



Thematic Dossier

Post-Pandemic Adolescence: Evaluation of Training for Protection Network Professionals

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Abstract: The study evaluated the effectiveness of a training program for professionals in the protection network, focusing on adolescence and the promotion of resilience processes, aiming to increase familiarity with the addressed topics and indirectly contribute to workers' engagement and mental health. A sample of 366 professionals underwent a six-week intervention, and pre- and post-test analyses (repeated measures t-test and JT method) showed significant increases in familiarity and engagement but no changes in mental health scores. Challenges such as job precariousness, lack of resources, and cultural pressure on caregiving roles may have limited the results. The study highlights the need for continued training programs to promote deeper changes, while contributing to the understanding of the challenges faced by professionals in complex contexts, particularly in the post-pandemic period, and emphasizing the importance of individual and organizational factors in training programs.

Keywords: continuing education, mental health, work engagement, professional training

Adolescências no Pós-Pandemia: Avaliação de Formação para Profissionais da Rede de Proteção

Resumo: O estudo avaliou a efetividade de uma formação para profissionais da rede de proteção, focada em adolescências e promoção de processos de resiliência, visando aumentar a familiaridade com os temas abordados e contribuir indiretamente para o engajamento e saúde mental dos trabalhadores. A amostra de 366 profissionais passou por uma intervenção de seis semanas, e as análises de pré e pós-teste (teste t de medidas repetidas e o método JT) mostraram aumento significativo na familiaridade e no engajamento, mas sem alterações nos escores de saúde mental. Desafios como precarização do trabalho, falta de recursos e pressão cultural sobre ocupações de cuidado podem ter limitado os resultados. O estudo enfatiza a necessidade de programas de formação continuada para promover mudanças mais profundas, além de contribuir para a compreensão dos desafios enfrentados pelos profissionais em contextos complexos, especialmente no pós-pandemia, destacando a importância de fatores individuais e organizacionais nos programas de formação.

Palavras-chave: educação continuada, saúde mental, engajamento no trabalho, capacitação profissional

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Adolescencia Post-Pandemia: Evaluación de La Formación para Profesionales de La Red de Protección

Resumen: El estudio evaluó la eficacia de un programa de formación para profesionales de la red de protección, enfocado en adolescencia y promoción de procesos de resiliencia, con el propósito de aumentar la familiaridad con los temas abordados y contribuir indirectamente al compromiso y la salud mental de los trabajadores. Una muestra de 366 profesionales participó en una intervención de seis semanas, y los análisis de pre y post-test mostraron un aumento significativo en la familiaridad y el compromiso, pero sin cambios en los puntajes de salud mental. Desafíos como la precariedad laboral, la falta de recursos y la presión cultural sobre los roles de cuidado pudieron haber limitado los resultados. El estudio destaca la necesidad de programas de formación continua para generar cambios profundos y contribuir a la comprensión de los desafíos enfrentados por los profesionales en contextos complejos, especialmente post-pandemia, subrayando la importancia de considerar factores individuales y organizacionales en los programas de formación.

Palabras clave: educación continua, salud mental, compromiso laboral, capacitación profesional

Children and adolescents are citizens in a unique stage of development, whose needs and rights are a priority, as guaranteed by the Constitution of the Federal Republic of Brazil and by the Statute of the Child and Adolescent (*Estatuto da Criança e do Adolescente* - ECA) (Law No. 8,069, 1990). Over the years, the ECA has ensured substantial changes in public policy, particularly concerning protection from different forms of violence, seeking not only to offer immediate assistance but also to build an environment that promotes recovery and full development. The COVID-19 pandemic, declared by the World Health Organization in March 2020, imposed a series of restrictions that impacted the lives of millions of children and adolescents around the world (World Health Organization [WHO], 2020). Among these measures, school closures had profound and far-reaching effects, especially in contexts of social vulnerability. The closure of educational institutions has resulted in a significant disruption of the academic and social support that schools provide, exacerbating situations of violence and neglect that many children already face at home (Colao et al., 2020).

