

# Oskar Pfister's Psychoanalytic Pedagogy. Educational trajectories in the field of disability

## La Pedagogia Psicoanalitica Di Oskar Pfister. Traiettorie educative nella disabilità

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What are the educational implications of Oskar Pfister's psychoanalytic pedagogy? This paper, based on some theoretical contribution proposed by this author, presents a reflection in an inclusive approach highlighting the multiple relationships between psychoanalysis and special education. In particular, it is emphasized how it is essential to strengthen support to parenthood (also involving fathers) through 0-6 services by enhancing an ordinary dimension and not exclusively clinical one.

**Key-words:** psychoanalytic pedagogy; education, inclusion, parenthood.

abstract

Riflessione teorica

(A. incontro con la storia; B. questioni epistemologiche; C. temi emergenti)



## Introduction

Starting from Oskar Pfister's contribution to *psychoanalytic pedagogy* which, in our opinion, embodies a number of very *current* issues, this work aims to tackle some questions concerning parenthood – with a focus on the father figure - coping with the disability of a young child, in the so called “father evaporation” period (Recalcati, 2011)<sup>1</sup>.

Traditionally, fathers of children with disabilities have a long history of being perceived as an “invisible parent” (Ballard *et al.*, 1997), or even as the “peripheral parent” (Herbert & Carpenter, 1994) disengaged from the family. More recently, it has also become apparent that fathers themselves often feel overlooked by both *researchers* and *workers* of the social-educational or health services, as if they are “just a shadow” than the centrality of mothers (West, 2000). The outcome of a long history of lack of inclusion is that relatively is known about fathers' experiences, needs, educational role and involvement in raising a child with a disability (MacDonald & Hastings, 2010). In Italy, the educational role of fathers with a child with disabilities has shifted in tandem with social role of women (e.g. increased labour force participation of woman) and with the societal and cultural changes, starting from the middle of the 1900 century. A further societal shift, particularly relevant to fathers of children with disabilities, has been the deinstitutionalization of disabled children: the increasing number of children with disabilities living at home and attending the mainstreaming, has meant that fathers (as mothers as well) likely to be more directly involved (and more emotionally affected) in raising their child. More recent studies talking about a “new fathers” or a “maternal fathers” (Lamb, 2010; Pietropolli Charmet, 2000; Argentieri, 1999). It means that fathers are caring and attentive observes but too much permissive; they are available but too much uncertain on the pedagogical line to follow; they are loving but they show relevant difficulties in the “normative area” of education (Ridding & Williams, 2019).

## 2. Oskar Pfister's psychoanalytic pedagogy

Pedagogy and psychoanalysis are often characterised by considerable mutual mistrust, ignoring some significant *affinities*, including those of *understanding* and *helping* mankind (Caldin, 1996). *Psychoanalytic pedagogy* – an expression coined by Swiss protestant minister Oskar Pfister in 1913 – offers a highly interesting, and in our opinion highly successful, attempt to reconcile *psychoanalytic orientations* and *education*, comparing these two disciplines in terms of mutual cooperation – *care and education, diagnosis and education planning, prevention (reparation) and educational care (caring for)* – rather than in terms of confrontation and division (Caldin, 2016). Pfister established a *new way of understanding education in relation to psychoanalysis*, however underlining that only pedagogy has the task of indicating the purposes of the *educational process*. According to Pfister (1927), with psychoanalytic pedagogy we become more prudent in our diagnoses and in the

1 It is necessary to underline that Recalcati strongly refers to Lacan's psychoanalyst theories. Lacan introduced, for the first time, the image of “paternal evaporation” and the decline of his normative function, according to the psychoanalyst approach, in 1938 (Lacan, 2005).



choice of educational methods, we learn to individualise and recognise children's deeper needs; indeed, the scholar claimed the validity of psychoanalytic pedagogy as a "useful component within education as a whole", able to help us to understand the multi-faceted framework of the child's personality, make fewer mistakes, eliminate the clumsiest errors of the educational action, read the child's personality with greater sensitivity and interpretation, and respond to *educational needs* in a more appropriate and individualised manner (Cremerius, 1975). Pfister established some of the founding principles of psychoanalytic pedagogy: *redemption* – removing the obstacles that *bind* people, increasing the dimension of *you can* (and not merely *you must*) which means seeing hope and faith in educational *possibilities* and possibilities for change – and the *bond* which restores interest for the individuality of the pupil/child, as theory must be translated into the pedagogic field in order to gain precise knowledge of the individuality of each one. In this regard, according to Pfister psychoanalytic pedagogy has two objectives: in *negative*, that of freeing the soul from harmful fixed bonds and in *positive (proactive)*, that of developing the autonomy of the personality (Caldin, 2016).

