



Science, Movement and Health, Vol. XXIV, ISSUE 2 Supplement, 2024  
September 2024, 24 (2): 300-305  
Original article

## ANALYSIS OF EFFECTS AND REQUESTS ON THE TRAINER WORKING WITH A CLIENT WITH SPECIAL NEEDS

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### Abstract

*Aim.* The way the trainer expresses himself in the relationship with the client greatly influences the evolution of the client's condition and the effectiveness of the treatment he follows. Recent research has examined how individuals' beliefs and ideas about illness have influenced health/illness behavior. An important feature of this model is its emphasis on emotional responses to illness. Based on previous communication research, this model outlines two parallel, partially interacting processing systems for the regulation of danger and emotion (Leventhal, Cameron, Leventhal, Ozakinci, 2005).

*Methods.* The study was conducted with the participation of 52 clients of Ovidius University of Constanta, to whom we addressed a questionnaire that made available to the participants of this study gradual response options. Thus, to be able to find out what is their perception of their own opinions and perceptions about complex activity with clients diagnosed with various diseases that include them in a special category, but which are included in the classes that form the mass education.

*Results.* The analysis of centralized values emphasizes the importance of providing adequate benefits to maintain high mental engagement and prevent disengagement, especially in the case of working with people with special needs, an activity that can be challenging and stressful in the long term. The results indicate that 80.69% of respondents (gathering 48% probably and 32.69% very likely) are open to expressing their emotions within the group of friends, suggesting that friends play an important role in their emotional life and in the process of managing stress. These respondents perceive friendship as a supportive environment and feel comfortable to share their feelings, especially in the face of professional challenges.

*Conclusions.* A partial conclusion based on the results obtained shows that a significant percentage (30.8%) considers that the positive reinterpretation of challenging situations depends on the benefits gained. This suggests that for many respondents, positive perception is conditioned by tangible or intangible rewards, indicating strong extrinsic motivation. The results show that a significant proportion of respondents are willing to suppress their leisure activities in the context of working with clients or pupils with medical diagnoses, especially if there are strong reasons, whether financial or moral. 32.69% of respondents are likely to make the sacrifice, which suggests that this group is very committed or pressured to prioritize work over personal time.

*Keywords:* Understanding, awareness, self-control.

### Introduction

You are in contact with a client or student with a medical diagnosis (example: Diabetes, ADHD, Down syndrome, Mental retardation, Motor disorder, etc). It is important to recognize the distinction between impairment and disablement. Specifically, the social model of disablement focuses on environment. The medical model of disability focuses on an individual who needs fixing-either by therapy, medicine, surgery or special treatment, (Peters, 2004) Many disabilities with a clear medical basis are recognized by the child's physician or parents soon after birth or during the preschool years. In contrast, the majority of students with disabilities are initially referred for evaluation by their classroom teacher or parents, because of severe and chronic achievement or behavioral problems (Carroll & Florin, 2003). What is important to the following features in the work with the customer, the student? In Romania, about 63% of adults are not physically active enough, according to recent studies. The inclusion of customers with special needs in all schools in Romania provided superior results compared to the classical approach in which all customers with special needs were included in special schools. While students with disabilities have historically been educated in separate special schools, including mainstream schools provide a cost-effective way forward. Inclusive education is better able to reach the majority and avoids isolating students with disabilities from their families and communities (Ogot, McKenzie & Dube, 2008). The involvement of the family in regular communication has a crucial role, there must be continuous communication with parents or carers to ensure that all the needs of the student are properly addressed. As noted by Ruitter, Abraham, and Kok (2001), fear arousal is less important in motivating precautionary action than perceptions of action effectiveness and self-efficacy. Moreover, perceived personal relevance may be critical to the emotional and cognitive impact of threat

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information. Mental health problems such as depression and anxiety are becoming more common. In Europe, 1 out of 6 people have a mental illness at some point.

