ResearchGate

See discussions, stats, and author profiles for this publication at: https://www.researchgate.net/publication/342327017

The Use of An Advanced Multi-systemic Approach by Social Workers in Handling Corona Virus

Article *in* Journal of Advanced Research in Dynamical and Control Systems · May 2020

DOI: 10.5373/JARDCS/V12I5/20201700

CITATION
1

READS
101

4 authors:



Muhammad Ali Equatora
Polytechnic of Correctional Science , Indonesia, Depok
12 PUBLICATIONS **5** CITATIONS
SEE PROFILE



Ambo Upe
Universitas Haluoleo
29 PUBLICATIONS **28** CITATIONS
SEE PROFILE



Adi Sumandiyar
Universitas Sawerigading Makassar
18 PUBLICATIONS **13** CITATIONS
SEE PROFILE



Muhammad Rusli
Universitas Haluoleo
6 PUBLICATIONS **1** CITATION
SEE PROFILE

Some of the authors of this publication are also working on these related projects:

Kemenristekdikti View project

Disertasi View project

All content following this page was uploaded by Adi Sumandiyar on 18 July 2020.

The user has requested enhancement of the downloaded file.

The Use of An Advanced Multi-systemic Approach by Social Workers in Handling Corona Virus

Muhammad Ali Equatora, Community Guidance Department, Polytechnic of Correctional Science, Depok, Indonesia.

E-mail: bangtora1973@gmail.com

Ambo Upe, Sociology Department, Halu Oleo University, Kendari, Indonesia. E-mail: ambo.upe@uho.ac.id

Adi Sumandiyar, Sociology Department, Sawerigading University, Makassar, Indonesia. E-mail: adisumandiyar@gmail.com

Muhammad Rusli, Sociology Department, Halu Oleo University, Kendari, Indonesia. E-mail: muh.rusli@uho.ac.id

Abstract--- The corona virus was first identified by the World Health Organization (WHO) on December 31, 2019. The virus which emerged from Wuhan City, Hubei Province, China, has spread to more than 120 countries, and on January 30, 2020, it was declared a pandemic. The acceleration of the spread also prompted WHO to formally establish the Corona virus Disease as COVID-19 on February 12, 2020. This study, therefore, discusses the practices of social workers in handling corona virus using an advanced multi-systemic approach, where the first two cases were reported on March 2, 2020. The qualitative descriptive method was used h. The results provided a valid overview related to the practices of social workers in handling corona virus using the Advanced Multi-Systemic approach. In conclusion, the use of this approach successfully increased the awareness of disease prevention, thereby, eradicating social panicking.

Keywords--- Social Work, Corona Virus, Advanced Multi-Systemic.

I. Introductions

The novel corona virus pneumonia (COVID-19), which was first reported in Wuhan, China has spread to other countries in the world. Presently, confirmed COVID-19 cases are higher than the number of infected SARS patients in 2003, with a tremendous death rate. Due to its transmission capabilities from "human-to-human", the World Health Organization (WHO) established it as a pandemic on January 31, 2020. These facts are sufficient to illustrate the emergency and complexity level of this pandemic.

The common signs and symptoms of this virus include acute respiratory disorders such as fever, coughing and shortness of breath. The average incubation period is 5-6 days, and the longest is 14 days. Furthermore, severe cases of COVID-19 cause pneumonia, acute respiratory syndrome, kidney failure, and even death. The clinical signs and symptoms reported in the majority of cases are fever, difficulty breathing, and extensive pneumonia infiltrates in the lungs through X-rays analysis.

Infected patients commonly have symptoms of fever, however, some only feel chills and respiratory pain, along with a mild dry cough, fatigue, difficulty in breathing, diarrhoea, etc. Some of the mild symptoms include flu, sputum, and gradual difficulty in breathing. In severe cases, the disease tends to worsen rapidly, resulting in acute respiratory disorder syndrome, septic shock, irreversible metabolic acidosis, and coagulation in a few days. Some patients tend to experience mild symptoms at the initial stage without fever, which becomes critical and fatal as the days progress.

