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**Life Skills and Adolescents in a Position to Host with
Intellectual Disabilities**

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Abstract

In Brazil, children and adolescents who need special juridical protection are directed through Public Power to hosting institutions and/or to foster families. However, there are no programs which enable them to live in the society afterward. This study aimed to analyze the effects of a training involving Life Skills, specifically assertive communication skills, applied to intellectually disabled teenagers who live in institutional sheltering situation, focusing on enhancing their responses quality to the demands of community life. This was a qualitative and quantitative research, descriptive, and exploratory accomplished in a shelter institution in Jaci, a town in Sao Paulo state, Brazil. We applied two semistructured questionnaires to the technical team in the institution, an interaction social board game to the adolescents and conversation circles to collect data. The data analysis was based on Content Analysis. Four intellectually disabled adolescents hosted by institutions took part in this study. We conclude that the training collaborated to improvement and/ or development of some verbal, non-verbal and paralinguistic components, which were in deficits in the participants' communication repertoire. Nonetheless, other components did not change. There is a need to apply other studies in this field, with other intervention strategies.

Keywords: Institutional Sheltering; Intellectually Disabled; Life Skills

Introduction

Bearing in mind the complexity which involves the institutional sheltering process, children and adolescents' disconnection and resocialization, specifically, intellectually disabled who remain sheltered for a long time, we searched systematically in the databases, studies approaching training to Life Skills, applied to them. However, we did not find any research related to the matter in question. This fact motivated us to accomplish the present study, which aimed to analyze a training involving Life Skill effects, specifically assertive communication skills applied to intellectually disabled teenagers who live in institutional sheltering situation, focusing on improving the quality of their responses to the community life demands. We believe that the referred training contributed to maximizing their skills, reducing occasional problems that involve their use, benefiting healthier and productive relationships. We also hope to contribute to the academic universe and hope that from this study, other programs may be developed to improve the life situation and global development of the social portion referred.

Institutional Sheltering

According to the Estatuto da Criança e do Adolescente (BRASIL, 2009) (Child and Adolescent Statute), Law 2010/2009 from August, 04th, 2009, in its third, fourth and fifth Articles, every child and adolescent, enjoy fundamental rights securing their physical, intellectual, moral, spiritual and social development. Family's, community's and public power's duty is to make them effective. If those rights are violated, through negligence, discrimination, violence, cruelty and/ or oppression, mainly by the children's adolescents' family, Public Power is responsible for referring them to sheltering institutions. Those entities execute protection measures aiming to host children and adolescents under personal or social risk situation. They are used as a transition way to reintegrate family and/ or integrate into a foster family, pointed out by Brazil (2006), Associação dos Magistrados Brasileiros (AMB) (2007), Cavalcante, Magalhães and Pontes (2007), Fávero, Vitale and Baptista (2008), Brasil (2009). Gulassa (2010) states that the institution is charged to enable the hosted to express themselves, elaborate and understand their crises moments, amplify their cognitive development and build their identities. Also, according to Brasil (2009) and Cabral (2009), the institution ought to make possible, the maintenance of the family and community bond, participation in the local community, inform them about circumstances involving them, their family situation, the procedures adopted referring to the hosting, improve their abilities, aptitudes, capabilities and competence, favor the autonomy, prepare them gradually for disconnection (deinstitutionalization) and enable an adequate social inception. Wentz (2005) describes deinstitutionalization as a governmental policy which aims to reintegrate disabled people who lived in institutions, segregated from their communities. In this case, training social

skills, according to Oliveira (2002) enables those children and adolescents to face social demands to which they are exposed and help them mitigate the negative effects, in psychosocial terms. These effects; unpreparedness sensation, abandonment, insecurity, confusion, disorientation, fear, tied to the lack of professional training, unfinished education, problems related to financial matters, lack of a support network, not having someone to live with or somewhere to live at all, among others, according to the research accomplished by Wathier and Dell Anglio (2007) with 130 young sheltered, manifestation of depressive symptoms; Santos (2012) with 15 teenagers and by Benneti (2012) with six young people who lived in a sheltering situation for a long period. MacLean (2003) outlines that even with the negative impacts of institutionalization regarding children development, studies show that they do not lead to psychopathology. However, Silva and Murta (2009) highlight deficits in social abilities during childhood and adolescence may compromise other phases in human development.

