



# FINAL REPORT OF THE PROJECT

BHIDAPA / Emerika Bluma 9a / 71000 Sarajevo Bosnia and  
Herzegovina

NARRATIVE REPORT OF  
THE PROJECT  
FOR THE PERIOD FROM  
01.11.2021. TO  
30.11.2022.  
QUANTITATIVE AND  
QUALITATIVE  
EVALUATION OF THE  
PROJECT

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Earlier research conducted in Bosnia and Herzegovina (Sarajevo Canton) indicates of almost twice the prevalence of the spectrum of internalizing problems (29%) in children of early adolescent age than the prevalence of clinically significant externalizing problems (16.3%). The results of the research are showing that almost every fourth child of early adolescence suffers and is at risk of developing mental disorders (especially depressive and anxious moods), which is in line with world research. Furthermore, the research indicates that every fifth adolescent feels lonely, worthless and less valuable, and every fourth adolescent feels that no one loves and understands him/her. In the total sample, 12.2% of children-adolescents think about killing themselves, and 9.3% of them intentionally try to injure or kill themselves. (Badurina, 2013)<sup>1</sup> These are serious data that call us to act responsibly.

The COVID-19 pandemic represents a **dangerous accumulation of risk factors** for the mental health of children and adolescents of enormous proportions: reorganization of family life, massive stress, fear of death of family members..., economic crisis, with the simultaneous **loss of support** and evasion, **limited access to health services**, as well as a **lack of social stabilization** and control of peer groups, teachers and sports activities. (Fegert, Vitiello, Plener and Clemens, 2020<sup>2</sup>, according to Buljan Flander, 2020<sup>3</sup>).

As the COVID-19 pandemic continues, there is really big pressure on our children and their relationships with family, peers and their communities. That pressure and uncertainty can have long-term effects on mental health. Based on available research on the impact of quarantine, uncertainty and isolation on mental health, it can be concluded that an increased number of people with mental health problems can be expected.

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<sup>1</sup> Badurina, M. (2013). Povezanost kvalitete života i mentalnog zdravlja djece osnovnoškolske dobi u Kantonu Sarajevo. Magistarska teza. Sarajevo: Medicinski fakultet

<sup>2</sup> Fegert, J. M., Vitiello, B., Plener, P. L. i Clemens, V. (2020). Challenges and burden of the Coronavirus 2019 (COVID-19) pandemic for child and adolescent mental health: a narrative review to highlight clinical and research needs in the acute phase and the long return to normality. *Child and adolescent psychiatry and mental health*, 14(20), 1-11.

<sup>3</sup> Buljan, Flander, G. (2020). *Izazovi i mogućnosti pružanja zaštite mentalnog zdravlja tokom krize*. Prezentacija: Drugi Internacionalni kongres dječje i adolescentne psihoterapije. Očuvanje mentalnog zdravlja i psihosocijalne dobrobiti. Sarajevo: BHIDAPA

Children and adolescents are especially at risk, due to their developmental characteristics and vulnerability.

- Horesh and associates (2020)<sup>4</sup> – The COVID-19 crisis includes a number of characteristics seen in mass traumatic events - during and after a pandemic an increase in **post-traumatic stress** symptoms can be expected
- Sprang and Silman (2013)<sup>5</sup> – study conducted after H1N1 and SARS epidemics in America - **30%** of children who were isolated or quarantined met the criteria for PTSD (according to Buljan Flander, 2020<sup>6</sup>)
- Research indicates heightened levels of anxiety, fears, sleep and attention disorders, changes in appetite, physical complaints, restlessness, irritability, separation difficulties.

Many available studies have made an important contribution in understanding the risk factors for negative health consequences for children and adults, while few studies have focused their attention on factors associated with processes that lead to positive health outcomes (Badurina, 2016<sup>7</sup>). New scientific discoveries are oriented towards salutogenic models that promote health and quality of life and preventive programs.

The term prevention implies a proactive approach to health, highlighting salutogenically oriented preventive, intervention and rehabilitation programs with a focus on the process of developing resilience (Figure 1). **Salutogenesis represents a new way of understanding and treating human problems and a new paradigm in the field of mental health. This new field in health research is based on the recognition of health determinants, potential, understanding and development of predictors that influence health.**

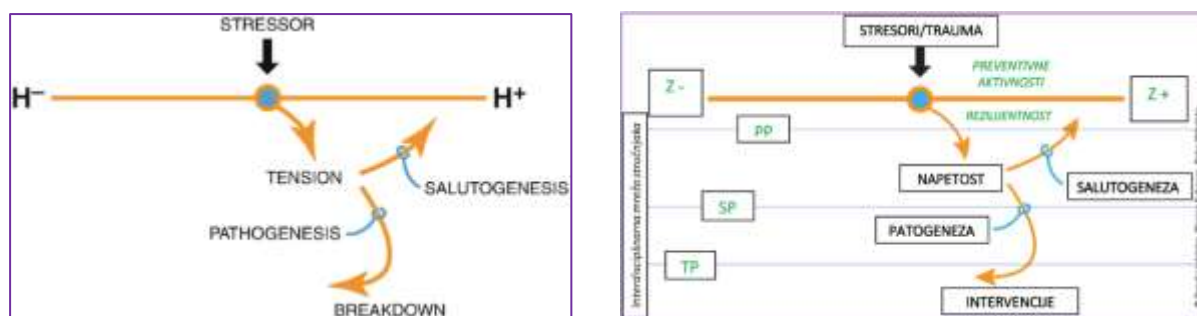
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<sup>4</sup> Horesh, D., Brown D.A (2020). *Traumatic stress in the age of COVID-19: A call to close critical gaps and adapt to new realities*. National Library of Medicine. Pub Med. Gov: [www.pubmed.ncbi.nlm.nih.gov/32271070/](http://www.pubmed.ncbi.nlm.nih.gov/32271070/)

<sup>5</sup> Sprang G., Silman M. (2013). Posttraumatic stress disorder in parents and youth after health-related disasters. *Disaster Medicine and Public Health Preparedness*, 7(1), 105–110

<sup>6</sup> Buljan, Flander, G. (2020). *Izazovi i mogućnosti pružanja zaštite mentalnog zdravlja tokom krize*. Prezentacija: Drugi Internacionalni kongres dječje i adolescentne psihoterapije. Očuvanje mentalnog zdravlja i psihosocijalne dobrobiti. Sarajevo: BHIDAPA

<sup>7</sup> Badurina, M. (2016). *Privrženost i rezilijentnost kao odrednice zdravlja djece i mlađih adolescenata sa stajališta gestalt psihoterapije*. Doktorska disertacija. Sarajevo: Fakultet zdravstvenih studija



Picture 1.

**Proposed model of preventive programs in educational and professional areas**, (PP-Primary preventive program, SP-Secondary preventive program, TP-Tertiary preventive program) adapted according to the model, Lindstrom, B., Eriksson, M., Wikstrom, P., 2014, according to Badurina, 2016)

According to the Bangkok Charter, which is the first renewal of the Ottawa Charter (WHO, 2005), **health promotion is a process that enables individuals and communities to increase the control over the determinants of health** thereby improving health for an active and productive life (WHO, 1986a, 1993; Ziglio et al., 2000, according to Badurina, 2016).

Recent research in the field of children's and young people's health indicates the importance of studying and understanding the development of resilience, which is closely related to the development of attachment, as the most important concepts of determinants of health. That is why **new preventive programs are directed and created in relation to the knowledge of the importance and development of secure attachment and capacity for resilience**. Resilience represents a new way of understanding and treating human problems, a new paradigm in the field of mental health, an approach focused on strengths and potentials (challenge model). Although the first research on resilience was focused on individual - biological, psychological and other protective factors that protect the individual from the destructive effects of crisis and persistent stress, it was recognized that resilience, **even biologically determined, develops in a relational context** (Majkić, 2011, according to Badurin , 2016).

The development of the concept of resilience, as a protective dynamic process, imposes the need for a systemic-holistic point of view, so that systemic theories extend the point of view of individual resilience to processes in wider family and social systems, which includes an ecological and developmental view of resilience. Among the first authors who emphasized the

importance of ecological approaches to development and behavior was Bronfenbrenner (Bronfenbrenner 1997)<sup>8</sup>.

Following up on research from around the world and clinical work with child populations who have experienced the stress of social isolation, poverty, stigma and violence (Ungar, 2020)<sup>9</sup> indicates that resilience is much more than a child's personal ability to overcome adversity. Rather, **resilience is a reflection of how well families, schools, service providers, and communities work together to create opportunities for children and youth to navigate the resources needed for well-being, while making those resources available in ways that youth experience as meaningful.**

The following mentioned, health promotion represents a holistic approach, integration of research and strengthening of community development, emphasizing the action and encouragement of activities aimed at active multidisciplinary and intersectoral cooperation. **Partnership in preventive programs is of crucial importance, and is the fundamental assumption of successful prevention.** Partnership is usually explained as a process involving individuals and/or institutions that seek to provide mutual support and coordinate their efforts towards positive outcomes for children's healthy development. The collaborative relationship emphasizes an equal and partnership relationship in which the child/family/school/community/professionals actively participate in the search for optimal solutions for current difficulties.

Therefore, in this project we looked at the interest in resilience from a social ecological framework, whereby we looked at and defined the resilience of communities from an integrative-holistic point of view. (Picture 2.)

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<sup>8</sup> Bronfenbrenner, J. (1997) . *Ekologija ljudskog razvoja*. Beograd: Zavod za udžbenike i nastavna sredstva.

<sup>9</sup> Ungar, M., Theron, L. (2020). *Resilience and mental health: how multisystemic processes contribute to positive outcomes*. Science Direct: [www.sciencedirect.com](http://www.sciencedirect.com).





Picture 2.

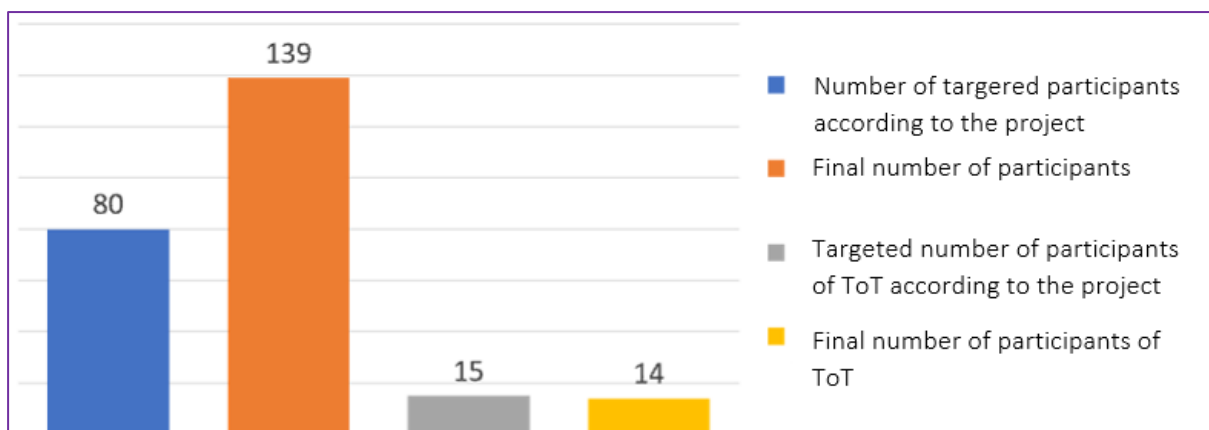
Holistic model of health development perspective (Davies et al, 2006, Lindstrom, 2014<sup>10</sup>, p.17, according to Badurina, 2016)

Furthermore, the need for early intervention to prevent negative consequences for the mental health and well-being of children and adolescents is significantly greater than the capacity of professionals specializing in working with children, adolescents and their families.

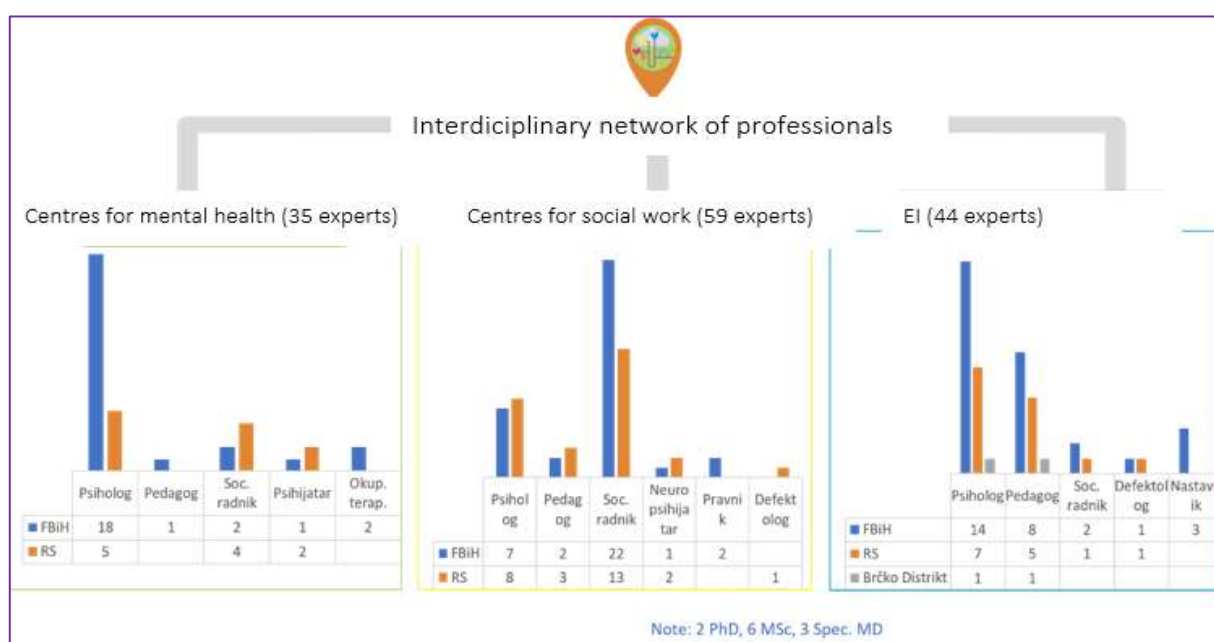
In the cooperation between UNICEF and BHIDAP with the support of USAID (2021)<sup>11</sup> so far , a project was implemented to train experts in Bosnia and Herzegovina from various professional fields (psychologists, social workers, psychiatrists, pedagogues, educators, psychotherapists, occupational therapists and lawyers) called Virtual Crisis "Here&Now" interventions. Through four education-training cycles, **175 experts** from the health, social, educational and educational sectors in Bosnia and Herzegovina participated, **which is 119% more participants than the number foreseen by the project**. Of these, **139** participants actively participated in the training and met all the conditions for obtaining the certificate, and **14 participants met the criteria for obtaining the ToT (trainer for trainers) certificate**. Through 8 specific thematic modules, the participants were guided by a multidisciplinary team and associates of BHIDAPA, a total of **15** eminent lecturers and experts. Graph 1 and Graph 2.

<sup>10</sup> <https://eubirthresearch.files.wordpress.com/2018/03/bengt-lindstrc3b6m-presentation.pdf>

<sup>11</sup> [Završni izvještaj Projekta Virtualne krizne intervencije „Ovdje&Sada“ 2021.](#)



Graph 1.



\*CMZ – Centers for mental health; CZS – Centers for social work/care; EI – Educational institutions

Graph 2.

Analogously, the "Here&Now" Interdisciplinary Network of Professionals project is a continuation of joint activities and Professionals' needs for additional specific education and skills needed to understand developmental tasks, family and system dynamics, and interventions aimed at preserving and improving the mental health of children and young people. The project activities followed the proposals of colleagues obtained through the evaluation of the previous Project and were based on a holistic and salutogenically oriented approach.

This project was implemented in cooperation with UNICEF and key relevant ministries in BiH, with the support of the EU within the initiative Mitigating the impact of Covid-19 on children and their families in the Western Balkans and Turkey.

## PROJECT GOALS

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An important goal of this project was to continue strengthening cooperation within the established interdisciplinary network of Professionals. Through the feeling of belonging and coherence, as the most powerful principle of developing resilience, a space for supporting mental health, personal and professional development of Professionals from the health, social, educational and educational sectors in Bosnia and Herzegovina was made possible, and thus the possibility to provide an optimal space for preserving mental health. and the well-being of children, young people and their families.

A special part of the project activities was focused on group processes and supervision. Through these activities, Professionals had the opportunity to recognize and additionally strengthen their personal and professional capacities, personal areas of development, and thereby actively participate in recognizing and reaching out for internal and external support systems in preserving their own health. In addition to the planned thematic units, specific activities were aimed at providing early interventions, promoting the mental health and emotional well-being of children, adolescents and their families.

Currently in Bosnia and Herzegovina, according to our knowledge, there are no official data on the state of mental health of our children and adolescents. The central phase of this project is the research that was conducted and which provides a basic picture of the mental health of children and adolescents and an insight into the capacity of resilience in their current age and environment. (Pages 77-86)

The final phase of the project is the creation of a manual as a result of the implementation of the Interdisciplinary Network of Professionals "Here&Now" project. It was created with the desire to be an additional support in further efforts to preserve the mental health of children and young people. The manual represents the integration of theoretical thematic units, practical experiences, interventions and guidelines that we gathered during the implementation of the projects. It is intended for Professionals who did not have the opportunity to participate in the Project (who in their daily work meet children, young people

and their families), then parents and all those who are interested in the mental health and well-being of children.

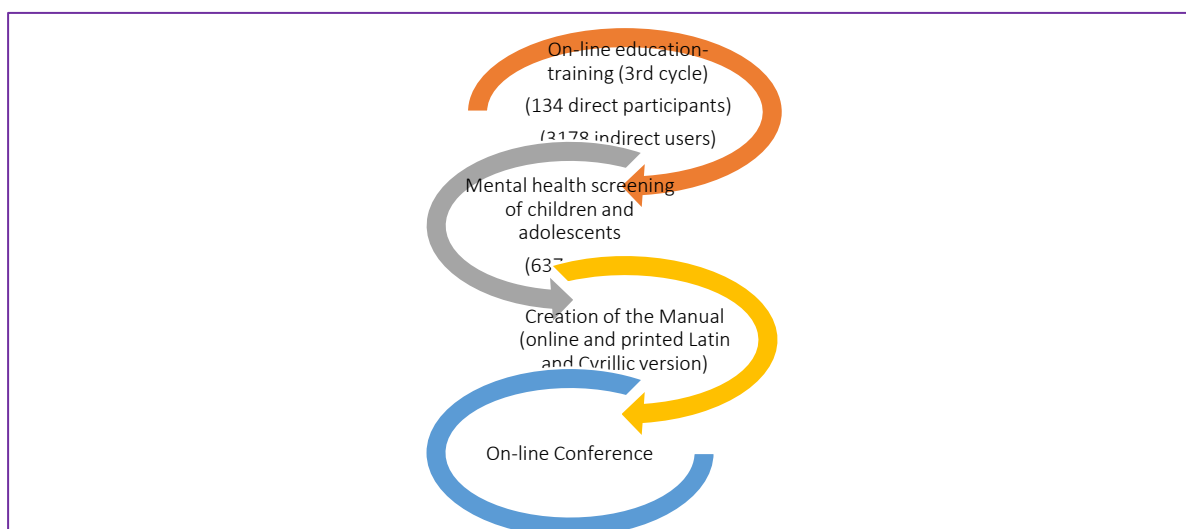
The online conference is the final event within the one-year project Interdisciplinary Network of Professionals "Here&Now". With it, we mark the importance of the program that brought together Professionals from the health, social protection, upbringing and education sectors from the territory of Bosnia and Herzegovina, and which actually represents the continuation of our joint activities in strengthening multidisciplinary and multisectoral connections and cooperation, as a foundation for the protection and preservation of the mental health of children and young people.

**The ultimate goal of the project** was to support the established interdisciplinary network of Professionals in BiH, **through strengthening the capacity of community resilience in providing early intervention, promoting mental health and emotional well-being of children, adolescents and their families.** Providing support to interdisciplinary network Professionals will cover four phases of the project:

1. **Initial stage: Creation and implementation of three cycles of online education-training** (30 professionals by the cycle for a total of 90 professionals), project included 134 Professionals from CMZ; CSR and the education sector in Bosnia and Herzegovina, which is **68% more participants involved in the project** than the number of participants planned by the project.
2. **Middle stage: Mental health screening of children and adolescents** for further systematic planning and creation of prevention programs - central phase of the Project (app. 800 questionnaires) the project included **637 children and adolescents** aged 3-18 years
3. **Final stage: Creating and printing of the manual "A child's soul should be listened to"** Latin and Cyrillic version, online<sup>12</sup> and printed form of the publication (200 pieces).
4. **Exit phase of the Project: On-line Conference "A child's soul should be listened to"**

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<sup>12</sup> <https://bhidapa.ba/publikacije-2/>



Graph 3.