II. Research Methodology

This is a qualitative-descriptive research, with the advanced multi-systemic approach used to provide an overview on the strategies used by social workers to handle the virus (Cottrell et al. 2018). A qualitative-descriptive is used to provide a holistic analysis of the author's ideas on the subject, in the form of words and special context languages. (Tramonti, Bonfiglio, et al., 2019)

Data were collected through documentation, interviews, and observation. (Decker et al., 2018). Equatora & Rahayu (2019), defined this process as a systematic and standard procedure for collecting data by conducting documentation studies, interviews, and observations. According to Bell & Willmott (2016), there is a correlation

DOI: 10.5373/JARDCS/V12I5/20201700
ISSN 1943-023X

Received: 07 Mar 2020/Accepted: 10 Apr 2020

between data collection, documentation, interviews and observations, with unsolved research questions. Therefore, the quality-descriptive method was formulated to provide answers to the problems (London et al., 2016)

This study used the interaction and triangulation model approaches to analyse the data (Gellatly et al., 2019). The model was used to check the validity of the data in order to compare its documentation with interviews. Therefore, the following procedures were used to evaluate observations results with the interviews conducted:

1. Arranging variations of questions,
2. Re-checking various data,
3. Utilising methods that allow for reliable data checking (Weisz et al., 2019).

III. Research Results

Primary and secondary data were collected from the following sources:

A. Ecological Perspective System

In practice, it is important for social workers to use the therapy system, to accordance with a community's ecological system perspective. According to Stewart et al. (2019), the spread of Corona Virus to more than 120 countries is the responsibility of medical and professional personnel. Therefore, they need to adequately determine client's problems to obtain the right treatment methods (Tramonti, Giorgi, et al., 2019).

The ecological system is a useful metaphor commonly used during practice, which helps the client to adapt to changes (Gatotoh et al., 2011). In the ecological system, adaptation is defined as a dynamic process between people and their environment, therefore clients tend to grow, develop, achieve competence and make contributions to others and their environment. Conversely, ecology provides an overview of the methods used to analyses patients' ability to adapt to an environment and their compatibility between people and the environment (Shakya et al., 2012).

According to Pinsof et al. (2017), system theory describes how an individual interacts, develops and systemically adapts to social interactions dynamically. Therefore, this collaboration acts as an ecological system capable of providing a systemic framework in understanding people and carrying out social interactions (Weisz et al., 2019). The ecological system perspective is a strong foundation in handling Corona Virus using the Advanced Multi-Systemic approach

B. Social Construction

This practise is used by social workers in handling Corona Virus. Lebow & Jenkins (2018), stated that social construction explains the meaning and value of equality with a deeper understanding of the multi-systemic relationships and adaptation of a person in their social environment. It also provides social workers with an understanding of a person with different background history. This is inseparable from how interaction occurs and the way a person analyses a problem, irrespective of the differing opinions in a family. Generally, people tend to interpret the social environment in a way understandable by them, irrespective of the underlining factors. (Hoagwood et al., 2018)

C. Biopsychosocial Perspective

According to social workers, biopsychosocial perspectives play an essential role, in handling a person infected with Corona Virus (Magnavita et al., 2010). They understand that human life is inseparable from biological, psychological, and social interaction subsystems, with the formation of an interactive multi-dimensional system. (Lebow & Diamond, 2018)

D. Empowerment Perspective

The ability to empower communities with social workers capable of successfully handling Corona virus is based on an ecological system that is dependent on the strength of individuals, families, groups, organisations, or communities (Butler et al., 2020). Therefore, the empowerment of all components of the community tends to accelerate the handling of Corona Virus with successful empowerment achieved when the following results were realised from every individual:

1. The potential for empowerment.
2. Subject to all rules applied during the Corona Virus handler at various levels (Sexton et al., 2019).

According to Almond & Allan (2019), social workers need to be able to awaken individual empowerment by internalizing their potential, thereby fostering their ideas in dealing with the virus.

