

## PROFESSIONAL CHOICE OF PUPILS WITH SPECIAL EDUCATIONAL NEEDS

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### ABSTRACT

Pupils with specific learning difficulties and behaviour disorders are a relatively strongly represented group in Czech schools, which traditionally received special attention. This group of pupils has more serious problems when making educational and subsequently professional choices in the labour market. In the text we present data from a quantitative investigation focused on identification of specific features in professional aspirations of pupils with a mild disability, specific learning difficulties and behaviour disorders. Attention is paid to selected circumstances and influences which often play a role in the process of decision making, particularly the influence of counselling bodies.

**Keywords:** Pupils with a disability, special educational needs, school counselling.

### INTRODUCTION

In recent years, special attention is paid to educational choices of pupils leaving basic school and career guidance in schools. External factors influencing educational and professional choices change from time to time, especially as regards school environment generally determined primarily by school politics (e.g. the possibility of multiple choice, quality of basic schools, the number and quality of secondary schools and branches), situation in the labour market (the rate of unemployment and entrepreneurial environment, formation of new professions etc.) and social politics (incentives and promotion). In the Czech Republic there has been a discussion about the decline of crafts and vocational schools and lower quality of secondary education. That accounts also for the high number of comprehensive secondary schools which do not set entrance exams and relax their requirements on their pupils in an effort to attract and maintain pupils (in the Czech Republic there is an ongoing debate about the school-leaving exams guaranteed by the state – the problem appears almost in every number of the journal on education *Učitelské noviny* – e.g. No. 13, 14, 15, 16, volume 113, 2010). Many leavers (not only) of these schools then search for a job in vain. Pupils with a disability might experience even a rather more complicated educational and professional path. In the Czech Republic, similarly to other countries, the integration of disabled pupils into mainstream classes is promoted and so-called inclusive schools are increasingly raised as an issue. At the same time the counselling role of the school is emphasized and in the last decade formation of so-called school counselling centres is endorsed, often financed from the European structural funds.

*Within our research project Special needs of pupils in the context of the Framework Educational Programme conducted at the Faculty of Education Masaryk University in Brno we focus on professional aspirations of pupils with special educational needs. The aim of this broadly conceived seven-year project is to identify a whole range of factors which influence the education of pupils with special educational needs and propose measures for their education in mainstream schools or guidance. The authors of the presented text are in charge of the field of technology education and professional aspirations of pupils. In this paper we present selected results of an investigation conducted in 2009, whose aim was to identify the specific features of educational choice of pupils with special educational needs. The focus of our attention were pupils with specific learning difficulties and behaviour disorders (further referred to as pupils with SLD and BD), who represent a relatively strong group in Czech schools. On average, there are 2 % of pupils with serious problems and about 2 % of pupils with a light form of a specific learning difficulty, in Czech schools. However, some of educators indicate that the number of children with these problems may reach 20 %, as not all the children manifest the same signs and difficulties of the disorder (Švancar, 2002). The consequences of specific learning difficulties and behaviour disorders as reflected into school achievement of pupils are generally known (e.g. Matějček & Vágnerová, 2006; Pokorná, 2001; Zelinková, 2003). It is not a severe disability, rather a developmental deviation, nevertheless these pupils often encounter many educational problems which hinder decision making about their education and can also influence their job prospects.*

#### ON THE DATA COLLECTION

To gain an insight into the problem of professional aspirations of pupils with specific learning difficulties and behaviour disorders we combined qualitative and quantitative methodology. Our intention in this part of the investigation was to answer the following questions:

*What are the most frequent factors influencing educational choices in children with SLD and BD?*