Adolescents with Mental Disabilities

When it comes to the human development stages, the World Health Organization (WHO) (2016) classifies the transitional period between ten and 19 years old as critical. Its duration and characteristics vary according to time, cultures and the social and economic situation. Papalia and Feldman (2013) highlight that at this stage the adolescent's body goes through severe physical, cognitive, emotional and social changes. Losacco (2008) suggests that it is a conflictual period in which the adolescent must take on new responsibilities, fit into new models, face working demands and deal with changes in their bodies, as well as endure esthetical changes, acquire financial independence and still, according to Aberastury and Knobel (1992) build a new identity, search for autonomy even from their own parents. In terms of physical development, Papalia and Feldman (2013) state what occurs: the adrenal glands activation and the sexual organs maturation, sudden increase in height, weight, muscles and bone structure. Within this period, adolescents also have major progress in terms of cognitive development. Davis (2011) points out that according to Piaget, adolescents between the ages of 11 and 12 years old are capable of incorporating a new reality to the cognitive structures to those that they already have, through logical operations in the ideas level, disconnecting from what is touchable, concrete. This field, specifically is where adolescents with intellectual disabilities present limitations that impact the development of their practical, social and conceptual abilities, as Luckasson et al. (2002) highlights. This fact prevents, according to Carvalho and Maciel (2003), Cardozo and Soares (2011), their cognitive and academic development, effective communication, adequate social competence, satisfying development regarding everyday activities, the exercise of autonomy and their interpersonal relationships.

Intellectual Impairment

Building on the above, the intellectual disability definition, stated by the American Association on Intellectual and Developmental Disabilities (AAIDD) (2010) is as an intellectual functioning (Intelligence Quotient- IQ) below the average, which entails certain limitations in the adaptive area. It covers the social abilities and practices and it is originated before the age of 18 years old. The Intelligence quotient may be measured through tests which measure mental abilities, the measurable development of a person in comparison to others, in the same chronological age, by means of numerical scores. A person with mental disabilities has to present an IQ test with scores between 70-75, or below, considering that the standard deviation may vary between 2 to 5. It is worthy to emphasize that intellectual functioning refers to the mental capability related: to learning, ratiocination and problem solving, among others. We understand as adaptive behavior the sum of the conceptual, social and practical skills, named: A) conceptual skills: language and literacy, monetary concepts, time, number and self-direction; b) social skills: social responsibility, self-esteem, cautiousness, problem-solving, capability of following rules, obeying laws, among others; c) practical skills: personal care, professional competence, health, trips, transportation, routine, safety, the use of money and telephone, among others. However, programs aiming at the development of the aptitude necessary to face everyday life may collaborate to the healthy development of an intellectual disabled person. Under this perspective, Rosin-Pinola et al. (2007) emphasize the need to encourage people with mental disabilities to issue the deficits abilities, because the social and academic repertoire acquisition is essential to both interpersonal and socioemotional development. According to Kronick (1983) and Ayres et al. (2013), many times the inappropriate behavior presented by an intellectually disabled person is due to the fact that s/he cannot interpret, the social situations, cause-effect relations, emotional relationships, body signs, feelings, perception, and the conversations of others involved in the relationship in an accurate way. Mathews (2015) highlights that the difficulties in acquiring skills in those young people are related, among many factors: to the lack of learning opportunity, employees' unpreparedness in the institution that helps them. Santos (2012) explains that even if the deficits aspects reversion will not happen, face to the learning possibilities, advances are possible to be reached, in spite of the limitations, which are not a barrier to learning. In compliance with Fujiura (2006), any person, in any degree of disability is able to act in a satisfying way, in community life, even facing challenging situations.