Considering psychoanalysis as a "general instrument of knowledge of human behaviour" (Pfister, 1927) with the intrinsic desire to help mankind, fostering introspection and exploring the possibilities of human development, we must seek cooperation with pedagogy, and particularly with inclusive pedagogy, in terms of spreading knowledge and prevention, using that which psychoanalysis gleans from clinical experience to formulate *pedagogical projects for preventive education* (Caldin, 2017). Pedagogy, on the other hand, helps to alert psychoanalysis by offering *directions of meaning* and more active *methodological ideas* to stimulate it, avoiding the risk of stagnation with rigid, passive interpretative techniques.

It is worth underlining how, while developing within the relationship between pedagogy and psychoanalysis and/or between education and psychoanalysis, Pfister's psychoanalytical pedagogy brilliantly paved the way for *prevention*, accentuating – to use phenomenological language – the idea of *taking care of (or taking care of oneself)* according to E.H. Erikson) rather than just *caring*, deeming it possible to bring *complementarity* to *education* and *care* through many *points of contact* (Erikson, 1984).

In this sense, psychoanalytical pedagogy shows that education is not a learning process limited to the child: psychic development as a whole takes place and can be understood only within a framework of *interpersonal development* (Fratini, 2012). For this reason, psychoanalytical pedagogy seems to be an interesting key of interpretation for tackling the issue of adults, and in particular, that of the father coping with the disabilities of a child. Thus psychoanalytical pedagogy makes its mark, through its *educational scope* that contrasts all forms of educational spontaneity and/or excessive medicalisation which leads us to think that "who" is in a situation of vulnerability does not only need to be "freed" – in the meaning offered by Pfister, *of freeing the soul from harmful fixed ties* – but also needs to be imagined and driven "elsewhere", "towards the not yet" of themselves (Caldin, 2017; Caldin, 1996)<sup>2</sup>.

2 In this scenario, it is also important referring to the *clinical method* (Caprara, 1976) and to the *historical-clinical method* (Batacchi, 2006) that can have some affinities (e.g. understanding and helping mankind) with psychoanalytic pedagogy, but also significant specificity. In this regards, the clinical method is strongly based on the therapeutic relationship which is represent one of key moment to



### 3. Psychoanalytic pedagogy and parenthood: an attempt at encounter

The idea that comes from *psychoanalytic pedagogy* is that it considers education as a possibility – open to the future – in continuous evolution and expansion, emphasising education for all and lifelong education. The possibility to learn also in adulthood, and the idea of continuous growth, is very close to the vision of family education which focuses on the *protagonism* of the parents, who become an active part of the educational and family project (Pavone, 2014; 2009). This family education overcomes the concept of a “school for parents” characterised by transmissive methods *for* the parents (“*you must*”), seen and considered as incompetent and therefore in need of being educated, emphasising their passivity and parental inadequacy. In the meaning we propose in this paper, family education is in line with the epistemological question of Pedagogy of the Family, for which we offer Catarsi’s definition (2002): pedagogy of the family aims to study the relationships and processes developing within families, in the relationship between parents and children, but also to investigate all issues concerning parental education, particularly the methods by which such educational experiences are organised and managed.

In this regard, despite of a psychoanalytic approach, the perspective of family education we hold dear cannot be “restorative”, committed to repairing damage, but rather “promotional”, enhancing the existing family resources and allowing parents to give their best and autonomously build parental style rich in “reflective rationality” (Catarsi, 2008; Pourtois, Desmet & Lahaye, 2006).