*How informed are they about the chosen branch?*

*What do they consider most difficult in their choice?*

*What is the most restricting factor in the choice?*

*What support are they expecting?*

We attempted to answer these questions by means of both quantitative methods (questionnaire) and case studies. In this paper we present only selected data – those gained from the questionnaire investigation. The questionnaire was distributed to 65 basic schools while we chose a special way of achieving the “random sample”. We asked 42 students of our faculty to deliver the questionnaire to five basic schools close to their home. Thus, we achieved that there were both village and town schools, mainly from our county (85%). In the schools selected this way students were to ask teachers or pupils of the 9<sup>th</sup> (last basic school) year with a diagnosed specific learning difficulty (dyslexia, dysgraphia, dysorthographia, etc.) or a behaviour disorder such as the ADHD syndrome. It is estimated that in every class there are 1 to 5 pupils with this disorder. With their parents’ consent pupils filled in the questionnaire under the supervision of our student. In total we obtained data from 214 pupils, out of them 146 boys and 68 girls. This distribution roughly corresponds with the findings that SLD and BD are more often diagnosed in boys.

In order to allow at least crude comparison with the “healthy” population and be able to identify in quantitative terms several specific features of the choice we decided to distribute the same questionnaire in the group of “healthy” pupils (for the sake of simplicity we will use the term “healthy” pupils in comparison, although it is obvious that pupils with SLD and BD cannot be considered ill). As it is necessary to gain parents’ consent for data collection, we decided to facilitate the process by addressing seven schools cooperating with our faculties in big and small towns (ordinary basic schools) and via the teachers (our supervising teachers) we got back in total 102 questionnaires (59 boys, 43 girls). Both investigations were carried out simultaneously in the time of the year when the pupils of 9<sup>th</sup> grade had already submitted their applications for secondary schools.

## PRESENTATION AND INTERPRETATION OF THE GAINED DATA

In this part of the text we briefly present the gained data and relate the results to the research questions. As we established only research questions for the complex research and not hypotheses and also owing to the fact there are two individual sets of data we do not have ambitions for mathematical-statistical calculations as far as the significance of differences are concerned between healthy pupils and pupils with specific learning difficulties and behaviour disorders. Not to exceed the limit of the number of pages we present only some simplified tables and no diagrams.

### *Selected data from school case history*

Special attention is paid to pupils with learning difficulties and behaviour disorders in Czech basic schools, however, it is the severity of the disability that plays a role. In our sample 44% of the pupils were *integrated* (i.e. the school gets certain special subsidy for these pupils), 27% of the pupils attended a *club for children with dyslexia*, 34% received *after-school teaching*, 41% of the pupils were *evaluated in a modified way*, and 9% of the pupils relied on *allowances made for them during secondary school entrance exams*. Eight of the addressed pupils mentioned that they have an assistant teacher with them in the class.

Although certain allowances are made for the pupils with SLD and BD in their evaluation, their performance in school is worse (Czech grading scale: 1 – the best mark, 5 – the worst).

Table 1: Pupils' achievement

Achievement	Pupils with SLD and BD	Healthy pupils
1,0 – 1,7	32%,	47 %
1,8 – 2,5	41%,	33 %
2,6 – 3,3	22%	14 %
Over 3,4	5%	6 %

Among *favourite subjects* of pupils with SLD and BD there are physical education (27.5%), mathematics (10.7%), history (9.8%), crafts and science education (7%), IT and art education (6%). There is a distinct preference for physical education among healthy pupils too, though slightly lower in percentage (21%), then mathematics (11%), history and geography (9-10%), languages (10%), science education (7%); the distribution of interest among all subjects is more even. Among *unpopular subjects* pupils with SLD and BD rank (not surprisingly) Czech language (47%), then mathematics (19%), foreign language (16%). Healthy pupils dislike mainly mathematics (30%), Czech language (27%) and then evenly other subjects (chemistry, physical education, physics, etc., 8-9%).

With regard to the main focus of our research where we examine also pupils' interest in crafts and technology we aimed to find out how pupils evaluate *technology activities* conducted within the curriculum in basic school and which should arouse pupils' interest in technology and crafts, i.e. branches with better prospects in the labour market. It was found that 22% of the addressed pupils with SLD and BD never encountered such subjects in the course of their school attendance (in healthy pupils it was even 24%) and if they did so, then pupils with SLD and BD evaluate the subject only slightly better than healthy pupils. 32% of pupils indicate the subject was excellent, 31% as mediocre and 15% as uninteresting. Only 7% of pupils with SLD and BD stated that subjects 'The World of Work' or 'Technology Activities' had direct influence on their choice (in healthy pupils it was merely 5%).

