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ORIGINAL RESEARCH

Employers Feedback on Psychosocial Counselling Graduates' Performance in Selected Healthcare Facilities in Malawi

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Purpose: Psychosocial counselling is vital for addressing mental health challenges in Malawi, a low-income country in sub-Saharan Africa. However, there is a shortage of qualified mental health professionals, including Psychosocial counsellors. The Saint John of God College of Health Sciences aims to produce competent graduates in psychosocial counselling, but there is a lack of information on the quality of graduates and their ability to meet employer expectations. This qualitative study aimed to explore employers' feedback on psychosocial counselling graduates' performance in selected healthcare facilities in Malawi.

Methods: This qualitative approach employed an explorative research design. Eighteen participants were selected purposefully from ten healthcare facilities across three regions of Malawi. They were interviewed independently using a semi-structured interview guide. The data were analysed thematically using content analysis approach.

Results: The study reveals the assigned responsibilities of psychosocial counselling graduates, including providing HIV/AIDS therapeutic services, individual and group counselling, crisis intervention, and coordinating referrals. Employers recognize the graduates' competence in communication skills, empathy, theoretical knowledge, and professionalism. However, some weaknesses were identified, such as difficulties in maintaining boundaries, limited knowledge of health-related terms, and a lack of proactivity. Suggestions for improvement include teaching professionalism, incorporating health-related terms in the curriculum, following up with graduates, continuing the practicum aspect, establishing partnerships, and expanding training in evidence-based practices.

Conclusion: The study explored employer feedback on psychosocial counselling graduates from Saint John of God College of Health Sciences in Malawi. The study to identified strengths, areas for improvement, and recommendations were made to improve the Psychosocial counselling academic programme. Implementing them can improve graduates quality and mental health outcomes in Malawi.

Keywords: mental health, psychosocial counsellors, competencies, gaps, improvement areas, curriculum

Introduction

The worldwide prevalence of mental health problems, such as anxiety and depression among college students, is high, which undesirably affects countries, schools, families, and individual students to varying degrees.[1–3] The multifaceted origins of these challenges, spanning biological, psychological, experiential, and lifestyle risk factors, are exacerbated by the competitive academic environment and underscored by the alarming prevalence of substance misuse, loneliness, and social isolation.[1,2] In response, educational institutions have instituted comprehensive approaches to addressing mental health issues among college students, including on-campus counseling centers, mental well-being promotion, and peer-led initiatives, supported by faculty, staff, and external resources.[1–3] Beyond campuses, society at large grapples with diverse mental health issues, necessitating skilled support. Graduates specializing in Psychosocial Counseling from St John of God College of Health Sciences are strategically placed in Malawi's healthcare facilities to play a pivotal role in providing evidence-based and empathetic assistance. These professionals, armed with psychological expertise and cultural understanding, foster tailored interventions and open dialogue, contributing significantly to the mental well-being of Malawians.

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This interplay highlights the crucial synergy between trained mental health practitioners and societal needs, amplifying the impact of St John of God College Health Sciences practicing psychosocial counselling graduates' contribution to Malawi's psychosocial landscape.

Psychosocial counselling plays a critical role in addressing the intricate and nuanced mental health challenges faced by individuals and communities globally.[4–6] In the context of Malawi, a low-income country in sub-Saharan Africa, the burden of mental health disorders is substantial, and the prevalence of depression between 19% and 30% has been reported among adult primary care attendees in Malawi.[7] There are a lot of problems the majority of Malawians are facing which include economic hardships, family and marital issues, HIV/AIDS and increased suicide cases. Recently, Southern Malawi was hit hard with Cyclone Freddy. As of March 29, 2023, 2.3 million people were affected by Tropical Cyclone Freddy in Malawi, with 1.6 million severely food insecure, over 650,000 people displaced and over 600 deaths.[8] The cyclone caused severe damage on infrastructure, including electricity lines and telecommunication infrastructure; flooded houses; destroyed road networks and bridges, schools, churches, and healthcare facilities.[8,9] The cyclone also led to crop and livestock losses, affecting livelihoods. The floods and heavy rains from the cyclone increased the spread of the Cholera outbreak.[8,9] All the stated problems require well-trained psychosocial counsellors to support the citizens in psychotherapy. However, mental health services remain limited, and there is a significant shortage of qualified mental health professionals, including psychosocial counsellors in Malawi.[7,10,11] In Malawi mental health concerns are prevalent and the demand for trained and competent psychosocial counsellors is particularly important.

