

Research Article

Capacity Building for the Social Workers and Outreach Workers of the Karnataka State Integrated Child Protection Society

Janardhana N^{1*}, Manjula B¹, Muralidhar D², Parthasarathy R², Sekar K² and Seshadri SP²

¹Department of Psychiatric Social Work, NIMHNS, India

²Department of Child and Adolescent Psychiatry, NIMHANS, India

*Corresponding author: Janardhana N, Department of Psychiatric Social Work, NIMHNS, Bangalore, India

Received: October 19, 2016; Accepted: April 26, 2017;

Published: May 10, 2017

Abstract

The Indian Government has brought all child welfare and development programme under the umbrella of Integrated Child Protection Scheme since 2010 with the amendment of JJ Act. The state of Karnataka appears to be a fore runner in implementing Integrated Child Protection Scheme by establishing the Karnataka State Integrated Child Protection Society (KSICPS) and recruiting approximately 560 personnel consisting of counsellors, social workers, child protection officers (institution and non institutions), community outreach workers, house parents and etc to work at the district head quarters. They are expected to initiate and provide psychosocial care for meeting the psychosocial needs of children in difficult circumstances. The KSICPS requested the Department of Psychiatric Social Work and Department of Child and Adolescent Psychiatry, National Institute of Mental Health and Neuroscience (NIMHANS), Bangalore to develop a curriculum designed to build and sharpen the skills of child protection personnel. After reviewing various programmes and course curricula, the authors proposed a curriculum for training, which was field tested and ultimately finalized to be circulated in the form of a capsule for other states to implement the similar programmes. Participatory methodology was used in each session so that the skills are enhanced. A Handbook containing reading material was provided for each session. The social workers reported that training was helpful, and felt confident that they would implement the skills learnt and sharpened towards the psychosocial care for children in their district headquarters.

Keywords: Capacity building; Child protection; Psycho social care; Community outreach programme

Introduction

India is home to almost 19% of the world's children. More than one third of the country's population, around 440 million, is below 18 years [1]. It is estimated that around 170 million - 40 % of India's children are vulnerable and living in difficult circumstances [2], needing care and protection. 'Child Protection' is about protecting children from and against any perceived or real danger to life, to freedom and to their rights, risk to their life, their personhood and childhood'. Protection is thus not only about reducing their vulnerability to any kind of harm and protecting them from the harmful situations, it is also about ensuring that no child falls out of the social security and safety net and fails to receive the necessary care, protection and support [3] as a matter of right. No longer are children considered as the future citizens of the country, in fact they are the current citizens, hence their rights and needs should be respected. In addition to providing a safe environment for children living in difficult circumstances, it is imperative that every child in general must remain protected and secure. Child protection is inherently linked to every other right that a child enjoys. Failure to ensure the rights of a child to protection has an adverse effect on all the other rights of the child [4]. The Government of India, while amending the Juvenile Justice Act (Care and Protection) of 2000 in the 2006 and 2010, 2015 has prepared mandates for the ministry ensuring care and

protection to children in difficult circumstances by introducing the Integrated Child Protection Scheme (ICPS).

Often children express their problems through their behaviours, which is perceived as problem behaviour, children express their feelings for their survival, protection, and general development. Rather than labelling child as 'problem child', there is a need for understand the 'child in the situation', behaviour need to be understood, help the child in experiencing the sense of safety and security. If through the process of providing care, a child is able to open up and share, the process becomes an effective way of addressing the psychosocial and emotional issues faced by children in difficult circumstances. Mediums of psychosocial care can be utilised as a tool for intervention and as a method of practice during the capacity building training programmes.

There is an urgent need for the involvement of helping professionals in service delivery respecting the rights of children and paying way for the children to experience dignified living. The young professionals coming out from the universities seeking their carrier in helping profession need to be mentored and build their capacities in filling the gap between theory and practice [5]. The ICPS programme* has opened up jobs for the young professionals to start their carrier helping children in difficult circumstances to find a secured and protected environment for experiencing their basic right of survival.

