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Designing and Implementing a Training Program for Psychological and Psychoeducational Support Services in Angolan Higher Education

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University student mental health has become a major concern for higher education systems worldwide, particularly where specialized support services are scarce. This article examines ANGOSAP, an Erasmus+ Capacity Building in Higher Education project coordinated by the University of Cádiz and designed to transfer and adapt a psychological and psychoeducational support model to Angolan universities. Using a descriptive qualitative design based on implementation records, the study analyzes the project rationale, the co-design of the Centers for Diagnostic and Psychological and Psychoeducational Guidance (CDOP), the training strategy for university staff, and the development of operational and ethical protocols. Early evidence points to strong institutional engagement, contextual adaptation of the service model, hybrid training delivery, and the progressive establishment of support structures in Angola. The article argues that ANGOSAP provides an evidence-informed framework for strengthening student well-being, academic persistence, and equitable access to psychological and psychoeducational care in resource-constrained higher education settings.

Keywords: *Higher education; student mental health; psychoeducational support; capacity building; Erasmus+; institutional transfer; university well-being.*

Introduction

Student mental health is now recognized as a critical issue in higher education because psychological distress affects academic performance, persistence, social integration, and quality of life (Sheldon et al. 2021). The problem is especially acute in sub-Saharan Africa, where empirical evidence remains limited and institutional support systems are often weak or absent. In Angola, the growth of university participation has not always been accompanied by equivalent development of specialized psychological and psychoeducational services (Julius et al. 2024). In this regional context, the creation of institutional frameworks must navigate not only severe resource constraints but also the complexities of adapting Global North psychological foundations to local systemic needs (Kaminer & Shabalala 2019).

In recent years, higher education institutions have been increasingly called upon to play an active role in promoting student well-being, not only through counseling services but also through institutional policies, staff development,

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and referral systems. In this context, student mental health support becomes part of the university's educational mission and a key component of quality assurance, inclusion, and student success (Souvlakis & Ridge 2025, UNESCO IESALC 2024).

The scientific relevance of this topic lies in the need to move beyond prevalence studies and examine how universities can build sustainable support structures. Although international literature increasingly documents student mental health needs, fewer studies explain how service models can be transferred, adapted, and institutionalized in resource-variable African contexts. This gap justifies the present article.

The aim of this study is to analyze the institutional logic, implementation process, and early outcomes of ANGOSAP in Angolan universities. More specifically, the article describes the rationale and structure of the CDOP model, examines the project's training and transfer strategy, and identifies the main opportunities and challenges for sustainability. The guiding questions are: How can a university psychological and psychoeducational support model be transferred to Angolan higher education institutions? Which implementation components are most important for contextual adaptation? What preliminary evidence supports the feasibility and institutional value of the model?

This study seeks to systematize an under-documented African higher education experience and to propose a framework for institutional capacity building in student mental health support. This study is positioned at the intersection of student mental health, institutional capacity building, and knowledge transfer in higher education. It therefore contributes to the literature not by testing a clinical intervention, but by documenting how an inter-university support model can be operationalized through training, local adaptation, and gradual institutional embedding.

Project Context

ANGOSAP (Project 101128979, Erasmus+ CBHE) is a transnational cooperation initiative coordinated by the University of Cádiz (UCA), with Hochschule RheinMain as a strategic European partner and four Angolan higher education institutions as beneficiaries, Óscar Ribas University (UOR), the University of Namibe (UNINBE), Lueji A'Nkonde University (ULAN), and the Instituto Superior de Ciências da Educação do Bié (ISCED-Bié) (Universidad de Cádiz 2024).

The project runs from December 2023 to March 2027 and is organized through work packages covering management, training, infrastructure, knowledge transfer, communication, and quality assurance. Its general goal is to create and develop a Center for Diagnostic and Psychological and Psychoeducational Guidance (CDOP) at Óscar Ribas University, with a model that can be transferred to the partner universities. The project follows the broader Erasmus+ logic of capacity building, which emphasizes institutional

strengthening, innovation, and sustainable cooperation between universities (Armendáriz-Núñez et al. 2022, European Commission 2023, Touriñán López 2019).