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#### IMMEDIATE GOAL:

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**Empowered professionals** working to reduce the negative impact of the current health crisis on the mental health and well-being of children and adolescents; from problem identification to a formal support process and indications for further multidisciplinary diagnosis and treatment.

**Strengthening the created platform of Professionals** and providing and strengthening multidisplinarinity and intersectoral cooperation.

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#### INDIRECT GOAL:

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**Mental health screening of children and adolescents** in order to further systematically **plan and create preventive programs** aimed at protecting the mental health and well-being of children, adolescents and their families in Bosnia and Herzegovina. The final phase of the project is the creation of a manual as additional support for Professionals who in their daily work meet with children, young people and their parents, as well as the planning and creation of online conferences called "Children's souls should be listened to"<sup>13</sup>, held on November 28, 2022.

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<sup>13</sup> <https://bhidapa.ba/ovdje-i-sada-novosti/online-konferencija-djecija-dusa-treba-da-se-slusa/>

## INITIAL PHASE OF THE PROJECT: CREATION AND IMPLEMENTATION OF THREE ON-LINE EDUCATION-TRAINING CYCLES

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The results of the completion of the Virtual Crisis Intervention Project "Here & Now"<sup>14</sup> initiated the need to continue working with Professionals who were previous participants. Support for the established interdisciplinary network of mental health Professionals in BiH, in strengthening the resilience of the community in providing early interventions, promoting the mental health of children, adolescents and their families, is a continuation of our joint activities.



Continuing education is an opportunity for professionals to **develop new skills and deepen their professional capacities, and strengthen multidisciplinary and multisectoral connections.**

The **issues** they face during the Covid 19 pandemic are becoming more **complex and require constant updating of Professionals and mutual and interdisciplinary cooperation.**

Three cycles of education-training "Interdisciplinary network of Professionals Here&Now" were implemented in the period from November 2021-November 2022 and included **7 modules** each, which were held once a week, on Fridays from 9:00 a.m. to 4:00 p.m., for a total duration of **56 hours.**

The **first cycle of education and training** was implemented in the period from **November 2021 to February 28, 2022.** In the **first cycle of education and training, 32 professionals** from Mental Health Centers, Centers for Social Work and Educational Institutions from **14**

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<sup>14</sup> [https://bhidapa.ba/wp-content/uploads/2022/03/Final-Narrative-Report\\_UNICEF\\_BHIDAPA.pdf](https://bhidapa.ba/wp-content/uploads/2022/03/Final-Narrative-Report_UNICEF_BHIDAPA.pdf)

municipalities in the Federation of Bosnia and Herzegovina participated and Republic Srpska. **The second cycle of education-training** was realized in the period from **March 2022 to June 23, 2022**. In the **second cycle of education-training**, **68** professionals from Mental Health Centers, Centers for Social Work and Educational Institutions from **16 municipalities in the Federation of BiH participated**, and four from Republic Srpska and Brčko District. The **third cycle of education and training** was implemented in the period from **September 30, 2022 to November 18, 2022**. **34** professionals from Mental Health Centers, Centers for Social Work and Educational Institutions from the area of **27 municipalities from the Federation of Bosnia and Herzegovina and 7 from the Republic of Srpska and Brčko District** participated in the most difficult cycle of education and training.

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#### INTRODUCTION AND DYNAMICS: ON-LINE EDUCATION - TRAINING

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The FIRST MODULE included familiarizing the participants with the overall education and its goals. The topic of the module was the promotion of mental health of children and adolescents in BH. Within the topic, participants were introduced to the development of mental health in BH. Work was done on developing the multidisciplinary of professionals through the development and strengthening of group cohesion and self-care, as well as the adoption and development of practical skills in working with target groups.

The SECOND module covered the **issues of children and adolescents who grow and develop in different contexts - kindergartens, schools, different socio-cultural environments**. **Protective and risk factors of psychosocial development and the Interaction model of development were discussed.**

The THIRD module touched on the importance of the family and dealt with **the impact of the crisis on the family and families in crisis**. The family is the place where people are born, become and survive. The family is the oldest institutional creation of man, evolutionarily as old as the human race, and which each generation learns over and over again, repeating, within it, transgenerational patterns of behavior. It provides its members with physical survival, as well as construction and development. In the last few generations, changes within the family have been particularly pronounced. As world orders change, living contexts change, so do families.



Life flows are unpredictable, both for the individual and the family, facing problems and challenges requires the skill of adapting, overcoming and adapting to new conditions that inertia create a crisis within it, and the crisis the possibility of disintegration or growth and further development.

The FOURTH module aimed to acquaint the participants with the expected reactions to stress, trauma and crisis. Introduction to **overemphasized reactions to stress, trauma and crisis, with the aim of preventing possible pathological conditions**. Acquisition and development of practical skills in working with target groups. Improving knowledge about the impact of different stressors on children and adolescents. Understanding the importance of triage. Promoting mental health care.

In the FIFTH module, participants are introduced to the theory of attachment, and the concepts: **community, multidisciplinarity, intersectorality, from the perspective of attachment and resilience**. The importance of elaborating the topic is **recognizing the possible etiology** of certain difficulties and challenges that arise in everyday work with clients. The issue of attachment and recognition of one's own styles raises awareness of the behavior and communication of individuals, mutual communication in a team and intersectorally.

The aim of the module is for participants to recognize their **own style and pattern of attachment and their impact on communication and connection**. Then, awareness of the **advantages and obstacles in mutual cooperation**.

The SIXTH module is interesting in that the topic he dealt with is still taboo, in the community but also among some professions dealing with children and adolescents. The challenges that adolescence brings with each passing day are more and more present. The **issue of sexuality, sexual and gender identity is still insufficiently present in education both in schools and in the media and the community in general**. Cases of homosexuality, transgenderism and other entities in this area are increasingly present in adolescents, and thus **the services that deal with them**. The topic of the module dealt with the general development of identity in children and adolescents, but also **psychosexual development with reference to the development of gender and sexual identity in children and adolescents**.

SEVENTH MODULE – This module deals with the very important topic of mentalization and resilience. The SEVENTH module dealt with a very important topic and thereby rounded off the knowledge and experiences of the participants about the development of children and adolescents, and the effects on that population. Resilience is formed in childhood and depends on the intensity of stressful events, but much more on the ability of the dominant figure of affective attachment to process the things that happen and which are objectively difficult, in a more or less acceptable way for the child. **Resilience** is defined as an individual's **ability** to **creatively adapt** (**consciously** find the best way to psychological, social, cultural and physical resources) in order to **maintain their health**, in moments of **exposure** to significant **adversity**. (Ungar, 2012, according to Badurin, 2016). Mentalization is the power to see ourselves "from the outside" and others from the inside. It is the mental process by which one implicitly or explicitly interprets one's own or another's actions as meaningful based on mental states such as wants, needs, feelings, and beliefs. This topic is particularly important for understanding children, adolescents and their reactions

## MODULE GOALS

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Each module had a certain individual goal that is closely related to the topic being addressed, all in the direction of improving the mental health of children and adolescents, but also the community as a whole, in BiH. They also worked on developing and strengthening a multidisciplinary and intersectoral network of professionals through the development and **strengthening of group cohesion, as the most significant predictor of resilience capacity development, with a significant focus on self-care.**

**The integration of theoretical and practical knowledge and skills** in working with target groups was the link between each module and education-training as a whole. The thematic units were aimed at understanding and improving the mental health of children and adolescents, as well as the community as a whole.

## MODULE THEMES

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Project activities focused on the implementation of education-training included seven thematic modules lasting 56 hours, through the BHIDAPA Zoom platform, namely:

1. Promotion of mental health of children and adolescents in B&H – introduction to research during education
2. The impact of different contexts on the growth and development of children and adolescents
3. Family and crisis
4. Psychological relations and the development of mental health problems in children and adolescents
5. Multidisciplinary concept – Who are we? How well do we know ourselves?
6. Development of children's and adolescent's identities
7. Resilience and Mentalization

---

## WORK METHODOLOGY AND METHODOLOGICAL REVIEW

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The module methodologically included constructive **interaction between the participants and the lecturer**. The work took place in **large and small groups**, with the use of **online technology** (zoom platform) in direct work. Exercise in **small groups enabled work on a personal level related to the topic**.

The space of supervision allowed the participants to resolve some of the professional and **ethical dilemmas**, exchanging professional experiences while supporting each other. (*Table 1.*)

The modules started with a **group process**. After the introductory round in the group process, a certain **projective, experiential exercise** (*Table 2.*) was done in each module, as an **introduction to the topic** (*Table 3.*) planned for the specific module. This way of working proved to be very effective for the participants. Recognizing some parts of themselves, coming to certain **insights through exercises**, they could better understand what is happening with clients as well.

During discussions in small and large groups, and during supervision, the participants emphasized the importance of connecting with each other and easier overcoming of some of the problems. The participants highlighted the connection on a personal level as a special value.

With lectures by expert lecturers, the participants had the opportunity to **complete their knowledge, which they further practiced in small groups and feedback in a large group**

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## WORK DYNAMICS

---

9:00 a.m. – 10:30 a.m.	GROUP PROCESS
10:30 am – 10:45 am	BREAK
10:45 a.m. – 11:00 a.m.	BEFORE THE TEST
11:00 a.m. – 12:30 p.m.	THEORY ON THE SUBJECT OF THE MODULE
12:30 p.m. – 12:45 p.m.	BREAK
12:45 pm – 1:15 p.m.	WORK IN SMALL GROUPS
1:15 p.m. – 1:45 p.m.	WORK IN A LARGE GROUP (FEEDBACK)
1:45 pm.. – 2:00 p.m.	POST TEST
2:00 p.m. – 2:45 p.m.	LUNCH BREAK
2:45 p.m. – 4:00 p.m.	CLINICAL SUPERVISION and EVALUATION

*Table 1.*

## EXERCISES - EXPERIENTIAL PART OF THE MODULE

My „first toy“ and reflection on my own roles and needs, were especially important for insights into the application of various interventions in working with parents, children and adolescents
The experiential exercise „At the table or lunch together“ contributed to the participants becoming aware of their place in the family, and recognizing the feelings they had as children connecting them with current behavior, feelings and needs. Understanding personal roles, feelings and general personal insights have a significant place in the application of various interventions in working with parents, children and adolescents
Experiential, projective exercise „Sage“ introduced the participants to recognize their own reactions, unconscious needs
Exercises for „self-massage“ and Sakala for attachment testing (Collins iRead, 1990)
Exercise „Who are you? With the addition of verbs: I can, I will, I want, I need, I must.
The „Tree“ exercises aims to raise awareness of resources, identify places of resilience and relaxation

Table 2.

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## MODULE LEADERS AND EXPERT LECTURERS

---



Mirela Badurina, PhD,  
psychotherapist, supervisor,  
Project manager



MSc. Azra Arnautović, MD, pediatrician,  
psychotherapist, supervisor,  
Module leader



Sabina Zijadić Husić, psychologist,  
psychotherapist, supervisor  
Module leader



Mirela Hadžić, psychologist,  
psychotherapist  
Researcher



Prim. Ranka Kalinić, MD,  
specialist of child psychiatry,  
psychotherapist,  
Expert lecturer



Prof. Gordana Buljan  
Flander PhD, clinical  
psychologist,  
psychotherapist, supervisor,  
Expert lecturer



Prof. Dubravka Kocijan  
Hercigonja, MD, PhD, child  
neuropsychiatrist,  
psychotherapist, supervisor,  
Expert lecturer



Ass. Goran Arbanas, MD, PhD,  
psychiatrist, psychotherapist,  
supervisor,  
Expert lecturer



Prof. Tatjana Stefanović  
Stanojević, PhD, clinical  
psychologist, psychotherapist,  
supervisor,  
Expert lecturer

## QUANTITATIVE AND QUALITATIVE ANALYSIS OF THE 1ST EDUCATION - TRAINING CYCLE

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The first cycle of education-training "Interdisciplinary network of professionals Here&Now" was implemented in the period from **November 2021 to February 28, 2022** and included **7 modules** that were held once a week, on Fridays from 9:00 a.m. to 4:00 p.m., in total duration of **56 hours**.

In the first cycle of education and training, **32** professionals from Mental Health Centers, Social Work Centers and Educational Institutions from **14 municipalities in the Federation of Bosnia and Herzegovina and Republic Srpska** participated. 26 professionals actively participated in the education-training and successfully completed it, while 6 participants, due to unplanned business obligations, missed most of the education and did not obtain the conditions for obtaining the certificate.

The education-training was held by members and associates of the professional multidisciplinary therapeutic and educational BHIDAPA team, expert lecturers, which brings together: child and adolescent integrative psychotherapists; gestalt, cognitive-behavioral, systemic family and psychoanalytic psychotherapists; child and adolescent neuropsychiatrist and psychiatrist; pediatricians, clinical psychology specialists, psychologists, mentors and supervisors.

Working through the modules, group cohesion developed and strengthened. Participants connected on a stronger professional level. Even during the duration of the cycle, individuals had **a need for connection and mutual support and intersectoral cooperation**, which they **considered very important**. Especially supplementing and connecting in environments that did not have the appropriate staff for a specific case. **Most of the participants were multipliers of the learned knowledge and skills in their collectives (experiences presented by the participants during the module)**. Most often, schools and kindergartens were places where education participants transferred knowledge and skills to their colleagues. Of course, there were individual examples in **mental health centers and centers for social work**.

In general, **the participants are dissatisfied with the position of the institutions they come from in society**. They emphasize the lack of suitable staff. Especially **the lack of psychologists and social pedagogues in schools, but also in centers for social work**. They believe that **the**

lack of the aforementioned personnel nowadays, when the problems of children and adolescents are becoming more complicated, affects the provision of services and the treatment of clients in the best way.

---

#### THEMES AND DATES OF THE FIRST EDUCATION-TRAINING CYCLE MODULE:

---

The first cycle of project activities focused on the implementation of modules included seven modules in the period 26.11.2021 - 11.02.2022. through the BHIDAPA Zoom platform and the planned topics were covered

1. Promotion of mental health of children and adolescents in BiH - Introduction to the research part of the Project – 26.11.2021
2. The influence of different contexts on the growth and development of children and adolescents – 03.12.2021
3. Family and crisis- 10.12.2021
4. Psychological reactions and development of mental health problems in children and adolescents – 17.12.2021
5. Multidisciplinary concept – Who are we? How well do we know ourselves? – 28.01.2022
6. Development of the identity of children and adolescents - 04.02.2022

*Tabela 3.*

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#### QUANTITATIVE EVALUATION OF THE 1ST EDUCATION-TRAINING CYCLE

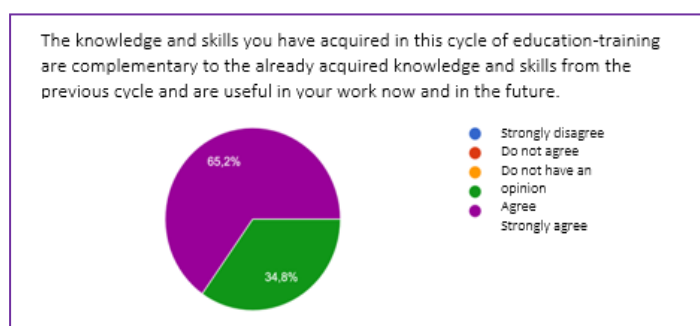
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88,5% participants completed an anonymous questionnaire.

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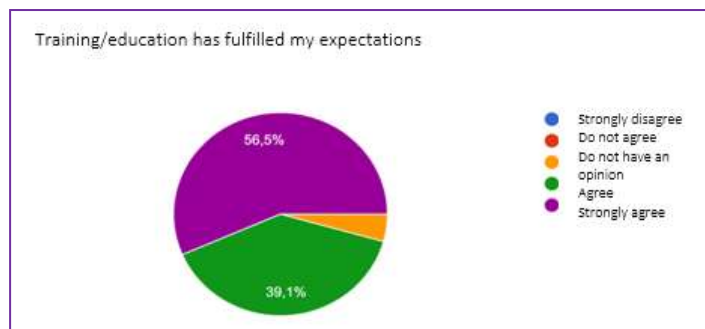
#### ANALYSIS OF GENERAL ISSUES ON EDUCATION-TRAINING:

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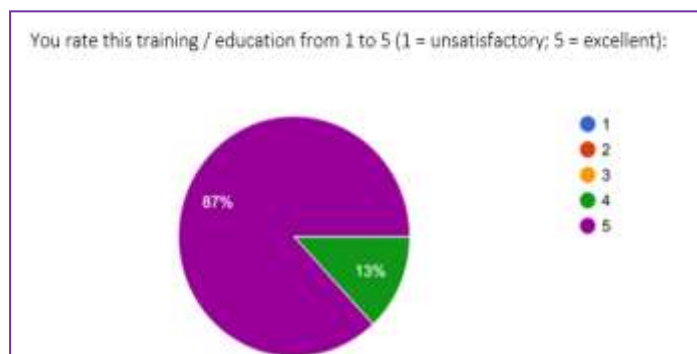


*Graph 4.*





Graph 5.

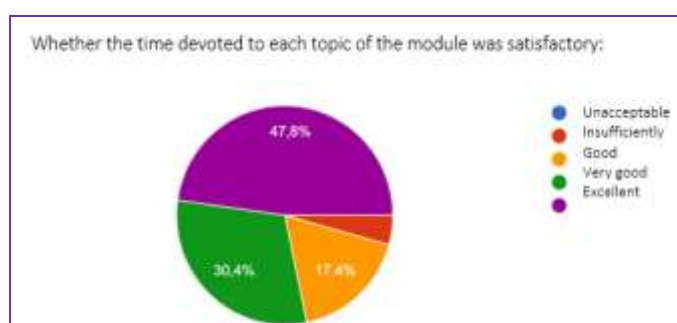


Graph 6.

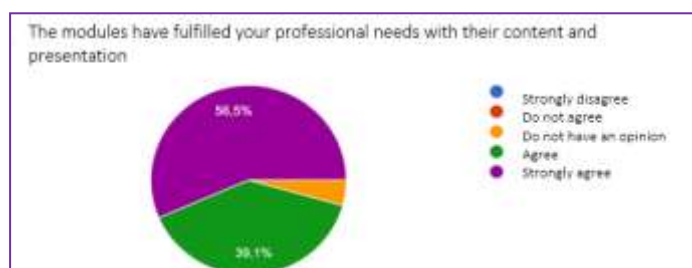
#### CONTETNT ANALYSIS OF EDUCATION-TRAINING:



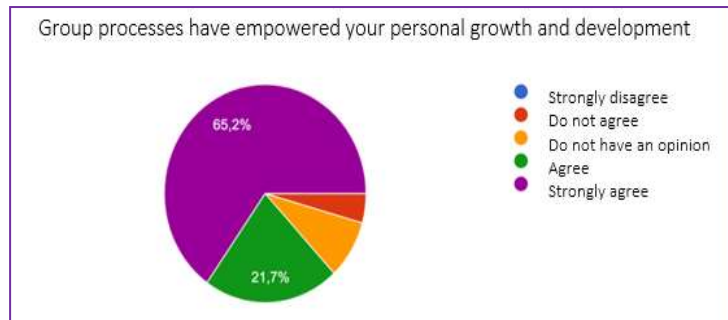
Graph 7.



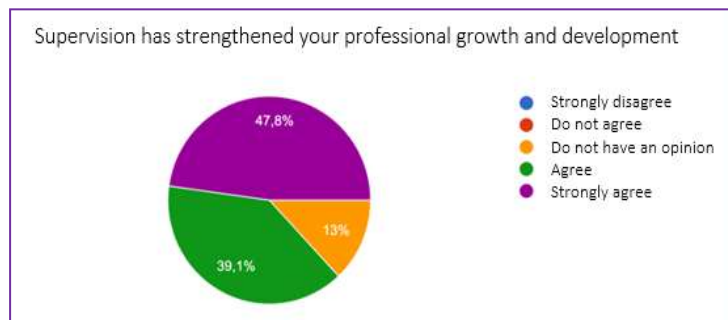
Graph 8.



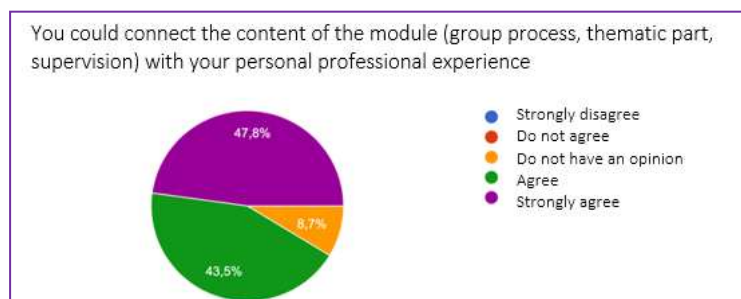
Graph 9.