### Choosing educational path

A relatively high number of pupils with SLD and BD apply for secondary schools with school-leaving examinations, although exact classification is rather difficult. At least 34% of pupils with SLD and BD apply for secondary schools with school-leaving examinations, from crafts there is greatest interest in the profession of a cook and waiter (14%) and professions dealing with machines (e.g. car mechanic 11%). 11% of pupils apply for schools with educational, social and medical focus (some of them with school-leaving examinations). Healthy pupils prefer comprehensive secondary schools more often.

Table 2: The choice of branch

Branches	Pupils with SLD and BD	Healthy pupils
Secondary schools and general upper secondary school	34 %	47 %
Cook, waiter	14 %	11 %
Traditional crafts – blacksmith, plumber, joiner...	12 %	7 %
Social and medical care	11 %	12 %
Car mechanic and machines	11 %	7 %
Electronics and computers	10 %	8 %
Others	8 %	8 %

Pupils with SLD and BD were asked what they know about their new school and their free responses were then categorized. A relatively high number of pupils admitted that they know quite little about the chosen school and referred to the experience of their friends or siblings (128 times), at the same time, however, many of them were able to name some school requirements and subjects taught there (68 times), approximately the same number of pupils listed advantages of the school (54 times - e.g. "mathematics is not taught there", "you don't have to take any entrance exams", "it isn't far from home" etc.), in 40 cases pupils mentioned good professional or academic prospects after leaving the school, in 35 cases they pointed out the prestige of the school or its good equipment and pleasant environment (pupils were to name more than one point).

Both groups of pupils were asked if they were *looking forward to their secondary school studies* and no differences were found between the groups. The highest number of pupils in both groups state that they are "rather looking forward" to their new school. Regarding *worries* 64% of pupils with SLD and BD express concern about the subject matter, 30% about new environment and schoolmates, only rarely are the worries related to commuting or practice. Healthy pupils express worries less frequently: 57% about subject matter and 27% about schoolmates. Only 22% of pupils in both groups are really worried that they will not be accepted by the chosen school. In the open questions we asked the pupils "what they are looking forward to most". Pupils with SLD and BD most often stated practice (94 times), new friends (76%), new subjects – theory (68%), new advantages concerning greater independence or "leaving" their old school (35 times), specific skills they will acquire and the job prospects or the "new life" after leaving secondary school (34 times). Pupils wrote that they were looking forward to their secondary school only scarcely (17 times) (there was space to list more alternative answers). Healthy pupils are more frequently looking forward to new theoretical subjects in better equipped schools (61 times), favourable job prospects or further studies after leaving secondary school (32 times), as well as friends (35 times), practical subjects (32 times) and the change of environment (24 times).

Greater differences between our groups were found as regards looking for *alternative choice*. More than a half of pupils with SLD and BD (54%) state that there is not an alternative and they do not know for which school they would apply if they were not accepted, or they do not express so much interest in the other alternative. In healthy pupils 62% of the addressed pupils mention an alternative of the same value to them and 48% do not see any alternative. Differences were also found regarding the *timing of decision making*. Pupils with SLD and BD more often decide at the last moment, their decision apparently takes more time and they hesitate more; 20% of the addressed pupils state they chose the branch at the last moment, in healthy pupils only 10% of the addressed pupils postponed the decision till the last moment.

