, decision-making, communication skills, understanding gender, power and group dynamics, assertiveness and team building. Using the health promoting schools approach and the strategies of developing healthy school policy, skills development, creating a healthy environment, improving community links, and reorienting support services, teams of learners planned (and subsequently took) action in their school or community. As funding for the camps was linked to reducing the spread of HIV and tuberculosis (TB) these topics were woven into the camp experience. There were fun activities for example team food preparation, yoga, visiting the beach and some less fun activities such as washing dishes. Reflective writing took place at the end of the day.

METHODOLOGY

The study was conducted using an explorative qualitative approach. Purposive sampling was used to recruit participants for the study using the following inclusion criteria: (1) learners in Grades 9 to 11 from one of the three high schools participating in the HPS Project, (2) learners who had attended the leadership camp in 2010. Of the twelve learners who had attended the camp from the one school, six agreed to participate in the study. Three of the participants were male and three were female. Their ages ranged from 16 to 17 years.

Ethical clearance for the study was obtained through the normal procedures at the University of the Western Cape and permission was granted by the Western Cape Education Department. Once the school principal of the participating school had given permission for the study, written informed assent/consent was obtained from both the participants and their parents respectively to participate in the study. Participants were aware that they were taking part in the study voluntarily, that they could withdraw at any time without any consequences, and were assured that confidentiality would be maintained at all times.

Data were gathered using focus groups with the participants. A member of the steering committee of the HPS Project was interviewed in order to provide the researchers with background information about the Project and the leadership camp. The information was used to develop questions for the focus groups. Two focus groups of 45 minutes each were conducted with the six participants. These groups took place in a classroom at the school, ten days apart. Using a semi-structured interview guide, the first focus group explored the participants' experiences of participating in the camp and how this influenced their roles as learners. The second focus group explored how the camp assisted the participants to cope with issues related to their personal, school and home environment. On both occasions, the focus group method prompted reflection and facilitated in-depth discussion amongst the six participants.

With permission, both focus groups were audio-taped and transcribed verbatim. The transcripts were analysed thematically by identifying codes, grouping these into categories, and finally themes.



FINDINGS

Four themes emerged from the data analysis and are presented in Table 1 together with the related categories.

Table 1: Themes and related categories

Theme	Categories
1. Becoming myself	Because I know here are people who care about me. I made peace with who I am and how I am. If I don't believe in myself, I cannot believe in others.
2. Learning life's lessons	Voicing opinions. Working in a group.
3. I can take on the world	Overcoming insecurity. Positive attitudes. Engaging in different roles.
4. Health promoting schools make a difference in my life	Other people saw changes in me. Never judge others. An eye-opener.

Theme one: Becoming myself

This theme captures participants' perceptions of how the camp facilitated their self development and growth. In order to become leaders, the participants needed to develop self-awareness. The emotional support that the participants received from their peers at the camp and the adult camp facilitators assisted them in this process of accepting that they could be themselves. They highlighted that communication with peers was often easier than communicating with family. It was easier for them to open up to their peers.

But sometimes the love from your friends exceeds that of your family. (Participant 4)

Participants explained how prior to the camp they could not be themselves as they were afraid of being judged by their peers. The support structure of the camp, which included having adult facilitators available at all times and who created a safe and secure, trusting environment, provided participants with opportunities to speak freely with their peers giving them a sense of self control. This enabled them to accept and value who they were, in so doing taking charge of their lives, and building their self-esteem leading to improved self-confidence.

Prior to attending the leadership camp, many of the participants indicated that they had experienced shyness and insecurity in their lives. They did not feel confident and were shy to speak up. By accepting themselves, including their imperfections, they were able to gain confidence, and believe in themselves and others.

I respected myself for who I am, and I respected others the same way, because, if you do not believe in yourself, then you cannot believe in others. (Participant 3)

Theme Two: Learning life's lessons

This theme captured participants' perceptions of the life lessons they had learned that assisted them with leadership. They identified their growing ability as leaders in the school as a result of the camp experience and felt better equipped to interact with their peers and work in a team. Participants perceived group work as combining different personalities to work together as a team.

I then learnt that working together is very important if you are working in a group. (Participant 2)

Participants could see the changes in themselves and learnt to voice their opinions. They could also see the difference in their peers who had been at the camp and who were part of the HPS school group and expressed how their friends had become more confident leaders as this quote highlights:

I see leadership qualities in M and after we joined the HPS. I saw that he became a different person. He is more open than before. He used

to keep his mouth [closed] but now M's voice is heard and that is the difference that I see in him. He will say what he wants to say but will do it in a proper manner and when he approaches someone, he will do it [with] the correct body language etiquette. (Participant 5)

Participants said that at the camp they could share their experiences about the personal difficulties many of them had at home, and how this influenced their way of living at home and their academic performance at school. Although they had experienced hardships in life, learning to voice their opinions empowered them to uplift themselves and cope in life.