ANGOSAP builds on the experience of the Psychological and Psychoeducational Support Service (SAP) at the UCA and on the good practices of Hochschule RheinMain. From the beginning, the project has linked service design, staff development, and institutional strengthening as interdependent parts of the same transfer process. In this framework, ANGOSAP should be understood as a transfer project rather than a simple training initiative. Its value lies in the combination of service design, staff development, and organizational embedding, all of which are necessary for the creation of durable university-based support services.

Training Design

One of the most strategic components of ANGOSAP has been the design and implementation of a training program for the staff responsible for launching and consolidating the CDOPs in the Angolan universities (Cheng 2021). Rather than a punctual activity, training was conceived as the backbone of institutional transfer, because the sustainability of the services depends not only on material resources but also on the technical, organizational, and ethical preparation of the professionals involved.

The initial training plan was developed within Work Package 2 and was based on the practices of the SAP at the UCA. It included four modules: introductory training on service creation, launch, and operation; preventive activities for the university community; advisory activities related to psychological and psychoeducational care; and clinical supervision sessions delivered both in person in Angola and online with real CDOP cases.

This structure reflected a broad understanding of the service, since the future CDOPs were expected to integrate prevention, guidance, technical management, and continuous professional supervision rather than focusing exclusively on individual care.

Adaptation Meeting

A decisive moment in the consolidation of the program took place in March 2024 during a working meeting at UOR in Luanda. At that meeting, the initial training plan was presented to the consortium partners and discussed collectively, which made it possible to revise the starting proposal and adapt it to the real needs of the participating Angolan universities.

This was not a merely formal adjustment but a genuine co-construction process aimed at ensuring the cultural, institutional, and operational relevance of the training content. As a result, the planning incorporated changes that adapted administrative and care protocols to the local context, strengthened the practical

usefulness of the content, and ensured that the training responded to the organizational conditions of each partner university.

Training Delivery

Training was delivered through a hybrid synchronous-asynchronous model designed to overcome geographical barriers, facilitate inter-university participation, and support continuity of learning. A dedicated space was created in the UCA Virtual Campus through Moodle, serving as a support environment and complement to the live sessions (Abusalem et al. 2024).

The training strategy adopted in ANGOSAP is consistent with the idea that knowledge transfer in higher education is most effective when it combines structured learning, practical supervision, and contextual adaptation. The hybrid model used in the project allowed the consortium to combine standardized content with local co-construction, which increased both relevance and ownership among the participating universities (Cheng 2021, Armendáriz-Núñez et al. 2022).

This virtual classroom brought together presentations, videos, support materials, supplementary resources, and assessment quizzes, functioning as an organized repository with continuous access for participants. The platform was especially important because it ensured traceability, later access to content, and standardization of the materials transferred from the coordinating institution.

The training sessions themselves were mainly delivered through Google Meet, combined with autonomous work in Moodle and key moments of face-to-face coordination. All sessions were recorded so that participants could review them later, improving accessibility and reducing the impact of possible logistical or connectivity difficulties. This hybrid format enabled a flexible and scalable transfer of knowledge while preserving the direct interaction needed for technical discussion and contextual adjustment.

The use of hybrid delivery was particularly important in a transnational project of this kind because it reduced geographical barriers while preserving interaction, feedback, and continuity. In this sense, the digital platform was not merely a repository of materials but a pedagogical infrastructure that supported access, traceability, and asynchronous reinforcement of learning. The training took place in three phases.

Phase 1 and Phase 2

The first training phase, implemented in May 2024, focused on the basic competencies needed for the initial operation of the CDOPs. Three core courses were delivered. Course 1 addressed the nature of a university psychological and psychoeducational support service and the functional definition of the CDOP. Course 2 focused on the basic functioning of the service and on administrative

and management protocols. Course 3 examined the role of the CDOP in training, research, and university extension.

The second training phase included two major blocks. The first corresponded to Course 4, devoted to preventive activities within the CDOP, and was delivered through thematic workshops on peer tutoring, suicide prevention, emotion management, eating disorders, domestic violence and gender, and healthy habits. The second block corresponded to Course 5, focused on advisory activities and direct psychological and psychoeducational care.