Life Skills

Life Skills are understood as the social, cognitive and affective skills useful in facing demands and challenges of daily life, from these skills, we highlight self-awareness, critical thinking, creative thinking, decision making,

problem solving, interpersonal relationship competencies, effective communication, empathy, dealing with emotions and dealing with stress, according to World Health Organization (WHO)- (1997) and Organización Panamericana de la Salud (OPAS) (Health Pan-American Organization)- (2005). Essentially, according to Ayres et al. (2013), they are skills needed to accomplish a productive life. Researches point out that inside the school context, a curriculum aiming to develop Life skills, builds up the social competence in students, mainly in students with intellectual impairment, so they can achieve proper training and reach success after the scholar period is not prioritized, describes Bouck (2010). Those skills empower interpersonal relationships and may be refined and/ or developed through specific training. In the case, for example, of teenager training, Macedo (2006) describes that it collaborates to their social inception, making them more active, constructive, responsible, conscious and decided citizens. OPAS (2005) claims that training also collaborates to high-risk sexual behavior and drug use reduction, dealing with emotions and improving academic performance. Gorayeb (2002) draws our attention to its implementation to ten adolescent students has made emotions dealing possible, healthy interpersonal relationships, conflicts managing, strengthening emotional bonds, raising academic development, an increase in self-esteem and competence. In the same way, when implemented to 45 adolescents, Minto (2005) points out learning of more adjusted responses in problematic situations, stress creators, the adolescents start to think before acting, decide and listen carefully. Silva and Murta (2009) highlight development with adolescents in the Programa de Atendimento Integral à Família (PAIF)-Comprehensive Family Care Program- entail self-awareness, feelings expressions, academic progress and improvement in affective skills. Paiva and Rodrigues (2008) emphasize that training implementation helps in reducing the positive expectations in adolescents about drug consumption, as researches accomplished by Botvin and collaborators at Cornell University, in the United States point out. Mathews (2015) points out that the application of programs for life skills together with deaf adults and intellectual impaired contributes to the transition process, favoring an independent life, mainly in the practical behaviors context. In the same way, Aguiar (2006) draws attention to the importance of implementing it also within intellectually disabled people, focusing, mainly, the assertive communication skill, taking into consideration that they present deficit in this category.

Assertive Communicative Skill

When it comes to assertive communication skills, OPAS (2005) understands them as the capability which a person has to express themselves verbally and non-verbally, in a proper way, consistent with the culture and situations surrounding him/her, reaching their personal goals, without harming other people. Asparna and Raakhee (2011), Castilla and Iranzo (2009, p.2) argue that assertive communication skills are about clearly expressing, feelings, thoughts, and needs. According to Caballo (2012), they encompass

specific components, named: a) *verbal components*: new behavior request, concurrence matter, compliments matter, questions, appreciation matter, self-revelation, verbal efforts, and refuse matters. Personal attention, humor, positive verbalization, theme variety, agreement matter, confrontation matter, sympathy manifestation, formality, generality, clearance, alternative offer, requests to share the activity, expressions in first person, reasons, explanations, conversation starting, feedback, picking the suitable moment, taking the floor, giving the floor, knowing how to listen, general conversation; b) *Non-verbal components*: visual contact, to look when the other speaks, to look during silence, answer latency, smiles, gestures, facial expression, body posture/ body orientation, posture changing, distance/ proximity, body expression, self-manipulations, nodding with the head, orientation, legs movements, hands movements, personal appearance; c) *paralinguistic components* : voice, voice volume, clearness, speed, timbre, inflection, talking time, answering time, number of spoken words, pause/ silences in conversation, number of sentences or words which repeat themselves during conversation, vacillation, talk fluency. Caballo (2012, p. 24/62) claims that “both verbal and nonverbal conducts are means by which people communicate with each other and constitute, both, basic elements in social ability”. The non-verbal communication is entitled by face and body, while verbal communication is followed by speech and the paralinguistic components referred to as “how” one speaks in opposition to “what” one speaks. According to Bielecki and Swender (2004) individuals with profound intellectual disabilities tend to present a limited verbal repertoire.