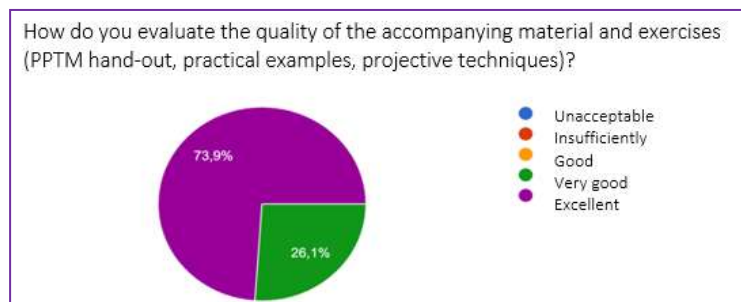
Graph 10.



Graph 11.



Graph 12.



Graph 13.

CONTENT ANALYSIS OF EDUCATION-TRAINING (open questions):

8. State a topic that you consider irrelevant to education? 23 responses

There is none  
None  
There is none  
There was no topic that was unimportant  
All topics were important  
All topics are equally important  
All themes are important and well chosen  
There is no irrelevant topic  
I could not single out any of the topics that were discussed as unimportant  
All the topics covered were important.  
All topics were useful to me.  
All the topics covered are significant  
I consider all of the offered topics important  
There is no such thing, but if I really have to name one, then let it be "Family and Crisis"  
All are equally important.  
All topics related to education were excellent.  
There were no unimportant ones  
Too much talk about homosexuality.  
There is none  
-

Table 4.

**9. Indicate the topic you think should be covered during education/training. 16 responses**

Adolescent crises; depression, self-harm, and specific exercises to work with these groups

Deeper explanation of early conflicts, early trauma

More practical examples i work

Can not remember

Corrective work with children is a good choice

Feedback in communication

Projective techniques or similar methods and techniques

There is a good choice of topics

Emotional development

Professional combustion

*Table 5.*

<b>10. Name the topic that is most important to you personally. 23 answers</b>
--

Resilience

3214

Boundaries on the personal and professional plan

Multidisciplinary concept – Who are we? How well do we know each other?

Strengthening professional capacities

Attachment theory

Resilience and Mentalization

All topics related to children, especially adolescents

Mentalization

Mental health

Sexual development

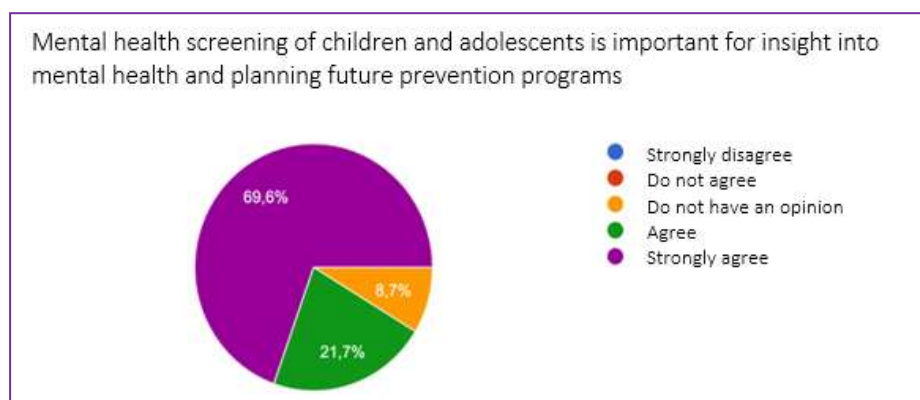
Topic of the last module

Identity development of children and adolescents

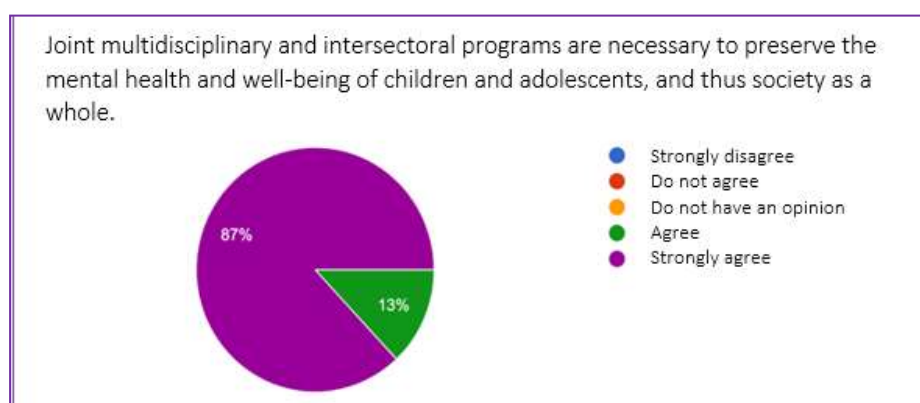
*Table 6.*

ANALYSIS OF THE OPINION OF THE INTERDISCIPLINARY NETWORK OF PROFESSIONALS ON THE IMPORTANCE OF PLANNING PREVENTIVE PROGRAMS AND ACTIVE COOPERATION BETWEEN INSTITUTIONS AND SYSTEMS IN ACHIEVING THE PRINCIPLES OF THE UN CONVENTION ON CHILD RIGHTS

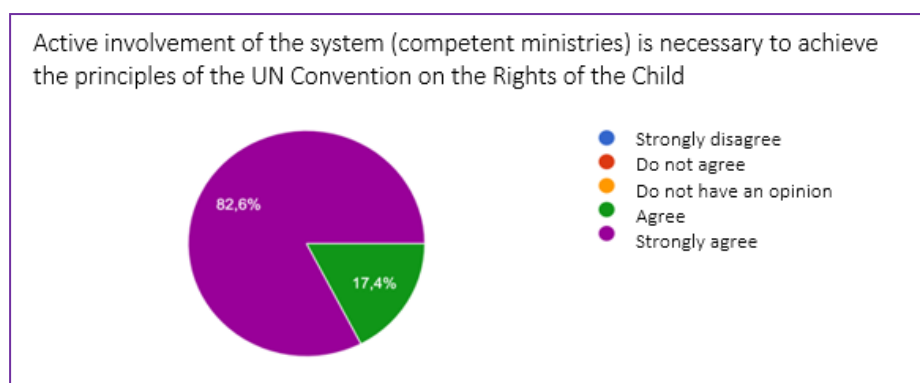
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Graph 14.

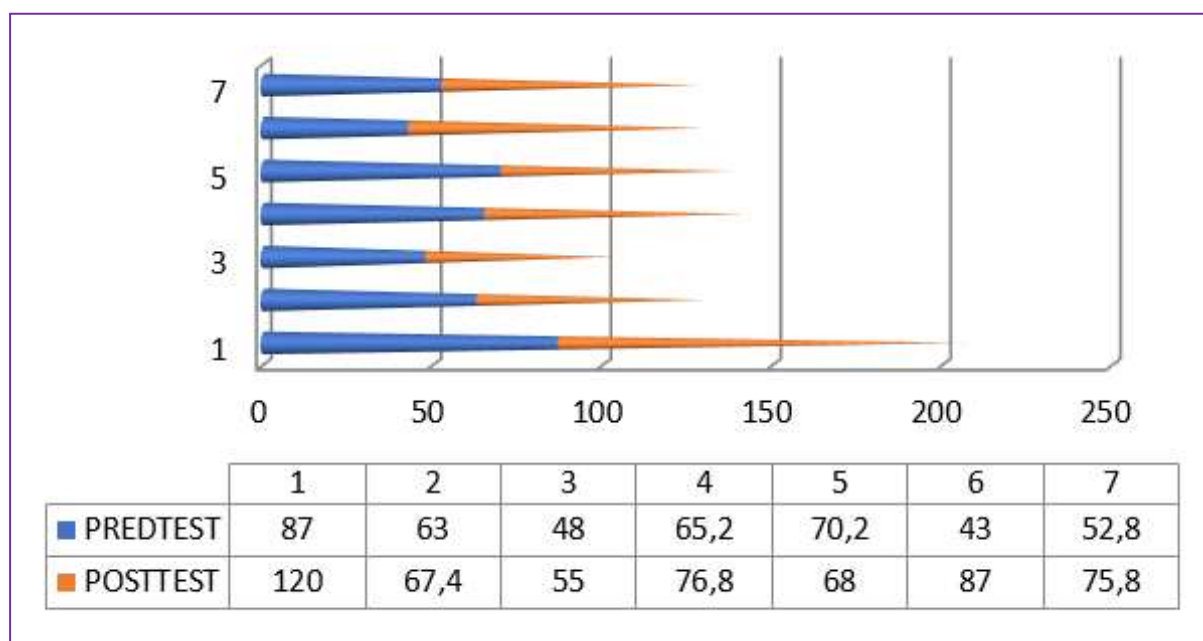


Graph 15.



Graph 16.

## ANALYSIS OF THE TOTAL RESULTS OF KNOWLEDGE TEST BY MODULES



Graph 17.

Graph 17. and the table show the percentages of correct answers for each module, which showed prior knowledge and post-knowledge. It can be noticed that they had significant prior knowledge in some modules and there was a small difference in the acquisition of new knowledge. For example. for module 2. where the percentage difference is 4.4% or in module 3. where 4.4%. The obtained percentage can be explained by the already acquired knowledge from the last cycle of education, but also by the basic knowledge they acquired at the faculties.

The greatest differences in knowledge were shown in modules 1, 4, 6 and 7, which leaves room for further work on these topics.

It can be concluded that a significant percentage of the **total new knowledge acquired is 27.6%**.

Since these are professionals who already have their basic knowledge and work experience. The results indicate that it is necessary to continuously refresh and improve knowledge and skills, especially professionals who are in contact with children and adolescents.

## DIRECT AND INDIRECT BENEFICIARIES OF THE FIRST PHASE OF THE PROJECT

### DIRECT BENEFICIARIES:

The first phase of the project, the first cycle of education-training "Interdisciplinary Network of Professionals Here & Now" was implemented in the period from **November 2021 to February 28, 2022** and included **7** modules held once a week, Friday from 9:00 to 16:00 : 00, for a total of **56 hours**.

The first cycle of education and training was attended by **31** professionals from the Centers for Mental Health, Centers for Social Work and Educational Institutions from **14 municipalities** in the Federation of BiH and Republika Srpska. **26** professionals actively participated in the training, and successfully completed it, while 5 participants, due to unplanned business commitments, missed most of the training. adolescents and families.

### INDIRECT BENEFICIARIES:

Indirect beneficiaries in the first phase of the Project in the period November-2021 February 2022 are children, parents and primary caregivers (a total of 989 beneficiaries, of which 429 children and adolescents). Data were collected by professionals engaged in the project (65% submitted data) for the above period is shown in *Table 7*.

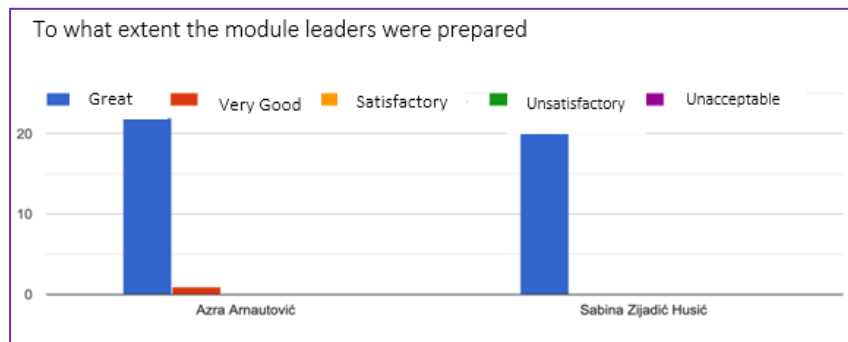
Project phases	Institutions	Number of beneficiaries/clients of children and adolescents		Number of adult users/clients	
		Girls 52%	Boys 48%	M-62%	F-38%
I cycle	Centres for social work	39		153	
	Centres for mental health	72		240	
	EI	293		81	
	Service for Economy, Veterans', Disability and Social Welfare	13		35	
	Service for social protection	12		51	
	<b>Total</b>	<b>429</b>		<b>560</b>	

*Table 7.*

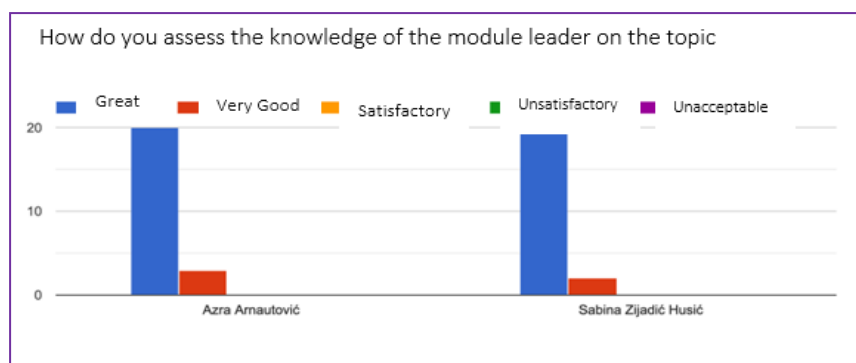


## EVALUATION OF MODULE LECTURERS AND PROFESSIONALS

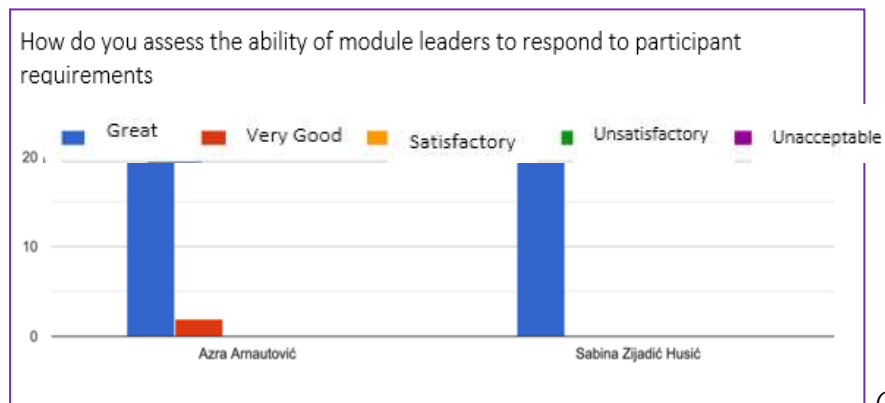
### EVALUATION OF MODULE LECTURERS



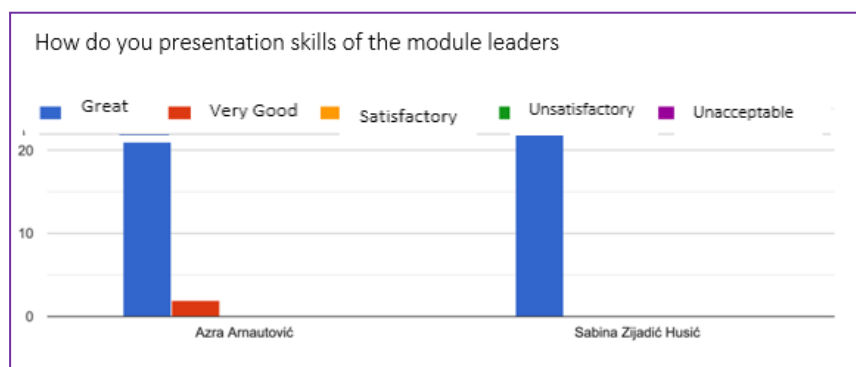
Graph 18.



Graph 19.

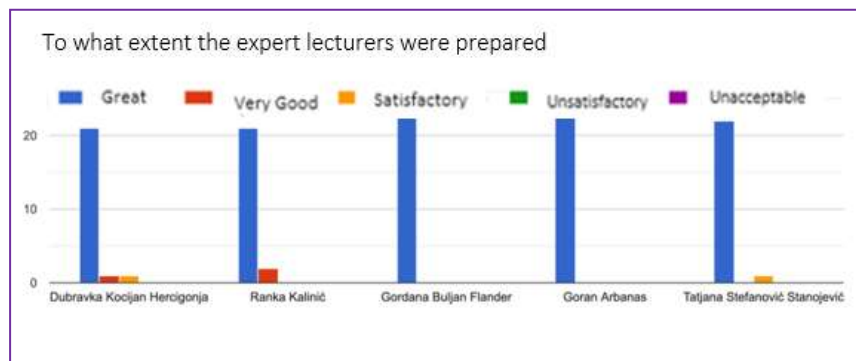


Graph 20.



Graph 21.

## EVALUATION OF MODULE EXPERT LECTURERS



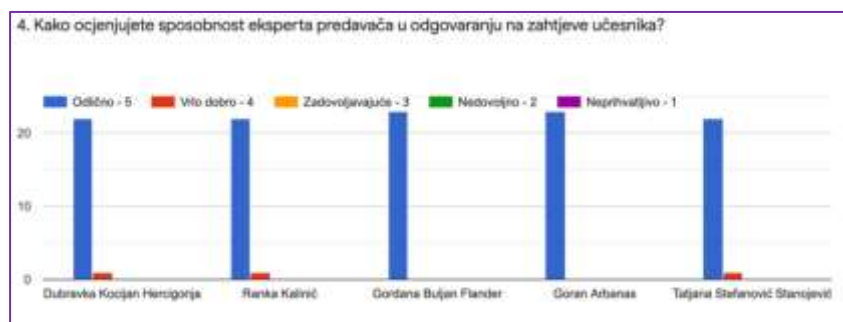
Graph 22.



Graph 23.



Graph 24.



Graph 25.

### 14. Place to write whatever you want and we did not ask you before...10 responses

Useful, interesting and dynamic. Very succesfull training

I would change the program concept.. longer duration of lectures, less reflections

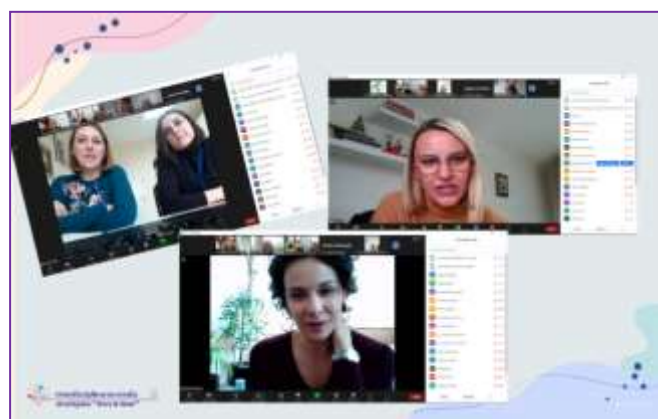
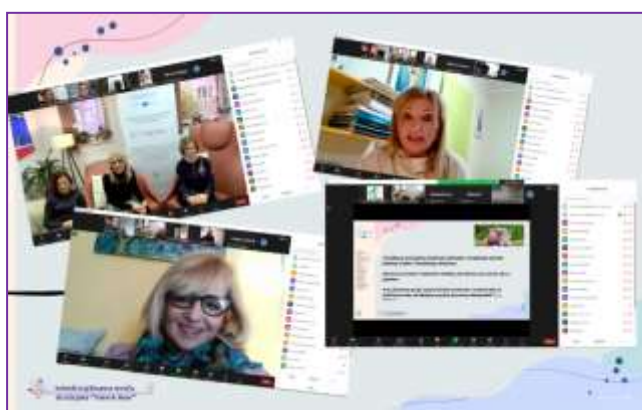
Unforgettable experience, there is no fear of making mistakes, of unknown, different. Ledears of the education were able to amortize each possibility of being misunderstood or disappointed.

These educations would have way better effect if not organized online

I consider that these educations would be more effective if organized during the weekends. During the working days we have some professional liabilities and duties that need to be done.

I would love it if you include the topic „Professional combustion“ in your next education

Table 8.



The second cycle of education-training "Interdisciplinary network of professionals Here&Now" was implemented in the period from **March 2022 to June 23, 2022** and included **7 modules** that were held once a week, on Fridays from 9:00 a.m. to 4:00 p.m., in total duration of 56 hours.

In the second cycle of education-training, **68** professionals from Mental Health Centers, Social Work Centers and Educational Institutions from **16 municipalities in the Federation of Bosnia and Herzegovina** and **four from Republic Srpska and Brčko District** participated. **54 professionals actively participated in the education-training** and successfully completed it, while 14 participants, due to unplanned business obligations, missed most of the education and did not obtain the conditions for obtaining the certificate.

The education-training was held by members and associates of the professional multidisciplinary therapeutic and educational BHIDAPA team, expert lecturers, which brings together: child and adolescent integrative psychotherapists; gestalt, cognitive-behavioral, systemic family and psychoanalytic psychotherapists; child and adolescent neuropsychiatrist and psychiatrist; pediatricians, clinical psychology specialists, psychologists, mentors and supervisors.