The quality of education and training received by counselling graduates is instrumental in building them to have required skills and competencies to support clients in a number of areas.[12,13] It is important to examine the perspectives of employers concerning the competence and preparedness of graduates in psychosocial counselling from educational institutions. A synthesis of literature clearly reveals that feedback and opinions of employers who have employed and collaborated with graduates from the institution is key for the academic institutions to improve their curriculums.[14–22] By comprehending the perspectives of employers, invaluable insights were derived regarding the strengths, weaknesses, and areas for improvement in the provision of the education program by the higher education institutions offering diverse academic programmes.[14–18,20–22] The results obtained from the employers of the graduates can help academic institutions to redesign and refine their curriculums to meet the standards of the industries. Such studies and developments provide a chance for future graduates to possess the necessary skills to effectively address the gaps in the employees that might be identified by the employers in workplaces. Researchers believe that employers in these sectors possess first-hand experience working with Psychosocial Counseling graduates from the college. This strategically positions employers well to provide feedback on the graduates' performance and competence in the real-world workplaces. As such, their perspectives may offer valuable input into the alignment between the education provided by the institutions of higher learning (universities and colleges) and the expectations and demands at the workplaces.

The inclusion of psychosocial counseling services across diverse sectors, including healthcare, education, and non-governmental organizations, creates viable job prospects for individuals who have completed their counseling training. In Malawi, Saint John of God College of Health Sciences is the only tertiary institution that is accredited by Medical Council of Malawi that offers an academic programme in psychosocial counselling. The college is a private institution of higher learning, which was established in 2003.[23] It is located in Mzuzu City in the north of Malawi. The institution is affiliated to three Malawian public universities which include Mzuzu University, University of Malawi and Kamuzu University of Health Sciences.[24,25] The college offers six academic programmes, namely Diploma in Psychosocial Counseling, Bachelor of Science in Psychotherapy (newly introduced academic programme), Diploma in Nursing (Registered Nurse), Diploma in Clinical Medicine, Bachelor of Science in Clinical Medicine (Mental Health), and Bachelor of Science in Mental Health Psychiatric Nursing. In this study, Psychosocial Counselling graduates refer to professionals who specifically trained and successfully completed their studies at Saint John of God College of Health Sciences and are providing counselling services to clients in different health facilities across Malawi. While counsellors entail all trained and licensed professionals who provide counseling services to clients regardless of learning at Saint John of God College of Health Sciences. Ideally, a counsellor is a professional who provides support, guidance, and therapeutic interventions to individuals dealing with a wide range of psychological, emotional, and social challenges that impact their mental health and overall sense of well-being.

In the Malawian context, St John of God College of Health Sciences Psychosocial Counselling curriculum is designed to prepare its graduates to be employed in the public and private sectors in the provision of psychosocial support. Those that find employment opportunities in government institutions work in health facilities (hospitals, health centres and clinics), schools, the police service, the army, orphanage centres, refugee camps and prisons. While others are employed in the private sector, including Non-Governmental Organizations (NGOs) and Christian Health Association of Malawi (CHAM) health facilities. In Malawi, the majority of psychosocial counselling graduates are employed by NGOs but are strategically placed in government and CHAM health facilities across Malawi. In particular, some of the NGOs that employ Psychosocial counselling graduates include: Baylor College of Medicine and Children Foundation, Elizabeth Glaser Pediatric AIDS Foundation (EGPAF), Lighthouse trust, Malawi AIDS Counselling and Resource Organization (MACRO), Medic to Medic, Pakachere Institute for Health Development Communication, Partners in Health, Partners in Hope, Saint John of God Hospitaller Services, and SOS Children's Villages.

Through exploring employers' feedback, this study has delineated the strengths demonstrated by graduates specializing in Psychosocial Counselling from Saint John of God College of Health Sciences. Furthermore, it established specific areas requiring improvement to ensure that the education provided by the College effectively equip graduates for the challenges they encounter in their respective workplaces. The employers' input contributed to the ongoing developments at Saint John of God College of Health Sciences. For instance, it also assisted in the review of the Diploma in Psychosocial Counselling Curriculum and the development of the Bachelor Science in Psychotherapy Curriculum which was recently approved by the Medical Council of Malawi (MCM). In the long run, the College will produce highly competent and skilled professionals who can make a significant impact in the field of Psychosocial Counselling in Malawi.