At the same time, this concept of family education evokes the idea of family education towards the children, but also educational actions targeting the parents, supporting and accompanying them in their educational responsibilities towards their children. One of the central elements of family education is the parental act of taking care – the promotion of educational well-being, the quality of the parent-child relationship and the development of parental skills – to allow mothers and fathers to experience parenthood with increased educational responsibility, with a view to both personal and family empowerment (Quartier, Prélaz & Délitroz, 2020). In this sense, taking care is not simply the concern for or worry over family-related issues: it refers to supporting families’ greater awareness of authoritative parenthood, which enhances both the quality of parent-child relationships and the quality of relationships within the community (Pourtois & Desmet, 2017).

However, and in particular, in families with children with disabilities the idea of family education linked to obsolete social representations is still very strong: this is the idea of “training” parents and the fact that – although less so than in the past – the disability can accentuate the (already) dysfunctional aspects of a family. The current increasing demand for *support to parenthood* shows that we must start to

the method. The relationship is itself object of observation during the process (e.g. involvement and distancing in the setting). Indeed, the verbal exchange – during the structured interview – is used as a tool for self-awareness and change and it represents the second key moment of the process. The historical-clinical method gives a great importance to the meaning that the patient attributes to the events of their life (such as a narration), with the attempt to insert the symptom within the subjects’ life, in the personal life of the patient. The knowledge of the patient is fundamental in order to understand his/her adaptive (or not) functioning.



break down the borders: this means that it is no longer enough for the system of educational and social services to take on board *only* the so-called “difficult” parents, and that – with a view to preventive education – it is becoming indispensable to promote well-being in *all* families, even in so-called ordinary situations (Pryce, Tweed, Hilton & Priest, 2017). Moreover, supporting families in a clinical dimension no longer represents a *fully adequate response* to the needs of families, instead we must promote a participatory logic of common educational actions and interventions aiming to create opportunities for growth in ordinary, everyday and real dimensions. In this sense, it is indispensable to provide inclusive services for early childhood which meet both the common and diversified needs of all families (including those with disabled children). Support parenthood should take place in the spaces of all (nursery and infant school) to underline the commonalities of the educational issues of the families of today, as well as the challenges facing families in educating in the so-called years of the weakening of parental education (Recalcati, 2011).

#### 4. Psychoanalytic pedagogy and disability: another attempt at encounter

Disability tests not only educational theories but also its practices, which must investigate unforeseen events which necessarily beg new questions. Disability is in fact an event which escapes control, it lies beyond the field of predictability and ready-made solutions. Pedagogy based on the use of pre-packaged methodologies alone is forced to “ignore” all those aspects of human life which do not conform to pre-built schemes or “imprison” unforeseen circumstance within the interpretative grids of the expected, leading to results which are not always positive. Educational thought must be willing to accept the unexpected, so that it can also tackle those situations in which the developed knowledge and methodologies are found to be inadequate or insufficient (Iori, 2001). Special Education – which traditionally deals with situations of disability – in particular is “a continuous composition of relations, actions, projects, points of view. It is above all many questions. Which cannot always be answered by what is already known. Special Education should learn to live with questions that do not already have prepared answers. Its task is to seek answers without being sure of finding them. Its task is to live with open, and therefore real and authentic, questions” (Canevaro, 2013, p. 182). In a way, this is linked to the notion of “artistry” (creativity, skill and knowledge) which, according to Iori (2001), implies the finely tuned ability – of those working in the education field – to find the most “suitable” answers to unforeseen situations (creatively), through the blending of knowledge (theory) and experience (practice). This means that creativity is not a synonym of improvisation and/or a spontaneous attitude, but on the contrary creativity is a skill which requires mainly solid training and practical experience. Creativity is a form of knowledge which cannot be merely learned, but is rather built through and in everyday practice. In other words, creativity is a cognitive operation that attempts to solve the conflict generated by an unexpected situation (such as the disability) and the real needs of the persons involved (the parents’ need for stability, the need to feel welcome and included in society) in order to close the gap between two points which, initially, seem very distant. Creativity springs from the



need to find the *most suitable* answers for unexpected situations, and in the reflections we offer here, it is based on the consideration that the parents are the bearers of knowledge which must be accompanied, with equal dignity, with that of education experts (the decentralisation of knowledge - Canevaro, 2006). Moreover, a second element marking our proposals is linked to the fact that “the most suitable answer” to the situation is that which focuses on taking care (in a socio-educational dimension) – rather than mere care (in a clinical or medicalised dimension).