In Romania, access to mental health services is limited, and stigma associated with mental health problems remains an important barrier. They use the general education curriculum and modify it to meet each child's individual needs. Most special education instruction teaches students at the elementary, middle, secondary and high levels (Hustler & Levi, 2008). Emotional and psychological support provided continuously and professionally by specialists contributes to the creation of a supportive environment. Students with disabilities are less likely than students without disabilities to start school and have lower rates of staying and being promoted in school. These students should have equal access to quality education, because this is real way to human capital formation and their participation in social and economic life. The manner in which the trainer expresses himself in the relationship with the client greatly influences the evolution of the client's condition and the effectiveness of the treatment he undergoes.

Recent research has examined how individuals' beliefs and ideas about illness have influenced health/illness behavior. The self-regulatory model proposes that individuals' illness representations, sometimes termed personal models, predict the ways in which people react to and cope with perceived health risks (Leventhal, Zimmerman, Guttman, 1984). An important feature of this model is its emphasis on emotional responses to illness. Based on previous communication research, this model outlines two parallel, partially interacting processing systems for the regulation of danger and emotion (Leventhal, Cameron, Leventhal, Ozakinci, 2005). The trainer must know and make the client aware of the importance of physical activity, in the case of such a medical condition. They need to inform patients of potential health problems associated with diabetes (e.g. heart disease, blindness, nephropathy and neuropathy) while at the same time giving information on how health risks may be reduced by the maintenance of near-normal blood glucose levels and empowering patients to develop the self-confidence to manage their condition (Diabetes Control and Complications Trial Research Group 1993). Influences on satisfaction at diagnosis of diabetes include the perceived difficulty in understanding information, whether health professionals were helpful, and whether the patients had the opportunity to ask questions (Povey et al. 2000).

Disabled people believe that our problems as adults will continue to be exacerbated by the non-disabled community, unless the education system accepts its responsibility towards us. We believe it to be our right to be part of the best, most flexible mainstream education system possible in order to prepare us for a useful active adult life within the mainstream. We also believe it is a right for all non-disabled children to grow up informed, unafraid and close to disabled people and to be able to maintain those relationships without enforced segregation at any point, (Rieser and Mason, 1990).

## Methods

The study was conducted with the participation of 52 clients of the Ovidius University of Constanta, to whom we addressed a questionnaire that made available to the participants of this study various gradual response. Thus, to be able to find out what is their perception of their own opinions and perceptions about complex activity with clients diagnosed with various diseases that include them in a special category, but which are included in the classes that form the mass education. We aimed to identify the perceptions and threats present in the teaching process. The subjects participating in this study were clients of the university, following the bachelor's cycle, at the time of inclusion in the working group for this study they had completed their studies. Subjects were trained in completing the questionnaire. The subject values were analyzed mathematically. The answers generated a number of questions, but also confirmations.

## Results

Our intention was to understand what are the mechanisms and directions in which we can react to avoid undesirable aspects encountered in the professional activity of the trainers in education. The question was: What are the effects on the one who works with a client or a student having a medical diagnosis (example: Diabetes, ADHD, Down syndrome, Mental retardation, Motor disorder, etc), The results for the question of the effects on the one who works with a client or student with a medical diagnosis in terms of acceptance and continued activity are the following: Depends on the benefits gained - 94.2%: An overwhelming majority, 94.2%, considers that the acceptance and continuation of the activity depends on the benefits gained. This suggests that for most respondents, the main motivation to continue working with people with medical diagnoses is largely determined by the benefits obtained, which may include financial, professional or personal development benefits. It underlines the importance of recognition and reward for work done in this field. Unlikely - 0%: No respondent considered that it would be unlikely to continue work, which suggests that those already working in this field are not faced with a major lack of motivation that would make them leave this type of activity. Probably - 3.8%: 3.8% of respondents believe that it would be likely to continue work. These respondents are inclined to remain in the field, but are not as firm in their decision as most. Their motivation could be influenced by contextual factors such as work environment, professional support or general satisfaction. Very likely - 1.92%: 1.92% of respondents believe that it would be very likely to continue work, which indicates a high level of commitment and personal motivation in relation to clients or students with medical diagnoses. These respondents are most likely deeply committed to their profession, either for vocational reasons or because of their personal values. The results for the question of increasing the number of hours with the group in the context of the effects on the one who works with a client or pupil having a medical diagnosis are as follows: Depends on the benefits gained - 88.5%: An overwhelming majority, 88.5%, considers that the increase