Aligning educational outcomes properly with the expectations and requirements of employers, Saint John of God College of Health Sciences can better equip its graduates to provide exemplary mental health services to the diverse and marginalised Malawian population. It is envisaged that the findings and recommendations of this study have the potential to inform evidence-based interventions. This might cultivate a workforce capable of addressing the mental health needs of Malawians. Recommendations will be used to promote the continued growth and improvement of Psychosocial Counselling education, thereby uplifting the standard of mental healthcare provision.

In Malawi, Saint John of God College of Health Sciences is a reputable institution of higher learning providing training in psychosocial counselling since 2003.[23,24] Much as the Psychosocial Counselling Curriculum is designed to equip graduates with the necessary knowledge and skills, still more there is limited information on the quality of the graduates produced by the College. It is also not yet known on how well the graduates are meeting the expectations of employers and addressing the various needs of clients. The feedback from employers provides important perceptions into the effectiveness of the education provided by the college and helps identify any gaps.[26–28] The feedback may also suggest areas for improvement for the teaching institution.[16,26,28] Since Saint John of God College of Health Sciences started graduating its students in 2004, no any study has been conducted to solicit employers' views on Psychosocial counselling graduates of the College. Therefore, the main aim of this study was to explore the employers' feedback on the performance of the Saint John of God College of Health Sciences Psychosocial Counselling graduates' performance in selected healthcare facilities in Malawi.

Materials and Methods

Study Design

The study used a qualitative approach employing explorative design to collect information on the employers' feedback on Psychosocial Counselling graduates' performance in workplaces in Malawi. Qualitative research is dynamic and attempts to capture experiences in the context of those experiencing them.[29,30] As such, a qualitative approach using interviews was the most suitable research method to carry out this study and gain an in-depth understanding of the phenomenon.

Study Setting and Sample

The study was conducted in all the three regions (northern, central and southern) of Malawi at selected healthcare facilities where the Saint John of God College of Health Sciences graduates were employed. These study participants were purposively selected across the three regions of Malawi. This is because Saint John of God College of Health Sciences Psychosocial counselling graduates are working across Malawi in different non-governmental organisations. In these sites, the researchers collected the data physically, that means collecting the data in person (Table 1).

Study Participants

The study participants were immediate supervisors who are regarded as employers for the graduates in the identified workplaces. Eighteen supervisors were interviewed from 10 different organisations in different healthcare facilities to give in-depth information about the graduates. The study excluded all supervisors who were not directly responsible for supervising the psychosocial counselling graduates.

Sampling Methods

The study used purposive sampling to select the supervisors or employers who were interviewed to give in-depth information about the graduates. Supervisors were health professionals whom Psychosocial Counselling graduates from Saint John of God College of Health Sciences directly reported to, as their superiors in different work places. Purposive sampling technique entails intentionally selecting individuals from a larger population based on predetermined criteria to concentrate on participants with specific relevant attributes or experiences, leading to targeted research at hand despite non-representativeness.[29–31] The sample size was determined by the data saturation.

Description of the Data Collection Process

A total of 18 participants (senior clinical officer 4, clinical officer 5, clinical psychologist 3, psychotherapist 1, district nursing officer (DNO) 2, nursing officer 3) were included in the study, and this was considered ideal for research of this nature. However, saturation was also a critical determinant of the sample size used in the study. Inclusion criteria of participants in the study were based on their availability and willingness to contribute to the subject matter, as well as those that directly supervised Psychosocial counselling graduates from Saint John of God College of Health Sciences,

Table 1 Study Sites

Health Facilities	Northern Region	Central Region	Southern Region	Total Participants
	Number of Participants	Number of Participants	Number of Participants	
A	2	1		3
B			1	1
C		1	1	2
D		1		1
E		2	1	3
F	1	1	2	4
G		1		1
H		1		1
I	1			1
J	1			1
Total	5	8	5	18

Healthcare practitioners who did not meet these criteria were excluded from the study. At the 14th interview, no new theme emerged, and subsequent data collection followed a pattern that paid more attention to addressing the already emergent themes. At the 16th interview, data saturation was judged to have been achieved, however, two other interviews were further conducted to affirm this.