Course 5 became one of the most advanced components of the training plan because it addressed assessment, diagnosis, intervention, and follow-up procedures that would later support the day-to-day practice of the CDOPs. Its workshops moved from understanding psychopathology to assessment, intervention, and the use of unified protocols.

Within the broader training pathway, Course 5 represented a turning point because it moved the program from general service design toward direct clinical and psychopedagogical action. It therefore functioned as the bridge between foundational training and advanced operational competence, preparing teams to respond to real cases in a coherent and ethically grounded way. Course 5 consisted of the following workshops: Psychopathology of children, adolescents, and adults, was delivered in two sessions and offered a complementary view of clinical and applied practice. Psychopedagogical assessment and diagnosis, strengthened the teams' ability to identify learning difficulties, academic guidance needs, and educational support requirements in the university setting. Psychological assessment and diagnosis, was especially important for consolidating assessment criteria and harmonizing how the CDOPs identify emotional and relational needs among students. Psychological and psychopedagogical intervention and follow-up, had a highly applied character and focused on professional decision-making and support for cases under follow-up. Unified protocol for the transdiagnostic treatment of emotional disorders, added an integrative dimension aimed at standardizing responses to frequent emotional problems and facilitating coherent intervention across contexts.

Overall, Course 5 and its workshops provided a solid basis for direct psychological and psychoeducational care in the CDOPs, allowing teams to move from understanding psychopathology to assessment, intervention, and procedural standardization.

Phase 3

This phase is intended to consolidate the competencies developed in the previous stages and to support the progressive institutionalization of the CDOPs within the participating universities. It includes in-person master classes, online mentoring, and bimonthly clinical sessions designed to reinforce applied knowledge, address emerging implementation challenges, and provide continuous professional support to the teams responsible for service delivery. In contrast to the earlier phases, which focused mainly on foundational training and

the acquisition of technical content, Phase 3 emphasizes supervised practice, case discussion, decision-making in complex situations, and the adaptation of intervention procedures to the specific realities of each institution. It also creates a structured space for reflecting on ethical dilemmas, interprofessional coordination, referral criteria, and the sustainability of the services over time. Through this combination of advanced training and ongoing accompaniment, Phase 3 strengthens local autonomy while preserving the quality standards and shared operational principles established during the transfer process.

Results

The project has established a clear institutional architecture for the creation and transfer of psychological and psychoeducational services in Angolan universities. It defined a flagship CDOP at Óscar Ribas University and a transferable model for the partner institutions, combining service delivery, psychoeducational guidance, prevention, and referral functions.

Professional training and knowledge transfer followed a hybrid model combining face-to-face coordination in Luanda, asynchronous Moodle-based learning, and synchronous workshops via Google Meet. The training process involved participants from the four Angolan partner institutions.

The documents also show that the European reference model was not transferred mechanically; instead, it was discussed and adjusted to local institutional needs, including service operation, ethical safeguards, and implementation pathways.

Discussion

From the perspective of the university's third mission, ANGOSAP illustrates how knowledge transfer can move beyond dissemination and become an engine for institutional innovation, social engagement, and service development. The project shows that capacity building is most sustainable when it is embedded in collaborative governance, shared responsibility, and long-term knowledge circulation (Compagnucci & Spigarelli 2020, Gaffaro & Naranjo 2025).

In higher education, student support should be understood as part of educational quality, inclusion, and retention policy. In psychology, the project highlights the value of culturally responsive, brief, university-based care linked to referral systems and psychoeducational work. These dimensions are especially relevant in contexts where institutional support structures are still emerging.

The relevance of ANGOSAP lies less in testing a psychological intervention than in showing how higher education institutions can build support capacity under constrained conditions. This distinguishes the project from much of the

student mental health literature, which often focuses on prevalence or symptom burden rather than service-building processes (UNESCO IESALC 2024).