DOI: 10.5373/JARDCS/V12I5/20201700
ISSN 1943-023X

Received: 07 Mar 2020/Accepted: 10 Apr 2020

E. The Power of Choice

Social workers act as facilitators, in providing individuals with ways to deal with the spread of the virus (Visscher et al., 2020). This provides them with the extent to which they face this problem, with mechanisms required to create a change in dealing with this problem (Dierker et al. 2014). Social workers facilitate clients to be active and encourage the implementation of instrumental partners. Therefore, clients are at the center of change in dealing with this problem. (Maughan & Gardner, 2018)

IV. Discussion

There are six factors used by social workers in handling Corona Virus with an advanced multi-systemic approach. Therefore, integrating these factors tends to enable them understand, assess and treat clients. This is therefore described in following factors:

a. Biological

The use of an advanced multi-systemic approach, encourages social workers to understand the "body language" of clients, and the relationship between emotions, behavior, and biological factors (Maughan & Gardner, 2018). It shows that biological or genetic cause personal problems such as mental disorder (MacDonald et al., 2013). In handling clients in the category of people under surveillance with Corona Virus, a social worker in the psychosocial services always face problems related to human biology, as well as the sources and determinants of the environment (Hussain et al., 2011). Therefore, they need to convince clients that adequate physical exercises and good nutrition helps to boost their immunity. (Ohrt, 2018)

b. Psychological

The use of the Advanced Multi-Systemic approach by social workers is literally related to the psychological and emotional factors. They need to be able to determine the client's problems from psychological and emotional aspects. This factor provides a very large contribution to the client due to the psychological pressure experienced in the social environment (Sharma et al., 2013). Therefore, in handling clients under surveillance (ODP) of Corona Virus, they are classified in accordance with the following:

1) Ability to assess problems through mental screening checks
2) Ability to carry out diagnostics and structurally analyse mental disorders manually.
3) Master the knowledge and take action in recognising psychological and emotional disorders and the causes of the disorder (Vijverberg et al., 2017).

c. Family

Family factor is unavoidable in the practice of social workers in handling Corona Virus with an Advanced Multi-Systemic approach. It is the smallest scope of a social interaction carried out by the client. Therefore it is vital in encouraging changes in client behavior (Lebow & Uliaszek, 2010). Lebow (2018), stated that clients have the ability to maintain physical and mental health in dealing with the virus, assuming the family factor is harmonious.

d. Religious

Social workers need to be careful in handling clients under surveillance and adopt the use of religious factor (Carr, 2019). Social workers need to be able to position themselves professionally and respect the client's beliefs, without interventions capable of causing problems in service. Therefore, they need to be professional in carrying out their service to clients, by strengthens them to deal with the problem in accordance with their belief (Dhaliwal & Hirst, 2016).

e. Social

In terms of social factors, workers need to be able to view clients performance in the community, in accordance with their cultural values, physical environment, everyday lifestyle, and religious values (Pinsof et al., 2017). Three important things need to be understood by social workers, as follows:

1) Location: where the client lives in the society such as city, or village
2) Identification: understanding the client's beliefs, religion, culture, race, etc.
3) Affiliation: understanding where the client becomes a part of the community, group membership, subculture, professional, politics/ ideological groups, etc.

DOI: 10.5373/JARDCS/V12I5/20201700
ISSN 1943-023X

Received: 07 Mar 2020/Accepted: 10 Apr 2020

In addition, there are a total of six sub-factors of the above-listed social factors as follows:

1. **Local community:** social workers are required to understand the client's physical environment, such as their living conditions and encourage them to adapt to a particular community (Cahill et al., 2010). Therefore, it is paramount to understand peoples' daily way of life, how they behave, treat others, are accepted by society and also the structure of power that grows within their community (Hartnett et al., 2016).
2. **Cultural context:** in this context, social workers are required to understand and interpret the client's culture, how it develops in the community, and has ability to change the daily lives of people in the environment. They also need to be able to explore the history that develops in society to determine its relationship to discrimination or assault that have occurred in the client's environment (Ciara et al., 2015).
3. **Social class:** Workers do not need to neglect the development of social class that grows from the family or the value of belief in society. Communities tend to experience obstacles when the social class are ignored during its development, especially in handling the Virus (Henggeler, 2019).
4. **Social Relations:** Workers need to be able to properly understand the factors of social relations because humans do not have the ability to live alone without friends. Therefore, they need to encourage well established social relations to encourage the creation of togetherness in handling the Virus (Blankestein et al., 2019).
5. **The history of law and involvement**: In this sub-factor, social workers need to be able to understand the history of law and community involvement in instilling legal norms that can be created and respected. Therefore, they are expected to provide information to the public on the involvement of family members in maintaining the continuity of legal norms to be mutually respected since time immemorial. This is evident from the fact that they need to be free from colonialism. Establishing the same view to uphold the law tends to accelerate the solution needed to solve the problem (Lake & Stanford, 2011).
6. **Community resources:** Social workers need to be able to determine the ability of community organisation to support and quickly resolve the process. Therefore, they are expected to be involved in finding support programs to help clients facing Corona virus pandemic (Tramonti et al., 2012). For example, clients tend to determine programs capable of providing support for economic needs due to the implementation of social programs. They utilise other efforts, to ascertain the social and economic needs of clients without isolating themselves. Hoagwood et al. (2018) stated that social workers need to encourage the surrounding community to empathise and care for the client's problems and contribute to strengthening them.

f. Macro Factors

In the macro factor, social workers need to be able to provide relevant information needed by clients, from the local to the higher levels. They need to be able to provide macro information, capable of influencing clients to recover quickly. Therefore, clients need to determine their national and international problems, along with the policies broadly needed by the state in handling these issues (Doremus-Fitzwater et al., 2010). Social workers also need to provide a holistic view in interpreting policies carried out by the government to enable the society to fight the Corona Virus. (Magnavita et al., 2010)

For example, they need to be able to explain how the Advanced Multi-Systemic approach is used during regional emergency policies. This enables social workers to control the area over the development of the Corona Virus, therefore all communities are expected not to travel outside the region (Lebow & Diamond, 2018). In addition, the government also has the ability to minimise the spread of the virus to other regions. However, it is the responsibility of the government, and society to understand the benefits of the policy. Greenberg & Lebow (2016) stated that staying at home helps to break the chain of virus transmission in the environment. Furthermore, the policy encourages the community to perform a healthy lifestyle by always washing their hands at all times, and this policy is considered to be able to reduce the risk of transmitting the virus. (Decker et al., 2018)

In the macro factor, attention needs to be paid to the various sentiments developed in society, such as negative views towards people under surveillance (Allan & Poulsen, 2017). Those in the macro factor need to understand this condition and assist clients in dealing with unfavorable conditions over sentiment that develops in society (Aysegul Tonyali, 2019).

V. Conclusion

In conclusion, the practice of social workers in handling Corona Virus using an Advanced Multi-Systemic approach requires a comprehensive unit to analyse the various factors of client's. Therefore, the use of multi-

DOI: 10.5373/JARDCS/V12I5/20201700
ISSN 1943-023X

Received: 07 Mar 2020/Accepted: 10 Apr 2020

systemic assessment provides a comprehensive recovery plan for those categorised as people under surveillance, as well as those that test positive to Corona Virus. Handling Corona Virus requires the services of professional medical, and social workers. Therefore, it is expected that by paying attention to the 6 factors of the Advanced Multi-Systemic approach, the Corona Virus will be quickly dealt with, in Indonesia and all over the World. The Advanced Multi-Systemic Approach includes knowledge, skills and values from various sources, which is utilised in assisting people under surveillance and those that tested positive.

References

[1] Allan, R. [Ed], & Poulsen, S. S. [Ed]. (2017). Creating cultural safety in couple and family therapy: Supervision and training. *Creating Cultural Safety in Couple and Family Therapy: Supervision and Training*.

[2] Almond, K., & Allan, R. (2019). Incorporating MDMA as an Adjunct in Emotionally Focused Couples Therapy With Clients Impacted by Trauma or PTSD. *Family Journal*.

