



Psychosocial Intervention for Students with Disabilities in Identified Primary Schools of South Western Ethiopia

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<http://dx.doi.org/10.18415/ijmmu.v7i1.1403>

Abstract

The main purpose of this study was conducting psychosocial intervention/training to selected schools of South Western Ethiopia. Three school principals, teachers of students with disabilities in the integrated classrooms, parents of the same and selected students with disabilities involved in the training conducted at their respective schools. The intervention study involved ecological perspectives of approaching the individuals' responsible assisting students with disabilities. Participants were selected purposively from each category where manual of training was employed for three groups: students/children with disabilities, parents and teachers of these children. The manual developed by researcher was evaluated critically by co-trainers and the trainee. The result indicated that the manual is of standard type which has to be organized as a guide or handbook of training in the psycho-social intervention. It incorporated foremost disability areas that had been covered in short-term training with all intervention strategies to be followed by concerned bodies. Finally, it is underlined that the manual has to be organized in more comprehensive way and been given to all stakeholders in the education of students with disabilities in the country.

Keywords: *Disability; Education; Intervention; Primary School; Psychosocial*

Introduction

Psychosocial challenges students with disabilities encounter in selected primary schools of South West Ethiopia is the mother project done on eight identified schools of South West Ethiopia. The result of this study was the guiding foundation to prepare intervention plan in phase two of this project since complementing the community is necessary to exercise and apply the outcome of the study to bring the desired change. Accordingly, global experience from literature and personal observation of the researchers incorporated to apply the support that might lead to change and development could be evaluated at the end in phase three of this project.

Psychosocial intervention has been variously defined by different scholars and institutions depending on the purpose and quality of the technique employed on the ground (Dagnan 2007). Some authors have defined it with a very specific focus indicating that psychosocial interventions are for people with intellectual disabilities but only considered individual therapeutic work, primarily within a cognitive behavioral framework (Hatton 2002). Other authors have defined it very broadly as any intervention that is not pharmacological. Although not specified in definitions, most psychosocial intervention for people without intellectual disability targets severe and enduring mental ill-health whereas much of the intervention and conceptual development in the intellectual disability field is in relation to depression, anxiety and anger. The psychosocial approach, however, is applicable to all mental health presentations and environmental challenges.

In real fact, treatment is only available to very few people in Ethiopia which is also similar with severe problems to most of African community, even though most conditions are very treatable. Many people remain untreated for years leading to much more disability than they would otherwise experience. Because of this actuality, the need for rehabilitation and intervention for students with disability may take firsthand in assisting the students and maintain positive psychosocial improvements in any work and life engagements.

In trying to organize the literature and conceptualize intervention in this area, the researchers proposed that it is helpful to consider the current psychosocial interventions as occurring within three ecological levels that could be managed within a time frame of Jimma University. These are:

Interventions with the individual - Such interventions may use therapeutic approaches to address the underlying factors associated with psychological, emotional and social challenges each students encountered personally in life. It assists to lessen distress experienced in response to symptoms or situations that devastated their normal life styles and to increase social or vocational skills. Additionally, such interventions may have a broader educative or psychotherapeutic focus with the aim of reducing distress and may include identification of signs of onset of acute phases of mental health difficulties.

Interventions in the immediate social context of the person - This includes intervention with the person's family or caregivers or immediate socializers of the student. Such interventions are often targeted at reducing high levels of 'expressed emotion' that individual students may encounter from their instantaneous relatives. Expressed emotion is a description of the negative emotional content of interactions between the person and their caregivers or family and is considered an important predictor of relapse and symptoms of a variety of psychosocial difficulties and behavioral presentations. Family and caregivers may also be offered educational interventions and be recruited into the process of early-signs monitoring.

Interventions aimed at the wider social context of the person - This includes a focus on housing, leisure, peer groups, classmates, teachers or school authorities. For example, the use of supported employment to improve the social functioning of people with different forms of disabilities (physical, hearing, visual impairments and behavioral difficulties) highly rely on orientation, awareness and getting full array of the factors that trigger individuals with disabilities to develop psychosocial challenges that may lead to moderate psychosocial difficulties or mental health problems.

In the work atmosphere of the psychosocial intervention to be taken in this program, more than hundred students were intended to participate on the training and few selected parents of these children on awareness training and sensitization packages concurrently with school teachers responsible teaching students with disabilities in their respective institutions.

