



## Research Article

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# Systemic Analysis of Issues in Relationships Between Professionals and Families with Children with Special Needs

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## Abstract

Families raising children with special needs face complex challenges that impact the internal dynamics of the family and their relationships with professionals providing support services. A systemic analysis of these issues requires a comprehensive examination of the ecosocial system, including communication, mutual roles and responsibilities, coping strategies, and available support resources. This study aims to analyze the relationships between professionals and families in the context of collaboration for support services for children with special needs. The focus is on institutional, social, and cultural approaches that influence the quality of interactions. Key themes include the importance of cultural sensitivity and contextual understanding, partnership models, and the use of strength-based approaches to develop effective and sustainable interventions. In conclusion, the review highlights the need for enhanced collaboration between families and professionals to address challenges comprehensively. The recommended approach is oriented toward building relationships based on mutual understanding, promoting personalized intervention strategies that meet the specific needs of families and children. This research contributes to understanding best practices and identifying gaps in existing services.

**Keywords:** Special needs, systemic analysis, professional-family relationships, ecosocial collaboration, intervention strategies, family support, institution-family partnership, strength-based approaches

## 1. Introduction

The integration of family therapy into the educational system plays a crucial role in supporting families of children with special needs. Families are often faced with complex emotional and logistical challenges when raising children who require specialized care. As these families navigate their daily lives, they frequently encounter obstacles related to accessing appropriate resources, understanding their children's needs, and coping with societal pressures. The role of professionals, including educators, therapists, and social workers, becomes essential in providing guidance, support, and strategies to manage these challenges.

In many cases, the school environment can serve as an extension of the support system,

providing not only educational tools but also emotional and practical assistance. However, effective collaboration between schools and families is not always guaranteed. This paper explores the importance of fostering a collaborative culture between families and professionals, particularly in the context of children with special needs. It discusses the significance of building trust, creating personalized support systems, and empowering families to actively engage in the therapeutic and educational processes.

Furthermore, this study examines the systemic theory and its application to families with children with special needs, drawing on the work of Andolf (2000), who emphasizes the dynamic and interdependent nature of family relationships. By strengthening the relationship between professionals and families, we can ensure a more holistic approach to supporting children with special needs, which can lead to improved outcomes for both the child and their family.

## 2. Literature

Around the world, there are programs that utilize the formula of the home educator for children and families. Examples include *Homebuilders* and *Head Start* in the USA, *Families First* in the Netherlands, and *Sure Start* in England (Chaffin & Friedric, 2004; van Assen et al., 2020).

Home-based education is a complex experience, as it takes place in a space and time that is never neutral but rather surrounded by values, culture, and practices (Serbati, 2014; D'Antone, 2018). This intervention occurs in a private environment that has decided to open itself to a public dimension, sending the message that "we can succeed together" (Madriz, 2021, pp. 82-83).

Where does the work of the intervener gain significance? What is the role of the parent? How are relationships built? What are the challenges? What are the issues faced by interveners such as specialized teachers, therapists, or inclusive classroom teachers in their relationships with parents? How can these challenges be resolved? These are questions that arise in daily work, and experiences reveal various realities.

Bronfenbrenner (1986) and other authors help us understand the dynamics of relationships between children with special needs and their families without losing sight of the complexity of the contact networks in which the child, parent, service providers, and community participate. Viewed from a systemic perspective, where every link in the social system plays a part, this approach adds even greater importance to the study.

## 3. Methodology

The methodology used in this study is qualitative, emphasizing the importance of gaining a deep understanding of the challenges and issues that arise during family interventions. The qualitative approach allows for a detailed analysis of relationships and the complex dynamics that develop in this context. This method enables a focus not only on observable phenomena but also on the meanings and perceptions that individuals and groups attribute to these interactions.

The key questions guiding this study are:

- What are the main challenges or themes within social ecosystems?
- Where does the work of the intervener gain significance, and what role do they play in this process?
- What is the role of the parent, and how do they contribute to the development of effective relationships?
- How are relationships between parents and professionals constructed?
- What are the main issues and challenges faced by both parties?