[3] Aysegul Tonyali, Z. G. and O. S. U. (2019). Çocuk ve Ergen Davranım Bozukluğu Tedavisinde Psikososyal Müdahaleler. *Psikiyatride Guncel Yaklasimlar-Current Approaches in Psychiatry*, *11*(3), 284–303.

[4] Bell, E., & Willmott, H. (2016). Qualitative Research in Business and Management. In *Qualitative Research in Business and Management*.

[5] Blankestein, A., Rijken, R., Eeren, H. V., Lange, A., Scholte, R., Moonen, X., De Vuyst, K., Leunissen, J., & Didden, R. (2019). Evaluating the effects of multi-systemic therapy for adolescents with intellectual disabilities and antisocial or delinquent behaviour and their parents. *Journal of Applied Research in Intellectual Disabilities*, *32*(3), 575–590.

[6] Butler, C., Sheils, E., Lask, J., Joscelyne, T., Pote, H., & Crossley, J. (2020). Measuring competence in systemic practice: development of the 'Systemic Family Practice – Systemic Competency Scale' (SPS). *Journal of Family Therapy*, *42*(1), 79–99.

[7] Cahill, P., O'Reilly, K., Carr, A., Dooley, B., & Stratton, P. (2010). Validation of a 28-item version of the Systemic Clinical Outcome and Routine Evaluation in an Irish context: the SCORE-28. *Journal of Family Therapy*, *32*(3), 210–231.

[8] Carr, A. (2019). Family therapy and systemic interventions for child-focused problems: the current evidence base. In *Journal of Family Therapy*.

[9] Ciara, C., Alan, C., Mary, F., Jane, F., Fidelma, B., Tom, C., & Brendan, R. (2015). Positive systemic practice: A controlled trial of family therapy for adolescent emotional and behavioural problems in Ireland. *Journal of Family Therapy*.

[10] Cottrell, D. J., Wright-Hughes, A., Collinson, M., Boston, P., Eisler, I., Fortune, S., Graham, E. H., Green, J., House, A. O., Kerfoot, M., Owens, D. W., Saloniki, E. C., Simic, M., Lambert, F., Rothwell, J., Tubeuf, S., & Farrin, A. J. (2018). Effectiveness of systemic family therapy versus treatment as usual for young people after self-harm: a pragmatic, phase 3, multicentre, randomised controlled trial. *The Lancet Psychiatry*.

[11] Decker, M. R., Wilcox, H. C., Holliday, C. N., & Webster, D. W. (2018). An Integrated Public Health Approach to Interpersonal Violence and Suicide Prevention and Response. *Public Health Reports*, *133*(1_suppl), 65S-79S.

[12] Dhaliwal, K., & Hirst, S. (2016). Caring in correctional nursing: A systematic search and narrative synthesis. *Journal of Forensic Nursing*, *12*(1), 5–12.

[13] Dierker, L., Ward, N., Alexander, J., Donate, E., Wilkinson, I. A., Reznitskaya, A., Bourdage, K., Oyler, J., Glina, M., Drewry, R., Kim, M. M.-Y., Nelson, K., Bråten, I., Strømsø, H. I., Andreassen, R., Chinn, C. A., Rinehart, R. W., Li, H. H. H. K., Zhang, J., … Watrous, B. E. (2014). Development Revisited: Writing and Knowing in Transition. *Reading and Writing: An Interdisciplinary Journal*.

[14] Doremus-Fitzwater, T. L., Varlinskaya, E. I., & Spear, L. P. (2010). Motivational systems in adolescence: Possible implications for age differences in substance abuse and other risk-taking behaviors. In *Brain and Cognition*.

[15] Equatora, M. A., & Rahayu, M. (2019). Media in Community Guidance Services. *Proceedings of the 2nd International Conference on Educational Sciences (ICES 2018)*. https://doi.org/10.2991/ices-18.2019.52

[16] Gatotoh, A. M., Omulema, B. E. E., & Nassiuma, D. (2011). Correctional Attitudes:An Impetus for a Paradigm Shift in Inmate Rehabilitation. *International Journal of Humanities and Social Science*, *1*(4), 263–270.