Internationally many authors identified the service structure through which interventions are packaged and delivered as a key element of psychosocial intervention. For example, in the UK, the National Service Framework for mental health identifies evidence-based service structures such as

assertive outreach, early intervention services and crisis resolution/home treatment teams. These structures are based upon models initially developed in the US, but also available in the UK, such as assertive community treatment and intensive case management. Each of these has different defined functions within the range of services available to people with severe impairments and mental ill-health problems; however, all deliver interventions within psychosocial models (Ryan, 2003). Organizing the literature in this way also emphasizes the broad range of areas that can be considered as psychosocial. In order to explore the development of the evidence base for people with motoric, health, visual, hearing and intellectual disabilities, this review takes each of the above ecological levels and reviews recent work in psychosocial intervention for people with psychosocial disabilities and mental health problems.

The question of lack of well-developed instruments to assess the major psychosocial difficulties people may face in life and its associations to mental health problems made intrinsic challenges to prepare more sophisticated and widely used intervention tools that could be generalized across the country. The study result of phase one also critically underlined that the psychosocial difficulties students encountered need varied type of interventions where the guideline to be developed for the disability specific strategies are of paramount importance. To bridge the gap existing in accessing the psychosocial intervention tools and materials in Ethiopian context and developing assistance strategies for the students under study; to this end, the study mainly aimed to introduce and apply psychosocial intervention strategies and techniques to alleviate the emotional, psychological, mental health related problems of students with disabilities in selected primary schools of South West Ethiopia. Specifically, the study intended to:

1. Minimize major psychosocial challenges students faced in selected elementary schools of South Western Ethiopia through training and awareness raising;
2. Alleviate students emotional, psychological and social problems that has an impact on personal development of the individual in later life;
3. Advance personal qualities of family and caregivers interacting and handling students with disabilities in the home and family settings through awareness raising and sensitization;
4. Enhance understanding of school community and selected co-actors approaching students with disabilities in community and school settings through awareness raising and training.

Finally, this research undertaking is noteworthy for students with disabilities and family cultivate relevant intervention and counseling support strategies and techniques available in their own settings that could be developed by researchers. The outcome of the study is also useful for policy makers and education offices to identify, assess and find treatment possibilities for these students throughout the country since disability right to services, education and intervention is due concern. The families of these students also benefit much since it paves way to access and search for possibilities and methods of supporting their children's difficulty based on the training they secure from professionals. The finding was best input to conduct intervention on other area students and higher institutional settings as continuation of the study. It additionally serves others who want to conduct similar research as a springboard to further the study to advanced level.

Methodology

The project is designed to conduct training and rehabilitation for students facing psychosocial difficulties of different disability forms in schools. The family and school community also get awareness and sensitization trainings with specific preference to student's family or caregivers and school teachers.

Participants

For the study fifty families /caregivers/ from eight study areas was chosen to be involved on the psychosocial intervention training that have at least a child with any form of disability for no less than one day using purposive sampling techniques to incorporate them. The study employed initial application of the thematic research results on identified students with disabilities in the phase one at diverse study centers. The sample used to gather information on family skill outcomes comprised 50 participant families, all in a risk situation with their child. Assessment on the outcome of the training will be conducted on the spot with selected families discussing on the relevance of the training. Fifty students with different forms of disabilities, the ones who had involved on identification study, will be included from each school under study site for training employing availability sampling for three consecutive days. Forty teachers of the same in the respective centers are also expected to participate on the awareness and sensitization trainings for comparable days on disability matters. The selection will be done employing both availability and purposive sampling technique depending on the user-friendliness of classroom teachers.

Research sites – Eight study sites were identified on phase one where six zones were selected from South Western Ethiopia. Accordingly, Jimma and Agaro (Jimma), Bedele and Mattu (Ilu Aba Bora), Nakamte (Eastern Wallaga), Gimbi (Western Wallaga), Bonga and Mizan (SNNPR Zones). From each centers, eight schools were involved in the study where phase two considered as its study sites.

Sources of Information – In this study both primary and secondary sources of data used in phase one were taken as a base for the psychosocial intervention. To apply the recommendations of phase one on the schools, different literatures, journals and psychosocial intervention handbooks were revised to prepare training manuals. The manuals effectiveness was assessed on the process alongside with training pragmatism test out on participants.

Population and sampling – the study population identified were all students with disabilities assigned in each of these eight elementary schools at selected sites. Purposive sampling technique was employed as to include individuals who didn't involve on phase one study. Parents and teachers of the same included based on their child's involvement and classrooms they have been taught respectively.