I learnt to be positive from the camp, and the choices I make today determine my future. (Participant 2)

Although most of the participants indicated that the camp did not help them directly with schoolwork, they had gained the confidence to ask the educators questions if they did not understand something or to explain things to other learners.

What I learnt at the camp, that you are brave enough to ask someone: "I don't understand, can you please explain". And that bravery, at the camp, I had the freedom to go to the lecturers [camp facilitators] and speak to them, and I can use that now in school. (Participant 5)

Theme Three: I can take on the world

This theme captures participants' recognition of how they had overcome personal insecurities and that as a result of the camp they felt more confident, self-assured and had a more positive view of themselves with regard to their image, school work and socially.

I walked out of my insecurity with a happy heart. (Participant 4)

Participants found that the camp gave them insight into themselves and realised through experience that a change in attitude can change the outcome.

Your attitude determines your altitude. (Participant 5)

I need to be a steadfast person so that I can encourage another learner ... if maybe he behaves in a wrong manner or does something wrong then I have to be like an example to him. (Participant 5)

Participants expressed that they felt more comfortable in taking on different roles at the school and other organisations after the camp. These roles included roles in the school health promoting school group as well as leadership roles such as prefects, class monitors and on the Representative Council of Learners. They were able to use the lessons learnt at the camp to assist them in these roles at school and within their communities.

You can be these roles in different places not just in the school but also... in your community. (Participant 5)

Many of the learners said that they felt more able to identify with, and engage in, their role as leaders.

We had the courage to go do it ... to talk in front of other kids. (Participant 1)

Theme Four: Health promoting schools make a difference in my life

This theme highlights participants' perceptions of the changes that they underwent by attending the camp. Participants explained that after attending the camp they behaved differently towards their families and friends. For example, one of the boys said that before the camp he did not respect his mother and did not do things for her. After returning from the camp, participants mentioned that their parents were amazed and happy at the changes they saw in their children, as this participant said:

My mother could not understand me at first ... "Who is this person?" Because they still saw that person from that time [before the camp], and now I am another person. (Participant 1)

Participants felt that they had learned not to discriminate against and judge other people. They realised that having a positive attitude towards life and other people would make them feel good about themselves.



I learnt not to discriminate [against] people because they have a sickness ... and that it's wrong to discriminate [against] people. (Participant 1)

All of the participants experienced the camp as “an eye-opener” as it provided them with opportunities that they had not been able to experience previously. These included going on an outing to the beach, making a potjie [stew] together, and doing chores like washing up. These camp experiences assisted the learners to develop a more positive outlook on life. Participants expressed that they wanted to take the lessons learnt to heart and apply them in their future endeavours.

When I went on the first camp it was like, WOW! (Participant 1)

Some participants said that attending the camp was a form of escape from the personal and social problems that they were facing. One of the learners shared with the group that she used to “cut herself” (self-mutilate) to alleviate the pain of her problems. The camp, with its focus on health promotion and living a healthy lifestyle, assisted her with the realisation that she had the power to control her urges and make healthy decisions.

If it was not for the camp I would have had doubts and I would have cut myself to die. (Participant 6)

DISCUSSION

The importance of civil society involvement in effective health promotion has been highlighted¹³. The health promoting schools approach encourages the involvement of all stakeholders in the school community in improving their health as individuals and that of the community. The learners’ participation in decision-making and the development of competencies to take action in the school and their community (action competence) is one of the basic values of the health promoting school approach.

In this study, we explored the results of developing leadership capacity among a group of learners attending a camp. The camp formed part of a broader HPS Project in three high schools in the Western Cape. In this paper, we focussed specifically on the influence of the leadership camp. This topic is relevant to the South African context as many adolescents have to deal with challenging social issues which place them at risk of developing long-lasting psychological and emotional damage¹⁰.

Zimmerman and Rappaport¹⁴ stated that in the process of empowerment, there is a development of a combination of self-acceptance and self-confidence, social and political understanding and personal ability to take a significant role in decision-making and resource control. The first theme “Becoming myself highlights how, through the supportive physical and psychosocial structure of the camp, the camp activities and the behaviour and attitudes of the adult facilitators, the learners became more aware of themselves. Developing self-awareness contributed towards building confidence, self-esteem and self-worth.