Table 1: Describe the socio demographic details of the Social Workers and outreach worker attending the counselling training programme.

Sl No	Particulars	Frequency	Percentage
1	Age of the social worker/ outreach worker		
	23- 30 years	74	82.2%
2	30 years and above	16	17.8%
	Sex of the social worker/outreach worker		
	Male	53	58.8%
3	Female	37	41.2%
	Educational qualification		
	Master degree in social work	38	42.2%
	Master degree in Psychology	12	13.4%
	Master degree in Sociology	13	14.5%
Master degree in History/Political science and other social sciences	17	18.8%	
4	Degree	10	11.1%
	Past experience of working with children		
	Present	82	91.2%
	Absent	8	8.8 %

Table 2: Describes the broad areas of training programme for the counsellors.

Day 1	Understanding psychosocial needs of children in difficult circumstances and initiating psychosocial mediums in understanding children
Day 2	Understanding legislations and initiating preventive and promotive mental health services
Day 3	Importance of group interventions and understanding ICPS in understanding and addressing the Bio-psychosocial needs of children in difficult circumstances

Materials and Methods

Government of Karnataka has been pioneering in implementing ICPS programme, the Department of Women and Child Development (DWCD) has appointed 560 field functionaries like protection officers- institutional and non-institutional, counsellors, social workers, outreach workers, house parents for implementing the ICPS programme. The Karnataka State Integrated Child Protection Society (KSICPS) in the recruitment process, understood the felt needs of social workers and outreach workers, appointed in the district headquarters, for enhancing the quality care for children in difficult circumstances so that they can implement uniform psychosocial care activities in the community for children in difficult circumstances.

Enhancement of capacities of all functionaries including, administrators and service providers, at all levels working under the ICPS is one of the objectives of the strategy plan of KSICPS. Karnataka State Integrated Child Protection Society had requested the Department of Psychiatric Social Work (PSW), and Department of Child and Adolescent Psychiatry (CAP) to develop a curriculum for training child protection functionaries. The curriculum main focus was to enhance the helping skills and initiate psychosocial care for children in their respective districts. The Department of PSW and CAP in collaboration with KSICPS of the DWCD Department, GoK, organized capacity building activities through 14 training programmes for the various child protection personnel. The present paper describes the process involved in developing the curriculum for training the social workers and outreach workers and the process involved in field testing the training programme and modifying it based on the feedback received from the trainees.

Process involved in developing curriculum

The aim of the present paper is to develop a curriculum focusing on building the capacities of personnel working with the child protection unit. The team comprised of four faculty members from the Department PSW, and one faculty member from the Department of CAP, and a Doctoral student from the Department of PSW having 3

decades of experience working with children. These faculty members have also been involved in training pre doctoral and doctoral students and have conducted several capacity building workshops.

The team felt that that the central task of the trainer is to support the trainees learning which Lynton and Pareek [6] describes it has "learning takes place within the individual as a result of a co-influence of diverse, intertwining and occasionally opposing influences ... the function of the trainer is to entice this mysterious process to develop within the participants....".

The team reviewed the curriculums of the training programmes conducted by the Department of Women and Child development, MSW specialization paper on family and child welfare (MSW Syllabus of University of Pune, Thiruvalluvar University, Dibrugarh University, University of Calcutta) and three international syllabus (Website: <http://www.unbc.ca/social-work>, school of social work, university of Michigan, Berkeley Social Welfare syllabus UC Berkeley School of Social Welfare) on the family and child welfare paper. The team also had discussions with the KSICPS state functionaries to understand the need for training the child protection personnel.