Tools of assessment and evaluation – since the study employed qualitative type of research approach, it was predetermined that training session, observation and interviews with trainees are the major tools of assessment. Structured and semi-structured interviews were conducted with selected students, parents and teachers. Additionally, observation checklists ready to assess and evaluate contents, methods and techniques were employed in the training with the trainers.

Procedures of activities – letter of cooperation was secured from the university and submitted to the responsible Education Offices. The trainers were communicated to attend training in their respective centers. After thorough discussion and securing permission, the researchers recruited and arranged for involving participants in schools being with education office and school principals to finally grip the parents of students with disabilities from each and every schools involved in the study.

Ethical considerations – since this study was conducted with human being, following strict code of ethical conduct is mandatory. Getting permission either in oral or written form, confidentiality and security of information got due attention.

Results

Back ground of the participants: The study conducted on psychosocial intervention for elementary school students with disabilities focusing on South Western Ethiopia was successfully done through training special needs and regular education teachers in selected schools. Thirty four teachers and principals, Twenty nine parents of children with disabilities from the target schools and Forty one students with disabilities involved in the study.

Training manuals: the manual was evaluated by special needs education teachers involved on Training of the Trainees (ToT) and different suggestions and comments were raised by the trainers. The first question raised to each of the three trainers was on the content of the manual whether it incorporates the basic/core issues relevant in awareness raising program for the family, school personnel and the students themselves on the issues of psychosocial interventions to be rendered for students with disabilities in the 'inclusive' settings. All the three revealed that the contents were prepared well in terms of the organization, coherence, simplicity, clarity to explain, use of short statements and timeliness. The discussants highlighted on the issues integrated in the handbook were admirable. It includes causes of impairment, emotional development and feelings of parents when identifying their child's impairment, cultural and societal impacts of having a child with impairment, acceptance and sending a child to school, worry parents have about fate of their child, attitude and belief system of the school and school community, existence of rules and regulations on disability rights locally and abroad, what parents and school community should do to assist children with disabilities in the school settings were the major ones that participants want to underline as strength of the manual. They finally indicated that some shortcomings they observed have to be included when finalizing the handbook at country level. Some of these are:

- Use of examples that are pertinent to the local contexts to make the training lively;
- Inclusion of pictorial and designs (art) specifically that focus on rehabilitation of students with physical disabilities and/or physiotherapy sessions done locally and abroad for better understanding of the support so far done;
- Use of translated version of the handbook in at least three to four local languages to address the need and interest of national/local NGOs and
- Better if any viewpoints stating associations and NGOs or any support groups interest were included in the manual.

Finally, they indicated that shortage of training time where understandings of people vary depending on economic, social, educational and other backgrounds. Additionally, formation of associations and parent-school collaboration after these training was critically articulated where the trainers themselves confirmed from the parents and school community on the usefulness of these institutions.

View of trainees on the manual: as indicated on the proposal, the manual focuses on the individual with disabilities, immediate relatives (parents, siblings, caregivers and home) and the surroundings (neighbors, peer groups, school community). Accordingly, trainee students indicated that the material is so useful that they gain a number of information and concepts regarding disability, how it could affect their life, communicability, ability vis-à-vis disability and how establishing bondage with non-disabled community members including their family. One from Nekemte signified that *the manual is of paramount importance in explaining about disability causing factors and how dealing with life conditions having impairment. The manual critically emphasized on the issues of different disabling factors, how it affects individuals, distressing conditions of disability, coping mechanisms, and self-effort to curb handicapping conditions working with parents and community.* This statement indicated that the

trainees are joyful on the manual preparation. Respondents from Mattu also underlined the usefulness of the material in giving them guidance in their future life indicating on certain contents like individual difference, stressing factors, coping techniques and strategies, development of confidence by accepting the reality regarding disability and matters related to rights to education and work. In the same talk, students with disabilities involved in the training from Bedele talk about on the manuals usefulness stating that *we benefitted much from this manual as it assisted us in awareness raising to exercise our right, use of residual capabilities and other potentials which are intact, self-initiation, personal effort to grow and change, positive acceptance of others and view of balancing opinion of others in all communications*. When they all summarize their view regarding manual preparation for the training, almost all agreed on the usefulness of the material and raised also issues as weakness that to be included in the manual. One of the issues they indicated was practical training needed for students with disabilities has to be included in the manual like exercises (physiotherapy, orientation and mobility, sports for physically impaired, etc). Consequently, it seems evident that inclusion of strategies to be employed by students, school teachers and parents in the school environment with its specific guideline development was emphasized as critical if incorporated in the manual.