Working through the modules, group cohesion, despite the number of interested participants, developed and strengthened. Participants connected on a stronger professional, but also personal level. As in the first cycle of education-training and during the second cycle, individuals had **a need for connection, mutual support and intersectoral cooperation, which they considered very important** (Table 28). Especially supplementing and connecting in environments that did not have the appropriate staff for a specific case. **Even in this cycle, we had the opportunity to learn from the participants that the name of the previous education-training Virtual Crisis Intervention "Here&Now" was extremely useful** and that most of the participants were multipliers of the learned knowledge and skills in their collectives (experiences presented by the participants during the module). Most often, schools and centers for social work and care were places where the participants of the education imparted

knowledge and skills to their colleagues. There were also individual examples in **mental health centers**.

In general, **the participants** emphasize the lack of suitable staff. Especially **the lack of psychologists and social pedagogues** in schools, but also in centers for social work. They believe that **the lack of the aforementioned personnel nowadays**, when the problems of children and adolescents are becoming more complicated, **affects the provision of services and the treatment of clients in the best way**.

#### MODULE DATES AND TOPICS OF THE SECOND CYCLE OF EDUCATION-TRAINING :

The second cycle of project activities aimed at the implementation of the module, included seven modules in the period 25.03.2022. - 23.05.2022. via the BHIDAPA Zoom Platform and planned topics were covered.

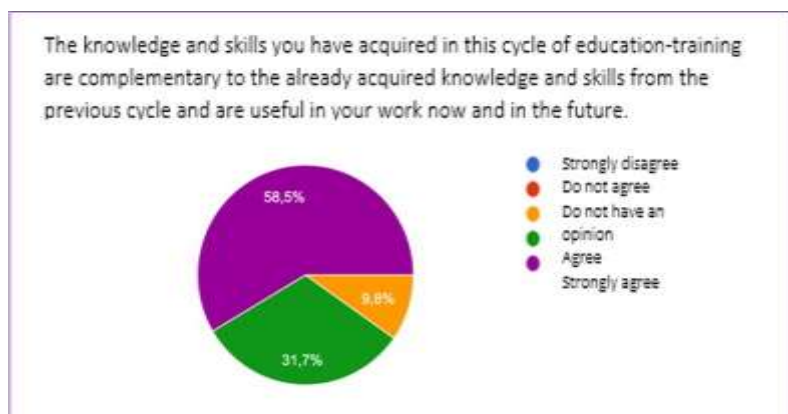
- |   |  |
|---|--|
| 1. Promotion of mental health of children and adolescents in B&H – introduction to research during education– 25.03.2022. |  |
| 2. The impact of different contexts on the growth and development of children and adolescents – 08.10.2022.               |  |
| 3. Family and crisis – 21.04.2022.  |  |
| 4. Psychological relations and the development of mental health problems in children and adolescents – 06.05.2022.        |  |
| 5. Multidisciplinary concept – Who are we? How well do we know each other? – 20.05.2022.                                  |  |

*Table 1.*

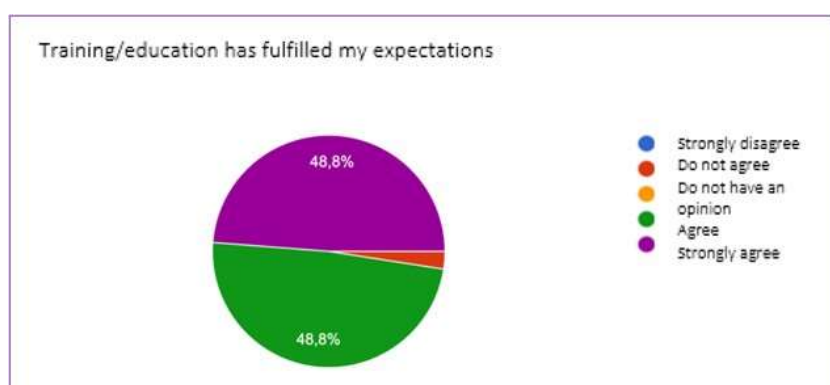
## QUANTITATIVE EVALUATION OF EDUCATION-TRAINING

73% participants completed an anonymous questionnaire.

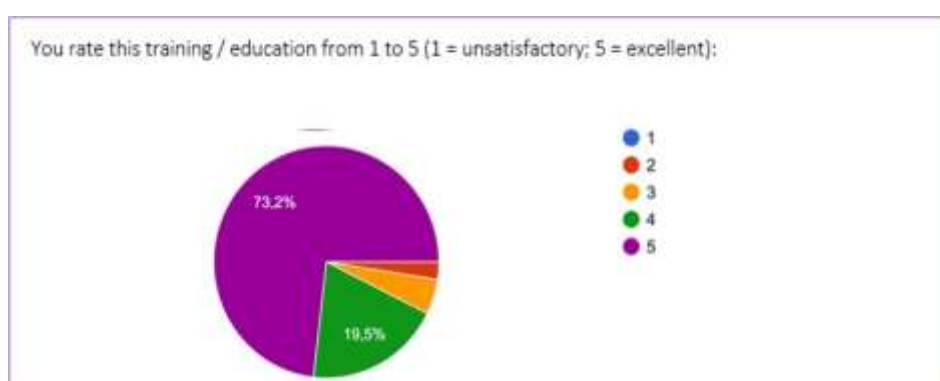
### ANALYSIS OF GENERAL ISSUES ON EDUCATION-TRAINING:



Graph 26.



Graph 27.



Graph 28.

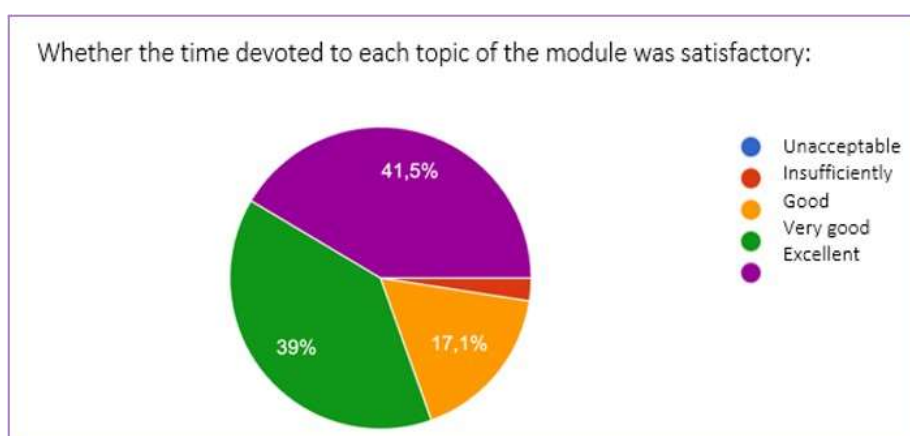
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## CONTENT ANALYSIS OF EDUCATION-TRAINING:

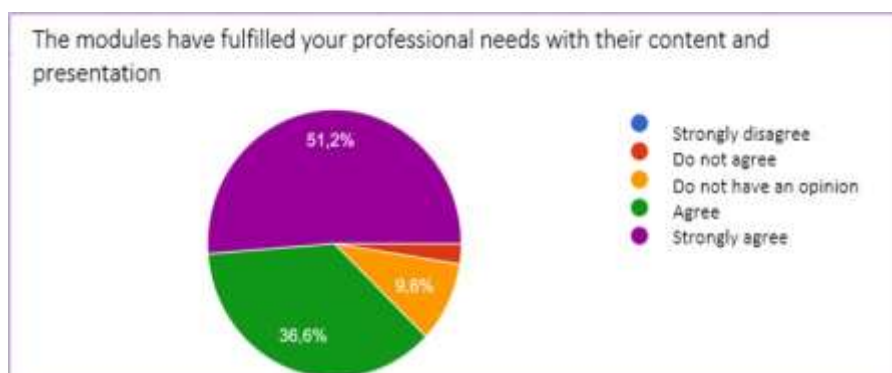
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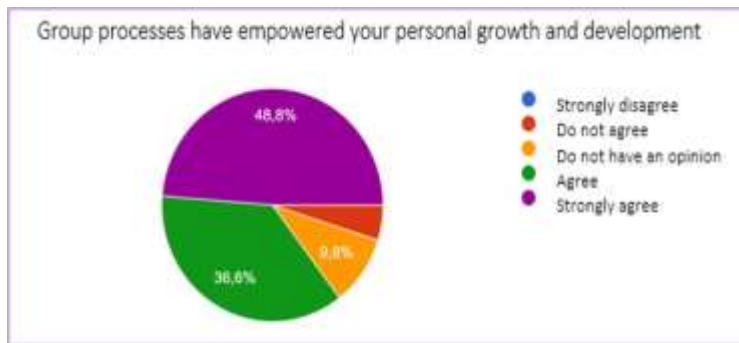
Graph 29.



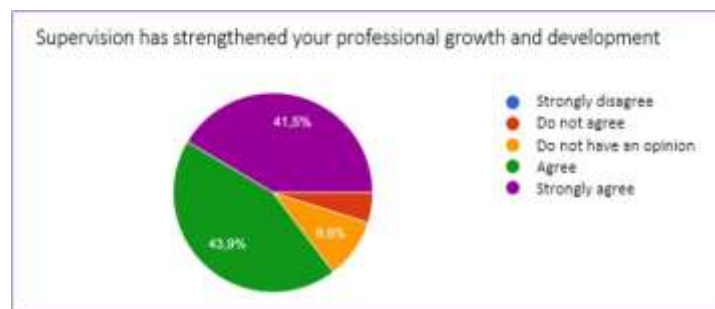
Graph 30.



Graph 31.



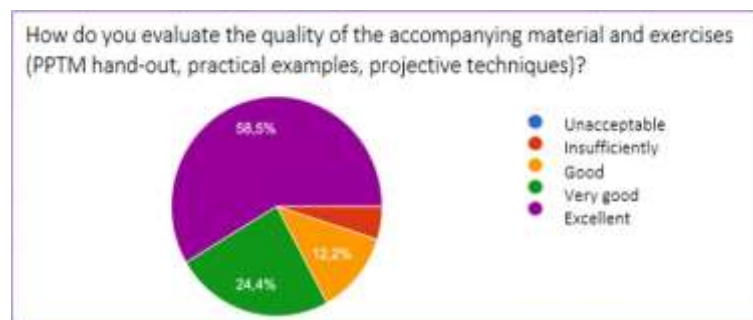
Graph 32.



Graph 33.



Graph 34.



Graph 35.



CONTENT ANALYSIS OF EDUCATION-TRAINING (open questions):

**8.Name a topic that you consider unimportant for education? 41 answers**

There is none

/

all topics were important

There was no such thing

Promotion of mental health among children and adolescents in Bosnia and Herzegovina

No

Everything was useful

All topics are important

All subjects were exceptional

I do not know

all topics are equally important

nothing special

I do not remember

There are no irrelevant topics

Each of the topics we had the opportunity to listen to contributed to my personal growth

-----

Family and crisis

Mental health of children and young people

They were all useful

All were important and useful.

Everything new that I learn is important to me, it's hard for me to single out anything

All topics are important

All topics are equally important, especially those related to working with children.

All topics covered are significant

I believe that all topics are extremely useful and significant for quality professional growth and development.

all topics were important

All topics were connected and good for professional development.

There is none

/

all topics were important

There was no such thing

Promotion of mental health among children and adolescents in Bosnia and Herzegovina

No

Everything was useful
All topics are important
All subjects were exceptional
I do not know
all topics are equally important
nothing special
I do not remember
There are no irrelevant topics
Each of the topics we had the opportunity to listen to contributed to my personal growth
-----
Family and crisis
Mental health of children and young people
They were all useful
All were important and useful.
Everything new that I learn is important to me, it's hard for me to single out anything
All topics are important
All topics are equally important, especially those related to working with children.
All topics covered are significant
I believe that all topics are extremely useful and significant for quality professional growth and development.
all topics were important
All topics were connected and good for professional development.
All are needed
No topic was unimportant
all topics were excellent and followed each other
there is none
Everything was important
I consider all topics important and useful
None.
There is no topic that I consider unimportant
There is no such topic
saints were important and current

*Table 10.*

**9. Please indicate a topic that you feel should be covered Education/training .**

**29 answers**

prevention of professional burnout  
Mental health of professional associates  
Family and crisis  
Self-evaluation  
High-conflict divorces and their impact on the psyche and development of children  
It would be good to repeat these topics with new educators and supervisors  
supervision of a professional in social work  
Boundaries in professional work  
Topics from speech therapy  
work strategies in simulated situations  
All are good topics  
ANY TOPIC FROM THE FIELD OF LOGIC PEDIATICS  
Communication with adolescents in counseling work  
Dealing with delinquent behavior  
A little more about people with developmental disabilities  
Motivation of children and young people - How to motivate children towards positive behavior patterns  
I feel that all the important topics were covered, with the fact that family-related topics would always come in handy.  
How to help people and parents of children with a certain degree of disability, how to cope with everyday challenges  
Topics related to work with victims of violence.  
Eating problems in children  
Topics concerning access with parents and children with PP.  
Early growth and development (negative influences, consequences, overcoming negative experiences, ...), burnout prevention (support groups, supervision, ...), ...  
mental health professionals  
burnout at work  
Trauma  
Early childhood development (up to 5 years)  
Development crises  
Children's addiction to media (mobile phones, computers...)  
counseling work with children and adolescents

*Table 11.*

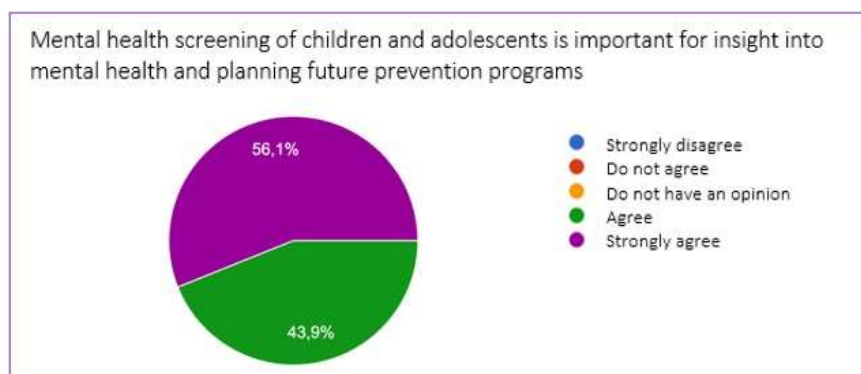
**10.Name the topic that is most important to you personally. 41 answers**

*Family and crisis, supervision, resilience*  
*Identity development of children and adolescents*  
*Who are we? How well do we know each other?*  
*Introspection, All are essential and important*  
*they are all very important*  
*Boundaries in professional work*  
*Multidisciplinary team - Who are we? How well do we know each other?*  
*REI method in the diagnosis of dyslexia*  
*developmental psychology of adolescents*  
*They are all important, Identity and work with family*  
*Resilience and mentalization*  
*APPLICATION OF THE REI METHOD IN THE TREATMENT OF DYSLEXIA*  
*Principles of advisory work, how to do advisory work with users in the best way*  
*All topics related to working with children*  
*Diversity. Mental health, family taking care of their needs*  
*Resilience, Identity, Family relations*  
*Resilience, identity development*  
*How to help yourself, work on yourself? To be an example to others with their example,*  
*something on that topic.*  
*All topics*  
*Topics related to working with children.*  
*All topics were excellent, I learned a lot from each one*  
*I believe that I derived a certain benefit from each topic and recognized its importance,*  
*but something that left the greatest impression on me personally was the topic of*  
*identity development in children and adolescents. I would especially like to emphasize*  
*the group process from that education, which helped me significantly in my personal*  
*guidelines for the future.*  
*multidisciplinary concept*  
*Everything*  
*Development of sexual identity*  
*combustion prevention*  
*attachment, resilience, mentalization, gender and sexual identity*  
*resilience, attachment theory*  
*Resistance to trauma*  
*Family and crisis, resilience and mentalization*  
*Identity development of children and adolescents*  
*Everything is ok*  
*Working with children and families at risk*  
*Resilience*  
*Mental health*  
*resilience and mentalization, psychosexual development and gender identity*

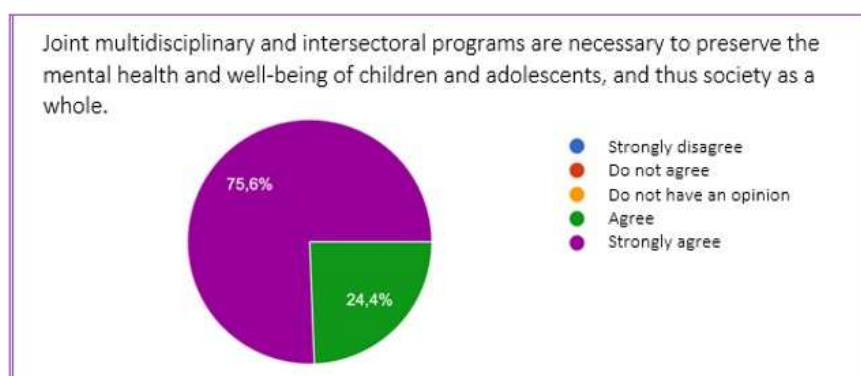
Table 12.

ANALYSIS OF THE OPINION OF THE INTERDISCIPLINARY NETWORK OF PROFESSIONALS ON THE IMPORTANCE OF PLANNING PREVENTIVE PROGRAMS AND ACTIVE COOPERATION BETWEEN INSTITUTIONS AND SYSTEMS IN ACHIEVING THE PRINCIPLES OF THE UN CONVENTION ON CHILD RIGHTS

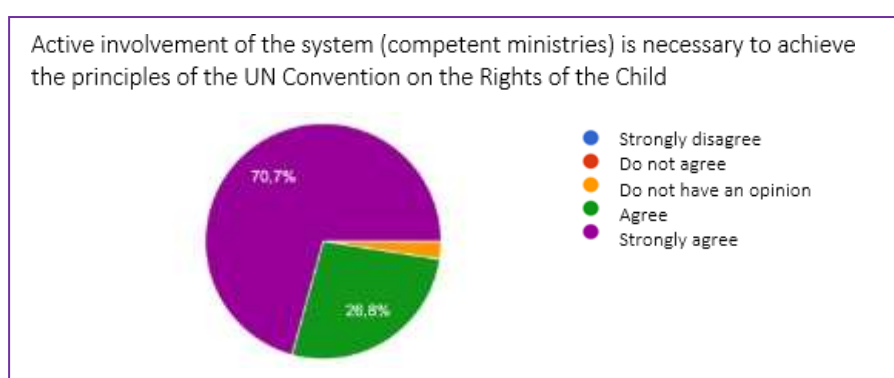
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Graph 36.

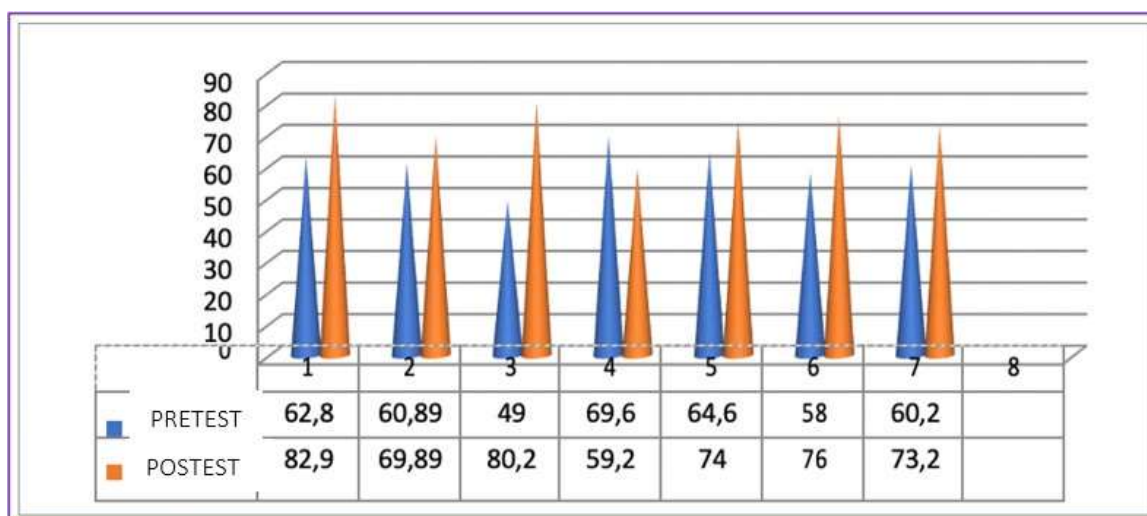


Graph 37.



Graph 38.

## ANALYSIS OF THE TOTAL RESULTS OF KNOWLEDGE TEST BY MODULE



Graph 39.

Graph 39 shows the percentages of correct answers for each module, which showed prior knowledge and post knowledge. It can be seen that the participants in most of the modules showed prior knowledge of education-training topics over 60%. The obtained percentages can be explained by the already adopted knowledge from the last cycle of education, the basic knowledge acquired at the faculties, but also the knowledge acquired during informal and informal education.