It was decided that the main aim would be to recognise already existing skills among the social workers and outreach workers, this curriculum would be used as a means to hone there already existing skills and upgrade knowledge. The training should be able to provide opportunities for learning and implementation regarding process and practice of providing community based psychosocial care while working with children in difficult circumstances. The team had four meetings to discuss the curriculum including the methodologies to be followed for each session. The draft curriculum was shared with the KSICPS team. Post this meeting a few suggestions were presented to the team designing the curriculum. These suggestions included areas related to legislations, functioning of ICPS, roles and responsibilities of child protection personnel. A consensus was reached and it was decided to field test the draft curriculum designed for training in capacity building for the counsellors, social workers/outreach

Table 3: Describes the details of the Topics covered with the methodology used and content of each session.

Training topics	Methodology	Description
Day One		
Status of children in India	Interactive lecture method	Statistics about status of children in India –rationale for child protection
Concept of child Development	Interactive lecture method, Group discussion	Process of normal child development, Areas of child development, theories of child development, understanding developmental needs of children
Psycho social needs and issues of children	Brain storming, Group Discussion	Understanding psycho social needs of children in difficult circumstances during developmental stages- Infancy, early childhood, childhood, adolescence. Difficulties in availing needs and process of providing needs
Day 2		
Orientation towards legislations for children in India- special focus on care and protection	Interactive lecture method, case discussion, Group activity.	Other legal aspects related to children like, UNCRC, POCSO, Child Marriage Act, Child Labor (Prohibition and Regulation) Act 1986, Legal aid services
Application of medium of Psycho social care in understanding children in difficult circumstances	Group activity, lecture method	Children in difficult circumstances – types, Understanding the concept of psycho social care, need for psycho social care, Use of different mediums to work with children- play, drawing, writing, painting, clay, family portrait, emotions pictures card, story cards etc
Preventive and promotive mental health activities with children in the institutions and non-institutions	Lecture method Individual activity Group Activity Brain storming Story session	Concept of preventive and promotive mental health activities – Introduction of concept of Life skills Need for Life skills activities for children and adolescents, Structure of Life skill education programme Experiential learning in Life skills education Methodologies used in imparting Life skill Education Application of Life skills education to work with children in difficult circumstances
Day 3		
Group interventions for children in difficult circumstances	Lecture method Group activity Demonstration of group sessions	Concept of group interventions, need for group interventions with children, principles of group interventions, skills for facilitator to carry out group interventions, methodologies for group interventions, structure of group session
Approaches to child protection	Lecture method Group discussion	Understanding concept of child protection, Child protection mechanism in India, protection of children within the institution and in community, working with different stakeholders in child protection, use of technology in the process of child protection,
Role of ICPS in protection of children	Group discussion, interactive lecture method	Guidelines from ICPS and institutions.
Stress management for the Staff	Brain storming and group discussion	Recognition of the stress and distress Stress management techniques

workers, child protection officers, probationary officers, house parents. Feedbacks from the participants were taken with regard to the content and the methodology adopted. Based on the feedback, areas of field observation and timing of the session were changed to improvise the curriculum.

The present paper captures the capacity building training programme aimed at building the skills of the social workers and outreach workers who were suppose to initiate community based mental health promotional and prevention activities and to develop Individual Care Plan for children in difficult circumstances. The 90 social workers and the outreach workers appointed and their profile been given in the below table. We also have analysed the feedback given by the participants while field testing the draft curriculum.

Results

Table 1

The above table indicates that nearly 82.2% of participants were aged below 30 years and 58.8% of the participants were males for the post of Social Workers. All the Social Workers had completed their post-graduation in social work, psychology, sociology or other social sciences it was only 11.1% of them had degree as their qualification. Most Social Workers 91.2% had past experience of working with children either as part of field work training in their post graduation or worked for short period of time in NGOs working for children. It was only 35 social workers of the counsellors had joined immediately after their completion of their studies.

Table 2

The training programme been designed for 3 days covering the broad areas as given in the below table and the session used participatory methodology with more scope for participation from the trainees aiming at fine tuning the already existing skills. The training also demonstrated some of the mediums of psychosocial care and group activities which can be used as a means for communication and building rapport from the child. The three days training programme includes following broad areas

The trainees were asked to write down the reflection dairy at the end of the day, where in the trainees were asked to record their reflections of the day, their personal learning and their confusions so that same can be discussed on the next day before starting the sessions.