35% of the pupils with SLD and BD have been convinced about their choice for more than a year, in healthy pupils it is by 11% more. It is possible that healthy pupils decide more quickly and earlier. Nevertheless, the results of the research do not indicate the choice to be easier for healthy pupils. In both groups, 35-36% of the pupils state that the choice was easy and only 12-13% found their choice very difficult. However, a few more healthy pupils confirm that their choice is *related to their interests* (65%), pupils with SLD and BD give similar answer only in 55%, but 40% say that their choice is related to the *experience of someone close to them* (in healthy pupils it is only in 30% of all cases). It seems that reference about the quality of school and experience with the potential future profession play a significant role, *Lack of finance* influences only 17-18% of pupils in both groups.

As expected, parents have *greatest influence on educational choices* of pupils; at the same time both groups of pupils state that the choice was primarily their wish. To a great extent the pupils apparently identify with the parents' opinion. 61% of pupils with SLD and BD consider their choice mainly their own decision and only 9% write that they had only minimum say concerning this decision. The distribution is similar in healthy pupils; little influence is attributed to other circumstances (3%). Healthy pupils consider these other circumstances of influence chiefly commuting, finance etc., in pupils with SLD and BD it is most often namely their disability. The average influence is illustrated in table No. 3 (1 – has no influence, 5 – strong influence).

Table 3: Who influences the choice?

	Pupils with SLD and BD	Healthy pupils
Mother	3,2	3,3
Father	2,8	2,8
Friends	2,5	2,4
Other experts (psychologist, special education teacher)	2,0	1,9
Teachers	2,0	2,1
Siblings	1,6	1,5
Doctors	1,3	1,2

It seems that the rate of influence of individual subjects on the choice is perceived almost identically by both healthy pupils and pupils with SLD and BD. However, we can assume that the *influence of experts*, i.e. teachers or doctors will be higher in pupils with a risk. This influence is by both groups considered low, while 41% of pupils with SLD and BD claim they had consulted an expert; in the group of healthy pupils the choice was

consulted with an expert only by 27% of pupils. Only 20% of pupils admit that their disability rather or significantly complicates the choice.

When inquiring the pupils about factors that would facilitate their choice we find out that some of their wishes cannot be easily met, e.g. *"I would like to try the job... to know if I will like it... to do mock practice"*, etc. Only 1% of the pupils would appreciate greater interest of their parents, 9% greater interest of teachers and school, 11% the possibility to consult the choice with other experts, 25% would appreciate experience and good reference of their peers, others claim that they do not expect any further support.

Concerning *the future* only a little group of pupils with SLD and BD (4%) are considering university studies, 21% are thinking about doing business and others see themselves as future employees. These pupils with SLD and BD might face problems in the labour market as they do not choose a craft (34% and more) but secondary schools with school-leaving exams. The risk seems to be higher in this group because 21% of healthy pupils plan that in the future they will study at university. It is obvious that such plans are only preliminary; nevertheless they indicate a risk of choice general secondary schools.

## CONCLUSION

The greatest influence on professional aspirations of pupils in 9<sup>th</sup> year is exercised by their parents, particularly mothers. Nevertheless, majority of pupils consider the choice their own wish, i.e. they identify with their parents' wish. Almost a quarter of basic school pupils have no experience with technology activities, if they do so, then they evaluate them mostly as excellent or mediocre, however, usually without direct influence on their choice.

Pupils with SLD and BD do not consider the choice of their education difficult more often than their healthy peers, nevertheless, they more often postpone their decision till the last moment and have difficulties when searching the alternative of the same value to their choice. Also, they more frequently consult experts (psychologists, school psychologists and special education teachers), but consider their influence on the choice low, similarly to healthy pupils. The pupils with SLD and BD choose crafts slightly more often than healthy pupils (their average achievement is worse, too), they are more strongly influenced by the family tradition and less by their own interests than healthy pupils. Besides, their self-confidence is lower regarding university studies. Therefore, the risk of unsuitable choice and unemployment can be higher. The results of the research raise questions related to the role of the school and experts and provoke the discussion on what influence is actually expected from them. To gain a greater insight into the whole range of influences and pupils' needs in this area we are conducting qualitative investigations (case studies) too within our research, and we present them in other papers.

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