Decentralising knowledge is an indispensable prerequisite in educational actions with families with disabled children, thus acknowledging equal dignity and complementary knowledge of both parents and specialists. Creating an alliance between the family and the services represents a fundamental step in the construction of a common educational project (May & Harris, 2020). The decentralisation of knowledge requires co-development: specialists can learn something that they would not learn in any other way than in the direct relationship with and alongside the parents, having, humbly and respectfully, listened to their voice and having “walked” together (Milani, 2018; Caldin & Serra, 2011; Bouchard & Kalubi, 2001). The family can also learn together with the specialists, who can help them to shift their vision beyond the deficit, fostering a co-developmental path of growth and maturity involving the “triad” of parents, children and specialists.

## 5. Education implications to support fatherhood

The idea of “taking care of”, in the reflections we offer here, is aligned with the so-called methodological *twin track approach*. The twin-track approach is the most commonly referenced approach by UN (DESA, 2011). It is usually cited in the narrative of mainstreaming disability as a thematic issue in an international scenario. The twin-track approach recognises the need for a) providing disability-specific initiatives to support the empowerment of persons with disabilities; b) integrating disability-sensitive measure into the design, implementation, monitoring and evaluation of all policies and programmes. This approach to inclusion can only lead to successful outcomes for people with disabilities (and their families), if emphasis is put on both tracks, as they complement each other. If the focus is only placed on either of the two, it cannot be called a twin-track approach anymore and there is likely to be an imbalance (Al Ju’beh, 2015). On one hand, some actions we propose specifically target persons with disabilities and their families (specific plan); on the other hand, other actions aim to identify and overcome the barriers present in the mainstream context, seeking to include the question of “disability” – through an approach linked to human rights, in conformity with the UN Convention on the Rights of Persons with Disabilities (2006) – in the agenda and programmes of educational services for early childhood (general plan) (Oliver, 1996).

In relation to the “first track”, above all in the period following the communication of the diagnosis, projects – and it is here that we offer a first educational recommendation/proposal – supporting parenthood must be run in a *home dimension*, initially focusing on familiarisation, mutual knowledge and mutual recognition between parents and the child with disability. Projects supporting post-natal development could be enhanced by a home-care educational figure in order to: 1) help both parents cope with the return home from hospital; 2) facilitate the educational presence of the father; 3) support the child’s attachment to the father (and not just



to the mother); 4) encourage fathers to find space in the mother/child dyad and, parallel to this, support the mother in developing a facilitating role in this process. Home-care projects must be planned during the times of the day when fathers can realistically be present. This means that the project should involve interventions in the evenings and/or at the weekends, flexible interventions which respond to the needs of the families. It could also be interesting to design micro-interventions targeting only the father: it is important to work with the father figure even without the mother, in order to involve him responsibly and actively in the educational relationship with the child, without needing the mother's mediation. An effective home-care project must not only begin promptly after the birth of the child (or the communication of the diagnosis), but must also be able to evolve gradually and continue over time, accompanying the family in moments of normal transition (e.g. starting nursery school or infant school) as well as in critical moments (e.g. returning home after a long period in hospital, worsening of the child's disability, etc.) thus also with medium- and long-term educational purposes (Cinotti, 2017). With reference to early childhood services, in our opinion – in a home-care dimension – the educational figure plays a fundamental role in facilitating the transition from the home environment to nursery and/or infant school: in many cases, this transition must be encouraged and supported. It is an important moment which helps the child leave that primary bond with his/her parents and experience affective relations outside the family. However, to be able to develop a disposition to exploring the world and opening up to other relations, the transition to the environment outside of the family context is neither linear nor taken for granted, and requires an integrated network of relationships with multiple figures, like that between parents, children and educators/teachers (Noël & Cyr, 2009).