Table 3

Table three describes that the professionals working with children need to have a good knowledge and understanding about child development and its theories, and psychosocial needs of children at different stages of development, which would help them assessment and in understanding children in their environment, so that they can initiate psychosocial interventions like life skills education, preventive and promotive mental health services, group interventions, administering psychosocial mediums of care in understanding the children in difficult circumstances. The helping professionals also need to have good insight about their stresses so

that they can evolve strategies and deal with their own stresses. All the above mentioned topics been captured in the syllabus.

It was observed that there were changes in understanding, in commitment, in statement or in the behaviour due to the reflections and opportunities been provided by the training. The reflection diary provides following sample statements:

Mrs AB, said that *'in the training, I was able to understand the importance of group interventions in building rapport with children so that they can feel comfortable in sharing their problems with us'*.

Mr CD said that *'I was not able to understand why children do not cooperate and have behavioural problems, even though they wanted to improve their quality of life and change their lives. The training helped to realise why children should believe the unknown person like them'*.

Mr X said that *'I understood the differences in perceptions 'the perception of protective environment differs from the child perspective and adults' perspective'*.

Ms EF said that *'the training helped her in understanding the need for life skill for all children and their responsibilities increased as they understood that their work is not just with children in difficult circumstances but also to work with children in the community, so that they can prevent them from becoming children in difficult circumstance'*.

Ms GH said that *'when she got the appointment, was not clear what would social worker/ outreach worker do at the community level, the training has given her some ideas for initiating group activities at the community so that she would be accepted more in the community and desire to learn more group activities, and felt the need for being creative'*.

Discussion

Training and capacity building programme for the staff has increased greatly over the past few decades, mainly because of lack of trained professionals to work in the field and also due to lacuna in the current education system [5]. More so in the development sector as the lab for training and practicing skills would be the people and in the community [7,8,9,5]. KSICPS recognized the need for training the newly recruited social workers and outreach workers of Integrated Child Protection Scheme, and approached Department of Psychiatric Social Work and Department of Child and Adolescent Psychiatry for developing the curriculum of counselling training for the counsellors. The Departments are well established and have experiences of conducting such short term training programmes and workshops for the professionals including lay people [10].

The training programme for the staff not only helped them recap their skills but also motivated them for quality care. Training is generally regarded as a subset of Human Resource Development; it can also be understood as a structured learning experience. As defined by Dessler [11] 'training is a process that applies different methods to strengthen employee's knowledge and skill needed to perform their job effectively'. Other researchers have defined training with similar perspectives [12-14].

The training programme began by addressing the concerns expressed by the social workers and outreach workers. They were

named as being chronic poverty, suffering of children in difficult circumstances and been sought for changing the mind-set of the child and their parents [15,5]. A need for strong conviction, commitment and skill in helping children while ensuring that the children experience a normal development was identified as key learning. Similar views were found to be shared in the manual developed by UNICEF [16] on Training Handbook on Psychosocial Counselling for Children in Especially Difficult Circumstances A trainer's Guide. The training programme started with unfolding the misconceptions. The programme was facilitated keeping in mind that developing a strong conviction and belief in understanding the worth of affected individual be it be child [17].

As awareness amongst people has been increasing so has the incidence of neglect of child rights, child abuses been reported in media [18], the bio-psycho-social needs of children especially those living under difficult circumstances are to be attended to the earliest. India despite being a developing country appears to be unequipped to address and provide the required training for professionals. There is an urgent need for disseminating helping skills among the various professionals dealing with the bio-psycho-social needs of children in difficult circumstances. The professionals working with children need to perceive children as present citizens of any society rather than go with the perception of children being future citizens of the society. Similar views were found to be shared in the children as active citizen by UNICEF [19].