An interview guide was used to gather data from the supervisors. The data were collected from March 2023 until May 2023, through one-on-one in-depth interviews using an interview guide. The interviews were conducted by the same researchers in a quiet room and were audio- recorded and transcribed verbatim. Furthermore, the transcripts were returned to participants for comments. The duration of interviews was between 50 and 60 minutes. During the interviews, participants were encouraged to freely share their views on the Psychosocial counselling graduates from the College. An interview guide was developed after reviewing the literature on the Employers feedback on graduates' performance in workplaces. The interview guide was used to structure the interviews. The participant information sheet was also provided to collect detailed information on the participants. Participants were asked to sign the consent form.

To ensure privacy and confidentiality, participants' data was stored in a locked cabinet and only accessible to the researchers. Data collection instruments were in English language and were not be translated in any local language. This is because participants were conversant with the language.

Ethical Considerations

The study was approved by the National Commission for Science and Technology (NCST) (Approval number: P.10/22/682) and permission was sought from Ministry of Health and management of the ten healthcare facilities. The study was conducted in accordance with the Declaration of Helsinki. Before the interviews, the interviewees were informed in detail regarding the purpose, methods, content and confidentiality of the study. The analysis of the results and the writing of the paper were coded and carried out anonymously. The researchers also assured the participants of the voluntary nature of the study and their rights to discontinue the study at any given time. Written informed consent forms were signed by all interviewees after agreeing to participate in the study voluntarily and the participants informed consent included publication of anonymized responses.

Preparation of Interview Questions

The interview guide was prepared in English using the objectives of the study. Field notes were used to verify issues that arose during data collection. The data collection tool also comprised demographic profile of participants.

Pre-Test of Data Collection Tool

The interview guide was pre-tested at Saint John of God Mental Health Clinic in Mzuzu in the Northern Region. Two individual participants were used to adapt the tool accordingly and increase its credibility. The results from the pilot study were not included in the main study.

Methodological Rigor

Researchers employed trustworthiness principles to make the study more credible and dependable.[32] Pilot testing of the data collection instruments and extensive interaction with the data were used to have deeper understanding. For credibility, some measures, such as long-term engagement and continuous observation by the researchers, use of duplicate questions to assure sample responses, and review of codes and categories by research team (peer debriefing) and participants (member check) were applied.[29,33,34] Dependability of the data was addressed by giving a detailed account of how data were collected, specific measures implemented during the research process, taking notes, data analyses, and determining categories. Through this, external auditors can examine the process. Furthermore, to facilitate external audit, the research process was explained thoroughly to ensure confirmability. Ultimately, the results were provided to three Psychosocial Counselling graduates in another context, who did not participate in the study, for check transferability. Their experiences were compared with our results and consistency was confirmed. Confirmability was upheld by involving multiple researchers in the data analysis phase to minimize individual biases.[29,33,34] Moreover, authenticity and confirmability were achieved by using participant's quotes when presenting the study findings and provide a dense description of research methodology.

Data Analysis

Data were analysed thematically using content analysis approach. Content analysis is a systematic coding and categorizing approach used for unobtrusively exploring large amounts of textual information to determine trends and patterns of words used, their frequency, their relationships, and the structures and discourses of communication.[35] NVivo 11 software was used to code and organize the data. All audiotaped interviews were transcribed verbatim in the initial data analysis. Thereafter, the study team read through all the transcripts several times to obtain a sense of the overall data. Initial open coding was done, which was then developed into various categories. Main concepts and phrases that arose in the transcripts were manually highlighted, extracted, and organised to generate the codes and subthemes. In the process, labels for codes emerged as they were grouped into final categorical themes. Data collection process and analysis were concurrent until the analysis generated different perceptions, and there were no new themes emerging, at which point data saturation was assumed to be attained.

Results

There were four general themes that emerged from data analysis. These were: assigned responsibilities of the psychosocial counsellor; competence of the employees in delivering psychosocial counselling-related tasks; the gaps observed in the graduate's delivery of psychosocial counselling-related tasks and improving the quality psychosocial counselling graduates at the college. Table 2 summarizes the participant's demographic characteristics. There were 18 participants in total across all the three regions. Of these, 14 were males and four (4) were females.