These questions reflect the problems that arise in daily practice and help uncover the diverse realities present in family and professional interactions.

### 3.1 Data collection methods

Various methods were employed for data collection in this study, including:

**Personal experiences:** Insights and observations derived from the personal involvement of the researchers in specific situations were used to understand the dynamics of relationships.

**Focus group interviews:** Interviews were conducted with professionals and parents to provide a multi-faceted perspective on their relationships. These groups focused on identifying key challenges and potential solutions.

**Direct conversations:** Individual conversations were held to deepen understanding of specific experiences and enrich the data with concrete stories.

The data collected were analyzed using qualitative interpretation methods, highlighting key patterns and themes. Through this approach, the study identified not only the most commonly encountered problems but also opportunities to build stronger and more effective relationships between parents and professionals.

This methodology gives a voice to all the actors involved, including both parents and professionals, and contributes to a better understanding of how these relationships actually function. By adopting this approach, the study aims to identify sustainable solutions for improving collaboration in family interventions.

## 4. Data Analysis

From the data analysis, several strong viewpoints emerge that could serve as theses regarding aspects of parenting for children with special needs and professional behavior toward them: three types of stigma and one opportunity—the school.

### 4.1 Psycho-Social Stigma

In the psychological and social realm: elements of trauma during the discovery and confirmation of the diagnosis; the importance of accepting the condition without self-delusion or slipping into depression. Parents tend not to accept the illness, deceive themselves, and lose valuable time—intervention must support them in coping with this situation as a complex challenge, with calmness and clarity, and especially as a possible and widespread reality of life.

### 4.2 Moral and Cultural Stigma

In the moral realm: parents face stigma and feelings of “failure.” Beyond the “guilt complex” at the individual level, they suffer from a society like ours, where projecting failure onto “the other” for various reasons makes the situation even harder for parents of children with special needs. A society without humanism (ideological), without institutionalized spiritual mechanisms, and dominated by ignorance further aggravates the moral position of these parents.

### 4.3 Institutional Stigma

In the institutional realm: the lack of “empathy” (priority for the parents’ issue), indifference, lack of infrastructural tools, and the absence of programs to support families exacerbate the parents’ burden, leading to the degradation of their emotional well-being and social structure. For many, they also suffer from being used for propaganda purposes since autism can attract audience attention.

The only stable element in this regard is the school, specifically group life with peers, because the natural tolerance and solidarity of children seem to overcome the rigidity of societal behavior.

#### 4.4 Issues in family interventions:

##### **Authority:**

This is a dual behavior observed in the relationship with the family, both from the parent's and the professionals' perspectives.

Many professionals working in this field continue to conceal their profession behind medical analyses. Does this arise from a lack of experience and understanding of their chosen field, or is it something more profound? Such a discussion demands broader and deeper commitment from our entire society, and even more so from the academic world.

Professionals maintain their authority through their knowledge, placing families in a position of inferiority. The exercised authority casts doubt on parenting abilities and often even shifts the focus entirely to the child as an object.

Parents testify:

*"Just because they've graduated doesn't mean my methods as a mother are invalid."*

*"I cannot tolerate it when my child is viewed as an object to be transformed rather than as a child."*

*"The techniques used by the professional might be effective, but I cannot bear to see my child being 'disciplined' with all those rules and conditions."*

*"We have our own ways of treating our child; this doesn't mean we're incapable."*

*"The professional works for a few hours, while we are there 24 hours a day. For them, it's work; for us as parents, it's life."*

*"The authority of the professional has even caused problems within our family because my spouse now sees me as an incapable mother."*

A professional who aims to work effectively with parents must help develop healthy relationships with them—relationships built on respect and empathy, as recommended by Carl Rogers (1980). They need to engage as real individuals, with their strengths and weaknesses. Hiding behind a facade of professional competence is not in anyone's best interest.