in the number of hours with the group depends on the benefits gained. This suggests that most respondents are motivated to increase their time with customers or students only if they perceive that they benefit directly or indirectly from this increase. Benefits may include financial rewards, professional satisfaction, personal development, or other forms of recognition and support. Unlikely - 5.8%: 5.8% of respondents consider that increasing the number of hours with the group is unlikely. These respondents might be restricted by factors such as the already busy schedule, limited resources or lack of motivation to invest more time in the work with clients or students. Probably - 3.8%: 3.8% of respondents estimate that the number of hours with the group is likely to increase. This category indicates a moderate openness to expand engagement, possibly influenced by favorable contextual factors or a positive perception of potential benefits. Very likely - 1.9%: Only 1.9% of respondents believe that increasing the number of hours with the group is very likely. These respondents are most likely deeply committed to their profession and are willing to expand their engagement even in the absence of significant additional benefits, possibly motivated by passion, vocation or strong personal values. The presence of a very small percentage in the likely and very likely categories (respectively 3.8% and 1.9%) indicates that in the absence of concrete benefits, most professionals are reluctant to increase their time commitment. It underlines the need for organizations or institutions to provide appropriate incentives to encourage staff to take on additional responsibilities. In addition, only 5.8% considered it unlikely to increase the number of hours, suggesting that barriers such as busy schedules or limited resources are not major disincentives for most respondents.

Overall, the focus on the benefits gained as a main motivator points to a clear direction for the strategies of retention and motivation of staff in the field of work with people with special needs. The results for the question of the effects on the person working with a client or pupil with a medical diagnosis in terms of alcohol/drug use are as follows: Depends on the benefits gained - 0%: No respondent considered that the consumption of alcohol or drugs would depend on the benefits gained. This shows that respondents do not directly associate the consumption of substances with the financial reward or the benefits derived from work with people with special needs. This is positive news, indicating that such behavior is not conditional on professional rewards. Unlikely - 90.4%: An overwhelming majority, 90.4%, consider it unlikely that the activity with clients or pupils with medical diagnoses will lead to alcohol or drug consumption. This suggests that most respondents are not adversely affected in this respect by the stress or challenges that come with their work. It also reflects a high level of self-control and mental health. Probably - 7.7%: A small percentage of 7.7% believe that they probably could resort to alcohol or drug use. These respondents might be exposed to higher stress factors or might consider that this type of work affects their mental and emotional health in such a way as to make them vulnerable to such behavior. Very likely - 1.92%: A small percentage, 1.92%, consider it very likely that they could end up consuming alcohol or drugs. These respondents may be most exposed to severe stress or the lack of a suitable support system in their work, which may make them vulnerable to such harmful behavior. This result suggests that while the vast majority of professionals are not prone to such behaviors, it is important to have support and prevention programs for professional exhaustion (burnout) to help the small vulnerable part of staff facing greater stress. The results for the question of the effects on the person working with a client or student with a medical diagnosis, in terms of literature study and planning, are as follows: Depends on the benefits gained - 46.15%: About half of the respondents (46.15%) consider that the study of literature and planning depend on the benefits gained. This indicates that a significant part of respondents are motivated to invest time and effort in documentation and preparation if they perceive a direct benefit from this activity, whether it be financial rewards, professional recognition or other personal satisfaction. Unlikely - 28.5%: 28.5% of respondents consider it unlikely to engage in study and planning actively. These respondents could perceive the supplementary study as a burden that does not bring sufficient value or a disproportionate effort in relation to the results or rewards received, indicating a need for more resources or support in this regard. Probably - 15.4%: 15.4% of respondents believe it is likely to get involved in the study and planning. They might be prone to making this effort even without a very clear immediate benefit, but nevertheless recognize the importance of good documentation in order to be effective in working with people with special needs. Very likely - 9.61%: A smaller percentage, 9.61%, very likely will invest time and energy in studying literature and planning. These respondents are most motivated and committed, showing great openness to improve their skills and knowledge, regardless of direct rewards. On the other hand, 28.5% of respondents consider that it is unlikely to make additional efforts for study and planning, which may indicate a lack of time, resources or even the perception that the benefits of this activity are not significant.