Research by Navarro et al. (2024) indicates that the lack of access to school during the pandemic increased the risk of violence, with many young people becoming even more exposed to hostile family environments and food insecurity. Moreover, extended school closures intensified educational inequalities and mental health problems. Low-income youth experienced more pronounced learning losses, while girls and older adolescents reported high levels of stress, insomnia, and isolation (Cosma et al., 2023).

The protection of vulnerable adolescents is guaranteed by a network of services that must operate in a coordinated and integrated manner. This integration is essential for each service to perform its specific role in promoting the health and safety of this population. An integrated approach allows interventions to be more effective and comprehensive, addressing the complex needs of adolescents (Corrêa & Von Hohendorff, 2020). Collaboration between different institutions strengthens the protection network, allowing for a broader view of the situations faced by young people (Trindade & Hohendorff, 2020).

In this context of integration, resilience emerges as an important factor to be fostered in the interventions.

Promoting resilience processes is important for both adolescents and for the professionals who serve them (Lima et al., 2021). Resilience, understood as interactive and relational processes that strengthen individuals and families in the face of adversity or vulnerability, can be fostered through psychosocial approaches that develop practices that help people cope positively with challenges, achieve their life goals, and develop their academic potential (García-Parra et al., 2021). Interventions focused on resilience processes mitigate the risks of mental health problems (Clauss et al., 2023), making them essential in practices aimed at adolescents in situations of social vulnerability.

Research indicates that the relationship between patients and professionals is particularly important for fostering resilience processes, although this aspect also presents challenges. Among these challenges are the workers' emotional exhaustion (Silveira et al., 2021), the stigma and blame placed on families (Taño & Matsukura, 2020), and the scarcity of child and adolescent policies and specialized services (Escobar et al., 2024). In this sense, it is essential to consider not only the needs of adolescents but also the working conditions and training of professionals in the network, whose actions are decisive for resilience interventions to achieve sustainable results. Formal service providers who receive training to establish safe, stable, and encouraging professional relationships can contribute significantly to strengthening resilience processes in children and adolescents over time (Ungar, 2018).

Therefore, considering that resilience is a psychosocial process that depends not only on individuals but also on the quality of institutions and the preparation of professionals, it is important to discuss the role of engagement at work. Engagement is a construct closely related to well-being and occupational health; engaged professionals are characterized by high levels of vitality, dedication, and concentration (Schaufeli, 2018). A person who is engaged in their work generally experiences positive emotions such as enthusiasm, vitality, and optimism. These emotional states promote creativity and improve the ability to solve problems efficiently, creating the perception that tasks are being experienced as more fluid and less stressful (Schaufeli et al., 2013).

The relationship between engagement and mental health is particularly important. In Brazil, mental disorders have become the third leading cause of disability benefits. These conditions often result in long-term leave, decreased productivity, and increased absenteeism. High demands and pressures, such as strict targets and excessive expectations, have had serious negative impacts on workers' mental health, contributing to the development of conditions such as burnout and panic syndrome (Ferraz, 2022).

In this context, professional training emerges as a key strategy. In general, these trainings address specific issues in the workplace, seeking to offer theoretical and practical support to deal with everyday demands. However, more than just the technical aspect, such training also strengthens the emotional bond between professionals and their work as well as the institution that promotes the development, satisfaction, performance, and commitment to the professional's duties (Damásio et al., 2014).

In this study, the term training action is used to refer to a specific training initiative, organized into thematic modules, which seeks to provide theoretical and practical updates to professionals in the protection network. Although it is not continuing education in the strict sense, understood as a systematic and permanent educational process, the action shares the same objectives of updating knowledge, developing skills, and strengthening professional engagement (Chamon, 2007).