The helping professionals need to have good understanding of child development, issues and concerns of children, rights of children, and legislations governing children in order to address problems of children in difficult circumstances [5,20,21]. The professionals working with children should have good knowledge of child development, and developmental stages so that they will be able to understand the changing needs of children at different stages of development. Professionals can facilitate environment for children to experience normal development. They need to realise the importance of initiating preventive and promotive mental health services using life skills approach and group intervention method while working with children [22]. The authors have, thus made an attempt in developing curriculum for addressing the training needs of personnel's working with children, so that they can enhance quality of psychosocial care for children both in institution and in the community. Training is one of tool through which the capacities of the workers can be enhanced; Raju [23] while training banking personnel also expressed that training as an effective tool in human resource management.

The curriculum was developed as an influential and powerful agent with an aim at enhancing capability of the social worker and outreach worker in providing quality services. Similar views have been expressed by Hall [24], wherein training was perceived as a powerful agent that brought about organizational expansion, development of capability and performance enhancing the programme. All the training programmes were planned as workshops with more scope for participation from the trainees, aiming at improving their helping skills. The training sessions were able to provide required knowledge and skills to work with children in difficult circumstances. The sessions included prevention and promotion of mental health through group activity, psycho social needs of children in difficult circumstances, mental health problems among children, group

interventions, psychosocial care mediums,; Legal aspects- JJ Act and other legislations related to protection of children; Administrative aspects about ICPS, child protection mechanism, similar contents been seen in the Post-graduation syllabus of social work in their specialization paper on Family and Child welfare of the Universities of Pune, Kolkata and Bharathiyar.

Training is an important aspect of human resources development; It helps in enhancing and initiating new activities for the welfare of an affected group [25-27]. In both the private and public sectors, training and capacity building is very critical to the growth and development of the programmes [28] and more so for child centred programmes [5]. For any training to be effective, organization need to examine the extent to which training is closely related to the programme strategy, it should aim at building on the skill, recognizing the already existing skills, similar approach been used by the training team, Haslinda and others [29,30] also share similar views.

The reflection dairy helped the team in understanding the day to day learning. It helped the team in understanding the training needs, need for changing methodologies suiting the group dynamics. Feedback from the participation at the end of each session and end of training programme on content of the topic, methodology adopted, relevance to the practice in the field and suggestions to improvise the training. The day to day evaluation was carefully designed to utilize the three levels of training effectiveness; personal learning, suggestions for the trainers, and take home message for the trainee. Hamid Khan, [31] also express similar views regarding the review and evaluation of the training programmes. The trainings aimed at increasingly emphasis on practice as most of the sessions had a participatory methodologies with lot of scope for participation from the training, and lot of handholding teaching techniques were used in demonstrating group activity. Moreover, the effectiveness of training program, in terms of its application in the role play, preparing the road map for next six months has been an important consideration as said by Brinkerhoff [32] and Gordon [33].

The authors through their telephone conversation and using their network have ensured that the social workers have initiated community based and group interventions for children in their respective districts. Training effectiveness is measured on the extent to which psychosocial activities been initiated as said by Krager and others [34,35].

Training evaluation is also been viewed as field testing of the conceptualizing, designing, analyzing, developing and implementing an effective training program as said in IAEA [36]. Moreover, the 3 trainings, day to day evaluation and over all evaluation has been advantage of identifying the area that needs further improvement and it also provides an insight on methods of improvement as reported by Goldstein & Ford [37]. Kirkpatrick [38-40] often referred to training evaluation as an 'evaluation of four different areas; reaction, learning, behavioral changes and return on investment, similar approach was used by the authors. Majority of the participants opined that the training programme was useful for them to enhance their knowledge and skills to work effectively with children in difficult circumstances. They expressed that participatory methodology was very helpful as they felt encouraged to share their already existing experience and skills. The trainees expressed that they are confident of implementing

the psychosocial care activities in the field and same been confirmed during our telephone conversation.

