Diagnosis levels in Vocational Guidance and Placement Processes

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Abstract

Career and employment counseling has been shown to be a key tool for assisting in processes of socio-professional placement. The objective of this article is to offer an innovative model of intervention that addresses the three vertices of labour market, social fabric and personal context, from which one can understand and globally analyze those actions aimed at enhancing access to the labour market for both groups and individuals.

The study offers indicators that can be applied specifically to intervention processes for social-professional placement.

Keywords: Socio-professional placement, employment counselling, assessment, occupational transitions

Introduction

All services linked to employment placement, whether they be public or private, share the need for operational references which can either assist or promote the labour market incorporation of specific individuals or groups. The present article outlines a broad framework which makes possible the establishment of indicators for employability diagnosis starting from the three major axes of incorporation: the labour market, the social fabric and the individual in question.

Diagnosis for employment placement is a comprehensible and approachable term, indeed, even to the extent that its very approachability may prove deceptive, especially if its use is limited simply to promoting the social acceptance of labour market entry. In this article we will attempt to scrutinise the many different aspects of the term, and to open fresh perspectives on placement diagnosis and in so doing attempt to specify some of the many possible practical applications. Diagnosis for labour market entry forms part of the more general discipline of diagnosis in professional orientation, and is concerned with understanding, analysis and intervention in connection with both individuals and groups who confront situations, whether personal or professional, related to the development of their personal careers.

What is Socio-professional Integration?

During recent decades there has been a steady increase in the number of studies which have been carried out into the processes of labour market placement for adults and young people, beginning with the recognition that professional orientation (and in a more general sense psycho-pedagogic intervention) is a key strategy within the framework of action directed towards favouring placement/inclusion, or, what is effectively the same thing, towards the avoidance of social and labour market exclusion.

The literature associated with this topic is in fact just as extensive as the terminology it has inspired, which we now briefly will summarise:

- The concept of **labour market placement** is one which has met with a widespread acceptance in an employment context. We normally identify labour market access with obtaining a job, and it is common to find a direct association between termination of unemployment and employment placement. However, most contemporary authors take the view that this relation is not one of true equivalence. As Vicens (1999) indicates, if we are really to talk about the placement process we need to think in terms of the achievement of a relatively stable permanent work status (whether employed or self employed) in such a way that a certain level of economic independence is achieved, with a high probability of being able to maintain this independence. Current European Union employment placement policies attempt not only to promote employment but also to guarantee the quality of employment placement as a fundamental measure to increase the competitiveness of member states (see European Employment Strategy, DO L197, 5.8.2003).
- Establishing quality of life as a multidimensional placement measure has a number of implications for action and evaluation. The centres and/or agents responsible for employment placement have to engage in an activity which by its very nature is more complex than can be measured in terms of training or other unidimensional indicators associated with the action they carry out. They need to be encouraged to think, or rethink, in a continuous search for forms of social participation beyond those which are associated with the simple achievement of employment. In this way evaluation indicators become broadened to include other elements which are

- broader than the issue of whether or not a job has been obtained, opening perspectives which facilitate social action.
- The concept of **transition** is one which has been widely diffused in the context of training policies, and this pervasiveness of the concept is in part to be explained by the distance which currently exists between the culture of the school and the culture of the workplace. This situation is also associated with the progression which occurs from adolesence to the adult world and the active life. Viewed in this light the concept of the transition to work is currently defined as *a broad process*, in which the achievement of professional qualification and personal maturity coincide, in a context which is conditioned by training and work (Casals, 1997, Figuera, 1996). The process is initiated during the training period, during which the student shapes his or her curriculum, learns to manage attitudes and behaviour, to develop strategies and to take decisions, and it comes to an end with placement in the first job, and with this placement the consolidation of the new work trajectory. Terms like the transition to the active life, and the work-school transition, now form a normal part of the linguistic environment of the professional who is active in the field.
- The expression **socio-employment integration** is one clear example of a concept which has emerged as a by-product of the specific intervention needs which have arisen from working with communities with special educational needs. Examples include migrants and their children, or persons with physical or mental disabilities, where integration at work forms a key component in the wider process of social integration (Jurado, 1990).
- The **placement-exclusion continuum**. The concept of work placement is often also defined in relation to that of **exclusion**, since the two are normally considered to be mutually exclusive whilst at the same time furnishing the defining limits of one single process. The concept of **exclusion** (together with its synonyms **marginalisation** and **vulnerability**) marks the negative boundary in the exclusion-placement continuum, and the concept has also been identified with a process of distancing from those social networks which define the community in which the individual lives, or with a loss of autonomy in achieving the resources which are necessary to live, to integrate and to participate in the wider society (Ballester and Figuera, 2000).