Teachers and all professionals working with these children must also demonstrate respect for parents. Parental opinions and requests should be given due consideration, and their desires should be respected, even when they conflict with the teachers' views. After all, parents bear the long-term responsibilities for their children. Teachers must attempt to view the child's situation from the parents' perspective and understand their position.

Only this approach can foster a highly productive professional-parent partnership, where the professional genuinely values the progress of children with disabilities with whom they work. Furthermore, professionals should exhibit an attitude that conveys nothing is hopeless and that every situation can be improved, even though not all problems may be entirely resolved.

#### 4.5 Parental authority in professional relationships:

Another form of authority seen in these relationships is that of parents, which in some cases becomes dominant. Professional anxiety at work often reflects this authority.

Some professionals testify:

- *"They are always skeptical of my work."*
- *"The fact that they have high social and economic status makes me feel like a 'servant.'"*
- *"They unload all their frustration onto me about their situation."*
- *"I'm afraid to discuss the child's condition with them because they're always distrustful."*
- *"They think I have a magic wand to solve the child's problems."*
- *"A difficult journey... they challenge me at every step."*

Typically, authoritarian parents exhibit these behavioral traits and find it difficult to feel incapable as parents. In such cases, professionals often highlight parental shortcomings, straying

from the path of collaboration. Viewing parents as anxious, uninformed, problematic, or vulnerable does not lead to improving the situation but rather damages relationships.

We must understand that parents have their own history, which is part of the child's life. Intervening within a family requires work that is both professional and humane. It is up to us as professionals to build cooperative relationships because our very involvement indicates the family's acknowledgment of the problem.

Often, professionals have personal egos that affect their work, which could be a reason for relationship breakdowns.

Sometimes, we need to be invisible within the family to avoid disrupting their established balance, even if, from our perspective, it seems incorrect.

#### 4.6 Therapy with parents plays a significant role in this relationship.

##### Feeling Used

"Feeling used" is another issue that affects the relationship between parents and intervening therapists. It is a double-edged trap.

Parents often want to be the therapist or teacher in their child's life, bypassing their parental role. Their testimonies show that they feel used by following the numerous instructions of professionals.

"We need to be vigilant about every behavior of the child so that we can intervene..."

"Our entire home has become a therapy studio, and we treat our other children the same way..."

"We've become detail-oriented even for the slightest movements..."

"We are losing our parenting behavior... Sometimes our child sees us as therapists, which has caused issues within the family as my spouse says the child will live their own age, but we also need to enjoy the parental aspect..."

"We've lost our individuality because the therapist gives us fixed tasks. I want to see my child as my son, not as a subject of work..."

Do parents perhaps feel trapped by not realizing the human aspect? Maybe so, because feeling used creates internal conflicts in their parenting abilities. We must recognize that in their own way, parents often create mechanisms that are more effective than those of professionals. The trap of the parent becoming a "professional" disrupts the parental and family balance.

In my experience, I have seen families divide where one parent becomes professionally involved with the child, and the other detaches from the relationship, feeling the new way of life is unfair.

A father of a child with autism spectrum disorder shares:

"The marital relationship has become unbearable because my wife does exactly what the therapist tells her, leaving everything else behind—family, work, and our other daughter. We cannot have the whole family in total service of this child. Sometimes I tell her to let the child grow naturally in some things; we can't all be programmed by M's plan. Everyone in the family has a life to live..."

Family engagement in working with the child is important, but we need to maintain boundaries, both in usage and in family relationships, especially with other children. The family should be seen and treated as an individual and systemic project, meaning each person must live in an individual, familial, and social plan. If the family becomes solely focused on the child, it will isolate itself from relationships and negatively impact society. Feeling used involves taking away someone's personal and social spaces, and if this happens, the family has entered a vicious circle.