Method

This was a quality and quantitative research, descriptive and exploratory, in which four adolescents with mental disabilities in institutional sheltering situation participated. They are identified by the following fictitious names: André, Carlos, Elias, and Luís. Two questionnaires were applied to the technical team of the sheltering institution: a) *I Participant Characterization*. Apprehends questions that may interfere in the sheltered psychosocial development: identification, sex, age, impairment degree, associated deficiencies, reason of ingress in the institution, institutionalization period, preservation of family bonds, family visit/ frequency, having siblings in the institution, participation in the local community activities, participation in the institution/evaluation activities in development, activities executed with a positive feeling. It was elaborated by the researcher from the prerogatives from ECA (BRASIL, 2009). b) *II Specific components in the assertive communication skill*. This was a survey accomplished by the researcher aiming to identify the technical team knowledge related to specific components in communication skills, presents or not on each participant and it encompasses: verbal and non-verbal components, and paralinguistic. The researcher elaborated the survey from the studies accomplished by Caballo (2012).

Afterward, the adolescents played a board game “The animals’ race” created by the researcher. The game was about a social interaction in which specific communication components were identified in deficits inside each adolescent repertoire and worked on, subsequently, during the training. The training was implemented in ten meetings, circle talks. After accomplishing the training, the game was replicated aiming to analyze its effects, whether there was or there was not enhancing and/ or development of the components in deficit among the teenagers’ repertoire. In general, 14 meetings were carried, one with the team, two with the adolescents to apply the game and ten with the adolescents to implement the training, and another one for everybody to celebrate. Meetings were carried twice a week, taking one hour and fifteen minutes each one, inside the institution. Training was elaborated from the results presented during the board game application. However, some of the components were worked several times, from multiple teaching strategies and through illustrative pictures, songs, interactive videos, puppets manipulation, interactive games, among other ludic activities. Data analysis was accomplished by a Content Analysis technique, proposed by Bardin (2011), and it refers to techniques targeting communication analysis and aim to obtain messages description, discovering the central meanings displayed in communication. In the case, the collected data analysis from the board game application, the researcher created an evaluation instrument with categories and subcategories previously defined from studies accomplished by Caballo (2012) and Hall (1976) and the adopted procedures were: a) extraction of the meaning from the information, which were put into categories and subcategories previously defined in the evaluation instrument; b) after filling the document, components that were worked upon during the training emerged; c) And also, a scores sum was performed, aiming to measure the participants development and classify them, according to development classification scale created for this study. It was divided in: 1. Totally Satisfying: 356-448 (81%-100%). 2. Very Satisfying: 268,9-358,4 (61%-80%). Satisfying:17,3-268,8 (41%-60%). 4. Little Satisfying- 89,7-179,2 (21%-40%). 5. Unsatisfying: 0-89,6 (0 % - 20%). The scores were obtained from 16 categories and 21 subcategories previously defined in evaluation instruments, totaling 336 subcategories/ scores that may be present in the behavior of a person with assertive communication abilities. It is important to highlight from the 336 scores that might be present in the behavior of a person with assertive communication ability, to 112 of them double punctuation (verbal components) were assigned and to 224 scores simple punctuation (non-verbal and paralinguistic components) were assigned, totaling 448 scores.

Results and Discussions

Questionary -I Participant’s Characterization- Related to Gender, Age, Scholar Degree, Impairment Severity, According to Medical Classification

The four participants are male adolescents, Lucas is 12 years old, Carlos is

16 years old and André and Luís are 17 years old, all of them have no scholar degrees. Carlos and Luís attended to a Special education school, André and Elias have never attended any education institution. It is important to highlight that every person, impaired or not, has the right of attending schools, classrooms of regular education, and the right to have him/her needs fulfilled, developing with other students. We are referring to inclusive education, which recognizes and values diversity as an enriching factor to the educational process and whose learning is centralized in the individual potential, not in the disability to listen, walking, talking, seeing or any development deficit student may present, according to Alves et al. (2006). Concerning to deficits, participants have the following medical diagnosis, based on the ICD-10 (International Classification of Disease) proposed by WHO (1995): André, Carlos, and Elias present moderate mental retardation without mentioning behavior compromising- ICD is F 71,9; Luís is diagnosed with moderate mental retardation mentioning absence or minimum behavior compromising-; ICD is F 71. However, they also present another diagnosis, such as: Luís – Conduct disorder (F 71.9); André and Carlos-Hyperkinetic disorders non-specified (F 90.9); André Oppositional Defiant Disorder (F 91.3); Carlos- non-specified Conduct Disorder (F91.9). Schwartzman (2013, p.251) draws our attention to the fact that the person who suffers from moderate mental retardation is able to learn and develop some degree of independence “in self-care and acquiring suiting communication and academics abilities “.