- The transition system. Both placement and exclusion are directly related to the given social structure in which the dynamic develops. The way in which a society is structured, the development of the formal training system, the role played by employment policies, the support systems and the individuals who participate in the support process, all of these have a significant influence over the transition trajectory and over the nature and distribution of social opportunities and difficulties which present themselves. The concept of 'transition system' (or 'placement system') includes the totality of public actions and resources put in motion in association with the transition (Rose, 1987; Casal, 1997).
- *The itinerary*. One of the most widely deployed concepts in the area of access is that of the itinerary or route (Rodríguez Moreno, 1999), which is located within the framework of the individual's personal biography and which defines the trajectory or process which the person follows whilst planning, organising and designing the various roles they will assume during their adult life. This process is associated with that of learning to manage one's own possibilities and combining such possibilities with the resources offered by the immediate environment.

What is placement-oriented diagnosis?

Placement diagnosis has the objective of helping the individual to face up to the social and professional demands which are imposed by the need to enter the labour market, from the begining of the preparation period up to the entry into the active life, passing through the exploration of the professional world, entry into the labour market and adaptation to the first job, as well as all the readjustment processes which accompany professional life – being informed of job loss, leaving the job, looking for a new one etc, and the processes of readjustment in professional-life roles, readjustments which are occasioned either by the changing character of the roles themselves or by employment circumstances.

This process makes it necessary to analyse variables, to interpret them, to combine them within a logical schema and to form action plans. The majority of these variables require a psychological substructure which allows for the understanding of their structure, a sort of DNA for the placement process, but it is always important to keep in mind the process in which the diagnosis is carried out is preeminently an educational one (Donoso, 2001).

Characteristics of employment placement diagnosis

In the framework of policy interventions directed towards improving the labour market placement experience of young people and adults it is important to draw attention to a series of characteristics which: a) differentiate this type of diagnosis from others that may be conducted within the school or among young people; b) structure the process and c) direct the activities of the professionals involved (Donoso, 1998).

- Decisions taken in the course of adult life have a very different character from those which are taken earlier. The term which best describes decision making during adult life is perhaps "binding". This term is one often found in a legal context and here should be understood in terms of the commitments which are acquired and the demands which are made on the person as a result of decisions taken. A bad choice made in adult life which needs subsequent correction and adjustment can bring with it an additional expenditure of energy which inevitably has an associated "cost" for the person concerned. The individual is normally continually aware of this even if it is only at an unconscious level, and this awareness makes decision making a more pressurised, anxiety ridden and significant process than it is in earlier life. However, this characteristic of adult decision making that the professional should always have clearly in mind also needs to be combined with two other characteristics worthy of comment: the incorporation of errors in the diagnostic process, and the need to move away from stereotypes associated with age.
- The stereotype of age, or ageism (Padilla, 2001), is the tendency to judge and value human conduct, in terms of whether it is appropriate or not, in relation to the social norms for a given age. Life and professional trajectories are broadening and changing rapidly, and indeed at the same speed as the associated changes in professional and social structures. It is thus clear that indicators which may serve in the context of child diagnosis, where it is necessary to have a set of evolved references and and to know at some level of generality the principal characteristics of each given age group as a guide to interpretation, are not valid in the context of adult diagnosis.
- Learning by trial and error is present throughout the entire learning process and we should apply this in the same terms to career development: among other things it is noteworthy that people tend to give considerable importance and strong emotional charge to failure. Introducing the value of error, and learning from mistakes, into the diagnostic process in professional orientation implies a feedback component which requires a rethinking of the normal linear process used in such diagnoses.