Table 2 Respondents by Gender, Sector, Age Range, Number of Years in the Post, and Position (n=18)

Dimension	Category	Number
Gender	Male	14
	Female	4
Sector	Malawi Government hospital	3
	Christian Health Association of Malawi (CHAM) hospital facility	3
	Non-Governmental Organisation	11
	Academic Institution	1
Age range	20 years – 24 years	0
	25–29 years	2
	30–34 years	4
	35 years and above	12
Number of years in the post	5 years and below	1
	6–10 years	3
	11–15 years	10
	16 years and above	4
Position	Senior Clinical Officer	4
	Clinical Officer	5
	Clinical Psychologist	3
	Psychotherapist	1
	District Nursing Officer (DNO)	2
	Nursing officer	3

Themes That Emerged

Theme 1: Assigned Responsibilities of the Psychosocial Counsellor

Interviews conducted with the immediate graduates' supervisors revealed a number of responsibilities assigned to the Psychosocial Counselling graduates. The responsibilities revealed are as follows: providing HIV/AIDS therapeutic services; offering individual counselling, family and group counselling; and short trainings and workshops, crisis intervention, and coordinating referrals. The following are the sub-themes that came out:

Providing HIV/AIDS Therapeutic Services

It was established that Psychosocial Counsellors were involved in providing HIV/AIDS therapeutic services. These included conducting HIV testing and counselling, sample collection of viral load and DBS, providing pre-ART counselling, assist clients with adherence to ART drugs, retention of ART clients and tracing of ART defaulters.

> They assist us a lot in our ART Clinic. They are involved in pre and post testing. In some instances, they follow up defaulters even in their homes using their own resources at times. After counselling them, we see them coming back for medication. (Participant 17)

Individual Counseling

It was reported that Psychosocial counsellors were responsible for providing individual counseling to clients. They were expected to establish a therapeutic alliance, conduct assessments, and develop personalized treatment plans.

> With these problems that we face in Malawi, the one-on-one counselling reduce people from killing themselves. He gives hope to the hopeless. (Participant 18)

Family and Group Counseling

Graduates were often involved in facilitating family and group counselling sessions, addressing various mental health concerns. They possess group facilitation skills and the ability to create a safe and supportive environment.

Short Trainings and Workshops on Psychoeducation

Employers noted that graduates were mostly engaged in delivering psychoeducation sessions to clients. This involved providing information numerous mental health disorders, coping strategies, and self-care practices.

Crisis Intervention

Psychosocial counsellors were also assigned with responding to disaster situations and providing immediate support to individuals experiencing acute mental health problems. One supervisor said:

> After the Cyclone Freddy hit very hard some districts here, people were left with nothing after losing all their properties and some lost their family members, friends and relatives. This was one of the difficult situations even as a country we were all shocked and speechless. We sent the same psychosocial counsellors to the camps where people were residing to provide counselling and give them hope (Participant 18).

> … People were homeless and were left with literally nothing and she volunteered to provide psychosocial support to those affected… (Participant 14)

Coordinating Referrals

Employers emphasized the importance of graduates' ability to identify clients who required further support beyond their scope of practice and refer them to appropriate professionals who may assist them.

Theme 2: Competence of the Employees in Delivering Psychosocial Counselling Related Tasks

Interviews with supervisors established that the graduates are highly competent as they provide high level standard psychosocial counselling services confidently with minimal support. It was also reported that the psychosocial

counselling and other related duties are accomplished on time. Employers reported that the Psychosocial Counselling graduates were skilled in communication skills, empathy and compassion, theoretical knowledge and professionalism. The following is a verbatim from one of the supervisors:

Communication Skills

Employers commended the graduates for their effective written and oral communication skills. They were also commended for having good listening skills. One said:

> …These graduates have high-level communication skills and honestly, they can create a safe and non-judgmental environment for clients to express their issues freely… (Participant 1)

> From my observation, I would say these employees are able to provide the standard counselling according to the needs of the clients. Actually, they provide the needed package, and they are good communicators. (Participant 2)

Empathy and Compassion

Graduates were consistently described as empathetic and compassionate in their interactions with clients. Employers recognized the graduates' ability to understand and validate clients' emotions, which significantly contributed to the therapeutic process.