In relation to the “second track”, i.e. that which aims to place the “disability” on a mainstream level – and here we offer a second, cultural recommendation/proposal – we consider that the new directions of support to parenthood must, over time, not only go beyond a home-care dimension but must also be fuelled by ordinariness, in relation with other parents (with or without children with disabilities): this principle stands for all parents, and particularly for the fathers and mothers of children with disabilities who need to be accompanied in exercising their educational functions, in regular contexts, through an inclusive approach (D'Alessio, 2011). Support to parenthood cannot therefore be thought of in a clinical dimension, but must take place in spaces common to all parents, in order to underline the commonalities of parental education. Childhood services, for example, potentially represent one of the most inclusive contexts that families can come across in their life path (Catarsi & Fortunati, 2004). They are accessible contexts (“open to all”) that correspond to the diversified demands of parents. These services should be understood as open, proactive and comprehensive places for educationally supporting children and/with their parents through ordinary and widespread support which – where necessary – is also able to guide families towards targeted services for special needs (health, psychotherapy and so on) (Booth & Ainscow, 2002). Alongside this, another great strength of these services is the precocity of their action: childhood services work with parents with young and very young children and can offer universal prevention (“universal” being a synonym of “for one and all”) and primary prevention through a wide range of services aiming to strengthen parenthood, as well as the significant learning and educational opportunities targeting children.

We should underline that parents themselves can also benefit from these educa-



tional opportunities – and it is here that we offer a third, political and socio-cultural recommendation/proposal – as they are accompanied by educators and teachers. We certainly need to rethink the issue of the participation of fathers in the life of these services, within the current scenarios (e.g. the hectic schedules of both fathers and mothers, the difficulty of both parents in reconciling professional and family life, educational difficulties etc.) in order to co-construct an educational project between families and services focusing on the growth, socialisation and well-being of the child (Cinotti, 2017). In the current socio-cultural context, fostering the participation of fathers in the services demands that the educational policies of the services be placed in close relation with the new programming strategies. In this regard, we may outline some – perhaps long-term – perspectives aiming to trigger change in childhood services: a) promote training sessions with key figures in both the municipal services and the nursery and infant schools (e.g. educational coordinators) to foster a culture of the father and the importance of the father figure for the growth and development of the child (with or without disabilities); foster cooperation between universities and education services to draft the *Educational Manifesto* for childhood services, aiming to place greater importance on the father figure in pre-school services guidelines; further enhance the role of the father in courses and workshops in the Education Sciences degree programmes targeting future preschool and primary school teachers and educators; study the issue of the father in training courses for in-service teachers and educators. The need to actively *involve* fathers in the services demands that we rethink the organisation of this context in even its most “practical” aspects. In this regard, it may be useful that: a) educational coordinators request the presence of both parents at initial interviews and other meetings throughout the school year, if the father (or mother) is not available due to other commitments, the proposal is to postpone the date of the meeting, in order to avoid sending the message that “the presence of only one parent is OK”. To do so the services must ensure flexibility and attention to the timetables proposed. It would be hoped, through a *reasonable arrangement*, that the meeting times respond better to the schedules and needs of the families rather than those of the service; b) teachers and educators run “mixed” socio-educational workshops for fathers, using innovative methods (also in this case, we underline the importance of the choice of times and days to be proposed). By “mixed” workshops we refer – and we believe this to be indispensable – an educational programme potentially targeting *all* fathers in an *ordinary* dimension to emphasize the *common aspects* characterising the fact of being a father and the educational issues relating to young children. Specifically, it may be useful to: 1) where possible, include a male figure (from inside or outside the service) among the workshop leaders/facilitators; 2) avoid “recycling” initiatives more suited to mothers, but rather consider new projects which respond better to the characteristics of the fathers; 3) guarantee continuity of the initiatives proposed to avoid “improvised” projects and/or impromptu situations (Cinotti, 2017; Cinotti & Caldin, 2016).

## Conclusion

In the light of the paper’s focused, more recommendations can be offered for future research that for future practice. Some recommendations include: scholars should continue to improve the quality research on fatherhood by the adoption of



advanced analytical procedures; scholars should also develop more theoretical model about the mechanism by which father involvement may influence mothers, and may have consequences on fathers themselves (Pelchat, 2010); practitioners should always have in mind of the multi-faceted nature of father involvement, because there is no “one way” for fathers to be involved (Mitchell & Lashewicz, 2019); practitioners should also develop a model of early intervention for families in order to support each parent as an individual, as a part of a couple, as a parent. Thus, it is likely that practitioners will meet the need of fathers by working toward strengthening parental dyad and by working toward strengthening parental support in a socio-educational dimension. In particular, the potential has been highlighted of socio-educational dimension to support families of children with disabilities to successfully negotiate life-cycle transitions, respond to stressful like events and avoid becoming stuck in negative forms of interaction (Marshak, Lasinsky & Williams, 2019).