- In the context of the training processes diagnosis should be combined with a common programme in which elements of the diagnosis are directly linked to the training process itself. Take, for example, the case of a training course among a high risk group such as long term unemployed or ex-prisoners. In such a case data for the diagnosis may be collected by the inclusion of relevant activities within the curricular areas, such as, for example, how to express in writing details about your life, the key people in your life, your strong and weak points....; such elements may later be collected and used as diagnostic indicators. In the same way diagnostic interpretations should, whenever possible, be introduced into the training process.
- Orientation for placement, and for the diagnosis itself, should be carried out in a context which is familiar to those being diagnosed. The presentation of alternative training itineraries needs to have been previously studied in the context in which the individuals in question live since it is rather meaningless to carry out an intervention on such an abstract level. It is also important to pay special attention to the groups, structures and organisations which constitute the local environment, and to the links which may exist with the community and with other professionals who are active in this context.
- What are the relevant variables to analyse in each given case? The theoretical framework
 governing the activity will tend to indicate the relevant diagnostic variables. According to
 the scope of this framework the areas which may be involved in the placement process
 can be analysed.

In a previous publication (see Donoso and Figuera, 2001), we have positioned ourselves in relation to what may be considered as one of the key theoretical concepts: the socio-cognitive perspective, which should be understood here as a comprehensive approach which facilitates our understanding and explanation of the diagnostic and intervention process, and which has its origins in the cognitive-behavioural approach. Under the heading cognitive-behavioural approach we include a whole line of research which whilst originating in two distinct traditions - neo-behaviourism and cognitive orientations - is normally seen today as a single entity based on two complementary approaches. Both of the traditions which lie behind the approach have now evolved to the point where they have emerged as the cognitivist approaches towards career development within the constructivist perspective which today dominates the interpretative and interventionist fields in connection with human behaviour. The socio-cognitive theory of the career (SCCT), as formulated by Lent, Brown and Hackett (1994), applies the fundamental principles of the

socio-cognitive theory of A. Bandura (1990) to professional orientation, as well as bringing together the cognitive theories of work motivation. In a subsequent work the same authors also applied these concepts to the process of work transition (Lent, Hackett and Brown, 1999).

In essence this approach conceptualises the work transition as a process of gradual development which passes through the training itinerary in such a way that entry to the world of work is preceded by a long preparatory period and followed by an extensive period of preparation for and adjustment to work and to other life roles.

The realisation of a professional project is a cognitive enterprise which is conditioned by a continuous interaction between personal and social factors. The person is an active agent who creates and forms his or her environment; the theory sustains the process whereby the person selectively perceives, evaluates and incorporates information about him- or herself and about the surrounding environment when making choices between career paths, formulating personal and professional objectives and attempting to advance career-related behaviour on the basis of beliefs about their abilities and other self-attributes, about the resources offered by their environment and about the probabilities attached to given outcomes which may result from different courses of action (Lent et.al 2000).

- The techniques and instruments used should be appropriate to the group which is being worked with. We need also to establish that the minimum criteria for the choice of instruments involves (Padilla, 2002):
 - Choose those which best correspond to the information processing level of the participants.
 - Choose those which are best able to incorporate the diversity of placement situations which may arise as well as the level of diversity among individuals and groups.
 - Choose instruments which are appropriate to the level of communicative ability of each individual, taking advantage of one instrument or another on the basis of whether or not it is consistent with the communicative level of the individual in question.
 - Always bear in mind the biases and inherent limitations of each given instrument, and
 - Choose those instruments with which the person conducting the diagnosis is more familiar (Buendía, 1994).
- The adult's involvement is basic in order to integrate him or her in the structure which is operationalised and in the fundamental change which is intimately associated with each and every intervention. It is essential that the entire process be a motivating one, and that

it awakens the interest of those participating to the extent that it is able to maintain in them a sufficient level of energy right up to the end of the process.