Given the above, the study evaluated the effectiveness of training for professionals in the protection network, focusing on adolescence and promoting resilience processes, aiming to increase familiarity with the addressed topics and indirectly contribute to workers' engagement and mental health. The study advances the fields of psychology and social sciences by deepening understanding of the impact of training on professionals in challenging contexts, emphasizing the need for ongoing support, and providing elements for the development of public policies that strengthen safety nets and value their members.

Method

This is a quasi-experimental study that evaluated the training program entitled "*Adolescence and resilience promotion for education, social assistance, and health professionals in the post-pandemic period*". The design included a pre-test (T1) and post-test (T2, conducted immediately after the end of the program) and was characterized as exploratory and longitudinal.

Participants

A total of 366 professionals from the protection network participated in the survey, of whom 211 (57.7%) were from social assistance, 93 (25.4%) from health, and 62 (16.9%) from education, with a mean age of 39.90 years ($SD = 9.99$), mostly women ($n = 324$; 88.5%), civil servants ($n = 170$, 46.4%), married ($n = 146$; 39.9%), white ($n = 180$; 49.2%), and living in rural areas ($n = 152$; 41.5%). To participate in the study, the inclusion criteria were: being a professional in one of the protection network areas (social assistance,

health, or education), working during and after the pandemic in Brazil, and being available to respond to the pre- and post-tests, in addition to completing 75% of the training program. The following exclusion criteria were used: professionals who did not work with adolescents. In this study, participants were selected for convenience, based on the dissemination of the training initiative on social media. Professionals from the protection network who met the eligibility criteria and agreed to participate voluntarily were included.

Instruments

Sociodemographic and occupational questionnaire: consisting of 20 questions, such as age, gender, years of education, and years of work experience.

Scale of familiarity with the topic: developed by the authors, consists of six items that assess participants' familiarity with training topics such as adolescence, grief, and resilience. The instrument is answered on a 10-point scale (1 = not at all familiar with the topic, 10 = very familiar with the topic). Examples of items: "*Adolescence and vulnerabilities in the pandemic*" and "*Grief and loss among adolescents in the pandemic*". As this instrument was developed specifically for this study, there is no prior evidence of its validity. However, in the present sample, the internal consistency index was satisfactory ($\alpha = 0.88$).

Utrecht Work Engagement Scale: Original by Schaufeli et al. (2006) and adapted by Vazquez et al. (2015). It consists of 12 items answered using a 7-point Likert scale (1 = never, 7 = always). Example items: "*I feel energized at work*" and "*I feel strong and vigorous at work*". In the validation study, the internal consistency index was $\alpha = .95$, while in the present sample it was $\alpha = .68$.

Mental Health Index: developed by Damásio et al. (2014), it consists of five items, including: "*How long have you been feeling very nervous?*" and "*How long have you been feeling so depressed that nothing can cheer you up?*". The scale assesses symptoms of depression and anxiety, with higher scores indicating better mental health. In the present study, internal consistency was $\alpha = .62$, while the original validation study reported $\alpha = .86$.

Procedures

Data collection. The training course entitled "*Adolescence and promoting resilience for education and social work professionals in the post-pandemic period*" was advertised on social media, and all interested parties received a registration form with the instruments to be completed online via Google Forms. With 2,830 registrations, 985 professionals participated in the course, and of these, 386 completed the pre-test (before the training) and post-test (immediately after the training), in addition to completing 75% of the course load. After excluding participants who did not work with adolescents, the final research sample was obtained.

The training took place between September and October 2023, with a total of 30 hours divided into six modules, five of which were synchronous and one asynchronous.

The synchronous modules were held every Wednesday, from 2:00 p.m. to 4:00 p.m., addressing topics such as: “*Adolescence and social vulnerability*”, “*Grief processes and reframing the experiences of loss among adolescents during the pandemic*”, “*Mental health and the role of adolescents in post-pandemic social assistance, education, and health*”, “*Promoting resilience in adolescents in the post-pandemic period*”, and “*Professionals in the protection network and their role as resilience tutors*”, as shown in Table 1. The methodological approach adopted in the synchronous modules combined interactive lectures with space for sharing experiences and critical reflection, encouraging exchange between lecturers and participants. An additional module with guided readings and reflective activities was offered asynchronously.