The findings are consistent with the literature stressing that student mental health support requires systemic responses rather than isolated clinical actions. The combination of training, operational protocols, infrastructure, and quality assurance supports the idea that sustainable services emerge when expertise, governance, and contextual legitimacy develop simultaneously (Armendáriz-Núñez et al. 2022, Compagnucci & Spigarelli 2020, Touriñán López 2019). This systemic approach aligns with previous African higher education experiences, which highlight that institutionalizing mental health support requires balancing broad consultation with the definition of clear service boundaries and operational frameworks (Kaminer & Shabalala 2019).

For higher education, the project implies that student support should be understood as part of educational quality, inclusion, and retention policy. For psychology, it highlights the value of culturally responsive, brief, university-based care linked to referral systems and psychoeducational work (Gaffaro & Naranjo 2025).

Conclusions

ANGOSAP provides an emerging model for building psychological and psychoeducational support services in Angolan universities through institutional transfer, contextual adaptation, and capacity building. The model appears transferable when adaptation is participatory, when staff training is systematic, and when implementation includes infrastructure, ethical protocols, and sustainability mechanisms.

The article's main contribution lies in documenting an early-stage Euro-African framework for student mental health support in higher education, an area still underrepresented in the literature on sub-Saharan Africa. Its principal limitation is that the evidence is still preliminary and based largely on project documentation and early implementation data rather than longitudinal student outcomes.

Future research should assess service utilization, satisfaction, symptom change, academic persistence, and institutional embedding over time across the participating universities.

References

Abusalem A, Bennett L, Antonelou-Abusalem D (2024) Engaging and Retaining Students in Online Learning. *Athens Journal of Education*, 11(1), 51-69. https://doi.org/10.30958/aje.11-1-4

Armendáriz-Núñez E, Tarango J, Machin-Mastromatteo JD (2022) Modelo de transferencia de conocimiento para vincular instituciones de educación superior en ciencias sociales y humanidades con entidades sociales. *IE Revista de Investigación Educativa de la REDIECH*, 13(1), e1491.

Cheng ECK (2021) Knowledge transfer strategies and practices for higher education institutions. *VINE Journal of Information and Knowledge Management Systems*, 51(2), 288–301. https://doi.org/10.1108/VJIKMS-11-2019-0184.

Compagnucci L, Spigarelli F (2020) The third mission of the university: A systematic literature review on potentials and constraints. *Technological Forecasting and Social Change*, 161, 120284. https://doi.org/10.1016/j.techfore.2020.120284

European Commission (2023) Erasmus+ programme guide 2024. Publications Office of the European Union.

Gaffaro AJ, Naranjo Y (2025) The third mission of universities towards knowledge transfer, innovation, entrepreneurship, and sustainable development: A systematic literature review. *RAE: Revista de Administração de Empresas*, 65(3).

Julius B, Putteeraj M, Somanah J (2024) A systematic review of university students' mental health in sub-Saharan Africa. *Transformation in Higher Education*, 9, a316. https://doi.org/10.4102/the.v9i0.316

Kaminer D, Shabalala N (2019) Developing a student mental health policy for a South African university: Consultation, contestation and compromise. *South African Journal of Higher Education*, 33(5), 196–212. https://doi.org/10.20853/33-5-3597

Sheldon E, Simmonds-Buckley M, Bone C, Mascarenhas T, Chan N, Quigley A, et al. (2021) Prevalence and risk factors for mental health problems in university undergraduate students: A systematic review with meta-analysis. *Journal of Affective Disorders*, 287, 282–292. https://doi.org/10.1016/j.jad.2021.03.054

Souvlakis N, Ridge DT (2025) Queering Psychology Education: Fostering Inclusivity and Destigmatization in Academic Curricula and Mental Health Practices. *Athens Journal of Psychology*, *1*(3), 139-150. https://doi.org/10.30958/ajpsy.1-3-1

Touriñán López JM (2019) Estudiar es actividad común externa y siempre educamos con la actividad: Una aproximación desde la perspectiva mesoaxiológica.

UNESCO IESALC (2024) *Supporting the mental health and well-being of higher education students*. UNESCO.

Universidad de Cádiz (2024) *AngoSAP: Desarrollo de los servicios de atención psicológica y psicopedagógica en universidades angolanas*. https://www.angosap.org/es