Conclusion

The training programme for social workers reflected that there is a need for continued education and training to equip professionals with transformational solutions and goal oriented skill set so that they work effectively with the challenges arising in the process of implementation. Capacity building activities are very essential to update knowledge and skills. It should continue as booster sessions and to continue handholding support and enhance their skills. There is a continuous need for reviewing the training programme periodically, so that there would be mutual learning for the trainer and also for the trainee.

Foot Note

*Integrated child protection scheme in brief

The Integrated Child Protection Scheme is expected to significantly contribute to the realization of Government/State responsibility for creating a system that will efficiently and effectively protect children based on cardinal principles of "protection of child rights" and "best interest of the child". Hence, the ICPS objectives are: to contribute to the improvements in the wellbeing of children in difficult circumstances, as well as to the reduction of vulnerabilities to situations and actions that lead to abuse, neglect, exploitation, abandonment and separation of children. These will be achieved by: (i) improved access to and quality of child protection services; (ii) raised public awareness about the reality of child rights, situation and protection in India; (iii) clearly articulated responsibilities and enforced accountability for child protection (iv) established and functioning structures at all government levels for delivery of statutory and support services to children in difficult circumstances; (v) introduced and operational evidence based monitoring and evaluation.

References

1. International Institute for Population Sciences (IIPS) and Macro International (2007). National Family Health Survey (NFHS-3). 2005; 1: 06.
2. UNICEF. Annual Report. 2013.
3. The Integrated Child Protection Scheme (ICPS). A centrally Sponsored Scheme of Government – Civil Society Partnership published by Ministry of Women and Child Development. Government of India in collaboration with National Institute of Public Cooperation and Child Development (NIPCCD). 2010.
4. The Integrated Child protection Scheme (ICPS). Department of women and child Development, Government of Karnataka Publication. 2012.
5. Janardhana N, Manjula B, Muralidhar D, Parthasarathy R, Sekar K, Seshadri SP. Developing Curriculum for Capacitating Counsellors of the Child Protection Unit: An Indian Experience. *Austin Journal of Psychiatry and Behavioral Sciences*. 2015; 2: 1042.
6. Lynton RP, Pareek U. *Training for Development*: SAGE Publications. 2011.
7. Janardhana N, Naidu DM. Community mental health and development model: An experience of Basic Needs India, News Letter, Indian Psychiatric Society, Karnataka Chapter. 2003.
8. Janardhana N, Naidu DM. Community mental health and development with gross root level organizations: an experience of Basic Needs India, National Federation for Mentally Disabled, Sovereign, New Delhi. 2013.
9. Janardhana N, Naidu DM. Inclusion of people with mental illness in community