The content of the asynchronous module was taught by nine professionals, eight of whom were professors and researchers with doctoral degrees working in higher education institutions in psychology, both at the undergraduate and graduate levels. Only one instructor had ties to a non-governmental organization dedicated to working with street children and adolescents. All instructors had extensive expertise in the addressed topics,

coming from different Brazilian institutions, which ensured the technical and scientific quality of the training program. The link for the meetings was made available in advance, every Wednesday, in a WhatsApp community created to facilitate communication between the organizing committee and participants. Attendance was recorded using Google Forms, accessible in the class chat and made available 30 minutes before the end of each session. For certification, participants needed to be registered, attend 75% of the synchronous classes, take the pre- and post-tests, and complete the asynchronous activity. Moreover, the synchronous classes were recorded and released at the end of the post-test, allowing later access to the content.

Data Analysis. Data were analyzed using SPSS (Statistical Package for Social Sciences) software, version 23. Initially, the normality of the data distribution was assessed using the Kolmogorov-Smirnov and Shapiro-Wilk tests. The assumption of variance homogeneity was verified using Levene’s test. Next, descriptive statistics (mean, frequency, and percentage) were calculated to characterize the sociodemographic variables of the sample. To examine the differences between the pre- and post-tests, a t-test for repeated measures was applied to investigate the

Table 1
Content and objective of each training module

Module	Content	Objective
Adolescence and social vulnerability	Definition of social vulnerability and its implications for adolescents Aspects of adolescence in situations of social vulnerability	To understand adolescence in contexts of social vulnerability To identify the specific needs of this audience and the available resources
Grief processes and reframing the experiences of loss among adolescents during the pandemic	How the pandemic has affected adolescents Effects of loss on adolescents, including social distancing and loss of references, during the pandemic period Psychosocial interventions for the process of loss reframing	To reflect on the effects of the pandemic on adolescents’ grieving processes To develop skills to assist professionals in designing interventions with adolescents
Mental health and adolescent protagonism in post-pandemic social assistance	Analysis of the effects of the pandemic on adolescents’ mental health How youth protagonism can be encouraged within services Psychosocial interventions and care practices in mental health promotion	To recognize the psychosocial effects of the post-pandemic on adolescents’ mental health To support professionals in promoting youth protagonism
Asynchronous activity	Consisting of two questions: “ <i>How do you think your professional practice can promote resilience in the adolescents you work with?</i> ” and “ <i>Tell us a real story about an adolescent you or your team has helped in the post-pandemic period that caught your attention</i> ”	To encourage critical reflection on professional practices in promoting resilience processes in adolescents To encourage the sharing of real experiences, enabling the exchange of effective practices and experiences
Promoting resilience among adolescents in the post-pandemic period	The concept of resilience and how it applies to adolescence Strategies for strengthening resilience in adolescents Family resilience	To identify resilience-building strategies that can be applied to adolescents To guide professionals to implement intervention programs focused on strengthening resilience
Protection network professionals and their role as resilience mentors	The role of the social protection network in promoting resilience Practical tools to support the development of resilience in adolescents Resilience tutors	To reflect on the fundamental role of professionals in the protection network in supporting the development of resilience To encourage professionals to use supportive practices, active listening, and appropriate interventions in the post-pandemic context

extent to which the intervention increased familiarity with topics related to adolescence and the pandemic, as well as engagement at work and mental health. A significance level of $p < .05$ was adopted. Finally, bootstrapping procedures (1000 resamples; 95% CI BCa) were used to increase the reliability of the results, correcting for possible deviations from normality and differences in group size, as well as providing 95% confidence intervals for the differences between means (Haukoos & Lewis, 2005).