Levels of diagnosis in work placement intervention processes

Diagnosis is a fundamental strategy which both accompanies and forms an integral part of orienting action during the different stages of an intervention process (Sobrado, 2005). Thinking about diagnosis as an integral strategy in the orientation process obliges us to take as our reference point the role of the orientation professional within the framework of the stage at which the intervention is targeted: in the present case work placement in the labour market.

From the perspective of a general model of intervention in the work placement process, the three vertices which represent the key elements which are implicit in the placement process need to be considered together: the labour market, the community and the individual. What does this imply? Why should the orientation professional, who here may be considered either as working with individuals or groups in the assessment process, evaluate anything beyond the biographical or personal dimension? When we speak of work placement we are talking about a complex process where, now more than ever, we cannot simply consider the needs of the individual from the perspective of the service in which we work.

We cannot attend to the individual needs of the person if we do not know how the labour market dynamic works, or what is happening to employment; what are the key points of employment policy, or what fiscal or labour policies favour or problematise access to information. These are some of the questions we might ask, but there are others of equal importance that are related to the immediate working environment, and thus, for example, we may need to know how business organisations, and in particular those related to the labour market of the relevant group, are thinking and acting, or what lines of development characterise each of the action frameworks.

As can be seen from the diagram (see figure 1 below), we are faced with two different levels of intervention: the macro one, or the context in which individuals make the transition to employment, and the micro one, or in other words the persons themselves. The individual constitutes the vertex of intervention, whilst the labour market and the social fabric are re-

source-references which can facilitate or otherwise the achievement of concrete employment objectives.

In each of these cases we need to integrate diagnosis with other orientation structures.

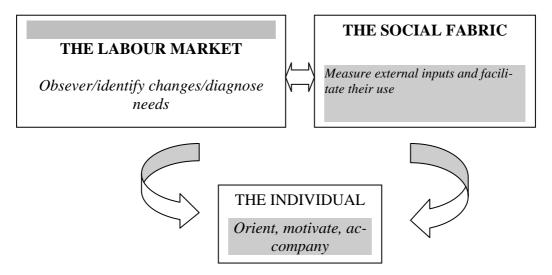


Figure 1. Reference points for the diagnostic process

Macro diagnosis: labour market and social fabric

The above vertices bring together the elements which are external to the individual and which condition the success or otherwise of the intervention. Below we outline some of the key questions involved:

The Labour Market

The professional who acts as a mediator in the work placement process for different groups in transition to employment needs to have detailed information about trends in the labour market and has to be familiar with the relevant characteristics and indicators of change which may affect the employment possibilities of those who participate in the mediation process. The "diagnosis" of these variables allows the professional to evaluate placement possibilities for the population at large as well as facilitating the detection of specific problems associated with determinate groups.

In both the training and the labour market context it is important to be aware of the specific details of any given economic, technological and socio-cultural environment. The box below (see box 1) presents some of the elements which should be borne in mind when

starting from the definition of the labour market as a space where interaction and exchange between demand and supply takes place.

DIAGNOSTIC ELEMENTS for the LABOUR MARKET	
1. LABOUR MARKET DYNAMICS	
Labour market dynamic	 Characteristics and sectors of activity Growth and contraction: fluctuations in the market
Agreement level	 Existence and functioning of territorial agreements on employment Development dynamics (regional, local,)
2. RELATION BETWEEN THE SUPPLY OF AND DEMAND FOR EMPLOYMENT	
Characteristics of the un- employed population (work offer)	 Disaggregated data on employment classified in terms of age, sex, geographic origin, educational level Relation between professional competences and the requirements of the labour market Availability: mobility, flexibility with timetables, salary, contractual issues Inactivity/unemployment
Demand	 Requirements Type of business: size, sector Working conditions Co-responsibility in territorial development: agreement, planning

Box 1: Diagnostic dimensions for the labour market. Reproduced from: Diagnóstico de la transición escuela-trabajo. (Figuera, Freixa, Garcia, 2000). Universidad de Barcelona.