According to Pinderhughes¹⁵, as an internal locus of control develops and self-esteem increases, so does the sense of empowerment. As demonstrated in Theme Two “Learning life’s lessons”, the learners felt confident to voice their opinions and work with others, giving themselves a better sense of control. This was achieved through camp activities which gave learners a variety of opportunities to interact with peers in groups within a safely structured environment. During these interactions, not only were personal feelings and emotions expressed, but the learners developed empathy by listening and responding to one another. In this way, they were able to recognise the good in themselves and others.

In Theme Three, “I can take on the world”, learners perceived that they had overcome their insecurities which led to a more positive attitude towards life and enabled them to take on different leadership roles in the school and community. It is evident that the broader health promoting school activities in their schools provided a context for them to practice and apply these newly acquired leadership roles. Cargo et al.⁷ refer to this as actualising youth potential whereby youth become empowered by directing

the course of, and taking responsibility for, a project (in this case the HPS Project), and thus are confronted by challenges that test their abilities. However, it was only on their return to school and their homes after the camp that they realised how they understood themselves better and were motivated to take action in an attempt to achieve more in their lives, indicating a sense of empowerment. This change is described by Parsons¹⁶ who indicated that the empowerment process involves both internal and external changes. Parsons stated that the internal change is related to the individual’s faith in his or her ability to make decisions and solve problems. The external change is expressed in an ability to act and apply the practical knowledge, information, and the newly acquired abilities.

Theme Four “Health promoting schools makes a difference in your life” highlights the power of the personal changes experienced and these positive experiences were commented on by other people. The positive influence of the HPS camp motivated learners to feel able to take action after the camp as part of a healthy lifestyle. As described by Stewart-Brown¹⁷, the intensity of the camp intervention as part of a long term intervention in the school had a marked impact on the youth. It is evident from the findings of the study that developing leadership capacity is embedded within, and part of, a broader process of empowerment.

Limitations

There were several limitations in conducting this study.

Firstly, the sample was drawn from only one of the three schools involved in the camp. Although the three schools are geographically close, the socio-economic communities the learners are drawn from differ to some extent. This might have an effect on the leadership development and the ability to take action. Secondly, although the focus of the study was on the camp, it was not always possible to distinguish the influence of the camp separately from the learners’ involvement in the broader HPS Project. For this reason, the findings have been discussed from the perspective of the camp being an integral component within the broader HPS Project. Finally, the qualitative methodology of the study did not allow for any comparison to be made between learners’ competencies before and after the camp. Neither was any collateral data collected from participants’ parents, educators or peers to validate and confirm the findings. Further research could be done to evaluate the effectiveness of leadership camps using quantitative methods to compare learners’ competencies before and after the camp.

Implications for occupational therapy practice

Occupational therapists have a role to play in all high schools as part of promoting the health and wellbeing of youth. Occupational therapists’ understanding of the link between health and occupation enables them to make a valuable contribution to planning and implementing appropriate leadership camps. Ultimately, this promotes adolescents’ occupational performance as learners. Occupational therapists and educators working together as a team to implement leadership camps will facilitate closer collaboration between the health and education sectors.

CONCLUSION

The study shows that, in South Africa, giving adolescent learners from low socio-economic contexts the opportunity to participate in an intensive, alternative process of intrapersonal and interpersonal experiential learning, over several days, with other adolescents, in a safe, well-structured environment with supportive adult facilitators acting as role-models, can bring about deep and lasting personal changes in the learners. This can lead to changes in their ways of relating to others in their families and their peers, enabling the learners to use their leadership skills and to take action on some of the multiple challenges they face both within in their communities and schools, demonstrating their development of empowerment.

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Livelihoods of youths with and without disabilities in peri-urban South Africa

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ABSTRACT

South Africa has good legislation advocating for the rights of youth with disabilities although consistent implementation remains problematic. In order to inform policy implementation barriers and opportunities must be identified within each unique context and how these influence the ability of youth with disabilities to sustain their livelihood. This study aimed to investigate the human and financial assets of youth with disabilities living in the disadvantaged communities of Diepsloot and Cosmo City compared to their non-disabled counterparts. The study used a cross-sectional survey design using snowball sampling to identify 189 participants. This study found that the majority of the youth, whether they had a disability or not, had difficulties sustaining their livelihoods particularly the participants with disabilities who had a lower level of education and fewer employment opportunities. Youth with disabilities were financially more stable than their non-disabled counterparts due to their ability to access disability grants.

Key words: livelihoods, youth with disabilities, human assets, financial assets

INTRODUCTION

The responsibility for the maintenance of health and wellbeing is placed on both the individual and the context in which they live¹.

However individuals seldom have control over a variety of factors in their environment, such as poverty and low levels of education which can negatively influence their health and wellbeing.