DOI: 10.5373/JARDCS/V12I5/20201700
ISSN 1943-023X

Received: 07 Mar 2020/Accepted: 10 Apr 2020

[17] Gellatly, R., Brookman-Frazee, L., Barnett, M., Gonzalez, J. C., Kim, J. J., & Lau, A. S. (2019). Therapist Reports of EBP Client Engagement Challenges in Sessions with Diverse Youth and Families in Community Mental Health Settings. *Child & Youth Care Forum*, *48*(1), 55–75.

[18] Greenberg, L. R., & Lebow, J. L. (2016). Putting it all together: Effective intervention planning for children and families. In *Parenting plan evaluations: Applied research for the family court., 2nd ed.*

[19] Hartnett, D., Carr, A., & Sexton, T. (2016). The Effectiveness of Functional Family Therapy in Reducing Adolescent Mental Health Risk and Family Adjustment Difficulties in an Irish Context. *Family Process*.

[20] Henggeler, S. W. (2019). Multi-systemic Family Therapy. In *Encyclopedia of Couple and Family Therapy* (pp. 1981–1989). Springer International Publishing.

[21] Hoagwood, K. E., Atkins, M., Kelleher, K., Peth-Pierce, R., Olin, S., Burns, B., Landsverk, J., & Horwitz, S. M. (2018). Trends in Children's Mental Health Services Research Funding by the National Institute of Mental Health From 2005 to 2015: A 42% Reduction. *Journal of the American Academy of Child & Adolescent Psychiatry*, *57*(1), 10–13.

[22] Hussain, A., Thirkell, T., & Taher, A. (2011). Enhancing the effectiveness of an assertive outreach team: Case study. *Psychiatrist*, *35*(7), 266–268.

[23] Lake, S. L., & Stanford, M. S. (2011). Comparison of Impulsive and Premeditated Female Perpetrators of Intimate Partner Violence. *Partner Abuse*, *2*(3), 284–299.

[24] Lebow, J. L. (2018). Editorial: Research on Rarely Researched Family Therapies. In *Family Process*.

[25] Lebow, J. L., & Diamond, R. M. (2018). Brief history of couple and family therapy. In *APA handbook of contemporary family psychology: Family therapy and training (Vol. 3).*

[26] Lebow, J. L., & Jenkins, P. H. (2018). Research for the Psychotherapist. In *Research for the Psychotherapist*.

[27] Lebow, J. L., & Uliaszek, A. A. (2010). Couples and family therapy for personality disorders. In *Evidence-based treatment of personality dysfunction: Principles, methods, and processes.*

[28] London, S., Maudsley, N., Standard, M. N.-N., 2014, U., Gunn, A. C. A. A. C. (Alexandra C., Hruska, C. A. C., Gunn, A. C. A. A. C. (Alexandra C., Hruska, C. A. C., Gunn, A. C. A. A. C. (Alexandra C., Hruska, C. A. C., D'Arbon, T., Duignan, P., Disorders, D. L. G.-A. of eating, 2005, U., Higgins, J., Mainstone, F., Work, J. P.-A. N. Z. S., 2015, U., Muir, R. C., … Malden, P. E. (2016). Managing childhood obesity: Learnings from the implementation of two statewide programmes. *Wiley Online Library*.

[29] MacDonald, R., Parsons, A., & Venters, H. D. (2013). The triple aims of correctional health: Patient safety, population health, and human rights. *Journal of Health Care for the Poor and Underserved*, *24*(3), 1226–1234.

[30] Magnavita, J. J., Levy, K. N., Critchfield, K. L., & Lebow, J. L. (2010). Ethical considerations in treatment of personality dysfunction: Using evidence, principles, and clinical judgment. *Professional Psychology: Research and Practice*, *41*(1), 64–74.

[31] Maughan, B., & Gardner, F. (2018). Multi-systemic therapy not superior to management as usual for adolescent antisocial behaviour in an English trial. *The Lancet Psychiatry*, *5*(2), 94–95.