- based rehabilitation: Need of the day. *International Journal of Psychosocial Rehabilitation*. 2013; 16: 117-124.
10. NIMHANS Annual Report- 2012, 2013, NIMHANS Publication. 2014.
 11. Dessler G. *A Framework for Human Resource Management*: Pearson Education India. 2005.
 12. Mondy RW, Noe RM. *Human Resource Management (9th ed.)*: International Edition. Prentice Hall. 2005.
 13. Yong K. *Human Resources Management in Malaysia* Institute of Management. 2003; 230- 250.
 14. Beardwell I, Holden L, Claydon T. *Human Resource Management a Contemporary Approach (4 ed.)*. Harlow: Prentice Hall. 2004.
 15. Baldwin TT, Ford JK. Transfer of training: A review and directions for future research. *Personnel Psychology*. 1988; 41: 63-105.
 16. Jordans MJD. *Training Handbook On Psychosocial Counselling for Children in Especially Difficult Circumstances A trainer's Guide (3 ed.)*. Nepal: UNICEF, United Nations Children's Fund. 2003.
 17. Perlman HH. *Social Casework: A Problem-Solving Process*: University of Chicago Press. 1957.
 18. Divya R, Janardhana N, Indiramma V. Resilience in Child Sexual Abuse: Role of Protective Factors. *Artha Journal of Social Science*. 2012; 11: 19-33.
 19. UNICEF. *Children as Active Citizens: A Policy and Programme Guide Commitments and Obligations for Children's Civil Rights and Civic Engagement in East Asia and the Pacific* Published in Bangkok in 2008 by the Inter-Agency Working Group on Children's Participation (IAWGCP): ECPAT International, Knowing Children, Plan International, Save the Children Sweden, Save the Children UK, UNICEF and World Vision. 2008.
 20. DePanfilis D. *Child Neglect: A Guide for Prevention, Assessment, and Intervention*. U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau Office on Child Abuse and Neglect. 2006.
 21. *Child Protection and Welfare Practice*.
 22. Sekar K, Prabhu Kavitha M, Selvi A, Malarmathi, Borgoyari P. *Psychosocial care for children (Medium 1- 7)*, Bangalore: NIMHANS Publication. 2007.
 23. Raju T. Training as an effective HRD technique in banking sector - an opinion survey. *New Delhi: Indian Society for Training and Development*. 2005; 35: 67-75.
 24. Hall DT, Fombrun CJ, Tichy NM, Devanna MA. *Human Resource Development and Organizational Effectiveness*. Strategic Human Resource Management. New York: John Wiley and Sons. 1985; 159-181.
 25. Rajeev P, Madan MS, Jayarajan K. Revisiting Kirkpatrick's model-an evaluation of an academic training course. *Current Science*. 2009; 96: 272-276.
 26. Janardhana N, Naidu DM, Valliseshan, Saraswathy L, Manikalliath, Asha B, et al. *People in our world: A Training Manual on Community Mental Health and Development Model – Theorising Practices*. A training manual capturing experiences of Basic Needs India, produced in collaboration with Tata Institute in Social Science, Basic Needs India Publication. 2009.
 27. Janardhana N, Raghevendra G, Manikalliath. *Community mental health and development: manual for the field staff*, Basic Needs India Publication. 2010.
 28. Noe R. *Employee training & development*. Boston: McGraw-Hill Irwin. 2002.
 29. Abdullah H. Major challenges to the effective management of human resource training and development activities. *Journal of International Social Research*. 2009; 2: 11-25.
 30. Abdullah H, Hiok OM. Modelling HRD practices in Malaysian manufacturing firms. *European Journal of Social Sciences*. 2009; 8: 640-652.
 31. Khan H. Effectiveness of a strategic management development program. *Applied Human Resource Management*. 2002; 7: 49-52.
 32. Brinkerhoff DW. Rebuilding governance in failed states and post-conflict societies: core concepts and cross-cutting themes. *Public administration and development*. 2005; 25: 3-14.
 33. Gordon J. Measuring the "goodness" of training. *Training*. 1991; 28: 19-25.
 34. Kraiger K, Ford JK, Salas E. Application of cognitive, skill-based, and affective theories of learning outcomes to new methods of training evaluation. *Journal of Applied Psychology*. 1993; 78: 311-328.
 35. Gupta S, Bostrom RP, Huber M. End-user training methods: what we know, need to know. *ACM SIGMIS Database*. 2010; 41: 9-39.
 36. Goldstein IL, Ford JK. *Training in Organizations: Needs Assessment, Development, and Evaluation*: Wadsworth. 2002.
 37. IAEA. *Means of Evaluating and Improving the Effectiveness of Training of Nuclear Power Plant Personnel*. Vienna: INTERNATIONAL ATOMIC ENERGY AGENCY. 2003.
 38. Kirkpatrick D. Technique for evaluating training program. *Journal of American Society for Training and Development*. 1959; 13: 11-12.
 39. Kirkpatrick D. Evaluating Training Program: Four levels. In *The Hidden power of Kirkpatrick's Four levels, 'T-D'*. San Francisco: Berette Koehler. 1998; 34-37.
 40. Kirkpatrick DL. Techniques for evaluating training programs. *Training and Development Journal*. 1987; 33: 78-92.