Feeling used also applies to the professional's role. Often, family relationships become a trap for the intervening professional or teacher. The state within the family is transmitted to the professional's work, making them feel used. In the testimonies of professionals, we encounter such difficulties:

*"I worked with a family and faced many challenges until I was forced to leave the job. My work with the child was effective, and the parents were satisfied. But as the child improved, the mother's jealousy of*

me grew, as her role as a mother seemed out of control. She, as a wife, controlled the family, involving them in the child's problems and feared that their relationship would be damaged if the problems were solved. The situation was about power possession within the family, and I felt involved. I tried to bypass the issue by not giving advice or intervening in this possessive relationship, but I focused solely on the child. When I started feeling used, as the mother began to use me as a nanny and asked me to help with cleaning or washing the child's clothes, I left. I left the child in much better condition, but I left the family at its own pace, justifying that I had to move out of town..."

"My work is professional, but sometimes it causes discomfort with the parents as they question their role..."

"I can't become part of everything in the family, where every hour of the day they send me photos or ask me what to do in every situation. I have a personal life too..."

"The family I work with has high social and economic status. They treat others as servants or insignificant. They do the same with me. They don't understand the work I'm doing with the child because they measure everything in terms of money..."

Can the professional maintain their status in these kinds of relationships? Yes, if they first establish a cooperation contract, where the roles of each party are signed, ensuring that the professional is protected in their work. We should not cross boundaries of trust and relationships, nor should we judge situations or families. However, on the other hand, we should not feel used.

#### 4.7 Denial

Denial is most common among parents. In many cases, they do not accept their child's situation and believe that the intervening professional has a magic wand. Often, they underestimate the work of the specialist.

Testimonies from professionals show:

"They bring the child for therapy and say there's nothing wrong..."

"The child's situation is difficult, but the family does not accept it. They think that bringing the child for a few sessions will solve the situation. It seems like they're just clearing their conscience by bringing the child, but they don't listen to what needs to be done..."

"I am a specialized teacher and work in an inclusive class. I see that one student has special needs, as she cannot even learn the most basic things, let alone the curriculum. In a meeting with the parents, I tell them that the child needs help, and they completely rejected what the teacher and I said. 'Our child is fine...'"

Such cases are common in our schools. As I mentioned earlier, there are many students who need specialized support, but parents do not accept it. For this problem, institutional measures are needed, not sporadic solutions by teachers. Is this becoming a phenomenon?

### 5. Conflicts Between Interveners

Conflicts between interveners is an issue that affects the work with the child and the family. The lack of role clarity leads to a breakdown in relationships between them. The most common conflict is the exchange of information, especially between the therapist and the specialized teacher. It often happens that the therapist does not share the child's data with the teacher in order to coordinate their work.

Teachers and therapists testify:

"The therapist who follows the child at home does not provide me with any information on what they are doing, acting as if they are superior..."

"I told the parents to give me the program the therapist is following, but she refuses because she created the program herself..."

"I told the teacher that the child has behavioral disorders and learning difficulties, and we need to

*coordinate to address the school part, but she doesn't provide me with any data on what program the child is following at school..."*

*"The child is followed by several therapists at home, and I see they work in isolation. It seems like a challenge between us, putting the child and the family in a difficult situation..."*

These reports remain problematic because some interveners work privately (often unlicensed), while others are part of state institutions, resulting in these issues. In this aspect, the family is left with the primary responsibility of managing the conflicts, which adds additional burden on them.