> All of them are able to deliver Psychosocial counselling-related work. On a scale of 10, I would let them 8 out of 10. This is because they are a motivated cadre and they use different approaches such as empathy and compassion. (Participant 3)

Theoretical Knowledge

Employers recognized that graduates possessed a strong theoretical foundation in psychosocial counselling. They demonstrated a solid understanding of various counselling approaches, assessment techniques, and treatment modalities.

> When we are in our internal meetings, it is clearly seen that she has a vast knowledge base of her profession. We also learn from her that some patients can heal with just a talk not necessarily medication. (Participant 13)

Professionalism

Employers commended the graduates for their professionalism and adherence to ethical guidelines. The graduates were noted to maintain confidentiality, respect boundaries, and uphold the principles of ethical conduct in their counselling work.

> So far, I have never had any work-related issues with our Psychosocial Counsellor, thus a sign that he is a professional and he handles himself with high integrity. He dresses well and comes to work on time. (Participant 12)

Theme 3: The Gaps Observed in the Graduate's Delivery of Psychosocial Counselling Related Tasks

Results from the interviews conducted with the graduates' supervisors revealed some weaknesses in the graduate's delivery of psychosocial counselling-related activities. The following are some of the weaknesses revealed: failing to separate social relationships and work, lack knowledge of terms or jargons in the health profession, young graduates age not matching with the psychosocial counselling tasks, and they are not proactive enough. The following are the sub-themes that emerged.

Failing to Separate Social Relationships and Work

Employers observed that some graduates struggle to maintain clear boundaries between their personal social relationships and their professional role as counsellors. Employers emphasize the need for graduates to develop a strong understanding of professional boundaries to ensure ethical and effective counselling practices. Below are direct quotations from one of the supervisors:

> In my view, she has to improve on character and relationship with clients, especially when talking to them. She must separate relationship and work. Should work on integration of personality and professionalism. (Participant 1)

Lack of Knowledge of Terms or Jargon in the Health Profession

Feedback from employers revealed that several graduates have limited knowledge of the specialized terms or jargon commonly used in the health profession. Employers emphasize the importance of ongoing professional development to enhance graduates' knowledge and fluency in the language of the profession. One participant stated as follows:

> …. Aaaah!!! In terms of Psychosocial counselling, they are very good, but they lack knowledge of health-related terms or jargons, so that they should have a very good base. It is important that they know these terms because they work in the health field…. (Participant 9)

Young Graduates Not Matching with Psychosocial Counselling Tasks

Employers observed that some young graduates may lack the necessary life experiences or emotional maturity to effectively handle the complexities and challenges of psychosocial counselling tasks. The following excerpt illustrates this gap:

> Since some young graduates are young in the profession that is attached to attitudes and values. Some specific contexts require to be handled with appropriate age attachment. (Participant 10)

Not Proactive Enough

According to employer feedback, some graduates demonstrated a lack of proactivity in identifying and addressing clients' needs. Employers encourage graduates to be more proactive in their approach, actively seeking opportunities to address concerns and provide comprehensive support to their clients.

Theme 4: Improving the Quality Psychosocial Counselling Graduates at College

Interviews with employers revealed a number of areas that the College should take into account to improve the quality of Psychosocial counselling graduates of the institution. These include: teaching professionalism in students, adding health related terms to the curriculum, following up graduates in their work places, continue the practicum aspect, and establishing partnerships expand training in evidence-based practices.

Teaching Professionalism in Students

Participants highlighted some areas that the College should work on to improve the quality of the graduates in psychosocial counselling. Participants suggested that the college should work on teaching professionalism in students before they leave the college. This was expressed by one participant in the following excerpt:

> The college should work on building professionalism in students before they leave your college, since it will assist the students in dealing with work relations. This will also facilitate effective delivery of services. (Participant 18)

Adding Health Related Terms to the Curriculum

One of the participants expressed that graduate's quality can be improved by incorporating a course in the curriculum that should include a component of health-related terms. This was illustrated in the following excerpt:

> Honestly, these psychosocial counselling graduates work with other health professionals like medical doctors, clinicians, nurses, and others… So they encounter challenges in understanding some health or technical jargons, I strongly feel like those jargons should also be added in their curriculum at school…. (Participant 8)

Following Up Graduates in Their Work Places

Another participant suggested another way to improve the quality of psychosocial graduates is to be continuously

following up them at their work places to be understanding real issues on the ground based. Once they are visited in their different healthcare facilities, the college will be finding some solutions that may be included in the curriculum.