The social fabric

The expression social fabric draws together all those community resources, organisations and social support mechanisms (transition networks) which are directed towards lessening the impact of critical situations and risk factors related to exclusion trajectories. Every community normally has a social network whose aim is to facilitate the work transition. At the same time we know that the vulnerability of each group in the face of critical situations

and exclusion risk factors is related to the availability, accessability and suitability of such resources in relation to their needs and requirements (García & Figuera, 2000). For this reason the fundamental objective of the intervention process is the measurement of inputs, and of the human and material resources which are available in each zone or sector in order to optimise their use, whilst at the same time serving as a channel for the intervention of all the teams and services whose role it is to support the work transition, especially in multi-problem situations.

From a social perspective diagnosis has a fundamental role. It should be directed to gathering information about the priorities of institutional policies (whether on the local or regional level), both from the perspective of the action itself and of those who are the intended recipients of the action.

Diagnosis of a social network in the context of the employment transition should allow us to obtain the information necessary for designing the intervention:

- Does the network of resources available for the transition to employment consider the differential needs of each of the various groups?
- To what extent are activities involved coordinated and prioritised in the immediate environment of the service users?
- In what way can such actions strengthen the various work networks, on both the intra- and the extra-municipal levels, which exist within any given municipality.
- What elements can contribute to the process of optimising the social networks which support employment access? To what extent does the situation allow for the formalisation of working instruments to encourage coordination?

Micro diagnosis: the personal vertex

Having offered perspectives for diagnosis in terms of the labour market and the social fabric, we now move on to look at the issue of diagnosis on the personal level. Given that there are many variables which can be analysed under this heading, we will limit ourselves here to asking which of these variables may be understood as fundamental and what role they have in the design of a work placement plan.

Work identity

How does the individual conceptualise him- or herself in the role of worker? We think that here both the preferences that the individual demonstrates towards the various possible professions and occupations, as well the perception they have of their own competences, need to be included (Figuera, 1996).

What is the objective of interest diagnosis and what conditioning factors need to be considered in the diagnostic process?

Initially conceptualised under the heading of occupational interests, the classic objective of identifying the individual's preferences for certain occupations and of helping individuals adjust their choices to these revealed preferences has now evolved towards a rather different type of objective which: a) uses the diagnosis as a stimulus which facilitates discussion and which serves to raise the self-awareness of the individual; b) offers a comprehensive framework which serves as a basis for research into the various occupations themselves; c) promotes a reflection on professional and career alternatives which may have a retroactive effect on the individual.

Examination of the interests of any given individual or group must of necessity take into consideration all the various elements which are generalisable to any contemporary diagnostic situation; that evaluation is not a rigid classification means in any category; that it should not be carried out and directed towards the individual simply according to the opinion of the professional responsible for the diagnosis. The results of the diagnosis should be discussed and analysed together with the individual concerned; the last word over the analysis carried out in a given area and the meaning to be attributed to the results should always rest with the individual who is being diagnosed.

In the specific case of interests it is also necessary to ask about other elements in the evaluation, and in particular to ask whether the meaning of the occupations under consideration is realistically based for the individual. That is, does the individual understand exactly what these occupations really are and realise that their perceptions are influenced by imaginative elements which may well incorporate social stereotypes and biases? Which particular elements may influence the choice of certain professions or occupations over others: gender, social imagery, etc? Does the individual understand that the evaluation should not become a

determining factor in the decision making process, but rather should constitute one part of a reflection process which needs to be combined with other elements? All these questions lead us to consider that the evaluation of interests should not become just one element among many others in the group activity, as has often been the case in the past, but rather should be seen as a process element which can help the individual who needs to have access to full, adequate information prior to making an evaluation. Indeed the evaluation of interests should be thought of as forming part of a broader evaluation process which can and should be repeated, providing the benefit of prior commentary and results analysis to subsequent orientation.

What is the significance of competence perceptions?

Personal self-efficacy is always directed towards a competence domain. This perception of self capacity is fundamental when the worker sets a series of professional and social competencies in motion. As research has demonstrated, self-efficacy works in an inverse sense: it acts as a barrier to work placement when it is negative, even if it does not necessarily activate placement when it is positive, and this is surely a result of a modelling effect when compared with other variables. Consequently it also modulates the quantity of energy that may be used in an effective way in completing a task (employment seeking, specific training, etc.); it is almost as if a positive sign associated with this variable liberated available energy for employment in concrete actions, energy which in other cases would remain blocked.