To further analyze the intervention’s effectiveness, the Jacobson and Truax (JT) Method was used, which considers the reliability and clinical significance of the changes. The Reliable Change Index (RCI) was calculated to determine whether the differences observed between pre- and post-test scores were statistically reliable (Aguiar et al., 2010). Graphical analysis was conducted to facilitate result interpretation. The central diagonal line represented differences between moments (positive when post > pre, and negative when post < pre), while additional lines delineated the area of uncertainty regarding the reliability of changes.

Ethical Considerations

This study was approved by the Research Ethics Committee of the institution of origin of the first and second authors, under opinion No. 5,725,003 (omitted for blind review). The research complied with the bioethical recommendations for research involving human subjects, in accordance with Resolutions 466/2012 and 510/2016 of the National Health Council (NHC).

Results

Familiarity was measured before the training (pre-test) and after the training (post-test). The results showed that familiarity levels were higher in the post-test when compared to the pre-test. The effect size of the difference was high. In terms of engagement, there was a significant increase after the intervention when compared to the pre-test, with a medium effect size. In contrast, for mental health, no statistically significant differences were found between the assessment points.

Table 2

Test results showing differences in familiarity with topics related to adolescence and the pandemic, engagement, and mental health before and after the intervention, and the percentage of participants according to the results of the Reliable Change Index (RCI) analysis

		Scores		t-test statistics (Bootstrapping sample)				Percentage of participants according to RCI		
		M	SD	t	df	p-value	Cohen’s d	RPC	NC	RNC
Familiarity	Pre	5.37	1.22	-17.27	365	<.001	0.90	58.5% (214)	38.2% (140)	3.3% (12)
	Post	7.28	1.64							
Engagement	Pre	4.57	0.55	-5.84	364	<.001	0.31	1.9% (7)	97.8% (358)	0.3% (1)
	Post	4.71	0.52							
Mental health	Pre	3.58	0.52	0.38	363	.09		5.7% (21)	91.8%(336)	2.5%(9)
	Post	3.62	0.51							

Table 2 also reveals the percentage of participants classified as “Reliable Positive Change (RPC)”, “No Change (NC)”, and “Reliable Negative Change (RNC)”, according to the Reliable Change Indices (RCI) obtained, considering the sample as a whole. It can be seen that most participants did not show reliable changes in terms of engagement and mental health, according to the RCI criteria, although the familiarity variable with the proposed topics showed Reliable Positive Change in 58.5% of participants.

The analysis results for the “Familiarity” variable are shown in Figure 1. Most participants showed an improvement in their post-intervention scores, as indicated by the concentration of points above the bisector (diagonal black line), which represents the equivalence between pre- and post-scores. Furthermore, several points lie outside the area delimited by the reliable change interval (diagonal dashed lines), indicating that the observed changes are not attributable to measurement error, but rather are reliable.

Regarding engagement (Figure 2), the results indicate that most participants exhibited small and unreliable changes, as the points, for the most part, remain within the measurement error range (between the diagonal dashed lines).