They showed the biggest differences in knowledge in modules 1, 3, 6 and 7, which leaves room for further work on these topics.

It can be concluded that the mean value of the **total new knowledge adopted is significant and amounts to 21.4%**, given that these are professionals who already have their basic knowledge and experience in work. The results indicate that there is a need for continuous updating and improvement of knowledge and skills, especially of professionals who are in contact with children and adolescents.

## DIRECT AND INDIRECT BENEFICIARIES OF THE FIRST PHASE OF THE PROJECT

### DIRECT BENEFICIARIES:

The first phase of the project, the second cycle of education-training "Interdisciplinary network of professionals Here&Now" was implemented in the period from **March 2021 to July 2022** and included **7 modules** that were held on Fridays from 9:00 a.m. to 4:00 p.m. in total duration of **56 hours**.

In the second cycle of education-training, **68** professionals from Centers for Mental Health, Centers for Social Work and Educational Institutions from 16 municipalities in the Federation of BiH, four from Republic Srpska and Brčko District participated, **54 professionals** actively participated in education-training, and successfully completed the same, while 14 participants, due to unplanned business obligations, missed most of the education, and thus did not acquire the conditions for obtaining a certificate.

### INDIRECT BENEFICIARIES:

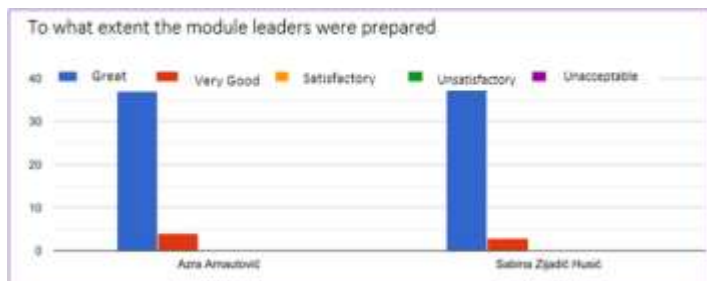
Indirect beneficiaries in the first phase of the Project in the period from March - 2022 to July 2022 are: children, parents and primary caregivers (**a total of 1278 beneficiaries, of which 884 are children and adolescents**). Data were provided by professionals involved in the Project (68% of participants provided data) for the above period and are shown in *Table 7*.

Project phase	Institutions	Number of beneficiaries/clients of children and adolescents		Number of adult users/clients	
		Girls 51%	Boys 49%	M-30%	F-70%
II cycle	Centres for social work	107		191	
	Centres for mental health	220		51	
	EI	557		252	
	Total	884		394	

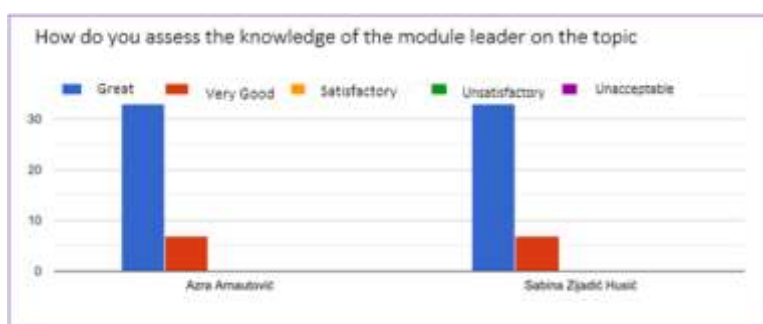
*Table 7.*

## EVALUATION OF LEADERS AND EXPERT LECTURERS OF THE MODULE:

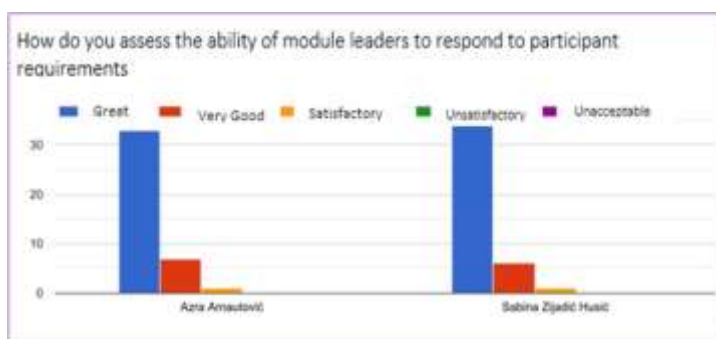
### EVALUATION OF THE MODULE LEADER



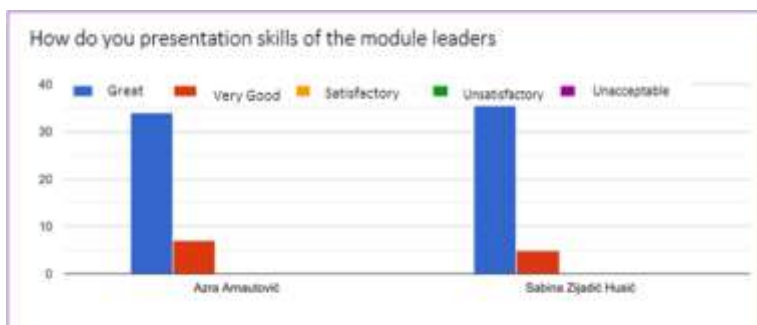
Graph 40.



Graph 41.



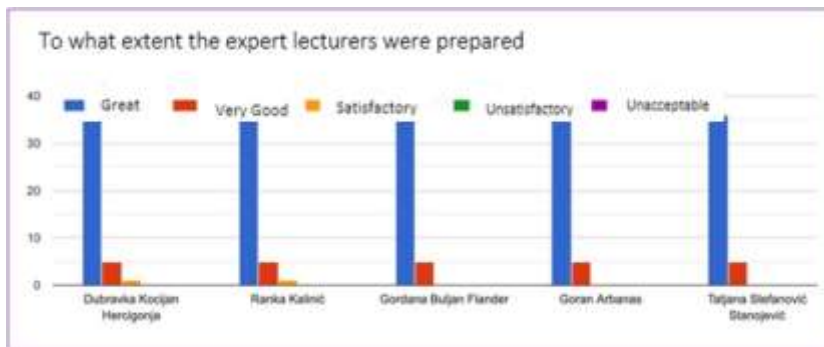
Graph 42.



Graph 43.



## EVALUATION OF MODULE EXPERT LECURERS



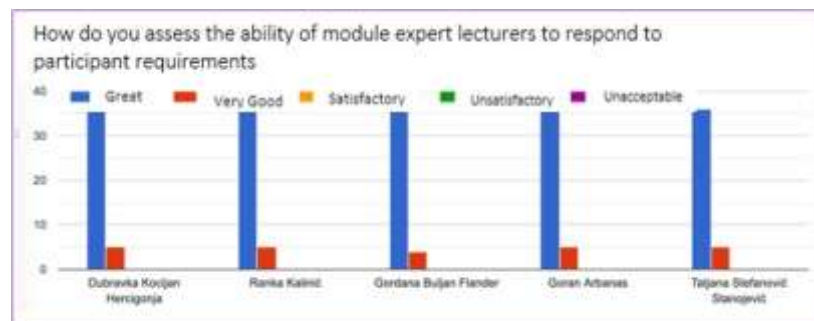
Graph 44.



Graph 45.



Graph 46.



Graph 47.

**14. Place to write whatever you want and we did not ask you before...24 responses**

The entire training is very high-quality, very well thought out, organized and implemented, well-combined exercises, theoretical part and work in groups, high-quality lecturers with great knowledge and experience. I really liked the method of pre-test and post-test, because we could check our knowledge before and after the module, i.e. the theoretical part... It was a pleasure to be part of this training!

It was a pleasure to be a part of your learning community. I learned a lot and became richer for another wonderful experience. Thank you.

A lecture could be held on the topic of how to help depressed children or children who have attempted suicide at school

Thank you for all your knowledge and experience that you have shared with us.

Thank you for your support and support in further work  
nothing special

A proposal for organizing live trainings, so that all participants could maximally participate, contribute and profit from such high-quality professional training

The seminar - education was excellently conceived and realized.. Thank you ....

Excellent lecturers, congratulations for their contribution. I think it would have been even better if we could have done this live, although this way is also well organized.

I hope to continue my education

Thank you to the organizer and partners who made such a practical and focused training possible with a good balance of education, practice of personal and professional empowerment.

That these types of educations continue

It was a pleasure to participate and thank you for the invitation!

I would like to thank you for the opportunity to be part of the education and thereby start my professional growth and development, considering that I am currently a trainee. The education was phenomenally organized, even though everything was online. I hope there will be a chance to meet again and I look forward to everything to come. Thank you!

I am very enriched ... we especially thank Azra and Sabina for the environment of existence, which helped me open my heart... And not only to learn something professionally, but also to strengthen myself personally. Thank you very much.

Everything was ok, I have no questions 😊

Congratulations, you are excellent

Thank you for every education

He would like to thank the Project Manager who creates programs in accordance with the needs of the field. Thank you to UNICEF for supporting such forms of education and training

Many thanks for the invitation and the opportunity to participate in such an important educational and experiential training. I couldn't believe that we would get close and connect in this way. I especially appreciate that I was able to feel the roles and

positions of other colleagues working in other institutions in small groups. I am not sure that I will be able to think further without cooperation with other colleagues....

Table 14.

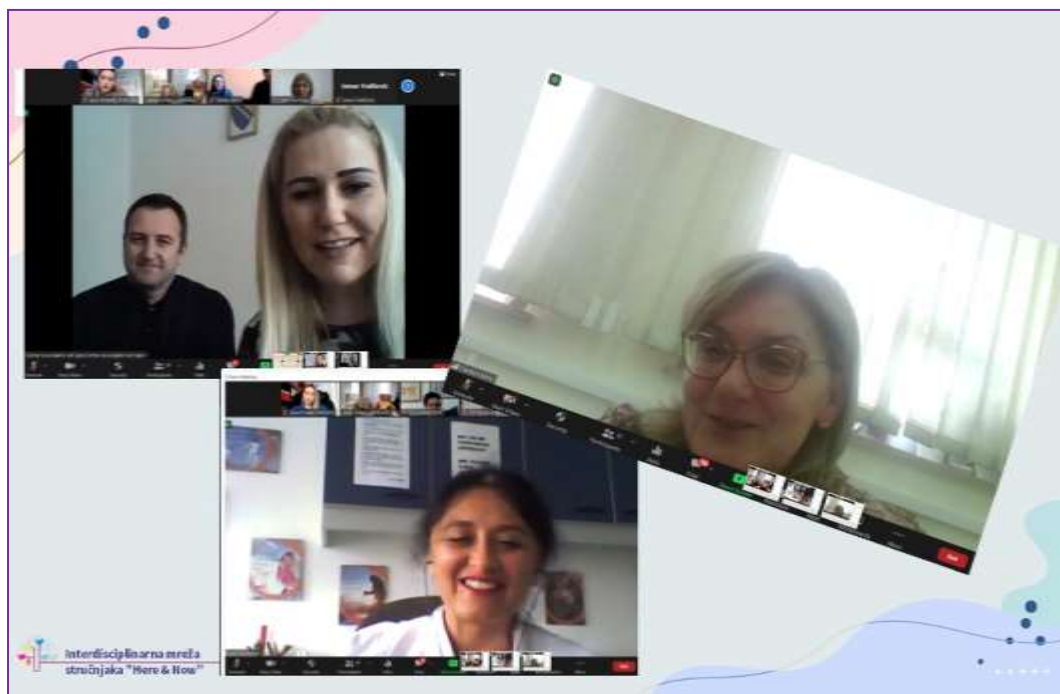


Table 8.



## QUANTITATIVE AND QUALITATIVE ANALYSIS OF THE 3RD EDUCATION - TRAINING CYCLE

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The third cycle of education-training "Interdisciplinary network of professionals Here&Now" was implemented in the period from **September 30, 2022 to November 18, 2022** and **included 7 modules** that were held once a week, on Fridays from 9:00 a.m. to 4:00 p.m. , for a total duration of **56 hours**.

**In the third cycle of education-training , 34 professionals** from Mental Health Centers, Centers for Social Work and Educational Institutions from the area of **27 municipalities from the Federation of Bosnia and Herzegovina and 7 from the Republic of Srpska and Brčko District** participated in the most difficult cycle of education and training. **27 professionals actively participated in the education-training** and successfully completed it, while 7 participants, due to unplanned business obligations, missed most of the education and did not obtain the conditions for obtaining the certificate.

The education-training was held by members and associates of the professional multidisciplinary therapeutic and educational BHIDAPA team, expert lecturers, which brings together: child and adolescent integrative psychotherapists; gestalt, cognitive-behavioral, systemic family and psychoanalytic psychotherapists; child and adolescent neuropsychiatrist and psychiatrist; pediatricians, clinical psychology specialists, psychologists, mentors and supervisors.

Working through the modules, group cohesion, despite the number of interested participants, developed and strengthened. Participants connected on a stronger professional, but also personal level. As in the first cycle of education-training and during the third cycle, individuals had **a need for connection, mutual support and intersectoral cooperation, which they considered very important** (Table 28). Especially supplementing and connecting in environments that did not have the appropriate staff for a specific case. **And in this cycle, we had the opportunity to learn from the participants that the name of the previous education-training Virtual Crisis Intervention "Here&Now" was extremely useful and that most of the participants were multipliers of the learned knowledge and skills in their collectives (experiences presented by the participants during the module). Most often, schools and centers for social work and care** were places where the participants of the education imparted knowledge and skills to their colleagues. There were also individual examples in

mental health centers.

In general, **the participants** emphasize the lack of suitable staff. Especially **the lack of psychologists and social pedagogues in schools, but also in centers for social work**. They believe that **the lack of the aforementioned personnel nowadays**, when the problems of children and adolescents are becoming more complicated, **affects the provision of services and the treatment of clients in the best way**.

#### MODULE DATES AND TOPICS OF THE THIRD CYCLE OF EDUCATION-TRAINING :

The third cycle of project activities aimed at the implementation of the module, included seven modules in the period 30.09.2022. - 18.11.2022. via the BHIDAPA Zoom Platform and planned topics were covered.

1. Promotion of mental health of children and adolescents in B&H – introduction to research during education– 30.09.2022.
2. The impact of different contexts on the growth and development of children and adolescents – 14.10.2022.
3. Family and crisis – 21.10.2022.
4. Psychological relations and the development of mental health problems in children and adolescents – 28.10.2022.
5. Multidisciplinary concept – Who are we? How well do we know each other? – 04.11.2022.
6. Development of children's and adolescent's identities – 11.11.2022.
7. Resilience and Mentalization– 18.11.2022.

*Tabela 15.*

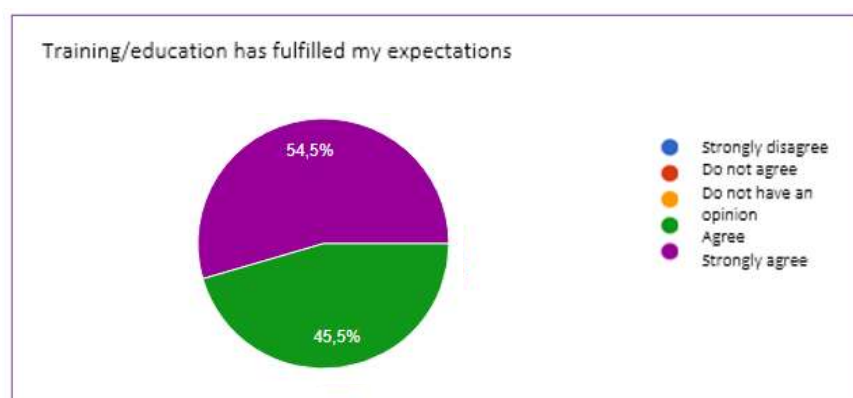
#### QUANTITATIVE EVALUATION OF EDUCATION-TRAINING

70% participants completed an anonymous questionnaire.

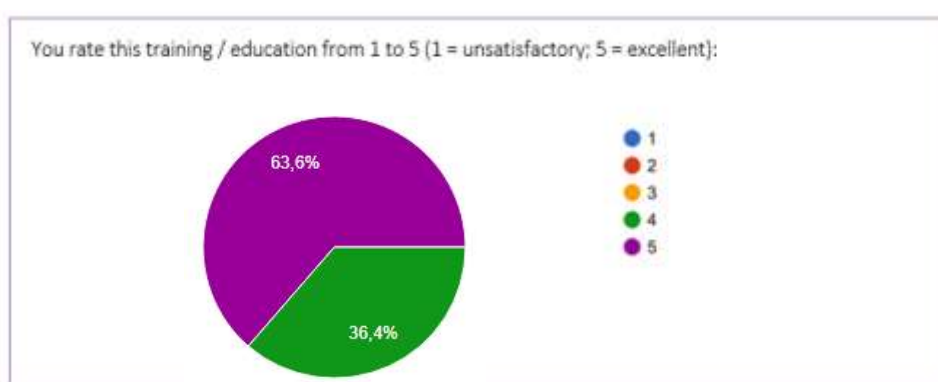
## ANALYSIS OF GENERAL ISSUES ON EDUCATION-TRAINING:



Graph 48.

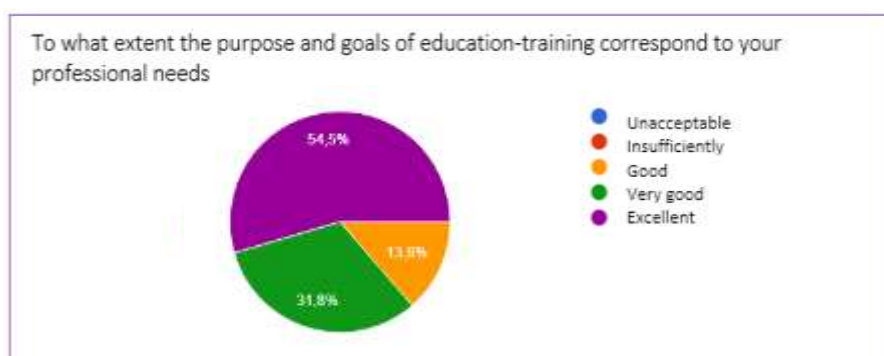


Graph 49.

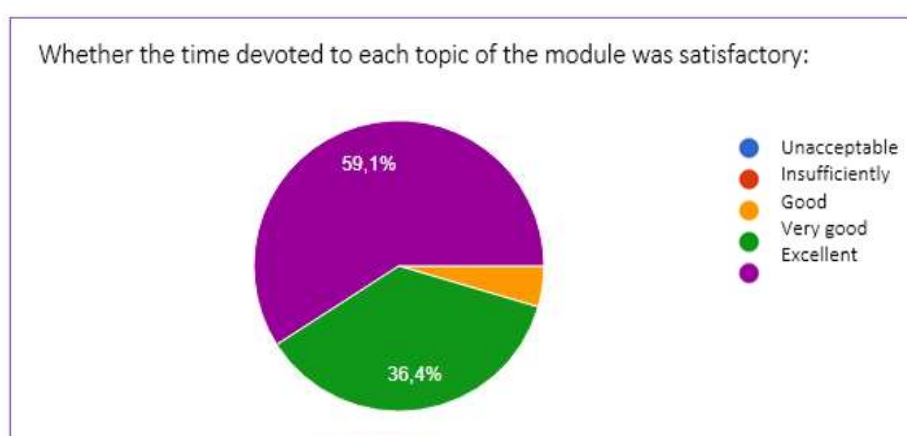


Graph 50.

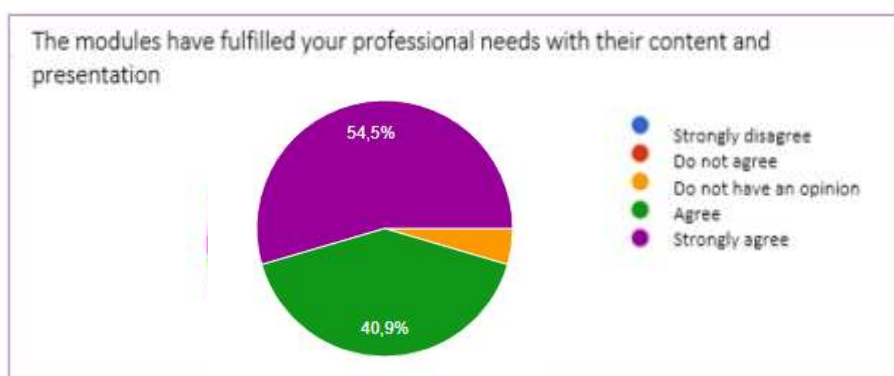
## CONTENT ANALYSIS OF EDUCATION-TRAINING:



Graph 51.