Why work, and with what objectives?

The objectives which the future worker has may well affect the intensity and the persistence of the activities carried out. These objectives may vary widely: making money, acquiring friends, having an interesting job or achieving a greater level of personal well-being (Russell, 1932). When the individual is concentrating on the task itself a level of activation occurs which is different in nature from that which is to be found when the individual concentrates on other elements which are parallel to or a consequence of the type of job or task in question. It is however only natural that this variable interact with the components of the personal infrastructure in areas like training, gender or social class.

Is there a personality trait which is related to competence in and for work?

Personality type is very closely related to the type of task which may be carried out and the conditions under which it may be carried out. This is why at the present time there is so much interest in evaluating the specific characteristics of the personality which are related to these factors. One "profile" is not better than another, but rather each characteristic is linked to the type of work tasks involved and to the work colleagues with whom they are carried out; in terms of work placement it is easier to work from what the person actually is, rather than from what can or should be changed. At the same time these characteristics interact with the social skills which are in play depending on the circumstances which are to be found in the workplace. It is normally accepted that there are five main factors which can be explained by personality traits; among these the business enterprise is normally most interested in honesty, scrupulousness, tolerance to stress and control of anger and preferences for relations with others (see the summaries which can be found in Rivas, 1995, Liénard, 2001).

However the personality characteristics which are associated with the placement processes are currently undergoing a change since it seems to be more interesting to analyse and intervene on the basis of styles of information processing rather than over personality characteristics in and of themselves (Hoffman, 2002). Perhaps it is not as interesting to evaluate personality per se, as it is to establish how the person processes inputs, approaches situations, or observes and attends to norms. These could well be considered to be the key elements which interact with the competences of the future worker. In this respect it is important not to forget the contribution which is being made by research based on the idea of emotional intelligence, and by relating the reactions which are most closely linked to personality to the construct of intelligence. (Mayer, Salovey, 1993 and 1995; Mestre Navas, et. al 2005)

At the same time the anxiety variable continues to have special relevance due to its capacity to modulate the principal characteristics of personality.

And what about the level of employability?

Even if only indirectly, a given qualification does carry with it the presumption of a certain level of intelligence or employability. Such perceptions may well be thought to be harmful to those with low qualification levels, and this incorrect evaluation constitutes an error for which a correction effort is now being made in the labour market context via the use

of models of professional competency in which the professional trajectory, and as such the experiential background of the individual come to be seen as having more relevance (Echeverría, 2005). In any event it should not be forgotten that training received when accompanied by educational credentials offers security and confidence to confront processes of employment search.

Higher or lower levels of training are not, in and of themselves, indicative of greater or lesser facility in finding work, whilst the learning capacity of the would-be worker may well offer evidence of whether or not the individual will overcome the selection procedures to which he or she is submitted, successfully manage the trial period in the future workplace, or give an indication of the potential level of success in training courses on both the theoretical and the practical levels.

Amongst those groups with medium or low levels of qualification the diagnostic process should be centered on the possibilities of problem resolution, isolating the sections which belong exclusively to the school curriculum, given that the low qualification levels which can be found among such groups may well mask their real intellectual possibilities.

Some considerations about the process

We have at present no clear model to describe the development of the diagnostic process in professional work placement, and this makes this area different from other areas where, for example a number of models exist for processes used in educational diagnosis and psychopedagogy, or even for use in interventions in professional orientation. We do not mean to say here that there are no guidelines which may be followed, but simply to draw attention to the fact that these tend to have been developed in the area of professional orientation and have not been specifically tailored for use in the context of work placement.

In the light of what is now known in this field we believe that the diagnostic process should at least be guided by the following principles:

Flexible and open planning

The thought processes involved in professional career management are becoming more and more relevant. As professionals we are interested in knowing the key thought processes which guarantee effective career development. Among those competencies which are most closely related to this theme, we would like to highlight one: that it helps to think in terms of a broad repertoire of concepts related to the choices, roles, functions etc. which present themselves across the professional career, and about how these concepts combine among themselves. We might well ask ourselves, for example, about the extent to which the sequential systems of diagnosis really allow us to approach an analysis of such complex interactive processes. Discovering which thought processes are involved in the diagnostic process with the techniques presently in use is a rather difficult matter, although it is worth noting that some initial trials are now taking place in this area.