Seeking to involve fathers at home and in the childhood services could be one of the directions for reversing that *educational weakening* which characterises the pedagogy of educational relationships today.

## References

- Al Ju'beh, K. (2015). *Disability inclusive development toolkit*. Bensheim: CBM.
- Argentieri, S. (1999). *Il padre materno. Da san Giuseppe ai nuovi mammi*. Roma: Meltemi.
- Ballard, K., Bray, A., Shelton, E.J., & Clarkson, J. (1997). Children with disabilities and the education system. *International Journal of disability, development and education*, 44, 229-241.
- Batacchi, M.W. (2006). *La conoscenza psicologica. Il metodo, l'oggetto, la ricerca*. Roma: Carocci.
- Booth, T., & Ainscow, M. (2002). *Index for Inclusion. Developing learning and participation in schools*. Bristol: CSIE.
- Bouchard, J.M., & Kalubi, J.C. (2001). Difficoltà di comunicazione tra genitori e operatori. Empowerment e sviluppo degli apprendimenti. In P. Milani (ed.). *Manuale di educazione familiare. Ricerca, intervento, formazione* (pp. 295-299). Trento: Erickson.
- Caldin, R. (2017). Le possibilità dell'utopia. Anna Freud e il rapporto tra psicoanalisi e pedagogia. In A. Grotta, P. Morra (eds.), *L'utopia del possibile. Anna Freud tra pedagogia e psicoanalisi* (pp. 43-61). Bologna: Edizioni Pendragon.
- Caldin, R. (2016). Oskar Pfister. La pedagogia psicoanalitica. In P. Crispiani (ed.), *Storia della Pedagogia speciale. L'origine, lo sviluppo, la differenziazione* (pp. 333-342). Pisa: ETS.
- Caldin R. (1996). *Educazione e psicoanalisi. Il ruolo di Pfister, amico di Freud*. Roma: Borla.
- Caldin R., & Serra F. (eds.) (2011). *Famiglie e bambini/e con disabilità complessa. Comunicazione della diagnosi, forme di sostegno, sistema integrato dei servizi*. Padova: Fondazione E. Zancan.
- Canevaro, A. (2013). Pedagogia Speciale – Lessico. *Italian Journal of Special Education for Inclusion*, 1, 181-184.
- Canevaro A. (2006). *Le logiche del confine e del sentiero: una pedagogia dell'inclusione (per tutti, disabili inclusi)*. Trento: Erickson.
- Caprara, G.V. (1976). *Personalità e aggressività*. Roma: Bulzoni.
- Caprara, G.V., & Accursio, G. (1994). *Psicologia della personalità. Storia, indirizzi teorici e temi di ricerca*. Bologna: Il Mulino.
- Catarsi, E. (2008). *Pedagogia della famiglia*. Roma: Carocci.
- Catarsi, E. (2002). Il ruolo dell'animatore di educazione familiare. *Studium Educationis*, 1, 31-39.