[32] Ohrt, J. D. D. and J. (2018). Integration on Expressive Techniques in Multi-systemic Therapy With At-Risk adolescen: A Retrospective Case Analysis. *The Family Journal*.

[33] Pinsof, W. M., Breunlin, D. C., Russell, W. P., Lebow, J. L., Rampage, C., Chambers, A. L., Pinsof, W. M., Breunlin, D. C., Russell, W. P., Lebow, J. L., Rampage, C., & Chambers, A. L. (2017a). The essence of integrative systemic therapy: Beginning therapy. In *Integrative systemic therapy: Metaframeworks for problem solving with individuals, couples, and families.*

[34] Pinsof, W. M., Breunlin, D. C., Russell, W. P., Lebow, J. L., Rampage, C., Chambers, A. L., Pinsof, W. M., Breunlin, D. C., Russell, W. P., Lebow, J. L., Rampage, C., & Chambers, A. L. (2017b). The integrative systemic therapy approach to working with individuals. In *Integrative systemic therapy: Metaframeworks for problem solving with individuals, couples, and families.*

[35] Sexton, T. L., Lebow, J., & Liddle, H. A. (2019). Multidimensional Family Therapy. In *Handbook of family therapy*.

[36] Shakya, H. B., Christakis, N. A., & Fowler, J. H. (2012). Parental influence on substance use in adolescent social networks. *Archives of Pediatrics and Adolescent Medicine*.

[37] Sharma, S., Arain, Mathur, Rais, Nel, Sandhu, Haque, & Johal. (2013). Maturation of the adolescent brain. *Neuropsychiatric Disease and Treatment*, 449.

[38] Stewart, D. G., Chu, A., & Rappaport, N. (2019). Role of Families, Schools, and Communities in Treatment and Recovery: From First Responders to Sustained Support. In *Treating Adolescent Substance Use* (pp. 115–125). Springer International Publishing.

DOI: 10.5373/JARDCS/V12I5/20201700
ISSN 1943-023X

Received: 07 Mar 2020/Accepted: 10 Apr 2020

[39] Tramonti, F., Bonfiglio, L., Bongioanni, P., Belviso, C., Fanciullacci, C., Rossi, B., Chisari, C., & Carboncini, M. C. (2019). Caregiver burden and family functioning in different neurological diseases. *Psychology, Health and Medicine*.

[40] Tramonti, F., Bongioanni, P., Di Bernardo, C., Davitti, S., & Rossi, B. (2012). Quality of life of patients with amyotrophic lateral sclerosis. *Psychology, Health and Medicine*.

[41] Tramonti, F., Giorgi, F., & Fanali, A. (2019). General system theory as a framework for biopsychosocial research and practice in mental health. *Systems Research and Behavioral Science*.

[42] Vijverberg, R., Ferdinand, R., Beekman, A., & van Meijel, B. (2017). The effect of youth assertive community treatment: A systematic PRISMA review. *BMC Psychiatry*, *17*(1).

[43] Visscher, L., Evenboer, K. E., Scholte, R. H. J., van Yperen, T. A., Knot-Dickscheit, J., Jansen, D. E. M. C., & Reijneveld, S. A. (2020). Elucidating care for families with multiple problems in routine practice: Self-registered practice and program elements of practitioners. *Children and Youth Services Review*, *111*, 104856.

[44] Weisz, J. R., Kuppens, S., Ng, M. Y., Vaughn-Coaxum, R. A., Ugueto, A. M., Eckshtain, D., & Corteselli, K. A. (2019). Are Psychotherapies for Young People Growing Stronger? Tracking Trends Over Time for Youth Anxiety, Depression, Attention-Deficit/Hyperactivity Disorder, and Conduct Problems. *Perspectives on Psychological Science*, *14*(2), 216–237.

DOI: 10.5373/JARDCS/V12I5/20201700
ISSN 1943-023X

Received: 07 Mar 2020/Accepted: 10 Apr 2020

View publication stats