There is, however, a smaller group (15.4% probable and 9.61% very probable) that is willing to invest time in study and planning even without immediate benefits, suggesting a high professional commitment and a desire for continuous improvement. This can reflect a strong vocation and the desire to be as well prepared in the work with clients or students with medical diagnoses. The results for the question of mental disengagement in the context of working with a client or pupil with a medical diagnosis are as follows: Depends on the benefits gained - 42.3%: Nearly half of the respondents (42.3%) consider that mental disengagement depends on the benefits gained. This suggests that, for a significant part of respondents, their level of mental engagement in activity is influenced by perceived rewards. If the benefits are sufficient (financial, professional or emotional), they are less likely to disengage mentally. On the other hand, if the benefits are not satisfactory, the risk of mental disengagement increases. Unlikely - 36.5%: 36.5% of respondents considered unlikely to experience mental disengagement. This group indicates good mental resilience and constant involvement in the work, even in situations where benefits are not obvious or are not perceived as sufficient. These respondents could have a strong intrinsic motivation or vocational commitment that keeps them involved. Probably - 17.3%: 17.3% of respondents



consider likely to experience mental disengagement. These respondents may be more vulnerable to mental exhaustion or stress, and in the absence of perceived benefits, there is a significant likelihood that they will become less mentally involved in the work. This indicates a need for additional support, either through stress management resources or through adequate rewards. Very likely - 3.8%: A smaller 3.8% considers very likely to experience mental disengagement. These respondents are most exposed to the risk of burnout or mental exhaustion, suggesting that, for them, lack of rewards or constant stress can negatively affect them in a significant way. However, 36.5% of respondents say they are unlikely to experience mental disengagement, suggesting good resilience and ability to remain engaged regardless of external rewards. This group might have a stronger motivation, perhaps intrinsic, that keeps them dedicated to their work. However, 17.3% of respondents probably consider themselves mentally disengaged, and a small percentage (3.8%) is very likely to do so. These respondents may be more vulnerable to stress or exhaustion and may need more support, either through psychological resources or through more tangible rewards, to prevent a decline in engagement. These data underline the importance of providing adequate benefits to maintain high mental engagement and prevent disengagement, especially in the case of working with people with special needs, which can be challenging and stressful in the long term. The results for the question of positive reinterpretation in the context of working with a client or student with a medical diagnosis show the following: Depends on the benefits gained - 30.8%: Nearly a third of respondents (30.8%) consider that positive reinterpretation depends on the benefits gained. This suggests that a significant proportion of respondents adjust their perception of difficult situations, but only according to the rewards or benefits they perceive. If they receive adequate benefits (financial, professional recognition, personal satisfaction), they are more likely to see the positive side of the challenges they face in their work. Unlikely - 36.5%: The highest percentage of respondents (36.5%) consider unlikely to engage in positive reinterpretation. These individuals may have difficulties in finding a positive outlook on the challenges or obstacles they face in working with people with special needs. This may indicate a greater need for emotional support, resources for stress management or a more favorable working climate that facilitates a more optimistic approach. Probably - 17.3%: 17.3% of the respondents consider likely to adopt a positive reinterpretation of difficult situations. These respondents have a greater openness to managing challenges with a positive attitude, without too much dependence on benefits or rewards. However, even in their case, there are factors that may influence how they see these situations, suggesting that the positive perception is not constant. Very likely - 15.4%: 15.4% of respondents considered very likely to adopt a positive reinterpretation. These respondents show an optimistic attitude and an ability to see opportunities in difficult situations, independently of immediate rewards. They are most likely professionals who have developed healthy adaptive mechanisms and can better cope with stress and challenges. On the other hand, an even higher percentage (36.5%) consider it unlikely to engage in positive reinterpretation, which may indicate a difficulty in managing professional challenges with a positive attitude. This may suggest a higher level of stress or a lack of effective coping mechanisms. However, 17.3% believe that they are likely to address the challenges with a positive attitude, and 15.4% are likely to take a positive view, even without immediate benefits. These respondents show greater emotional resilience and a predisposition towards optimism in the face of challenges. Implications: These results suggest that in order to encourage a more positive and resilient approach to work, emotional support measures, personal development programs and mechanisms for professional recognition may be needed.