Viewpoints of trainees on the training and the sessions: all groups (parents, students, teachers) participated on the training appreciate the session and welcome exclusively their participation on such a training since they gained new ideas, concepts, knowledge and change in attitude towards students with disabilities and the disability itself. One of the respondents stated on the issue of the training and its session, *I have no idea about disability where my belief is attached to inborn thinking of disability as a curse, sin and bad did of the parents. My personal understanding is feeling of sympathy only as human being. I am sympathetic towards these children only to accept them in the school and don't care about what they are, how to help them, what they need from us, the potential they have and positive future. My assumption is that they are burden on school, parents and community. But, this training made me evaluate and undermine myself that I am not a person of logic, truth and empathy. Therefore, I am the one who benefitted much from this training session and become 'human' who is willingly advocating supporting of children with disabilities. I found myself as a person getup from a dream and undermining myself for the mistakenly thought I have before. Hence, instead of condemning myself, I become an advocate of these children in my entire career*. Most of the trainees from Bedele area shared similar concept and agree to assist these children in all affairs they can. Some of them communicated the researcher with tears and despair faces remembering that as if they did bad against students with disabilities. In all other areas of the training centers, almost all of them raised similar issues of misunderstanding, misconceptions, poor knowledge about disability and lack of awareness about disability matters.

Some of the schools principals participate on the training appreciate the training and sessions they have involved on since the participation, discussion and both way interaction was highly interesting which facilitates for best learning environment. One of the principals participated on the training from Mattu stated that *I found this training so interesting where I learnt a lot from the presenters, colleagues and organizers as well. I have got great knowledge, understanding and way of assisting children with disabilities in my school. What astonishes me is changing of attitude towards my children that I have forgotten in previous times. I apologize for parents and students for the mistakes I did so far on them unknowingly. From this day onwards, I am ready to work with teachers, interested groups and parents developing strategies on how to support our students in education and life skills training to the level possible*.

Similar opinions were entertained by many of the respondents from deferent training centers. Some of them initiate discussing with the participants on establishing workforce to organize support groups in their respective school being with school administration. The school teachers and principals involved in the program in two centers established workforce and support groups to identify, assess and

intervene on conditions that children with different disability may face in their respective schools depending on the discussion and training sessions opinion.

Feedback of the co-trainers: Three special needs education teachers involved on all the trainings indicated that the material is well prepared giving emphasis to core points of the content area to be covered; easily understandable terminologies for the trainer use it in local context, simple statements and to the point.

As reported by the special need education teachers (co-trainers) almost all the participants involved on the training (regular education teachers, parents of the children with disabilities and the students) underlined that the training is timely, efficient and motivating in its approach, content and organization.

The respect, tolerance and patience trainers demonstrate during training sessions and the compassion and integrity they show to parents and students with disabilities were among the major thanks raised by the trainees (participants) as indicated by the co-trainers. Additionally, they raised the value participants gave to the training in keeping grounding rules, time management, strong attention, effective participation and concern in question and answering sessions.

Furthermore, in response to the rating scales item presented to trainers, all of them agree on the usefulness of training manual preparation and suggest on making the manual more comprehensive and focus on skills in addition to the knowledge and awareness raising issue to capacitate understanding, acceptance and supporting power of the parents. Self-awareness training to identify personal ability and disabilities, use of lingering potential in life, empowering to initiate positive innate behaviors, self-regulatory prospective, and maintaining self-reliance possibilities to win life than keeping to charity, developing dependency and begging nature of life was the reinforcement issue students with disabilities has to develop from the training. Consequently, the possibility raised on the training to shift to vocational skills training, if academic achievement of the students were/are under threat due to the inconveniences arisen from schools; lack of training materials relevant to disability specific learning; limited access to further education, interpersonal impeding factors like severe disabilities, paralysis and/or other environmental confounding factors related to: negative attitude of teachers, peer group, community and siblings as well.

The trainers also indicated that coherence and organization of the manual needs amendment in the case that it can facilitate to knowledge production and skills development for students with disabilities in addition to the sensitization, self-assertion potentials, confidence building and understanding the concept of disability vis-à-vis impairment. The manual is entirely useful in developing concepts between impairment, disability and handicappedness with the impacts it may create on an individual with disability. Hence, the contents of the manual need more expansion to signify on the significant responsibility of stakeholders facilitating for appropriate intervention of school and after school related challenges these students might face.