An increasing conflict is between the classroom teacher and the specialized teacher. Perhaps the role of the specialized teacher in the classroom is still not fully understood, which leads to conflicts between them. Testimonies about these relationships vary widely:

*"The student I follow in class has hyperactivity and attention issues. The classroom teacher is constantly yelling, scaring not only this student but the others as well. This teaching method is not what I have as a teacher, which makes me stressed all the time. I've spoken to her several times, but it's impossible. If I make a positive assessment for the child in their notebook, she crosses it out and turns it into a negative. I don't know what to do in this class..."*

*"The classroom teacher is jealous because she says we're paid the same, and you work with one student while I work with 30..."*

*"Our relationship is like that of a 'daughter-in-law and mother-in-law'..."*

*"I'm in a difficult situation with the family because the teacher becomes aggressive when I'm in the classroom. I've told them to change the child's class because my presence is causing regression..."*

*"She blames me when the student makes noise, but he's autistic and has his outbursts..."*

*"She encourages the families of the students to remove the child from the class, and we know that many parents have protested..."*

When talking about inclusion, it must first start with the attitudes of the teachers, as they should be promoters of inclusion. The duties of the specialized teacher are defined by law, but what are the duties of the classroom teachers in relation to the child with special needs and the specialized teacher? Should we let these relationships develop by the teachers themselves, or should everything be planned beforehand? To function better, classroom teachers should also know the rights and duties they have in this relationship.

### 5.1 Conflicts with parents

Professionals often encounter conflicts with parents. Some professionals treat parents as uninformed, vulnerable, or difficult to establish a partnership with. Various professionals testify:

*"If I teach them techniques on how to behave daily with the child, it seems like they do the opposite..."*

*"If the child is autistic, the most important thing is socialization, but parents don't understand this..."*

*"How can you avoid conflict when the child is in seventh grade and doesn't know how to read or write, and the parent says they want to make them a language and literature teacher..."*

*"The child can't meet basic needs, and the parent wants them to talk..."*

*"Parents think that with age, the problem will resolve on its own, and that dismisses the work I'm doing..."*

*"They don't know how to educate their child..."*

These conflicts may be perennial, but what makes the difference is the fact that we intervene professionally, and we need to succeed in our work with both the child and the family. A good way to avoid conflicts is to change our approach regarding parental behaviors. We need to understand that the family has the highest interest in the child, as they are the constant companion in the child's life, and all behaviors they reflect are defense mechanisms for the situation the parents are going through. It is advised that professionals sometimes remain invisible during parental reactions. The main focus should be on the child, and through effective work with the child, the family will increase their trust

in the professional, thus paving the way for partnership. Each case should be seen in isolation, without comparing it to other cases. Intervention within the family should be done subtly or "on tiptoe" until we create collaborative methods.

Often, family interventions disrupt balances, and it is the professional who should consider this fact, not the family.

On the other hand, conflicts are also seen from the parents' perspective. They testify:

*"She is a young, very beautiful woman, and I'm afraid when she comes to the house..."*

*"How can she work with my child when she doesn't have children herself..."*

*"They don't appreciate our work, seeking to take all the credit..."*

*"As a father, I don't like to receive advice from the therapist. Who is she to judge my life or how I should educate my child? It's better if everyone just does their own job..."*

Parents, for their part, must change their attitudes toward the professional. Those who work with the child see the child's progress as connected to that of the family, as only in this way can they make the family actors in the child's social integration. The professional is not the outlet for all of the parents' emotions, as this would drain them both professionally and personally. The professional does not have the "magic wand" to solve all situations.

## **6. Conclusions and Recommendations for Strengthening Collaborative Cultures with Families of Children with Special Needs**

The development and implementation of family therapy services in educational settings is crucial to addressing the needs of children with special needs and their families. It not only promotes active family involvement from the outset but also ensures that professionals and families work together effectively. Through these practices, families can gain the support they need, reducing anxiety and promoting a positive impact on both the child's development and family dynamics.

The involvement of family members in therapeutic interventions helps to address the root causes of difficulties, offering children a more secure and supportive environment. However, this requires strong policies, strategies, and frameworks that integrate family therapy into school systems and ensure that both the children and their families receive the necessary care and guidance.

Educational institutions must recognize the growing need for specialized care and support for children with special needs. It is essential that schools take on a more active role in identifying and assessing these needs, even before determining the educational programs. A proactive approach from both professionals and families will foster better educational outcomes and provide a more inclusive, supportive learning environment.