Figure 1

Results of the RCI calculation considering the mean familiarity scores

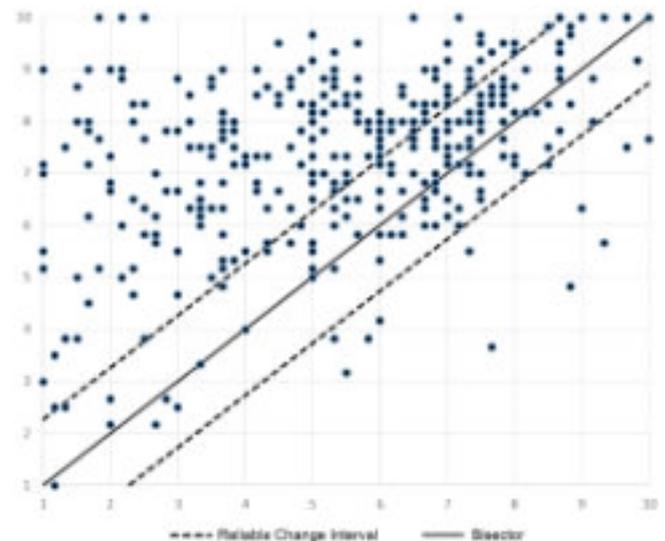


Figure 2
Results of the RCI calculation considering the engagement means

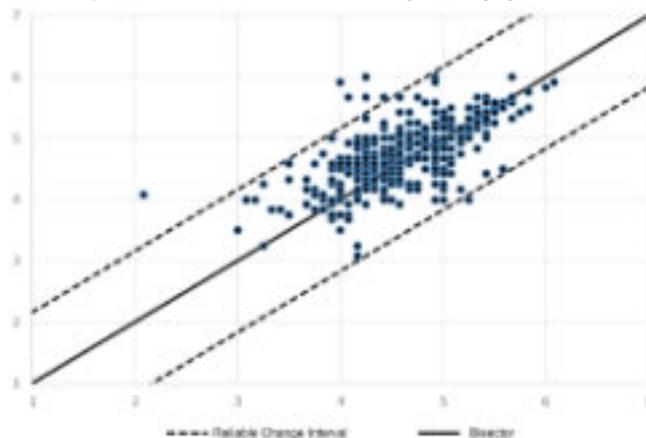
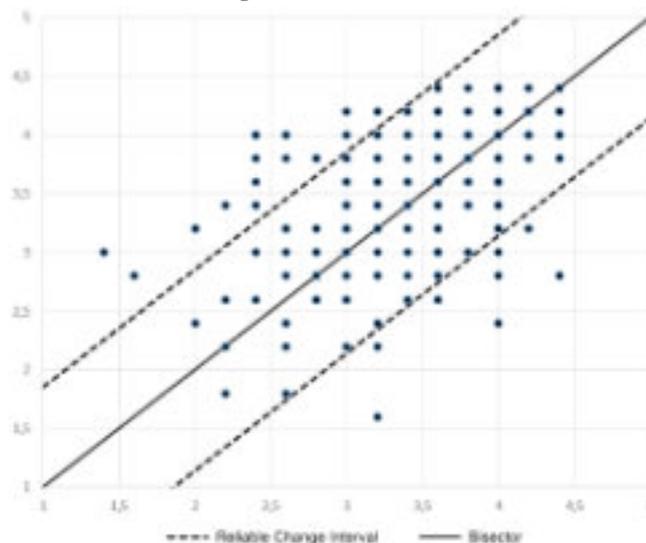


Figure 3
Results of the operationalization of RCI and CS (Criterion A) calculations, considering mean mental health scores



Finally, regarding the mental health variable, it was observed that most participants had low scores in the pre-intervention phase, and few changes were observed outside the reliable change interval, suggesting that the variations observed in the scores, in most cases, can be attributed to measurement error.

Discussion

The study result indicates that the proposed intervention had distinct effects on the variables analyzed, reflecting the complexity involved in changing attitudes, behaviors, and psychological states in the context of issues such as adolescence and the pandemic. The significant increase in familiarity with the content demonstrates that specific training actions are effective in expanding knowledge in the short term, but are not necessarily sufficient to change

more structural dimensions, such as work engagement and mental health. This discrepancy suggests that cognitive gains do not automatically translate into attitudinal or emotional changes, reinforcing the importance of considering strategies for transferring learning and the organizational context that favors (or limits) the application of what has been learned. This finding is corroborated by a study conducted with professionals who work with adolescents in situations of social vulnerability (Silveira et al., 2021).

Regarding familiarity with the proposed topics, the results suggest that the intervention was effective in significantly increasing the levels of this variable among study participants. The comparison between pre- and post-action familiarity scores revealed a statistically significant difference with a high effect size, indicating that the intervention succeeded in expanding participants' knowledge of critical issues related to adolescence and the pandemic. Research by Vicente and Almeida (2024) points to a widespread lack of training among professionals in various fields, such as health, education, and law, regarding the management and intervention in cases.