Reason of Admission in the Institution, Time of Sheltering and Presence of Other Siblings in the Same Institution, Maintenance of the Family Bond, Family Visits and Frequency of the Visits during the Year

Carlos and Luís entered in the institution after transferred from another sheltering institution, André, after being neglected and Elias because of situation of abandonment. All of them are in an institutional sheltering situation for more than two years, the maximum period established by law. Elias has been sheltered for four years and seven months, André for five years and five months, Luís for eight years and one month and Carlos for eight years and two months. According to Maia and Williams (2005), the abuse and negligence cause significant negative effects to the development, mainly to the cognition areas, language, academic development, socioemotional development, and, deficits related to managing affection abilities in general. In the same way, Cueno (2009) defends that institutional sheltering, when extended, may entail in the injury the following aspects: emotional, intellectual and social. Zeanah et al. (2003) highlights that the institutionalization period provokes limitation in the development, damage in language and cognitive capacity areas. In terms of family bond maintenance, Carlos, Elias and Luís do not share any family bonds and André share affective bonds with his genitor and siblings, who visit him every six months. According to Dessen and Junior (2005), the family importance when it comes do human development is unquestionable, because that is the first responsible institution for its member’s evolution, it is the one

that conveys the social meaning to their lives, promotes their skills development and their own communication ways due to the established relationships quality.

Participation in Local Community, Participation on Activities Developed in the Institution, Development Degree Related to the Proposed Activities in the Institution, Activities that Perform with Positive Feeling

All adolescents engage in local community and André, Carlos, and Elias participate in activities developed in the institution, only Luís partially participates in them. However, only André and Elias presented minimum development, with regard to the above. Only Carlos presents a good development in relation to the execution of the activities proposed by the institution, inside or outside of it. And, promoting the engaging of the sheltered on the local community, community living, and promoting a meaningful educational process is one of the prerogatives imposed by the ECA (2009) in its 92nd Art. Nery (2010, p.196) highlights it is about assuring the rights of children and adolescents sheltered, who should “remain integrated in the attention network in healthy, culture, education in community services (...) evolving dance, theater, sports, leisure, professionalization among others (...)”. According to Brazil (2006), deprivation of family and community interaction may entail in damaging the maturing process, especially in the adolescence period, bearing in mind that the adolescent will not have references of other people in relation to his/her identity construction, to his/her autonomy development and future projects elaboration. Activities which the participants executed with positive feeling are basically the same, in all cases. André, Carlos, and Elias like educational games and Luís is interested in playing soccer. The four adolescents participate in equotherapy very delighted. André, Carlos, and Luís also like listening to music and Elias likes listening to stories. Finally, André, Elias, and Luís appreciate watching television while Carlos entertains himself with folkloric games. Hence, developing ludic activities with this part of the population is extremely important. According to Dohme (2009, p. 122), ludic activities might collaborate with personal development, the formation of the autonomous man and, at the same time, improving community participation, of the constructive man. Alves and Bianchin (2010) argue that the ludic plays a fundamental importance role concerning the physical and mental development of the child, because it helps in learning and knowledge construction, in the socialization process, due to the fact of acting in a direct way in his/her cognitive and affective processes.