Activate and develop the learning process, a paradigm for action.

Obtaining a job, maintaining it, preparing for professional life, integrating into the labour market reality, etc. All of this depends on many factors whose only common denominator is learning. The success of a person's social life, which is normally associated with access to working life, involves learning, and this is a capacity which needs either to be stimulated, developed, or activated depending on the personal history of each individual, and the diagnostic process forms the key means for achieving this objective.

Learning needs to involve problem resolution, and this means integrating the cognitive and the volitional areas of the individual. Thus it is not only knowing or understanding which is important, but also acting in a given manner, giving an impulse to action, producing a change.

The value of "getting it wrong"

Learning by trial and error is present throughout the entire learning process, and we should equally apply this appreciation to the question of career development. Among other things it should be pointed out that we normally attribute considerable importance to our failures and attach a high emotional charge to them. Introducing a value for error into the diagnostic process in the case of professional orientation requires a rethinking of the linear processes used in such diagnosis.

It doesn't matter so much where you are as where you can go

The whole area of cognitive diagnosis in education continues to work within the Vygotskyian psychological framework of the zone of proximate development. In the first place we know that environmental influences can set a limit to the capacity for thought and the style of a person; and in the second place what is of interest is not only analysing where the subject is, but also where he or she may go. Thus diagnosis may help us outline the zone of potential development. It is just this approach that needs to be applied to diagnosis in professional orientation. Not only should we be interested in what the individual has to say in relation to the measured variables, we should also be interested in his or her potential for developing such variables and in converting the diagnostic process into the means for doing this. To date this process has been applied with some success to cognitive development, however the question arises, why not attempt to estimate the individual's possibilities in relation to other types of variable? Why not try to apply the process to develop planning potential and career management? And, even more to the point, could a promising line of investigation not be opened up for the delicate subject of prediction in diagnosis?

Do not forget the macrocontextual reality of the adult

In the development of the professional career, subjective aspects are now beginning to take on ever greater importance; we are beginning to think about the importance which subjects attach to their personal histories, and the skills, aptitudes, beliefs, etc. that they have acquired. There are always a multitude of meanings and interpretations which may be applied to a given set of circumstances. Incorporating such subjective elements requires introduction of diagnostic techniques which allow for apprehension of essential mechanisms, regardless of the theoretical line of reserach which is being followed (life histories would be one good example).

One final note: diagnosis is not simply looking and observing, but rather, and above all, acting.

In the course of this article we have attempted to offer some reflections on the role of diagnosis in the socio-professional placement process.

Once and for all, and this despite the fact that much has already been written in this regard, it is now time to clearly bring to an end the distinction between diagnosis and intervention. It is important to terminate this distinction not only because intervention should accompany diagnosis (this is already a classic approach), but also because the process should be at one and the same time an intervention-oriented one, with intervention considered not as a residual element, but rather as a planned and active one.

Diagnosis cannot be limited to the description of a reality, such as, for example: how the person is, how he or she acts, what the contextual characteristics are, etc. It is also an assessment of what can, at one and the same time, produce the desired outcome that the person being diagnosed becomes aware of their background reality in a way which enables them to work to optimise their performance, to overcome deficiencies, to develop skills etc. Diagnosis and intervention appear to be closely linked and even interconnected throughout this entire process.

In this context we have previously worked with an exploratory behavioural scale (Donoso, Figuera and Rodríguez Moreno, 1994; Donoso, Figuera and Torrado, 2000; Donoso and Figuera, 2001), and this scale can be used as any other classic diagnostic procedure: moving from the scale, to the correction, to the evaluation and then to the presentation of the results, with the distinction in this case that we have transformed the process by means of a guide into a diagnostic process which combines diagnosis and intervention in such a way that the diagnostic process in the case of exploratory behaviour represents an activation of the various dimensions linked to that behaviour.

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