Parent's viewpoint: interview with key informants and general discussion with all the respondents were conducted after the training. Consequently, parents raised different questions to teachers and school administrations regarding education of their children based on the training offered. One of the questions was 'why they were reluctant to comply with the policy of government in assisting their children since it puts right of children to education in clear terminology?' The teachers and school heads involved on the training accept the reality on the bench and tried to smoothen the way for future cooperation to assist the children. They put a benchmark viewpoints of communication to bridge the gap existed before for future integrative effort by putting the mistakes and misconceptions as the opening tip of departure from elusiveness to mutual understanding.

On the other hand, the participant families of children appreciate the training and underlined that 'this training is unique in its kind which, arouse their moral, feelings and got enthusiastic on the future

fate of their children with disabilities'. They underlined that the training is of paramount importance in changing their attitudes towards their child with disabilities. All the endeavor they had/have made so far to heal their children, the conflict they have developed with schools and the integrative effort of school-parent relationship was addressed where both partners get good opportunity to discuss on their children's matters face-to-face. Many of them thank God (the creator) in getting such opportunity in discussing their matters around a table and all were/are concerned to make paradigm shift in attitude, bridge communication gaps existed before, find solutions on how to support these children to succeed in schools and life in the community, integrate effort to bring change on students with disability education and searching for locally available resources to support these children.

Conclusion and Recommendation

Conclusions

Training/intervention was given for students with disabilities in the selected schools, parents of the same and school teachers with principals. About one hundred individuals involved in the training where all of them are highly involved on the issue of disabilities at home school and community level. Most of them gave their opinion on the training manual, training conducted, methodology used during training and usefulness of the training on capacity building of the intervention capability/skills.

As discussed above, even if the training manual is applied for the first time, it seems relevant, timely and critical in assisting the trainees get awareness about disability issue, underlying causes of disability, symptomatic factors, how treating children with disability and mainly the difference between disability and child with disability. The manual also gave emphasis on how to assist these children at home, school and community settings with the role and responsibilities of each member of the community. The manual discussed also about the rights of individuals with disabilities, existing policies locally and abroad which gave them an insight for the future confrontation of challenges that may emanate due to misunderstanding and lack of information about the rights, responsibilities and duties of each member to assist children with disabilities.

The training manual is of paramount importance for the trainees, specifically parents, in giving them a spotlight on issues which were blurred before in supporting these children. Absorbing the shocking myths, insult of certain people from neighboring community, loss of hope due to child's disability and future, struggling with the child's disability/difficulty and other intruding factors that may possibly arise from this problem was/is a challenge. Hence, this training manual incorporated these all issue that gave them strength in the future deal with their children.

The training was useful if properly applied and practiced by all members of the society where a child with disability could find him/herself and organizations where these children might communicate for any life related matters. In this regard, participants of these training underlined that they can exercise what they have gained through the training in their respective institutions (homes, schools, community settings, public settings ...) which is perceived as positive indication in the future interactions and support of these children. In this study, sympathy is not the target in the support system for students/children with disabilities, which is common among our community. Rather, empathy has to be addressed at all level where every trainee has to develop where each and everybody contribute a little in altering life of these children at home. School and community settings. The belief systems that put children with disabilities at lowering status was assumed as bad habit that has to be abolished since they internalized that loss or abnormality in one organ couldn't mean that it is a total loss to function exhausting residual capabilities or other organs to lead successful life and wining bread. This developed anticipation in the future and initiate participants have confidence in supporting their children with disabilities to impartially involve in

education, vocational trainings, community dialogues, rights advocacy and different activities at equal level. The students also developed confidence in preserving their potential to be fruitful in life through education and training to lead independent life in the future.

The training has manifold benefits for the participants, specifically parents, where they gain detailed information on what disability is and how treating their children with disabilities. Secondly, they develop mechanisms of controlling emotions of themselves towards their children and their child's discomfort when facing difficulties from school, peer, neighbors, or distress they may experience internally. Thirdly, they have got insight on the child's capability to use residual and other potentials in securing success in life and winning bread independently if they get access of education, support when need be from all responsible bodies and have access to facilities, modifications and services. Lastly, the notion they previously have to disability rights was drastically changed and confirmed that their children have right to education, life, services and accommodations in any institution they are able joining.