A focus on cultivating coping and positive reinterpretation skills could improve professional engagement and satisfaction for a larger number of respondents. The results for the question of the suppression of leisure activities in the context of working with a client or student with a medical diagnosis are as follows: Depends on the benefits gained - 17.3%: Only 17.3% of respondents consider that the suppression of leisure activities depends on the benefits gained. This suggests that a relatively small proportion of respondents would be willing to give up leisure activities depending on the rewards or benefits they receive from their professional activity. This could mean that for these respondents the additional rewards should be significant in order to make sacrifices in terms of personal time. Unlikely - 19.2%: Approximately 19.2% of respondents considered unlikely to suppress their leisure activities. This indicates that these respondents greatly value the work-life balance, and are not willing to give up leisure or recreational activities, even if there would be professional benefits in return. Probably - 30.8%: 30.8% of the respondents consider likely to suppress leisure activities. These respondents are more flexible in terms of work-life balance and might be willing to give up leisure time to fulfill their professional responsibilities, especially if they feel that their work is important or that they are getting adequate rewards. This group seems to moderately prioritize professional requirements over personal activities. Very likely - 32.69%: The highest percentage, 32.69%, considers very likely to suppress their leisure activities. These respondents are most prone to prioritizing work, and are willing to make significant sacrifices in terms of their free time in order to fulfill their professional duties. This trend could indicate a high level of professional engagement or external pressures that lead them to spend more time working. On the other hand, 19.2% of respondents are unlikely to give up leisure activities, indicating a higher value given to the balance between personal and professional life. 30.8% of respondents are likely to make the sacrifice under certain conditions, suggesting moderate flexibility. Interestingly, only 17.3% of respondents believe that suppressing leisure activities depends on the benefits gained, which suggests that most of those who are willing to make this sacrifice do so independently of tangible rewards. This may reflect a strong intrinsic motivation or perception of professional duty. Implications: These results underline the importance of work-life balance and the need to provide support to prevent exhaustion (burnout), especially for those who are willing to make significant sacrifices to their careers. Support programs for stress management and the promotion of a work-life balance could be beneficial to

reduce the risk of job exhaustion. The results for the question of seeking emotional support in the context of working with a client or student with a medical diagnosis show the following: Depends on the benefits gained - 1.92%: Only 1.92% of respondents consider that the search for emotional support depends on the benefits gained. This very small percentage indicates that most respondents are not influenced by benefits when they feel the need for emotional support. They perceive the pursuit of emotional help as a fundamental need, not as an action conditioned by rewards or material advantages. Unlikely - 15.4%: 15.4% of respondents considered unlikely to seek emotional support. These respondents can be more emotionally resilient or feel that they do not need external help to meet the challenges in their work. This group may prefer to manage stress and difficulties on their own or be more reluctant to apply for support. Probably - 42.3%: A significant percentage of 42.3% probably consider seeking emotional support. These respondents recognize the importance of emotional support in managing challenges related to working with people with special needs. It is a sign of openness to external aid when situations become difficult, and this group is most likely to seek assistance regularly when stress or emotional difficulties arise. Very likely - 40.4%: Almost as many respondents (40.4%) consider it very likely to seek emotional support. This group is most likely to ask for help when they feel they need it. They seem to be aware of the emotional impact of work and are prepared to access resources to protect their mental health and remain functional and balanced in their professional activity. Only 1.92% of respondents believe that emotional support depends on the benefits gained, suggesting that most see this need as independent of material or financial rewards. The need for emotional support is perceived as an inherent necessity in the face of emotional challenges, rather than as a choice based on external advantages. 15.4% of respondents are less willing to seek support, suggesting a tendency to handle challenges on their own or greater resistance to seeking help. However, this group is a minority. These results underline the importance of the availability and accessibility of emotional support for professionals working with people with special needs.