Continue the Practicum Aspect

The data collected from the interviews revealed that the college should continue the intensity of the practicum aspect. A selection of verbatim quotes from one of the participants is presented below:

> Yes, let me emphasize that one key thing the college should not stop doing is the component of practicum… practicum offers students the opportunity to work directly with clients, apply theoretical knowledge and gain practical experience in a supervised setting… this experience can help students develop their counseling skills…. (Participant 15)

Establishing Partnerships

The results from the interviews showed that the college can improve the quality of psychosocial counselling graduates by establishing partnerships with relevant organizations in the community, such as hospitals and counseling centers. The following is a direct quotation from the participant:

> As a matter of fact, your college can collaborate with experts in the field to ensure that the curriculum is up-to-date with the latest psychosocial counselling research and practices… It can assist the exchange of knowledge and resources between the college and the community… This can also provide a very good platform for practical training and gain experience… (Participant 5)

Expand Training in Evidence-Based Practices

Employers emphasized the importance of graduates being knowledgeable about evidence-based counselling interventions. They recommended enhancing the curriculum to include training in specific evidence-based practices such as Cognitive-Behavioral Therapy (CBT), Solution-Focused Brief Therapy (SFBT), and Trauma-Informed Care.

Discussion

The main aim of this qualitative study was to explore the employers' feedback on Psychosocial Counselling graduates' performance in selected healthcare facilities in Malawi. The findings of this study provide valuable insights into the assigned responsibilities, competence, gaps, and recommendations for improving the quality of psychosocial counselling graduates from Saint John of God College of Health Sciences in Malawi.

The assigned responsibilities of psychosocial counsellors play a crucial role in determining their effectiveness in addressing the diverse needs of clients in healthcare facilities. Results clearly show that the graduates were entrusted with a wide range of responsibilities, including individual counselling, family and group counselling, short training and workshops on psychoeducation, crisis intervention, and coordinating referrals. These results are in tandem with previous studies which also clarifies that counsellors must possess a comprehensive skill set to address the complex mental health concerns of clients.[12,13] This is aligned with the multifaceted nature of the profession, which requires many skills since citizens face a diverse nature of problems.[12,13]

Results found in this study show that the positive feedback received from employers regarding the competence of graduates in delivering psychosocial counselling tasks reflects the effectiveness of the educational programme provided by the College. Employers acknowledged the graduates' strong communication skills, active listening abilities, empathy, compassion, theoretical knowledge, and adherence to ethical guidelines. Literature indicate that these competencies are essential for establishing therapeutic relationships, fostering trust, and facilitating meaningful change in clients' lives.[12,13] The positive feedback received from employers regarding the competence of psychosocial counselling graduates carries several implications for further enhancing their skills and performance. Graduates should prioritize continued professional development to stay abreast of the latest research, interventions, and best practices in the field.[36] By actively engaging in workshops, conferences, and specialized training programs, they can enhance their knowledge and skills to better meet the evolving needs of clients. Besides that, integrating ICTs in different professions can yield quality

results.[24,25] In agreement with that, scholars argue that incorporating Information and Communication Technologies (ICTs) into counselling practice can assist improve the profession.[37–39] These include online databases, online platforms, and electronic record-keeping systems. This implies that embracing technological advancements can improve the overall quality of their counselling services in Malawi.

The study established some gaps in the delivery of psychosocial counselling-related tasks in different workplaces. Employers observed that some graduates struggle to separate their social relationships from their professional responsibilities. This hinders the establishment of appropriate boundaries with clients, compromise objectivity, and impact the quality of counselling.[40,41] The college should address this gap by incorporating training on professional boundaries to ensure the development of healthy professional relationships. Feedback from employers revealed that graduates often lack sufficient knowledge of terms or jargon specific to the health profession. This brings a communication gap among health workers and clients.[42,43] Employers also expressed concerns about young graduates not fully matching with the psychosocial counselling tasks they encounter in professional settings. This can be attributed to limited practical experience, lack of exposure to diverse client populations, or inadequate training in specialized areas. The literature highlights the value of practical experience and exposure to diverse clients in preparing graduates for the challenges of the field.[44–46] To bridge this gap, the College should enhance their practicum components, offer opportunities to work with diverse populations, and provide specialized training in areas, such as trauma-informed care, and multicultural counselling. Employers have observed that some graduates are not proactive in their approach to client care. This can manifest as a lack of initiative, limited problem-solving skills, or inadequate follow-up with clients. The literature stresses the importance of active engagement, critical thinking, and proactive behaviour in effective counselling practice.[40] The college should emphasize the development of these skills through experiential learning, case studies, and practical training opportunities.