The teachers also profited a lot from the training where they got an insight in forming teams of professionals to assist these students and how to prepare individualized planning in support of children with disabilities cope-up with their counterparts or the non-disabled ones. The students with disabilities are on the frontline benefiting enormously from this training where they have got relief on the issues of fear they have from family, school, peer and community as a whole. Developing confidence is not an easy task since it has great implication on emotional and psychological make-up of an individual where these students were left astray by all members of the community because of their disabilities. But, this training revived their hope, confidence, feeling of winning, glimpse of hope and showed line of communication.

Recommendations

Training manual developed incorporate relevant issues in life interaction that parents, school community and children with disabilities might share as human being in the ecosystem. The thought, beliefs, taboos and myths in the community challenging individuals/children with disabilities and the family were addressed in the manual and presented to intervene these intruding encounters they faced in child rearing and education. Hence, this training has to reach key parts of the community: parents of children with disabilities, institutions like schools, training centers, religious and community based organizations; public sectors [kebeles, district education, social affair offices] and indigenous sectors of the community.

The training has great impact on future aspiration of students with disabilities where the knowledge gap, understanding and conceptualizing disability was not thoroughly understood by the students, family and the community. Concept of impairment, disability and handicappedness need to be communicated well among the community where children with disabilities get access of exercising their right in any community settings at private and public sectors too.

It empirical for government bodies initiate and support such trainings been undertaken in all sectors of community dominion. Awareness raising trainings and sensitization groundwork are critical in assisting intervention strategies to be employed for these children in all settings. Therefore, training institutions has to take the lead in conducting research and disseminating research outputs in the employment of intervention tools trough training.

Acknowledgement

Jimma University is responsible funding this study and extends the appreciation to all the respondents involved in this research project.

References

- Arenas V, Hidalgo S, Menéndez A (2009). *Cohesions social percibida en family asuarias de los service ossociales comunitarios*. Portularia.
- Bamberger M, Rugh J, and Mabry I (2006). *Real World Evaluation: Working under Budget, Time, Data and Political Constraints*. California: Sagebolt, P. and tang, a., *A new approach to cross-cultural function assessment*. Available at: http://www.who.int/mental_health/emergencies/2.2_key_resource_4_bolton_article.pdf
- Boyden J, Armstrong M, and Galappatti G (2004). *Piloting methods for the evaluation of psychosocial programme impact in eastern Sri Lanka. Report for USAID*. oxford: Refugee Studies Centre, March 2004. Available at: <http://www.rsc.ox.ac.uk/PDFs/rrpilotingmethods04.pdf>.
- Dagnan D (2007) Psychosocial interventions for people with intellectual disabilities and mental ill-health, *Current Opinion in Psychiatry*, 5, 456-460.
- Duncan J, and Arntson N (2004). *Children in Crisis: Good Practices in Evaluating Psychosocial Programming*. Save the Children Federation Inc.
- Feuerstein, M. (1986). *Partners in Evaluation: Evaluating Development and Community*.
- Hatton C (2002). Psychosocial interventions for adults with intellectual disabilities and mental health problems: a review. *Journal of Mental Health*; 11:357-73 *Programmes with Participants*. London: MacMillanhart, J. with J.
- IFRC (2009). *Psychosocial Intervention, A handbook for training*. Blegdamsvej, 27 DK-2100 Copenhagen
- Kerr H, Stattin M (2000). *What parents know, how they know it, and several form of adolescent adjustment: Further support for a reinterpretation of monitoring*. *Developmental Psychology*, 36 (2000). <http://dx.doi.org/10.1037/0012-1649.36.3.366>.
- Oliva A (2006). *Relaciones familiares y desarrollo adolescente*. *Anuario de Psicología*, 37.
- Rodrigo M, Máiquez J, and Martín L (2010). *La Educación Parental comorecursopsicoeducativoparapromover la parentalidadpositive*. Federación Española de Municipios y Provincias y Ministerio de Sanidad, Servicios Sociales e Igualdad, España.
- Save the Children (2001). *Children and Participation: Research, Monitoring and Evaluation with Children and Young People*. london: Save the Children UK.
- UNHCR (2008). *A Community-based Approach in UNHCR Operations*. Available at: <http://www.unhcr.org/publ/PUBL/47f0a0232.pdf>
- UNICEF (2008). *Psychosocial Evaluation Guide – field testing version*. Available at: www.psychosocialnetwork.net.

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