Questionary II- Specific Components of Assertive Communication Ability

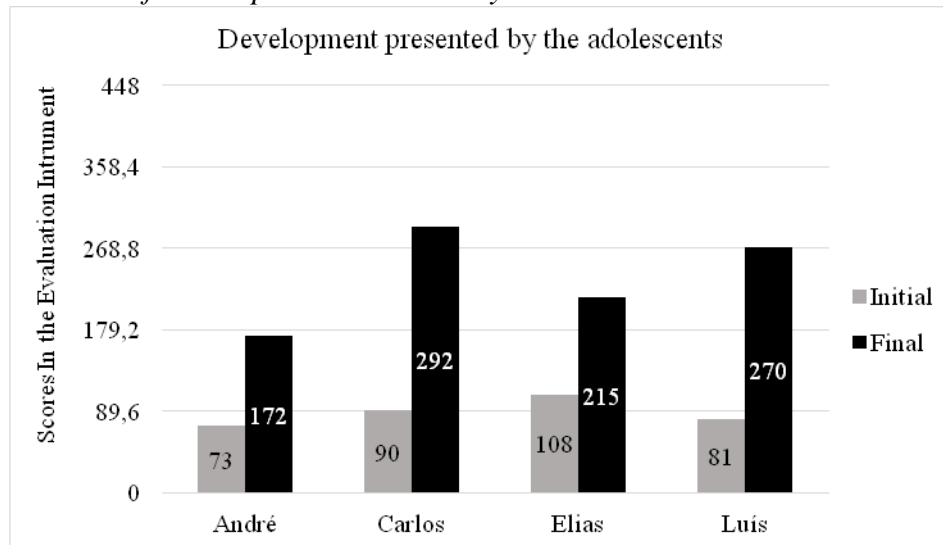
This was a survey accomplished by the researcher aiming to identify the technical team knowledge concerning specific components in communication skills, present or not in each participant repertoire and encompasses: verbal and non- verbal components, paralinguistic, which should be present in the

repertoire of a person who has assertive communication ability adequate. The researcher elaborated it from the studies accomplished by Caballo (2012). The results presented demonstrate unawareness by the technical team with regard to some specific components in assertive communication ability, mainly in relation to the paralinguistic components: latency, fluency and clearness, as well as difficulty in differing among some non-verbal components and its ways of manifestation, such as: body posture, legs and/or feet movement, and also difficulty to recognize the practical applicability of the concept: assertivity. The need to provide professional training to the employees in sheltering institutions was observed, bearing in mind that the service quality offered interferes directly in the children and adolescents' development, other than violates their rights. Based on this understanding, Dell'Aglio (2000) states that sheltering institution, whose function is protecting, should continuously prepare professionals who set its technical team. Salina (2007) claims that efficient professional practices tend to work as protecting factors in relation to the deficiencies that the sheltered, occasionally may develop. In fact, there are many attributions imposed to the professionals who execute several functions in the sheltering institutions, and little is invested in ways to qualify them to those intents. In this way, we intend to, after accomplishing this study, train the institution professionals, if they agree to do that, in Life Skills area. Concerning the school context, educators who prioritize a curriculum directed to Life skills, must be creative, offering activities that enable students, including the ones with intellectual impairment, to obtain proper education and to achieve success after the school period, in adaptive terms, practical and social, as pointed out by Bouck (2010).

Board Game Application- Initial and Final Interaction

The initial board game application aimed to promote a social interaction among the adolescents and the researcher, so that it was possible to identify specific components which characterize the adequate assertive communicative ability, presents or not in the adolescent's repertoire. Those components were worked, afterward, during training. Its reapplication propitiated the researcher to observe whether there was or there was not an improvement and/ or development of the components which were in deficits at the beginning of the data collecting, that is, it indicated the effects of the training of the assertive communication ability which was applied to the adolescents. The results reached may be observed in Figure 1.

Figure 1. *Initial and Final of Training of Assertive Communication Abilities, in Terms of Development Presented by the Adolescents*



Source: Created by this Thesis researcher.

In order to a better understanding of the above, we will return in this section to a classification scale created to this study, divided into: 1. *Totally Satisfying*: 356-448 (81%-100%). 2. *Very Satisfying*: 268,9-358,4 (61%-80%). 3. *Satisfying*: 173-268,8 (41%-60%). 4. *Little Satisfying*: 89,7-179,2 (21%-40%). 5. *Unsatisfying*: 0-89,6 (0% - 20%). The advances observed concerning to the performance presented by the participants after training, suggest that: a) André has obtained initial classification as : *Unsatisfying* (scores under 73) and final classification: *little satisfying* (total scores:172); Elias has obtained initial classification: *little satisfying* (initial scores 108) and final classification: *satisfying* (total scores 215); c) Carlos has obtained initial classification: *little satisfying* (total scores 90) and final classification: *very satisfying* (total scores 292); d) Luís has obtained initial classification: *unsatisfying* (total scores: 81) and final classification: *very satisfying* (total scores 270). All participants have improved and/or developed some communicative abilities behaviors. Under this perspective, Piaget (2014, p.3/7) states that “ the development (...) is a progressive equilibration, a continuous flow from a less balanced stage to a balance”, in the specific case of moderate mental impaired people, he considers that those people have a mental balance with some attributes that should be taken into consideration when elaborating educational activities, among them: capacity to reconstruct their actions in a narrative way and anticipation of future actions through verbal representation, resulting in three important consequences to mental development: possible exchange among the individuals (action society), word internalization (thought per se emerging) and internalization of the act the reconstructs in the intuitive plan of mental images and experiences. In this way, language emerges from Exchange and communication aiming individuals. According to Piaget (2014, p. 17), the word is the internal life by which it is put in common, and it should be stated, that it is built in conscience, as it can be communicated. Intercommunication