This study revealed a number of areas which must be improved to produce the quality psychosocial counselling graduates at the college. Employers recommended that the college should be teaching professionalism to students. This aligns with the literature, which emphasizes the significance of ethical conduct, maintaining boundaries, and adhering to professional guidelines in the counselling profession.[5,45] The implication is that integrating professionalism into the curriculum enables students to develop the necessary skills for establishing and maintaining professional relationships with clients. Results indicated that employers also stressed on the need to incorporate health-related terms and jargons into the curriculum. Understanding medical terminologies and concepts facilitates effective communication among healthcare professionals.[42,43] Thereafter, it will promote interdisciplinary collaboration between psychosocial counsellors, nurses, clinical officers and other cadres in the health sector. This implies that understanding health-related terms is key in providing comprehensive care and fostering collaboration within the healthcare delivery system. This collaboration could lead to improved patient outcomes, as different experts bring their unique perspectives, skills, and knowledge to address the needs of patients. This integration of diverse expertise has the potential to enhance the quality of healthcare services, ensuring that patients receive well-rounded and patient-centered care that encompasses not only medical needs but also psychosocial and emotional support. Supervisors also emphasized the value of following up with graduates in their workplaces. A synthesis of literature shows that such follow-ups are vital for evaluating program outcomes and staying informed about graduates' experiences.[20,28] This implies that such ongoing connection allows colleges to assess program effectiveness, identify areas for improvement, and can help the College to improve on its curriculum for future students. Another key result derived from employers' feedback is the continuation and strengthening of the practicum aspect. It is expected that the counsellor should be abreast of a handful of the following approaches to counselling: psychodynamic psychotherapy, cognitive behavioural therapy (CBT), humanistic/existential therapy, mindfulness, post-modern therapy, family systems therapy, person-cantered therapy, existential therapy, gestalt therapy, and eclectic techniques.[45] This can make graduates have a diverse range of therapeutic approaches to meet client needs. Strengthening case management skills through focused training can improve graduates' ability to develop comprehensive treatment plans and monitor client progress. The literature supports the value of experiential learning, exposure to diverse client populations, and the integration of theory and practice in counselling services.[44] This means that strengthening the practicum component, with structured supervision, feedback mechanisms, and clear learning objectives, enhances students' clinical skills. Establishing partnerships with external organizations and community agencies was also

emphasized by employers as a strategy to improve the programme. The literature echoes this implication, highlighting the importance of community engagement, collaboration, and exposure to a variety of client populations to enhance students' learning experiences and professional networks.[4,44] These partnerships offer students valuable experiential learning opportunities, exposure to different practice settings, and access to a diverse range of clients.

Limitations

The limited number of participants might be one of the setbacks in this study, therefore generalizing the results should be done with caution. A larger sample size would have provided a more representative perspective and increased the robustness of the findings.

The study did not directly involve the graduates themselves. Including their perspectives on their education and training experiences could have provided a more comprehensive understanding of the strengths and weaknesses of the psychosocial counselling academic programme. Therefore, researchers recommend that another study has to be done which should target Psychosocial counselling graduates of the College.

The study focused on a specific period and may not capture the long-term outcomes and effectiveness of the graduates. Following up with employers and graduates over an extended period could provide a more comprehensive evaluation of the graduates' skills and professional development.

Conclusion

The study examined the feedback from employers on the psychosocial counselling graduates of Saint John of God College of Health Sciences in Malawi. The findings highlighted the graduates' competence in fulfilling their assigned responsibilities, which included various counselling tasks. However, certain gaps were identified in their delivery of psychosocial counselling-related tasks. To address these gaps, recommendations were proposed, such as training students' professionalism, incorporating health-related terminologies to their curriculum, conducting graduate tracer studies, continue the practicum facet, creating partnerships with other institutions and enhance research. Implementing these recommendations can improve the quality of psychosocial counselling graduates and contribute to better mental health outcomes in Malawi.

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