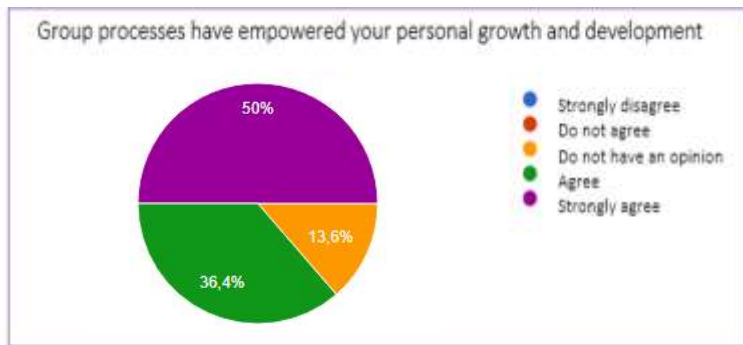


Graph 52.

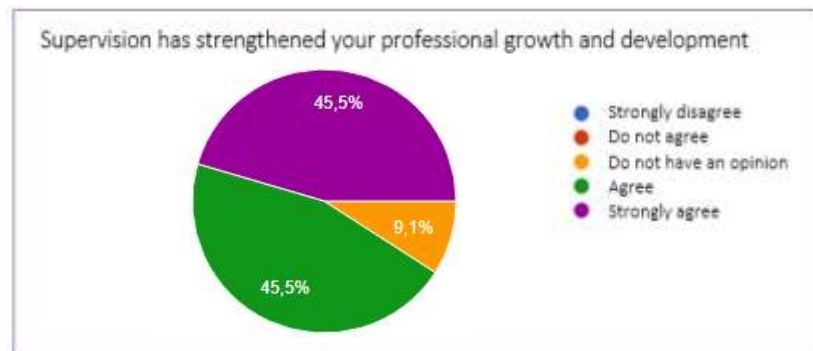


Graph 53.

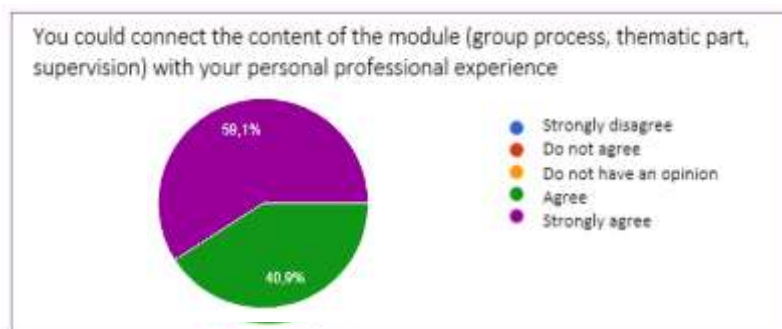




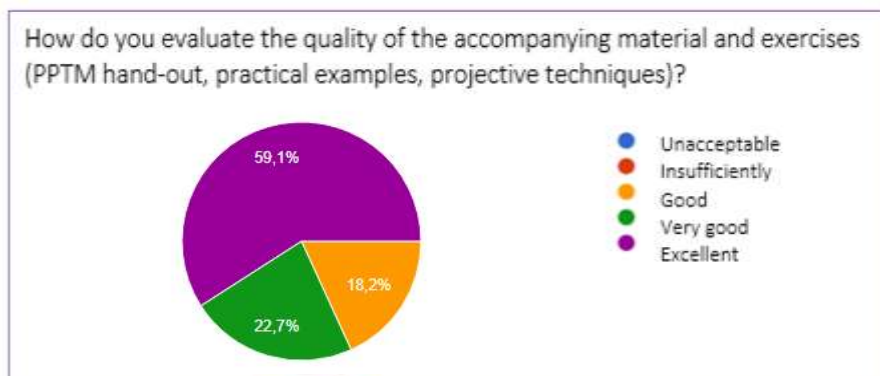
Graph 54.



Graph 55.



Graph 56.



Graph 57.



CONTENT ANALYSIS OF EDUCATION-TRAINING (open questions):

**8. Name a topic that you consider unimportant for education? 22 answers**

There is none  
None  
There is none  
There was no topic that was unimportant  
All topics were important  
All topics are equally important  
All themes are important and well chosen  
There is no irrelevant topic  
I could not single out any of the topics that were discussed as unimportant  
All the topics covered were important.  
All topics were useful to me.  
All the topics covered are significant  
I consider all of the offered topics important  
There is no such thing, but if I really have to name one, then let it be "Family and Crisis"  
All are equally important.  
All topics related to education were excellent.  
There were no unimportant ones  
Too much talk about homosexuality.  
There is none  
-

Table 16

**9. Please indicate a topic that you feel should be covered Education/training. 18 answers**

The influence of the Internet on children and adolescents  
I would like to listen a lecture on "Borderline personality disorder in young people"  
A child in a conflictual divorce of his parents  
Identity development of children and adolescents  
Resilience  
Defining procedures for dealing with crisis situations  
Prevention of mental health of children and adolescents  
Education and psychological support of children excluded from the family.  
The topic of anxiety in children  
Children and young people and smart use of social networks.  
Psychological reactions and development of mental health problems in children and adolescents  
Learning and socialization of students  
Working with children with developmental disabilities.  
More topics related to the recognition of psychopathology - child and adolescent psychiatry  
Violence on social networks  
Professional burning...how to save yourself  
They are covered  
-

*Table 17.*

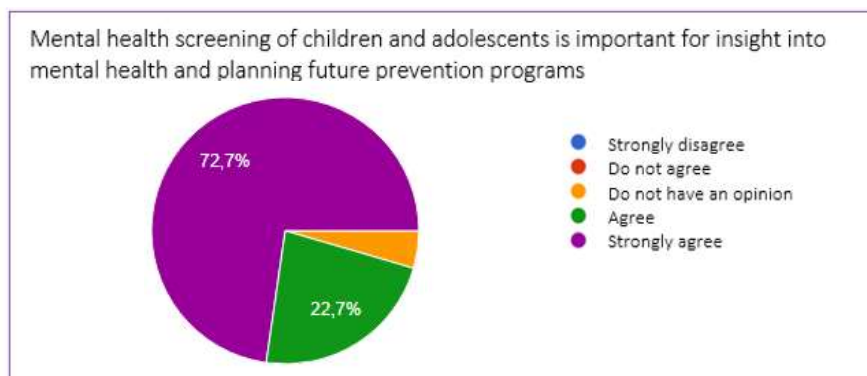
**10. Name the topic that is most important to you personally. 22 answers**

Resilience and mentalization  
Resilience and mentalization 😊  
Identity development  
Mental health and therapeutic technique ABFT  
All topics related to children's mental health  
Identity development of children and adolescents  
About attachment  
Prevention of occupational burnout and treatment of burnout  
The influence of different contexts on the growth and development of children and adolescents.  
The topic of boundaries in relationships  
Topics covered in the fifth module - attachment...  
The child and how to deal with early childhood trauma and ongoing trauma.  
Psychological reactions and development of mental health problems in children and adolescents  
Stress in students, puberty  
How to make teenagers aware of life's problems.  
Child and adolescent psychopathology  
Helping parents or empowering parents  
Mentalization  
Combustion  
They were all good  
Family and children's mental health

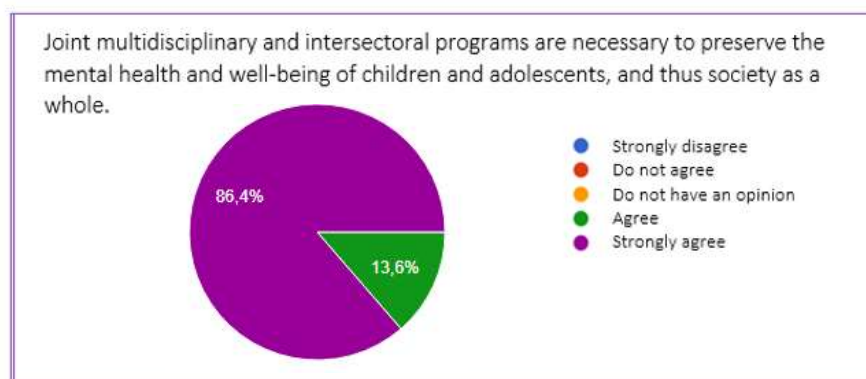
*Table 18.*

ANALYSIS OF THE OPINION OF THE INTERDISCIPLINARY NETWORK OF  
PROFESSIONALS ON THE IMPORTANCE OF PLANNING PREVENTIVE PROGRAMS  
AND ACTIVE COOPERATION BETWEEN INSTITUTIONS AND SYSTEMS IN ACHIEVING  
THE PRINCIPLES OF THE UN CONVENTION ON CHILD RIGHTS

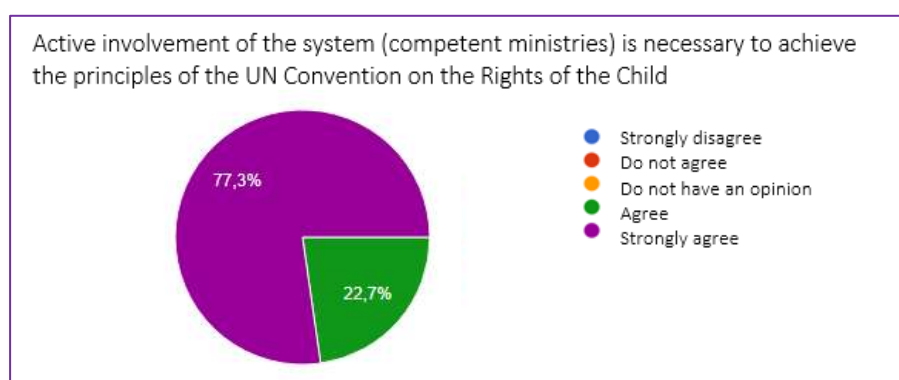
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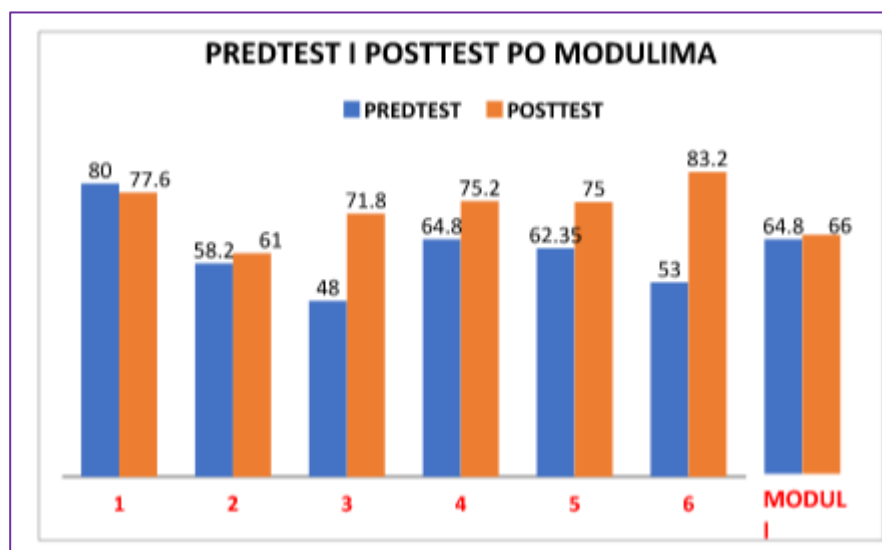
Graph 58.



Graph 59.



Graph 60.



Graph 61.

Graph 61 shows percentages of correct answers for each module, which showed prior knowledge and post knowledge. It can be seen that the participants in most of the modules showed prior knowledge about the topics of education-training over 86.23%. The obtained percentages can be explained by the already acquired knowledge from the last cycle of education, the basic knowledge acquired at the faculties, but also the knowledge acquired during informal and informal education.

They showed the biggest differences in knowledge in modules 3, 4, 5 and 6, which leaves room for further work on these topics.

It can be concluded that the mean value of the **total adopted new knowledge is significant and amounts to 15.73%**, given that these are professionals who already have their basic knowledge and work experience. The results indicate that there is a need for continuous updating and improvement of knowledge and skills, especially of professionals who are in contact with children and adolescents.

## DIRECT AND INDIRECT BENEFICIARIES OF THE FIRST PHASE OF THE PROJECT

### DIRECT BENEFICIARIES:

The first phase of the project, the third cycle of education-training "Interdisciplinary network of professionals Here&Now" was implemented in the period from September 2022 to November 2022 and included 7 modules that were held on Fridays from 9:00 a.m. to 4:00 p.m. in total duration of 56 hours.

In the third cycle of education-training, 34 professionals from Centers for Mental Health, Centers for Social Work and Educational Institutions from 27 municipalities in the Federation of BiH, 7 from Republika Srpska and Brčko District participated, 27 professionals actively participated in education-training, and successfully completed the same, while 7 participants, due to unplanned business obligations, missed most of the education, and thus did not acquire the conditions for obtaining a certificate.

### INDIRECT BENEFICIARIES:

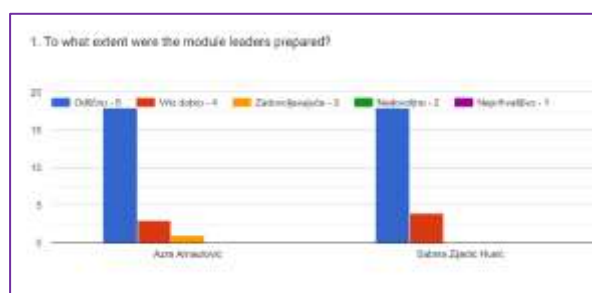
Indirect beneficiaries in the first phase of the Project in the period from September - 2022 to November 2022 are: children, parents and primary caregivers (a total of 911 beneficiaries, of which 547 are children and adolescents). Data were provided by professionals involved in the Project (68% of participants provided data) for the above period and are shown in Table 19.

Project phases	Institutions	Number of beneficiaries/clients of children and adolescents		Number of adult users/clients	
		Girls 51%	Boys 49%	M-35%	F-65%
II cycle					
	Centres for social work	153		198	
	Centres for mental health	196		86	
	EI	198		80	
	<b>Total</b>	<b>547</b>		<b>364</b>	

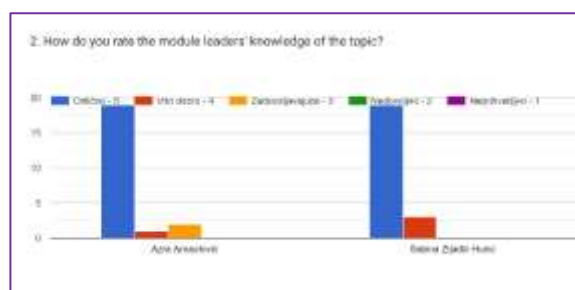
Table 19.

## EVALUATION OF MODULE LECTURERS AND PROFESSIONALS

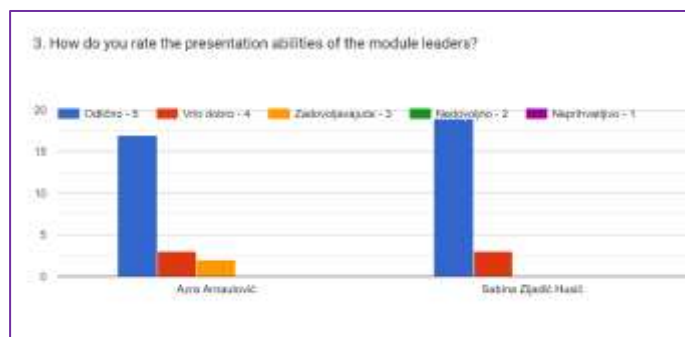
### EVALUATION OF MODULE LECTURERS



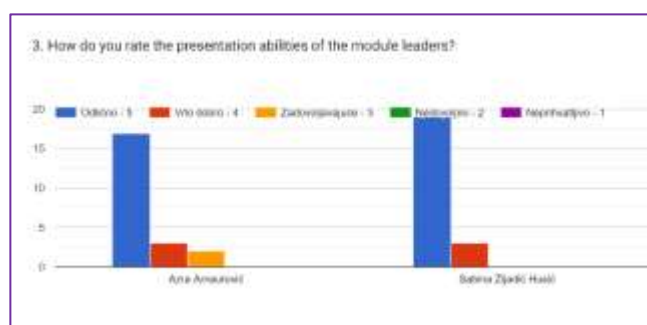
Graph 62.



Graph 63.

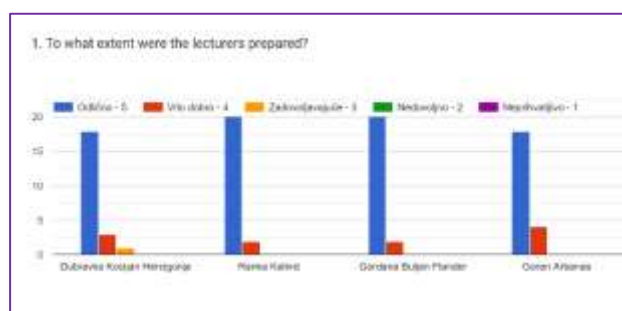


Graph 64.



Graph 65.

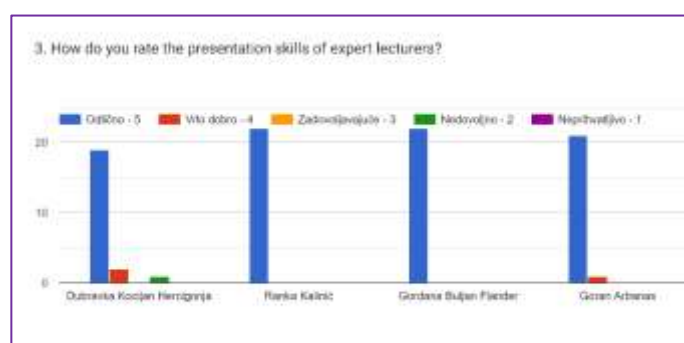
## EVALUATION OF MODULE EXPERT LECURERS



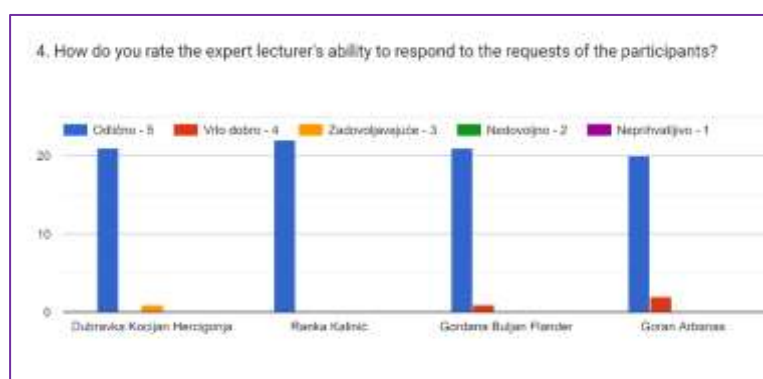
Graph 66.



Graph 67.



Graph 68.



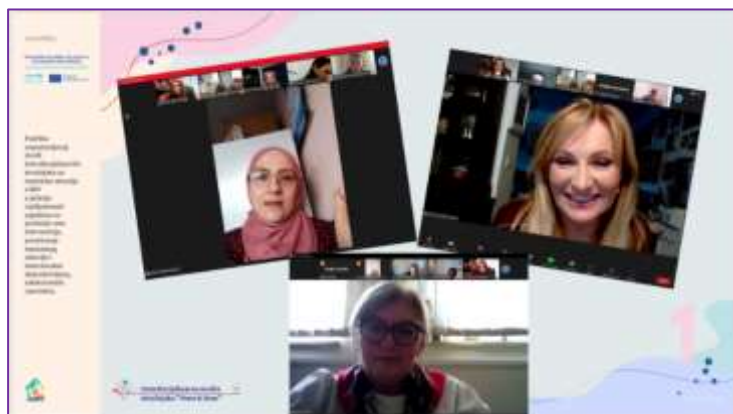
Graph 69.



14. Place to write whatever you want and we did not ask you before...24 responses

I asked everything I wanted  
Extremely useful education, carefully thought out and prepared in detail, the professionals for delivery very well chosen. More training like this is needed, especially where staff have not encountered these topics through their studies. Thank you  
Thank you!  
During the education we had the opportunity to say everything we wanted, I hope that in the future there will be opportunities to continue working on topics in the field of mental health of children and adolescents, and to strengthen our own capacities in this way.  
All praise for the choice of educators, topics and way of working.  
I want to emphasize how important these trainings are for us working professionals. Primarily because they allow us to connect from various places (online) because it would be impossible to coordinate travel with work obligations. But what I really appreciate is that you make it possible for us to listen to truly outstanding professionals for free. Thank you!  
Thank you for the education.  
All questions were answered.  
Empowerment to prevent burnout at work  
It would be good if the education was live.

Table 20.