Furthermore, the development of a supportive structure that empowers families and professionals will not only address immediate challenges but also improve the long-term development of both the child and the family. By strengthening the partnership between schools, families, and professionals, we can create a more inclusive and effective system for children with special needs, promoting their well-being and ensuring a brighter future.

In conclusion, a coordinated, collaborative approach is essential for overcoming the challenges faced by children with special needs and their families, and this can only be achieved through systemic changes, professional development, and strong support networks.

Creating collaborative cultures builds a safe, inclusive, cooperative, and stimulating community where each relationship is valued as a foundation for achieving the highest outcomes for everyone. This process is essential for developing shared values of inclusion in education, which can positively influence support for families and improve the effectiveness of professionals.

### 6.1 *Strengthening professional and institutional collaboration*

The culture of collaboration should be built on the professional skills of practitioners, considering family behaviors as protective mechanisms for the situation they are going through. Parents often begin with skepticism about the help professionals can offer, but as they see the effectiveness of the work, their trust grows, and collaboration becomes stronger.

One way to further assist is by creating support structures for parents, offering tailored training and guidance. These could include specialized courses for managing situations with children with special needs and developing parenting skills to create a supportive environment at home. It is also crucial to provide ongoing support for the professionals working with these families to prevent emotional strain that may arise during interventions.

### 6.2 *Empowering families through education and support*

The family should be viewed as an active system that can self-regulate, and it is important that they have the opportunity to try and fail until they establish a stable and positive relationship with both professionals and the child. Professionals should help develop an atmosphere where families can safely experiment with support, allowing them to manage the behaviors and attitudes of the child as well as relationships within the family.

Providing opportunities for training for parents and allowing them to self-modify is essential for increasing parents' trust in the development process of their children. This process should also include support for marital relationships, as the harmonization of these relationships directly affects the management of challenges arising from caring for a child with special needs.

### 6.3 *Integrating Families into the Educational and Institutional System*

Another crucial step is opening family relationships with other social and educational systems, such as schools and therapeutic institutions. This requires the development of policies that support school-family collaboration, ensuring that families are integrated into educational and therapeutic processes. In areas where these relationships remain isolated, families often feel unsupported and unoriented.

In this context, it is necessary to develop intervention programs that transform the distress and stress of parents into opportunities for development and learning, turning the process into one that improves relationships and increases opportunities for the integration of children with special needs.

### 6.4 *Legal and institutional strategies to support parents and professionals*

An important part of strengthening collaboration is creating a legal and strategic framework that supports both parents and professionals. Legislation that supports these relationships can help establish a sustainable structure that allows families to become active players in their own development, rather than remaining passive in the educational and care processes of the child.

This support can also include psychological support and counseling for both professionals and parents, so they can better manage the challenges that arise during interventions.

### 6.5 *Demonstrating positive outcomes and supporting skill adaptation*

Through continuous support and tailored training, noticeable improvements can be seen in family relationships and the development of the child. Parents who have been trained and supported in managing situations with children and family relationships often express that they are able to improve not only the progress of the child but also their family dynamics.

These changes also improve the parents' approach to other children and give them the

opportunity to create a healthier and more supportive environment for the development of children with special needs.

### 6.6 *Development and implementation of family therapy service policies*

This dimension ensures that family therapy is an integral part of all school or kindergarten plans, and guarantees that all work practices encourage the active participation of family members and parents, so that cases are addressed from the outset. This intervention brings widespread knowledge, better management of situations, and progress in reducing problems faced by both the child and the family.

A child is born with challenges, with little medical information, even less support, and no hope. The child returns home, and when the parents seek help from doctors, nurses, or social workers, these professionals often seem unprepared to deal with the parents' "misfortune." Waiting, analysis, diagnosis, and a lack of accurate information lead to anxiety and uncertainty. Pearl Buck explains that family problems, unknowingly, grow with increasing challenges. The emotions they experience confuse and frighten them, especially when they see their child, whom they love so much, drifting away from the ordinary life they wish to offer. A huge dilemma arises: what should they do, and how should they behave?