- Catarsi, E., & Fortunati, A. (2004). *Educare al nido. Metodi di lavoro nei servizi per l'infanzia*. Roma: Carocci.
- Cinotti, A. (2017). *Padri e figli con disabilità. Incontri generativi, nuove alleanze educative*. Napoli: Liguori.
- Cinotti, A. (2017). Accompagnamento. *Studium Educationis*, 3, 137-140.
- Cinotti, A., & Caldin, R. (eds.) (2016). *L'educare dei padri. Teorie, ricerche, prospettive e disabilità*. Napoli: Liguori.
- Codispoti, O., & Bastianoni (2001). *Che cos'è la psicologia clinica*. Roma: Carocci.
- Cremerius, J. (ed.) (1975). *Educazione e psicoanalisi*. Torino: Boringhieri.
- D'Alessio, S. (2011). *Inclusive education in Italy. A critical analysis of the policy of Integrazione Scolastica*. Rotterdam: Sense Publishers.
- DESA (2011). *Best practices for including persons with disabilities in all aspect of development efforts*. New York: UN.
- Erikson, E.H. (1984). *I cicli della vita. Continuità e mutamenti*. Roma: Armando.
- Fratini, C. (2012). Famiglie e rapporto genitori-figli disabili. In L. d'Alonzo, R. Caldin (eds.), *Questioni, sfide e prospettive della Pedagogia Speciale* (pp. 115-128). Napoli: Liguori.
- Herbert, E., Carpenter, B. (1994). Fathers – The secondary partners. Professional perceptions and father's recollections. *Children and Society*, 8, 31-41.
- Iori, V. (2001). *Fondamenti pedagogici e trasformazioni familiari*. Brescia: La Scuola.
- Lacan, J. (2005). *I complessi familiari nella formazione dell'individuo*. Torino: Einaudi.
- Lamb, M.E. (ed.) (2010). *The role of the father in child development*. Hoboken: John Wiley & Sons.
- MacDonald, E., Hastings, R. (2010). Fathers with children with developmental disabilities. In M.E. Lamb (ed.), *The role of the father in child development* (pp. 486-516). Hoboken: John Wiley & Sons.
- Marshak, L.E., Lasinsky, E.E., Williams, C. (2019). Listening to fathers. Personal impacts of raising children with Down syndrome. *Journal of Intellectual Disabilities*, 23, 3, 310-32.
- May, T., Harris, K. (2020). Parent training programmes can improve parenting skills in parents with intellectual disabilities. *Journal of Paediatrics and Child Health*, 56, 172-173.
- Milani, P. (2018). *Educazione e famiglie. Ricerche e nuove pratiche per la genitorialità*. Roma: Carocci.
- Mitchell J.L., Lashewicz B. (2019). Generative fathering. A framework for enriching understandings of fathers raising children who have disability diagnoses. *Journal of Family Studies*, 25, 2, 184-198.
- Noël, R., & Cyr, F. (2009). Le père : entre la parole de la mère et la réalité du lien à l'enfant. *La psychiatrie de l'enfant*, 52, 2, 535-591.
- Oliver, M. (1996). *Understanding disability. From theory to practice*. Basingstoke: Macmillan.
- Pavone, M. (2014). *L'inclusione educativa. Indicazioni pedagogiche per la disabilità*. Milano: Mondadori.
- Pavone, M. (ed.) (2009). *Famiglia e progetto di vita. Crescere un figlio disabile dalla nascita alla vita adulta*. Trento: Erickson.
- Pelchat, D. (2010). Prifam. A shared experience leading to the transformation of everyone involved. *Journal of Child Health Care*, 14, 3, 211-24.
- Pfister, O. (1927). *Pedagogia e Psicoanalisi*. Napoli: Giannini.
- Pietropolli Charmet, G. (2000). *I nuovi adolescenti. Padri e madri di fronte a una sfida*. Milano: Raffaello Cortina.
- Pourtois, J.P., Desmet, H. (2017). La città dell'educazione. Agire insieme per l'emancipazione di tutti. *Ricerche di Pedagogia e Didattica*, 12, 1, 123-130.
- Pourtois, J.P., Desmet, H., & Lahaye, W. (2006). Il buon trattamento. Bisogni del bambino - Competenze dei genitori. *Rivista Italiana di Educazione Familiare*, 1, 2, 109-125.
- Pryce, L., Tweed, A., Hilton, A., & Priest, H. M. (2017). Tolerating uncertainty. Perceptions of the future for ageing parent carers and their adult children with intellectual disabilities. *Journal of Applied Research in Intellectual Disabilities*, 30, 1, 84-96.
- Quartier, V., Prélaz, I., & Délitroz, C. (2020). Culpabilité parentale et processus diagnostique en clinique de l'enfant. Une relation ambiguë. *Psychologie Française*, 65, 4, 325-335.



- Recalcati, M. (2011). *Cosa resta del padre? La paternità nell'epoca ipermoderna*. Milano: Raffaello Cortina.
- Ridding, A., & Williams, J. (2019). Being a dad to a child with Down's syndrome. Overcoming the challenges to adjustment. *Journal of Applied Research in Intellectual Disabilities*, 32, 3, 678-690.
- UN (2006). *Convention on the Rights of Persons with Disabilities*. New York: UN.
- West, S. (2000). *Just a Shadow? A Review of Support for the Fathers of Children with Disabilities*. Birmingham: Handsel Trust.