Concerning RCI, over half of the participants showed a Reliable Positive Change. The importance of training initiatives for professionals working in public policy is widely recognized. Although the investigated action does not constitute continuing education in the formal sense, it can be understood as part of a professional development process, insofar as it promotes updating, critical reflection, and practice strengthening (Shiri et al., 2023). Participating in professional development programs can improve job retention, reduce turnover intentions, and increase commitment to work (Shiri et al., 2023).

As for engagement, even though scores went up, the effect size was small, and only 1.9% of participants showed a reliable positive change. This result indicates that engagement is not just the result of specific training but depends on broader working conditions, such as job stability, institutional support, and adequate resources. The literature indicates that the precarization of work, manifested in temporary contracts and a lack of infrastructure, significantly reduces opportunities for engagement (Nunes & Morais, 2024), representing a multifactorial and structural characteristic of the contemporary labor market (Franco et al., 2010). Thus, the limited effects of intervention in this regard do not signal the fragility of the action itself, but rather highlight the need for alignment between professional development and policies that promote the valorization of work.

When it comes to mental health, the lack of significant differences between pre- and post-testing should also be understood in light of the scope of the action. Since mental health wasn't the direct focus of the intervention, it would be unlikely to see consistent changes just from a short training program. In addition, recent research indicates that, in contexts of social vulnerability, the professionals' mental health is directly related to working conditions and institutional overload (Dantas, 2021; Silva et al., 2022). This underscores that interventions aimed at psychological strengthening produce lasting effects only when coupled with organizational

and structural changes capable of reducing insecurity, distress, and strain in the daily work environment.

The study evaluated the effectiveness of training for professionals in the protection network, focused on adolescence and promoting resilience processes, aiming to increase familiarity with the addressed topics and indirectly contribute to workers' engagement and mental health. It was observed that the intervention significantly increased participants' familiarity with the themes discussed; however, the indirect effects were more subtle: there was a slight increase in professional engagement and no significant changes in mental health. These results may be related to the main focus of the proposal as well as structural and organizational challenges that limit its impact.

Promoting greater familiarity with the topics addressed in the program proved to be an important strategy for strengthening the work of professionals in the protection network. Despite the extensive experience of many participants, the need for ongoing training became evident, particularly in light of the changes and challenges imposed by the post-pandemic context. The approach adopted in the action, conducted by experienced and theoretically grounded researchers, combined scientific rigor with practical articulations, which enabled a greater connection between participants and the content.

A significant methodological aspect of the study was the use of two methods to compare pre- and post-test scores. While the t-test allows for the identification of general differences in sample scores, the JT method provides a more individualized interpretation, verifying whether the observed changes are significant in practical terms for each participant. The study is relevant because it contributes to understanding the challenges faced by professionals in the protection network, especially in complex scenarios such as dealing with crises resulting from the pandemic. Moreover, the study highlights the importance of continuing education initiatives as a strategy for professional qualification, while emphasizing the need for approaches that consider individual, organizational, and structural factors.

However, some limitations should be considered: the intervention length was limited, which may have restricted the results, especially regarding engagement and mental health. The absence of a control group and longitudinal follow-up also limits the generalizability of the findings and understanding of long-term effects, as well as social desirability, since the data were obtained through self-report instruments. It is possible that participants answered in a way that portrayed a more positive image of themselves or their professional practices, which may have influenced the results concerning the topics' familiarity, work engagement, and mental health. This bias is inherent in studies with this design and should be taken into account when interpreting the findings.

Future research could explore more extensive and integrated interventions, combining training with structural and organizational changes. The inclusion of different methods of analysis is recommended to improve the data interpretation and provide a more detailed view of the interventions' effectiveness. These advances are important to strengthen the performance of professionals in the protection

network and, consequently, the quality and sustainability of the provided services.

Data Availability

The datasets generated and/or analyzed during the current study are available from the corresponding author on reasonable request.

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