## CONCLUSION OF THE FIRST CYCLE OF EDUCATION-TRAINING

The results of the completion of the "Here&Now" virtual crisis intervention project initiated the need to continue working with the professionals who were previously participants (*Graph 1 and Graph 2*). The continuation of education and training represents an opportunity for professionals to develop new skills and deepen their professional capacities, and **to strengthen the multidisciplinary and multisectoral connectivity**. The problems they face during the Covid 19 pandemic are increasingly complex and require constant upgrading of professionals and mutual and interdisciplinary cooperation.

The ultimate goal of the project is **to support the established interdisciplinary network of mental health professionals in Bosnia and Herzegovina, in strengthening the resilience capacity of the community in providing early interventions, promoting mental health and in general the health of children, adolescents and their families**, is a continuation of the joint activities of the project.

The "Here&Now" Interdisciplinary Network of Professionals project includes four phases of project activities (*Graph 3*):

1. Initial phase: Creation and implementation of three cycles of on-line education-training (per cycle planned 30 professionals, total 90 professionals), the project included **134 professionals** from CMZ; CSR and educational sector in Bosnia and Herzegovina, which **is 68% more participants involved in the project** than the number of participants planned by the project.

2. **Central phase: Screening of the mental health of children and adolescents** with the aim of further systematic planning and creation of preventive programs - the central phase of the Project (app. 800 surveys), the project included 637 children and adolescents aged 3-18 years
3. **Final phase: Creation and printing of the manual "A child's soul should be listened to"** Latin and Cyrillic version, online<sup>15</sup> and printed form of the publication (200 pieces).
4. **Exit phase: On-line Conference "A child's soul should be listened to"**

This final report includes the first phase of project activities, all three education-training cycles.

**The immediate** goal of the project: empowered **professionals** to work to reduce the negative impact of the current health crisis on the mental health and well-being of children and adolescents; from problem identification to a formal support process and indications for further multidisciplinary diagnostics and treatment. **Strengthening the created platform of professionals** and providing and strengthening multidisciplinary and intersectorial cooperation.

In order to achieve the project goals, the first cycle of training education for the aforementioned participants was created and implemented.

**The first phase of the project, the implementation of the education-training "Interdisciplinary network of professionals Here&Now",** was realized in the period from November 2021 to November 2022 and **included three 7-day modules each**, which were held usually once a week, on Fridays from 9: 00-16:00, for a total duration of 21 days, 56 hours per cycle of education-training.

In **education-training 134 professionals** from the following institutions participated in the education-training, and since the beginning of the program implementation (May, 2020) **a total of 309 professionals have participated in the project (Graph 1, 2 and 3)** from:

- Centers for mental health,
- Centers for social work i
- Educational institutions.

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<sup>15</sup> <https://bhidapa.ba/publikacije-2/>

**The project covers 27 municipalities from the Federation of Bosnia and Herzegovina and 11 from the Republic of Srpska and Brčko District.**

The education-training was led by members and associates of the professional multidisciplinary therapeutic and educational BHIDAPA team - leaders and expert lecturers, which includes: child and adolescent integrative psychotherapists; gestalt, cognitive-behavioral, systemic family and psychoanalytic psychotherapists; child and adolescent neuropsychiatrist and psychiatrist; pediatricians, clinical psychology specialists, psychologists, mentors and supervisors.

Each **module** had a certain **individual goal** that is closely related to the topic being addressed, all in the direction of improving the mental health of children and adolescents, but also the community as a whole, in BiH. They also worked on developing and strengthening a multidisciplinary and intersectoral network of professionals through the development and strengthening of group cohesion, as the most significant predictor of resilience capacity development, with a significant focus on self-care.

**The created dynamics of work aimed at integrating theoretical and practical knowledge and skills** in working with target groups, and was the link of each module - education-training as a whole. (*Table 2.*)

The space of supervision allowed the participants to resolve some of the professional and ethical dilemmas, exchanging professional experiences while supporting each other.

The module methodologically included constructive interaction between the participants and the lecturer. The work took place in large and small groups, with the use of online technology (zoom platform) in direct work. Exercise in small groups enabled work on a personal level related to the topic. (*Table 3.*)

**The anonymous evaluation of the education-training**, which was **completed by 77%** of the participants, of the first cycle of education-training, **included:**

- 1. Quantitative analysis of general questions about education and training**
- 2. Quantitative and qualitative analysis of the content of education-training**

3. Quantitative analysis of participants' opinions on the importance of planning preventive programs and active cooperation between institutions and the system in achieving the principles of the UN Convention on the Rights of the Child
4. Quantitative analysis of acquired knowledge
5. Quantitative analysis of indirect users
6. Quantitative evaluation of module leaders and expert lecturers by modules
7. Impressions from education – training

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## 1. QUANTITATIVE ANALYSIS OF GENERAL EDUCATION-TRAINING ISSUES

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Based on the analysis of first part of evaluation, the following **can be concluded**:

- **58,1% of participants strongly agree**, and 37% of them agree, that they have **supplemented the knowledge and skills** to the already acquired knowledge and skills from the previous cycle and that they are **useful in their work now and in the future** (*Graph 4., Graph 26., Graph 48. )*
- **53,5% of participants strongly agree** (44,9% agree and 4.4% disagree) that the **education-training met their expectations** (*Graph 5., Graph 27., Graph 49.)*
- **71,8% of participants rated the highest grade, excellent 5, education-training**, and 27,3% of them rated, very good 4. Three participants evaluated the education-training with a rating of good 3 and one participant with a rating of sufficient 2. (*Graph 6., Graph 28., Graph 50.)*

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## 2. QUANTITATIVE AND QUALITATIVE ANALYSIS OF EDUCATION – TRAINING CONTENT

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Based on the analysis of second part of evaluation, the following **can be concluded**:

- **55,9% of participants rated the highest grade** (excellent), and 30,8% of them as very good, 11,7% rate sufficient, and 1,6% rated it with insufficient that the **purpose and**

goals of education-training meet their professional needs (*Graph 7., Graph 29., Graph 51.*);

- 51,8% of participants gave the highest grade of excellent, 35,5% very good and a grade of good of 11.1%, and one participant rated with sufficient that there was a **satisfactory** time devoted to a particular topic of the module (*Graph 8., Graph 30., Graph 52.*);
- 54,1% of participants fully agree, 39,4 % of them agree and 6,5% of them neither agree nor disagree, while one participant does not agree that the **modules with their content and presentation met their professional needs** (*Graph 9., Graph 31., Graph 53.*);
- 54,5% of participants fully agree, and 33,8% of them agree, while 11,7% neither agree nor disagree, two participants do not agree that that **group processes have strengthened their personal growth and development** (*Graph 10., Graph 32., Graph 54.*);
- 45% of participants fully agree, and 43,5% of them agree that the **time of supervision has strengthened their professional growth and development**. 11,5% of participants were neutral on this issue, while two participants do not agree on this matter (*Graph 11., Graph 33., Graph 55.*);
- 54,3% of participants fully agree and 41% of them agree that the **contents of the module (group processes, thematic part, exercises, supervision) can be linked to personal and professional experience**, 4,7% are neutral on this issue (*Graph 12, Graph 34., Graph 56.*);
- 62,6 % participants with the highest grade excellent, evaluates the quality of supporting materials and exercises (PPT; hand-out, projective techniques) (*Graph 13*). All materials are available in the E-library<sup>16</sup> „Here&Now“
- In the qualitative part of the evaluation, the participants agree that the **topics covered by the plan and program were important for them**. (*Table 4, Table 10., Table 16.*);
- Participants list many topics that they are interested in and that they need for further professional development. However, it can be said that the majority of participants believe that the **topic of professional burnout should be specifically covered by education-training** (*Table 5. 11. 17.*);

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<sup>16</sup> <https://bhidapa.ba/ovdje-i-sada/biblioteka/>;

- From *Table 6., Table 12., Table 18.* it can be concluded that all topics covered by the **modules were important for the participants**. Topics stand out: mental health, mentalization, resilience, trauma, psycho-sexual development and gender identity and group process as a significant part of the module for support in personal guidelines for future work.

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### 3. QUANTITATIVE ANALYSIS OF PARTICIPANTS „OPINIONS ON THE IMPORTANCE OF PREVENTION PROGRAM PLANNING AND ACTIVE COOPERATION BETWEEN INSTITUTIONS AND SYSTEMS IN ACHIEVING THE PRINCIPLES OF THE UN CONVENTION ON THE RIGHTS OF THE CHILD

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Based on the quantitative analysis of the third part of the questionnaire, it can be concluded that:

- **67.7% of participants fully agree**, and 27.7% of them agree, that it is important to check and have insight into the mental health of children and adolescents as a basis for planning future preventive programs (Graph 14, Graph., Graph 58.) ;. Screening of the mental health of children and adolescents, as the second phase of the project activities (Graph 3), provided a basic picture of the mental health of children and adolescents and an insight into the attachment style and capacity for resilience in their current age of life (pp. 71-79).
- **83.5% of participants fully agree**, and 16.1% of them agree, that multidisciplinary and intersectorial cooperation is necessary to preserve the mental health of children and adolescents, and thus society as a whole (Graph 15, Graph 37, Chart 59. );
- **76.9% of participants completely agree**, and 23.1% of them agree, that it is necessary to actively involve the system (competent ministries) in order to achieve the principles of the UN Convention on the Rights of the Child (Graph 16, Graph 38, Graph 60 );.
- During the module, participants express dissatisfaction with the position of the institutions they come from, in society. They emphasize the lack of suitable staff. Especially the lack of psychologists and social pedagogues in schools, but also in centers for social work. They believe that the lack of the aforementioned staff nowadays, when the problems of children and adolescents are becoming more complicated, affects the provision of services and the treatment of clients in the best way, which can be connected with their needs for additional training in understanding specific topics related to children and adolescent difficulties, and education-training aimed at prevention of burnout. (Table 5., Table 11., Table 17.)



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#### 4. QUANTITATIVE ANALYSIS OF ACQUIRED KNOWLEDGE

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From *Graph 17., Graph 39., Graph 61.* it can be concluded that a **significant percentage of the total acquired new knowledge is 20,1%**, considering that they are professionals who already have their basic knowledge and experience in work. They showed the biggest differences in knowledge in modules 3, 5, 6, and 7, which leaves room for further work on these topics. **The results indicate that it is necessary to continuously refresh and improve knowledge and skills, especially professionals who are in contact with children and adolescents.**

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#### 5. QUANTITATIVE ANALYSIS OF THE INDIRECT BENEFICIARIES

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Indirect beneficiaries in the first phase of the Project in the period November-2021 February 2022 are children, parents and primary caregivers (**a total of 3178 beneficiaries**, of which **1860 are children and adolescents**) Available data collected by professionals involved in the Project (61.5% submitted data ) for the above period is shown in Table 7, Table 13, Table 19.

**The total number of beneficiaries** since the beginning of the implementation of the program (May, 2020) is **5,507 beneficiaries**, of which **3,002 are children**.

It can be concluded that the total number of users was 3178, of which 56.2% were children and adolescents (slightly more girls 51% than boys 49%) and 43.8% were adults (parents and guardians), and significantly less men 44 .3% compared to women 57.6%.

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#### 6. QUANTITATIVE EVALUATION OF MODULE LEADERS AND LECTURER PROFESSIONALS BY MODULES

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Based on Graphs: 18, 19, 20, 21, 22, 23, 24, 25,40, 41, 42, 43, 44, 45, 46, 47, 62,63,64,65,66,67 and 68, it can be concluded that the largest number of participants **gave the highest grade 5: preparedness, demonstrated knowledge, presentation skills and method of imparting knowledge, as well as the ability to respond to the requests of participants, module leaders and expert lecturers.**

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## 7. IMPRESSIONS

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From Table 8., Table 14., and Table 20. it can be concluded that the first part of the training was very useful for the participants. **Here are some insights from users:**

*„The entire training is very high quality, very well designed, organised and implemented, well combined exercises, theoretical part and work in groups, quality lecturers with great knowledge and experience. I really liked the method of pre-test and post-test, because we were able to check our knowledge before and after the module, , i.e. the theoretical part... It was a pleasure to be a part of this training!“; „It was a pleasure to be a part of your learning community. I learned a lot and became richer for another wonderful experience. Thank you.“; „ A lecture could be held for school personnel on the topic of how to help depressed children or children who have attempted suicide “; „ Thank you for all your knowledge and experience that you have shared with us“; „ A proposal for organising live training, so that all participants could participate fully, contribute and profit from such high-quality professional training“; „ Seminar- education was well thought out and realised. Thank you .... “; Excellent lecturers, congratulations for their contribution. I think it would have been better if we could have done this live, although this way is also well organised“; „ I hope to the continuation of the education“; „ Thank you to the organiser and partners who make such a practical and targeted training possible with a good balance of education, practice of personal and professional empowerment.“; „ That these types of education continue“; „ I would like to thank you for the opportunity to be part of the education and thereby start my professional growth and development, considering that I am currently a trainee. The education was phenomenally organised, even though everything was online. I hope there will be a chance to meet again and I look forward to everything that is to come. Thank you!“; „ Thank you to UNICEF for supporting such forms of education and training“; „ Go ahead team! 😊 “; "Thank you very much for the invitation and the opportunity to participate in such an important educational and experiential training. I couldn't believe that we would get close and connect in this way. I especially appreciate that I was able to feel the roles and positions of other colleagues working in other institutions in small groups. I am not sure that I will be able to think further without cooperation with other colleagues. The entire training is very high quality, very well designed, organized and implemented, well combined exercises, theoretical part and work in groups, quality lecturers with great knowledge and experience. I really liked*

*the method of pre-test and post-test, because we were able to check our knowledge before and after the module, i.e. the theoretical part... It was a pleasure to be part of this training! It was a pleasure to be a part of your learning community. I learned a lot and became richer for another wonderful experience. Thank you.*

*A lecture could be held on the topic of how to help depressed children or children who attempted suicide at school. Thank you for all your knowledge and experience that you shared with us. Thank you for the support and support in further work, Proposal for organizing live training, so that all participants could maximally participate, contribute and profit from such high-quality professional training*

*The seminar - education was excellently conceived and implemented, excellent lecturers, congratulations for their contribution. I think it would have been even better if we could have done this live, although this way is also well organized; I hope to continue my education; Thank you to the organizer and partners who made such a practical and focused training possible with a good balance of education, practice of personal and professional empowerment; That these types of education continue; It was a pleasure to participate and thank you for the invitation!; I would like to thank you for the opportunity to be part of the education and thereby start my professional growth and development, considering that I am currently a trainee. The education was phenomenally organized, even though everything was online. I hope there will be a chance to meet again and I look forward to everything to come. Thank you!; I am very enriched ... we especially thank Azra and Sabina for the environment of existence, which helped me open my heart... And not only to learn something professionally, but also to strengthen myself personally. Many thanks. Congratulations, you are excellent; He would like to thank the Project Manager who creates programs in accordance with the needs of the field. Thanks to UNICEF for supporting such forms of education-training; Go ahead! 🙏; Many thanks for the invitation and the opportunity to participate in such an important educational and experiential training. I couldn't believe that we would get close and connect in this way. I especially appreciate that I was able to feel the roles and positions of other colleagues working in other institutions in small groups. I am not sure that I will be able to think further without cooperation with other colleagues.; I think it would not be bad to offer more tools for work, materials and guidelines in therapy; I asked*

*everything I wanted; Extremely useful education, carefully and thoroughly thought out and prepared, professionals for delivery very well chosen. We need more educations like this, especially where staff have not encountered these topics through their studies; Thank you! During the duration of the education, we had the opportunity to say everything we wanted, I hope that in the future there will be opportunities to continue working on topics from the mental health of children and adolescents, and to strengthen our own capacities in this way; All praise for the choice of educators, topics and way of working; I want to emphasize how important these trainings are for us working professionals. Primarily because they allow us to connect from various places (online) because it would be impossible to coordinate travel with work obligations. But what I really appreciate is that you make it possible for us to listen to truly outstanding professionals for free. Thank you; All questions were answered; It would be good if the education was live..."*

The results indicate that it is necessary to continuously refresh and improve knowledge and skills, capacity and sensitivity for appreciation, active listening, readiness for teamwork, readiness for personal and professional development through education and supervision, especially professionals who are in contact with children and adolescents.

## MIDDLE PHASE OF THE PROJECT: MENTAL HEALTH SCREENING OF CHILDREN AND ADOLESCENTS - RESEARCH REPORT

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The aim of this research was to attempt, on a theoretical and above all practical level, to preserve, improve and strengthen the health of children and young people in their transition from childhood to the world of adults.

### RESEARCH GOALS

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The main goal of this research was to examine whether health in relation to quality of life can be explained by the quality of attachment and capacity for resilience. Also, the goal of this research is to try to contribute to the understanding of the determinants of health and the activation of solutions in relation to the obtained research results, through the proposal of creating preventive programs.

### RESEARCH PROBLEMS

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- 1) Examine children's attachment styles (secure attachment style; insecure-avoidant attachment style, insecure-anxious/preoccupied attachment style, insecure-disoriented/disorganized attachment style) and differences in relation to sociodemographic characteristics (age; gender; structure of displacement-displacement/ unsettled; structural characteristics of the family-complete/incomplete-extended-with one or more children in the family)
- 2) Examine the quality of attachment (secure-insecure) and aspects of attachment (communication, trust and alienation) in relation to parents and peers with certain attachment styles, sociodemographic characteristics, number of friends, physical activities (plays sports - does not play sports).
- 3) Examine the overall resilience of the dimensions of resilience (individual resilience, relational resilience and contextual resilience), and differences in relation to sociodemographic characteristics, number of friends, hobbies, physical activity, and in relation to attachment styles and quality.

- 4) Examine health in relation to quality of life and dimensions of health and their differences in relation to socio-demographic characteristics, number of friends, hobbies, physical activity and resilience

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## RESEARCH METHODOLOGY

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The research was conducted on an adequate sample of children and young adolescents, who were selected by random sampling. Out of a total of 120 participants in the project from all over Bosnia and Herzegovina, the research was conducted in 20 primary and secondary schools, 3 kindergartens, 5 mental health centers and 20 social work centers.

The sample included 637 children and adolescents aged 3 to 18 years..

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## MEASURING INSTRUMENTS

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For the purposes of quantitative research, an online version of the questionnaire entitled: "Attachment and resilience as a function of children's health in early adolescence" was constructed, consisting of five parts covering:

- 1) General characteristics of the participants
- 2) Family attachment assessment scale
- 3) Scale for assessing the quality of attachment
- 4) Resilience assessment scale
- 5) Health assessment scale

The entire questionnaire was created in online form (google form) for easier distribution and application, but also taking into account that this way of applying the questionnaire is more acceptable for children and young people.

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## PROCEDURE

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Quantitative research was conducted in 53 institutions that work directly with children and young people and that participated in the project "Support to the established interdisciplinary network of mental health professionals in BiH, in strengthening the resilience of the community in providing early interventions, promoting mental health and children's health in general, adolescents and their families" "The research was carried out with the prior consent of all competent ministries within which these institutions are located (ministries of education, health, labor and social policy).

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## RESULTS OF THE PROJECT

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### GENERAL PART - SOCIO-DEMOGRAPHIC DATA

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- of the total sample, boys make up 37.9% (n=242), and girls 62.1% (n=395), so we can conclude that the sample is somewhat uniform by gender.
- the average age of the total sample is 12.3 years (sd=1.44). the youngest participant was 7 years old, and the oldest was 17 years old.
- participants in most cases live in a complete family with a brother/sister, 38.4% of them, 15.5% in a complete family as an only child, and 14.3% in an extended family.
- also, it can be seen that 13.% of them live in an incomplete - single-parent family, most often due to the divorce of their parents, 9.2% of them.
- It can be observed that 55.1% of children and younger adolescents have four or more friends, 29.9% of them have two or three friends and 8.0% of the participants have one, and a significant percentage of children (compared to the sample) 6.9% of them do not have any friends..

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### ANALYSIS OF ATTACHMENT STYLES IN CHILDREN AND YOUNG ADOLESCENTS

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- At the level of the entire sample, the most represented secure attachment style is present in 54.6% of participants, followed by insecure-anxious attachment style in 24.4%, insecure-avoidant attachment style in 12.7% of participants, and 8.3% participant exhibits an insecure-disorganized attachment style.

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## ANALYSIS OF RESILIENCE IN CHILDREN AND YOUNG ADOLESCENTS

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To understand resilience in children and young adolescents, it is necessary to look at the total capacity of resilience, as well as the dimensions of resilience (individual, relational and contextual factors that facilitate the feeling of belonging to a wider context).