Organizing psychological support programs, access to counseling or support groups can be crucial to prevent burnout and to help employees maintain their emotional balance. The fact that such a large percentage is willing to seek emotional support indicates a clear need for resources in this regard. The results for the question of expressing emotions within the group of friends in the context of working with a client or pupil with a medical diagnosis are as follows: Depends on the benefits gained - 3.8%: Only 3.8% of respondents consider that the expression of emotions within the group of friends depends on the benefits gained. This very small percentage shows that most people don't associate this emotional need with tangible rewards. Expressing emotions is perceived as a natural act rather than being conditioned by external benefits. Unlikely - 15.4%: 15.4% of respondents consider it unlikely to express their emotions to their friends. These individuals may tend to manage their emotions privately or may prefer to avoid expressing them to others. This group may consider friendship as a space where emotional vulnerability is not always necessary or comfortable. Probably - 48%: The highest percentage of respondents, 48%, probably think to express their emotions within the group of friends. It suggests that nearly half of respondents feel moderately open to friends and would be willing to share their emotions when they experience difficult or stressful experiences. Expressing emotions in this case can be perceived as a healthy mechanism of stress management. Very likely - 32.69%: About a third of respondents (32.69%) are very likely to express their emotions within the group of friends. This group has great confidence in their social relationships and perceives friends as solid support for expressing their emotions. They are most likely to manage their stress and challenges by sharing their emotional experiences with their loved ones. 15.4% of respondents are more reluctant to express their emotions, preferring to manage these feelings on their own or avoiding emotional vulnerability in friendship relationships. Only 3.8% of respondents believe that expressing emotions depends on the benefits gained, suggesting that most consider this behavior as an intrinsic mechanism, and not as a conditioned one of advantages or rewards. These data underline the importance of the group of friends as an emotional resource for those working with clients or pupils with special needs. Friends can provide emotional support and help mitigate the effects of professional stress. Cultivating positive social relationships and encouraging the expression of emotions in informal contexts can be an effective strategy for the psychological well-being of these professionals. The search for social support - depends on the benefits gained - 1.92%, unlikely - 26.9%, probably - 40.4%, very likely - 30.8%.

### Conclusions

The results show that the benefits gained play an extremely important role in the motivation of those who work with clients or students with medical diagnoses. While the overwhelming majority (94.2%) base their decision to continue on these benefits, there is still a small part that probably remains motivated by personal or professional factors, as other response options suggest. These data underline the importance of a working environment that provides sufficient rewards and support to keep the staff involved in this type of activity. The results show that the benefits gained are a major determining factor in respondents' decision to increase the number of hours spent with the group. 88.5% of respondents base this decision on the perceived benefits, highlighting the importance of an effective reward and support system to motivate staff to expand their involvement in the work with clients or students with medical diagnoses. The overwhelming majority of respondents, 90.4%, consider it unlikely that their work with people with special needs will lead to alcohol or drug consumption, indicating good stress resistance and ability to manage professional challenges without resorting to such harmful behaviors. However, there are a small proportion of respondents (7.7%) who believe that alcohol or drug use is likely, and 1.92% think it very likely.



Results show that for a significant proportion of respondents (46.15%), literature study and planning are activities that depend on the benefits gained. This reflects the fact that some professionals need an external motivation to dedicate their time to these activities, whether it is financial rewards, promotion or other advantages. The results show that 42.3% of respondents believe that mental disengagement depends on the benefits gained. This indicates that, for a significant part of the staff, the level of mental involvement is conditioned by the rewards or advantages perceived in their work. Without these benefits, the risk of mental disengagement is greater. The results show that a significant percentage (30.8%) consider that the positive reinterpretation of challenging situations depends on the benefits gained. This suggests that for many respondents, positive perception is conditioned by tangible or intangible rewards, indicating strong extrinsic motivation. The results show that a significant proportion of respondents are willing to suppress their leisure activities in the context of working with clients or pupils with medical diagnoses, especially if there are strong reasons, whether financial or moral. 32.69% of respondents are likely to make the sacrifice, which suggests that this group is very committed or pressured to prioritize work over personal time. The results show that a large proportion of respondents (over 82%, gathering 42.3% probably and 40.4% very likely) are willing to seek emotional support in their work with people with special needs. This reflects an increased awareness of the importance of emotional support to manage stress and pressures in this activity. The results indicate that 80.69% of respondents (gathering 48% probably and 32.69% very likely) are open to expressing their emotions within the group of friends, suggesting that friends play an important role in their emotional life and in the process of managing stress. These respondents perceive friendship as a supportive environment and feel comfortable to share their feelings, especially in the face of professional challenges.

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