promotes action progress, transforming the material conduct into thoughts and, also, may be triggered during collective games or rules games, which are considered proper instruments to the socialization of actions. It is important to highlight that socialization does not reflect only in intelligence level, on thinking, but also, and mainly, on affective level. Affectivity development and intellectual functions development are inseparable, scholastic tend to reach a significantly superior performance when the proposed activities fulfill their affective interests, when they correspond to their needs. It's also important considering that education must not hang only on results maximizing in the child learning, but enable him/her to learn how to learn, to learn to develop and to learn to keep advance.

Final Remarks

There are no doubts concerning the importance of gradually preparing the sheltered adolescents to a social reintegration that enable them to keep healthy and productive social interpersonal relationships and the training oriented to Life Skills may be one of the instruments used for that objective. Having in mind that they provide maximization of the adolescents' skills, aptitudes, capacities and competencies, even when intellectually impaired, according to observations from this study. Ludic and interactive activities might facilitate the teaching-learning process, since they stimulate teenagers' involvement, curiosity, language use, cognitive, psychomotor, affective and social developments are sources of pleasure. During the activities execution, participants expressed themselves both verbally and non-verbally their positive feelings: pleasure, joy, and satisfaction. In the same way that the circle talks were used as a communication educational strategy, they could also collaborate with the communication skills development and/or refinement, because when they shared previous knowledge about the content proposed to each activity, participants assimilated new ideas, new content, and new learning were accommodated in their former cognitive structures, bearing in mind that, they presented advance related to some trained behaviors and if we had developed more circle talks, certainly, the positive results reached would have been superior. It is important to highlight that the sheltering institution can propitiate abilities training since the sheltered admission, because the longer they are exposed to those stimuli, the bigger development gains will be obtained. And, when they are withdrawn from the institution, it is possible that they will be able to respond in a suitable way to the community's demands in which they will be placed. In the same way that the professionals who help them, must be capable of implementing the training, because the mental balance is only kept by maintenance. We certify that the inferior intellectual functioning in the participants was not a limiting condition to our actions and neither to their learning. We used methods and strategies by which means and ways of communication were suited to them, making the training the most favorable to be executed, in the attempt to reduce the disadvantages presented on an

intelligence level. It must be pointed out that the participants in this study, besides living in an institutional sheltering situation for a long period, are mentally disabled and some also have other associated pathologies, they are adolescents. Those facts show that training their life skills was extremely important. We consider the necessity that this theme has to be the object of study in other researches, which also cover other methods to collect data, different evaluation, and abilities training implementation, as well as, its social and political importance. The global development of any child and/ or adolescent impaired or not, institutionally sheltered or not, and the guarantee of his/ her rights is family's, State and society's obligation, in the same way, that political changes also will only happen when the society, the State is committed from thoughts transformation of preconceptions, of paradigms. Sen (1998) claimed in his work that even in developed countries intellectually impaired people families, the social services do not elaborate plans aiming a promising future for them. The vocational schools are few for this target group. The academic accomplishments are seen as unimportant in contrast to the social adaptation and professional training. Nonetheless, many of those people cannot find jobs and/ or other means which assure an autonomous surviving. Unfortunately, 26 years have been passed and we are still under the impression that the text describes the current reality, since the general overview which we attend, regarding the above, remains the same.

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