- A statistically significantly higher score on the scale of **total resilience capacity** is observed for children who achieve excellent success in school, who prefer active hobbies and children who have brothers or sisters. The result is expected and is in line with many researches, related to the importance of peers and actions on resilience in children.
- Children who have more friends achieve a significantly higher score on the total resilience capacity scale than children who have one or no friends. A statistically significant higher score on the total resilience scale is achieved by children who have not moved, children who live in a complete family, as well as children who actively engage in physical activity
- It can also be observed that statistically significantly higher scores on the scale of **individual resilience** are achieved by children who did not move, and by children who achieve excellent success in school. We can conclude that a greater capacity of individual resilience is achieved by children who have more than four friends, children who prefer active hobbies and actively play sports, compared to participants who have no or one friend, who choose passive hobbies and do not play sports. Furthermore, visible is a significant connection of the **variable of individual resilience in relation to the quality of attachment to peers and parents**.
- We can say that children and younger adolescents with a secure quality of attachment to parents and peers have a more developed capacity for individual resilience, where communication with friends has the highest correlation.
- It was found that children who prefer active hobbies and participants who live in a complete family achieve a statistically significantly higher score on the scale



of **individual and relational resilience**, compared to participants who prefer passive sports and live in a single-parent family

- It can also be observed that a higher score on the subscale of **contextual resilience** is achieved by participants who did not change their living environment. Furthermore, a higher score on the contextual resilience subscale is achieved by children who live in a complete family and by children who prefer active hobbies.

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#### ANALYSIS OF HEALTH IN RELATION TO THE QUALITY OF LIFE OF CHILDREN AND YOUNGER ADOLESCENT

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- The obtained results indicate that boys rate their physical health as better, feel that they are in good shape and are full of energy, compared to girls. A significant difference in the dimension of physical health is observed between girls and younger adolescent girls. In girls, physical health declines sharply with the beginning of the 11th year. years, while this dimension in boys is more stable compared to age with a tendency of gradual decline. The results are consistent with developmental theories.
- The main effects of gender were found, and in relation to them we can conclude that boys rate their psychological health as better, are more satisfied with their lives and are in a better mood compared to girls. In the total sample, a moment of decline in psychological health is visible in relation to age. A significant difference in relation to age and gender is observed in the period of 14 and 15 years. Younger adolescents, they estimate (better psychological health compared to younger adolescent girls.

We can say that they stood out as the most significant predictors for the criterion variable of health

- boys
- children and younger adolescents who did not change their living environment, i.e. place of residence for the last five years,
- secure attachment style that is achieved through the quality of attachment to parents through aspects:

- trust in the mother (feeling of security and confidence that the mother will respond to the needs of the child-adolescent) i
- quality of attachment with peers through aspects of communication with friends (trust and feeling of support)
- developed capacities of individual resilience (quality relationship with others and oneself, emotional and social competence, feeling supported and supported by peers in a stressful period, and work skills and ability to care for others).
- developed capacity for relational resilience (quality relationship with parents) i
- developed capacities, contextual resilience (feeling of connection with the human community, and connection with others, feeling of belonging to the school, quality relationship with teachers, etc..

## CONCLUSIONS

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At the level of the entire sample, the most represented **secure attachment style** is present in **54.6%** of participants, followed by an **insecure-avoidant attachment style** in **12.7%**, an **insecure-anxious attachment style** in **24.4%** of participants, and an **insecure-disorganized style** in **8.3%** of participants. attachment.

Compared to the previous research in BIH (Dr. Badurina, 2016), a **decrease in the secure attachment style by 14.2%** and an **increase in the insecure-anxious attachment style by about 14.8%** and an **increase in the avoidant attachment style by about 2.8%** can be observed.

Taking into account the data of recent research, especially during the COVID pandemic, where there is a decline in the secure attachment style due to the pandemic, these results are expected.

The Covid 19 pandemic has affected mutual relationships in the family, we know about the increased number of domestic violence, but also difficulties of an economic and social nature. **All these are factors that, especially in children and young people, could lead to increased anxiety and insecurity, and therefore to the growth of an insecure-anxious attachment style, especially in pre-adolescent children (11-13 years).**

- It was determined that children and younger adolescents achieve a higher score on the scale of total capacity for resilience, which exerts its influence on health through individual and contextual resilience, as well as children who have not changed their place of residence, and children who live in a complete family.
- Also, the results show that children and younger adolescents who have more friends achieve a significantly higher score on the scale of the total resilience capacity. Girls show a higher degree of individual resilience compared to boys.
- A significant connection of the variable of individual resilience is visible, especially in relation to the quality of attachment to peers.
- Children and younger adolescents with a secure quality of attachment to parents and peers have a more developed capacity for contextual resilience, where communication with the mother and trust in friends have the highest correlation.
- Girls have significantly more developed personal/personal skills and perceive better quality relationships with others and with themselves, and perceive their emotional and social competence as greater, compared to boys.
- Younger adolescent girls perceive greater dissatisfaction in meeting emotional needs from their parents compared to younger adolescents.
- It was confirmed that there is a significant positive association of the relational resilience variable, especially in relation to the quality of communication with the mother.
- It has been confirmed that children and younger adolescents who have not changed their place of residence, who live with a brother or sister, in a complete family, achieve excellent success, and children and younger adolescents who prefer active hobbies and actively play sports achieve a higher score on the overall health scale. .
- Boys rate their physical health as better, feel that they are in good shape and are full of energy, compared to girls. A significant difference in the dimension of physical health is observed between girls and younger adolescent girls.

- Girls rate their physical health better than younger adolescent girls. Younger adolescent boys rate their psychological health as better than younger adolescent girls.

All of the above indicates that younger adolescents are more vulnerable to the development of psychopathology than children, and education and sensitization of parents and teaching staff, as well as professionals in the mental health of children and adolescents to timely recognition and response, is key to preventive actions.

The results of this research can be useful guidelines for further research on these phenomena. Since this research identified the determinants that predict the process of establishing healthy contact and the way in which contact develops and leads to health, as well as some of the factors that can be significant for them, and bearing in mind that resilience is learned and developed, opportunities for the development of preventive programs that would enable children and young people to develop their resilience. The development of these programs would represent the practical value of this research.

## FINAL PHASE OF THE PROJECT: CREATION OF THE MANUAL "A CHILD'S SOUL SHOULD BE LISTENED TO"

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The result of this project is a publication and it was created with the desire to be an additional support in further efforts to preserve the mental health of children and young people. The manual represents the integration of theoretical thematic units, practical experiences, interventions and guidelines that we gathered during the implementation of the projects. It is intended for professionals who did not have the opportunity to participate in the Project (who in their daily work meet children, young people and their families), then parents and all those who are interested in the mental health and well-being of children.

The manual, entitled "The child's soul should be listened to" (BHIDAPA's slogan), consists of nine author's texts. At the very beginning, you can read the biographies of the (co)authors, as well as the creation process of the projects implemented in partnership with UNICEF BiH. This is followed by nine thematic units that integrate theory, examples from practice and practical guidelines. The examples presented in the manual are based on real experiences of people. Personal information has been changed to protect its privacy. Parts of the chapters published here were also taught orally through the previously mentioned modules. At the very end of the manual, we have prepared a short glossary of terms.

The manual has a total of 10 (co)authors who are long-term professional collaborators, professors, mentors and supervisors of BHIDAPA. University professors, child and adolescent neuropsychiatrists, child and adolescent psychiatrists, doctors of health sciences, child and adolescent integrative psychotherapists, psychoanalytic and system-oriented psychotherapists, gestalt psychotherapists, sexual psychotherapists, psychiatrists, clinical psychologists, pediatricians, psychologists and supervisors participated in writing the manual. . All authors have many years of practice in the field of child and adolescent psychiatry, developmental psychology and psychotherapy.

The publication is the result of what we have learned from our small clients, their parents and associates. For this reason, the greatest gratitude goes to our children and their parents, from whom we learned, with whom we grew personally and professionally, and who are our greatest motivation. Special thanks to the (co)authors, who gladly responded and who enriched the modules and the Manual with their knowledge and skills, the expert team of BHIDAPA, the

photographer and the adolescent girl who gave us the photo for the cover page of the Manual, the editor-in-chief, the designer and all our colleagues of the "Here&Now" Interdisciplinary Network of Professionals.

A big thank you to our partner UNICEF BiH, with the support of the EU, for the trust and cooperation shown, without which the implementation of project activities and the publication of the Manual "A child's soul should be listened to" would not have been possible.

Thank you to the competent ministries that supported the implementation of the Project with their consent: the Federal Ministry of Health, the Ministry of Health and Social Protection of the Republic of Srpska, the Federal Ministry of Labor and Social Policy, the Federal Ministry of Education and Science and the Government of the Brčko District of BiH - Department of Education.

The manual is available online in Latin<sup>17</sup> and Cyrillic<sup>18</sup>.



<sup>17</sup> [https://bhidapa.ba/wp-content/uploads/2022/11/prirucnik\\_bhidapa\\_latinica\\_FINAL\\_WEB.pdf](https://bhidapa.ba/wp-content/uploads/2022/11/prirucnik_bhidapa_latinica_FINAL_WEB.pdf)

<sup>18</sup> [https://bhidapa.ba/wp-content/uploads/2022/11/prirucnik\\_bhidapa\\_cirilica\\_FINAL\\_WEB.pdf](https://bhidapa.ba/wp-content/uploads/2022/11/prirucnik_bhidapa_cirilica_FINAL_WEB.pdf)

## EXIT PHASE OF THE PROJECT: ONLINE CONFERENCE "A CHILD'S SOUL SHOULD BE LISTENED TO"

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The online conference "The child's soul should be listened to" was organized within the project INTERDISCIPLINARY NETWORK OF PROFESSIONALS "HERE&NOW" in cooperation with UNICEF, with the support of the EU and the relevant ministries. The conference was organized on Monday, November 28. 2022 online, via the zoom platform, starting at 10:00 a.m.

This conference is the final event within the one-year project INTERDISCIPLINARY NETWORK OF PROFESSIONALS "HERE&NOW". The conference was attended by more than 150 participants.

With it, we wanted to mark the importance of the program that brought together professionals from the health, social protection, upbringing and education sectors from Bosnia and Herzegovina, and which actually represents the continuation of our joint activities in strengthening multidisciplinary and multisectoral connections and cooperation, as a foundation for the protection and preservation of children's mental health and young people.



The project was aimed to strengthen the resilience of communities and strengthen the interdisciplinary network of professionals through specific activities aimed at providing early

interventions, promoting mental health and emotional well-being of children, adolescents and their families. In addition to thematic units, special emphasis was placed on group processes, experiential exercises and supervision. In this project, **134 professionals from the health, social, educational and educational sectors from the Federation of Bosnia and Herzegovina, Republic Srpska and Brčko District participated.** Indirect beneficiaries of the project, in relation to the data provided by **65% of the professionals** involved in the Project are: children, parents and primary caregivers, a total of **3178 beneficiaries, of which 1860 are children and adolescents.** Whole program (Virtual Crisis Intervention and Interdisciplinary Network of Professionals) gathered more than 300 professionals from Bosnia and Herzegovina, which is 82% more participants involved in the project than the number of participants planned by the project. Indirect beneficiaries of the program were children, adolescents and primary caregivers. According to the data obtained from 61% of the participants in the program, over 5 500 beneficiaries received indirect support, including over 3000 children.

A significant part of the project activities was aimed at **researching the determinants of children's mental health.** The sample included 637 children and adolescents aged 3 to 18 years, the results of the research were presented on Conference. The final phase of the project was **promotion of manual entitled "THE CHILDREN'S SOUL SHOULD BE LISTENED TO",** which consists of nine (co)authored texts and was created with the desire to be an additional support in further efforts to preserve the mental health of children and young people. It is also intended for professionals who did not have the opportunity to participate in the Project (who in their daily work meet with children, young people and their families), as well as parents and all those who are interested in the mental health and well-being of children.

The conference was consisted out of four panels, insight and presentation of examples of good practice, from all three sectors, **three plenary lectures,** results of research, project dynamics and conclusions.

The conference also includes **three plenary lectures** by the Project's expert lecturers: Prof. Ph.D. sc. Mirjana Graovac, Prof. Ph.D. sc. Gordana Buljan Flander and Prof. Ph.D. sc. Tatjana Stefanović Stanojević.



Opening ceremony of the conference was held by: Mirela Badurina, director of BHIDAP and guests of honor: chairperson of UNICEF in BiH dr. Rowank Khan, Assistant Minister for Public Health of the Federal Ministry of Health prim. Dr. Goran Čerkez, Assistant Minister of Health and Social Protection of the Republic of Srpska, Dr. Milan Latinović and M.Sc. sc. Mara Matkić, representative of the Preschool and School Education Department of the Brčko District of Bosnia and Herzegovina. The moderator of the conference is Jelena Subašić, Belma Šteta supporter, translator of the conference was Hadžira Bucu and technical support of the conference.



**BHIDAP** **Interdisciplinarna mreža** stručnjaka "Ovdje & Sada"

**We proudly invite you to attend the on-line Conference**

**„A child's soul needs to be listened to“**

**Which will be held on Monday, 28.11.2022. starting at 10:00 am**

**AGENDA**

10:00 - 10:15	Opening of the conference
10:15 - 10:30	Where we started from and where we are now? Project: „Interdisciplinary network of professionals Here&Now“
10:30 - 10:45	Dynamics and experiences from modules
10:45 - 11:30	Examples of good practice
11:30 - 11:45	<b>BREAK</b>
11:45 - 12:00	Research results
12:00 - 12:35	Plenary lecture: How to listen and understand a child's soul? <i>Prof. Mirjana Graovac, MD-PhD, child and adolescent psychiatrist and psychotherapist</i>
12:35 - 13:00	Plenary lecture: Children and young people in the on-line world. <i>Prof. Gordana Buljan Flander, PhD, clinical psychologist, child and adolescent psychotherapist</i>
13:00 - 13:30	Plenary lecture: Resilience. <i>Prof. Tatjana Stefanović Stanojević, PhD, clinical psychologist</i>
13:30 - 13:40	Promotion of the handbook „A child's soul needs to be listened to“
13:40 - 13:50	Handbook for the Interdisciplinary network of professionals.
13:50 - 14:00	Project conclusions Closing of the conference

**MITIGATING THE IMPACT OF COVID-19  
ON CHILDREN AND FAMILIES  
IN THE WESTERN BALKANS AND TURKEY**

**unicef** **Funded by the European Union**

*A HEALTHY CHILD IS THE BASIS OF A HEALTHY SOCIETY!*

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[Besplatna online registracija](#)

## CONCLUSIONS FROM THE CONFERENCE

Conclusions of the project that were given to the participants are:

1. Comparison of attachment styles (decrease in secure attachment and increase all of the insecure attachment styles) showed in the Graph:

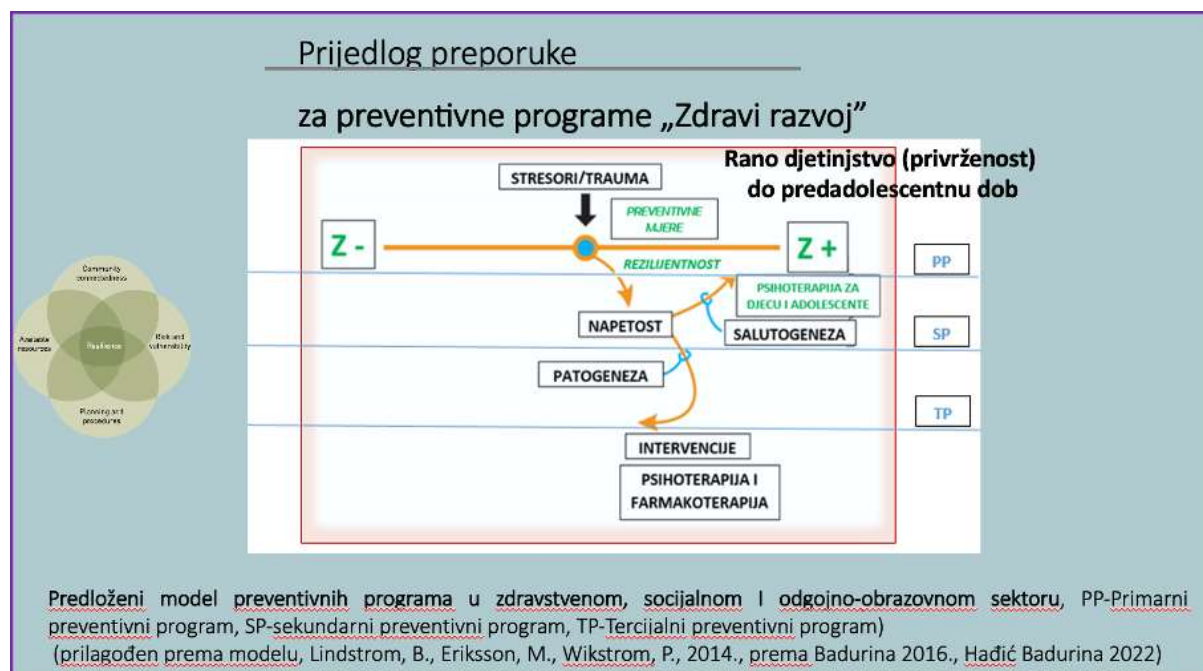


2. New situations-crises lead to new challenges (Crisis as a challenge for growth and development)
3. The principles of interpersonal relationships are important, and it is necessary to work on developing activities through listening to oneself and one's needs with the aim of improving the quality of one's own life, improving relationships and cooperation with others, through which the quality of relationships with children and young people is achieved.
4. The approach to children and young people has its own specificities related to age, earlier ways of functioning and relationships, which is why a specific approach for each age group and each form of reaction is necessary, which requires additional education
5. It is necessary to modify approaches to children and young people who have various forms of neurodevelopmental deviations or serious psychological problems, as well as children from vulnerable groups who need more support
6. It is necessary to increase awareness and actively act in strengthening multidisciplinary and intersectoral cooperation;
7. The pandemic and the changed way of functioning of families and society resulted in an increase in (self)destructive forms of behavior, and it is necessary to develop models

of good practice and prompt response in the protection of children in accordance with the Convention on the Rights of Children;

8. Strategies for working with children today and in the future, based on research, are necessary;

The conference ended with the conclusions of the project and recommendations for the development of preventive programs.



Children, as the future of every society, should have a safe and healthy environment. We adults are responsible for that. That is why our common message from the conference is to stay united for the sake of our children!

**The team that participated in the implementation of the project:**

In front of UNICEF BiH: Sandra Kukić, representative of the child protection department in UNICEF BiH

Trainers: prim. MrS. dr. Azra Arnautović, pediatrician, psychotherapist, supervisor

B.Sc. psychologist Sabina Zijadić Husić, psychotherapist and supervisor

Expert professors: Prof. Dubravka Kocijan Hercigonja, MD, PhD, child neuropsychiatrist, psychotherapist, supervisor;

Prof. Gordana Buljan Flander, PhD clinical psychologist, psychotherapist, supervisor

Prim. Ranka Kalinić, MD, specialist in child psychiatry and psychotherapist

Prof. Goran Arbanas, MD, PhD, psychiatrist, psychotherapist, supervisor;

Prof. Tatjana Stefanović Stanojević, PhD, clinical psychologist

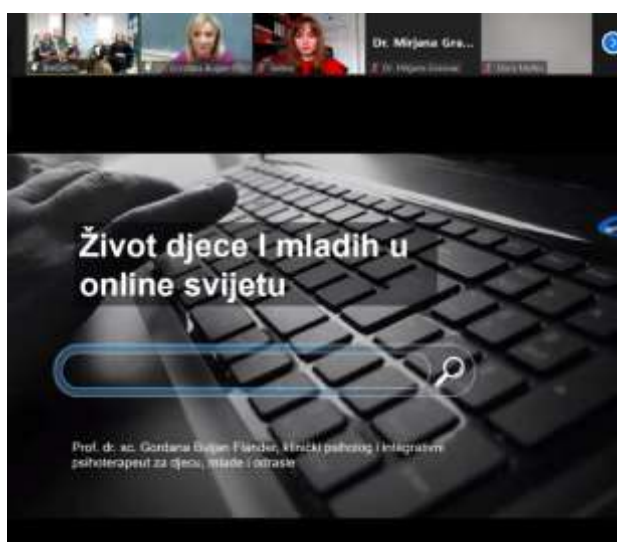
Researcher: Mirela Hadžić, psychologist, cognitive-behavioral psychotherapist

Project coordinator: Adi Grebović, B.Sc. etc

Project assistant: Ajna Prndelj, B.Sc. of Economics and Selma Karasoftić, student of the Electrical Engineering Faculty of the University of Sarajevo

Project manager: Mirela Badurina, PhD, psychotherapist and supervisor





THANK YOU FOR YOUR SUPPORT AND COOPERATION!

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A big thank you to our partner UNICEF BiH, with the support of the EU, for the trust and cooperation shown, without which the implementation of project activities and the publication of the Manual "A child's soul should be listened to" would not have been possible.

Thank you to the relevant ministries that supported the implementation of the Project with their consent: the Federal Ministry of Health, the Ministry of Health and Social Protection of the Republic of Srpska, the Federal Ministry of Labor and Social Policy, the Federal Ministry of Education and Science and the Government of Brčko District BiH - Department of Education.

Many thanks to our dear expert lecturers, colleagues for their trust, support and active participation.