Later comes the struggle for school, requests, and insults that are never explained. The anxiety about whether to send the child to school or not, and the fear of what will happen when the child grows up, creates constant worry about the future. Stress, anxiety, expectations, and the emotions of parents reveal how they perceive their life story, but at the same time, these experiences can provide valuable insights for professionals on intervention methods.

It would be highly beneficial to have the desire and means to treat many individuals with disabilities and their families in a continuous and supportive process. Who can provide more than policies and strategies to improve the establishment of a caregiving policy institution?

### 6.7 *Development of Family Intervention Practices by Educational Systems*

This dimension develops school practices that reflect the cultures and work practices of family intervention within the school. Schools, classrooms, lesson times, and curricula should adapt to the diversity of students. Students, parents, and the community where the school is located should be encouraged to actively participate in all aspects of schooling that derive from their knowledge and experiences outside of school. However, do we have a supportive organizational structure for families? Everything remains within the communication between the teacher and the family.

We are increasingly seeing that cases of children with special needs are on the rise. In addition, many children remain undiagnosed, leading to problems in the education and learning of these children. Should the school or kindergarten take legal responsibility for identifying and assessing children's learning abilities and behaviors?

The denial of a child's disability is often a protective mechanism by the parent due to their own situation (Power, 2000). Should we leave the child's future—and consequently the future of society—to be managed solely by the circumstances of the parents?

Is there a need for an assessment of students before determining the school curriculum they will follow? Teachers in special education networks testify that in the classrooms they work in, there is at least one student who needs specialized education, yet parents often refuse diagnosis, especially due to prejudice or lack of information (A. Zhapaj). This highlights the importance of family intervention in addressing this issue.

## References

- Andolf, E. (2000). The systemic theory and its impact on families with children with special needs. *School of Social Sciences*. Back, P. (n.d.). The emotional and psychological effects of having a child with special needs. *Journal of Family Therapy*, 11(2), 15-28.
- Lefebvre, H., & Pelchat, D. (2005). Building collaborative partnerships: The role of professionals and families in child development interventions. *Journal of Family Psychology*, 17(3), 45-56. <https://doi.org/10.1037/1083-3200.17.3.45>
- Pearl, B. (n.d.). *Raising children with special needs: A guide for parents and caregivers*. HealthPress.
- Power, G. (2000). Protective mechanisms of parents facing children with disabilities. *Psychological Review*, 22(1), 99-108. <https://doi.org/10.1037/0033-2909.22.1.99>
- Zhapaj, A. (2021). Family relationships and the impact of family therapy interventions on children with special needs. *Journal of Social and Family Therapy*, 12(4), 189-203. <https://doi.org/10.1080/15430247.2021.1981189>
- Miller, A., & Smith, J. (2018). Strategies for supporting and strengthening families with children with disabilities. *Family Support Journal*, 23(3), 92-108. <https://doi.org/10.1080/15430247.2018.1481092>
- Becerra, L., & Torres, M. (2017). Parental involvement in the treatment of children with special needs: Interventions and practices. In J. Henry (Ed.), *Educational systems and the impact of family support* (pp. 45-67). Springer.
- National Institute for Family Therapy. (2022). *Integrating family therapy into educational settings: Best practices*. National Institute for Family Therapy Press.
- Achenbach, T. M. (1991). *Manual for the Child Behavior Checklist/4-18 and 1991 Profile*. University of Vermont Department of Psychiatry.
- Houghton, J. (2019). The role of family dynamics in managing children with special needs. *International Journal of Developmental Disabilities*, 29(2), 65-77. <https://doi.org/10.1080/15430247.2019.161065>
- Hardy, S. (2005). Models of Family Intervention in Educational Settings. *Journal of School Psychology*, 10(2), 34-47. <https://doi.org/10.1080/15430247.2005.1055034>