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Evaluation of Integrative Community Therapy with Domestic Violence Survivors in Quito

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Abstract

Integrative community therapy is a public health methodology used to address community issues such as depression, substance abuse, and stress. This approach is distinctive in that it is founded on critical pedagogy, cultural anthropology, communication, resilience, and systems theory. Furthermore, creative arts therapies point to the therapeutic value of music. Through a pre-post comparison group design, this study used ICT and a music workshop with domestic violence survivors in Quito, Ecuador. The six-week study included 87 women, 49 in the intervention group and 38 in the comparison group. Self-esteem, general health, resilience, attitudes towards dating violence, and social support were all assessed. In addition, members of the intervention group were asked open-ended questions about their experiences, and some took part in a focus group.

Keywords: Domestic violence • Community support • Social support

Introduction

Violence against women is a widespread issue in Ecuador, affecting 65% of women at some point in their lives. Over the last 30 years, the country has made several advances, including international human rights declarations, national declarations, the adoption of a national constitution that prescribes gender equity, and the ratification of a criminal code that catalogues gender-based violence. Nonetheless, despite a persistent call to improve the quality of services for survivors of domestic violence, most services are insufficiently available, accessible, adaptable, or appropriate. Psychological, medical, legal, and social services are the most common types of services available. While necessary, these services have been criticised for taking a top-down, colonial, western, medical, and individualistic approach. In contrast to models that place knowledge and expertise in experts, ICT sees knowledge as emerging "from the bottom, in the bottom, for the bottom." Barreto criticised the medical model for focusing on the disruptive effects of illness rather than the illness itself he argued that a biopsychosocial model would be more adequate in understanding the individual in context. By understanding the problem in community, ICT seeks to foster individual and systemic autonomy. It expands on the medical model's patient/professional relationship by fostering personal growth, relationship development, social inclusion, and accountability through listening to common pains. Cultural anthropology, critical pedagogy, communication theory, systemic thought, and resilience are among the theoretical pillars incorporated into ICT.

Literature Review

In terms of cultural anthropology, ICT expressly embraces culture, which is frequently overlooked in medical, colonial, and imperialist models. Valuing and empowering marginalised, minority, and oppressed communities can alleviate the pain caused by cultural imposition. As culture is considered healing, cultural identity is central to ICT, and the approach uses songs, sayings, poems, local spiritual and medicinal traditions, local celebrations, and other cultural tools to help rediscover and strengthen cultural identity. ICT aims to honour traditional and ancestral forms of knowledge in order to reconnect people to their faith in themselves and their cultures. Postcolonial and decolonial voices advocate for grupalidad curadora (loosely translated as "group healing"), which contributes to a personal and community reconfiguration that exists apart from a medical model and necessitates a more holistic, transdisciplinary approach.

Many aspects of Paulo Freire's critical pedagogy and methodology have been adapted to the context of ICT. According to Freire, the teaching process is always political and has the potential to either maintain or change the social structure. Pedagogy is an exercise in communication, exchange, and reciprocity. As a result, there is a time to speak and a time to listen, as well as a time to learn and a time to teach. Understanding communication and teaching as a horizontal rather than a vertical process is liberating. This generates free dialogue, capable of connecting theory and practise, producing knowledge and consciousness, and promoting critical thinking in the individual. By understanding who we are, why we are the way we are, and appropriating our own experience, we become masters of our lives rather than victims of others or circumstance, resulting in a more just and liberating existence.

Discussion

As evidenced by the results, the cognitive-behavioral approach to therapy was effective in this case. The proposed goals were met in a relatively short period of time, and the patient recovered successfully. Several considerations must be made, which arose in the case and influenced the therapy in some way. For example, in some cases, the family's socioeconomic status made it difficult to establish certain healthy eating patterns and limited the use of material reinforcement. The elevated absence of a family structure also proved to be a determining factor, necessitating individual intervention with each member of the family, as group therapy could not be used. Nonetheless, all of the family members were clearly concerned about the situation and offered their assistance in achieving the therapy objectives.

Barreto incorporated communication theory perspectives into ICT methodology and saw good communication as a means to a better life. Furthermore, he included Watzlawick's five axioms as basic rules for communication when participating in ICT. In general, all actions, even when people choose not to act, are considered communication and point to some important message that should be understood. Communication serves the purpose of providing information about oneself, and responses to communication can either confirm or refute the speaker's self-image. Effective communication necessitates mutual understanding on both sides, a combination of verbal and nonverbal communication, and can be symmetrical or complementary. There are certain conversational rules in ICT, such as listening when others are speaking,

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only speaking about one's own personal experience [1-6].

As a result, in ICT, these theories coalesce into a method of interpersonal and inter-community encounters. Participants use their life stories to reaffirm their identities by perceiving problems and possible solutions through local resources. It is a therapeutic act that moves away from a pathology-focused model and towards the promotion of health and social inclusion. This process is led by a community therapist, whose role it is to be aware of the goals and limitations of ICT. The therapist does not solve problems, but rather creates an environment in which participants can share their experiences and form a support network. The therapist does not impose their own solutions or ideas on the group, but rather generates ideas within the group.

Conclusion

This research has significant limitations. First, our intervention and comparison groups differed statistically from the start of the study, but our sample sizes were insufficient to include control variables in analyses. Because of the high level of interest in our study, the intervention group filled up before the comparison group. We did not assign people to the experimental or comparison groups at random, instead relying on their availability and the project's capacity to accommodate survivors in the intervention group. Another limitation was the resilience measure, which was based on a personal trait of being able to recover quickly from adversity. This understanding of resilience contradicts current research on a variety of strengths and resilience-promoting factors, as well as the experience of domestic violence survivorship, which can be a long and difficult journey. In accordance with this process, it may be necessary to run this intervention for longer periods of time for stronger effects and/or to continue assessing outcome variables over time, possibly on a monthly basis. Given the underpowered nature of some of the quantitative analyses, we propose that future work replicate this evaluation with larger sample sizes and possibly additional comparisons to other methodologies. While methodologically random assignment is best for detecting differences between groups, we felt that approach was inappropriate for DV survivors, especially when the comparison group did not have DV survivors.

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Conflict of Interest

There are no conflicts of interest by author.

References

1. Engel, George L. "The need for a new medical model: A challenge for biomedicine." *Science* 196 (1977): 129-136.
2. Rocha, Ianine Alves da, Aralinda Nogueira Pinto de Sá, Lucineide Alves Vieira Braga and Maria de Oliveira Ferreira Filha, et al. "Community integrative therapy: Situations of emotional suffering and patients' coping strategies." *Rev gaucha enferm* 34 (2013): 155-162.
3. Jatai, José Martins and Lucilane Maria Sales da Silva. "enfermagem e a implantação da terapia comunitária integrativa na estratégia saúde da família: Relato de experiência." *Rev Bras Enferm* 65 (2012): 691-695.
4. Alves, Mariane Inaraí, Adriana Olimpia Barbosa Felipe and Denis da Silva Moreira. "integrative community therapy–interventive strategies in the reduction of depression symptoms in adolescents: A quasi-experimental study." *Int J Ment Health Nurs* 30 (2021): 1426-1436.
5. McCart, Michael R., Daniel W. Smith and Genelle K. Sawyer. "Help seeking among victims of crime: A review of the empirical literature." *J Trauma Stress* 23 (2010): 198-206.
6. Fernández González, Liria, Esther Calvete Zumalde and Izaskun Orue Sola. "The acceptance of dating violence scale (ADV): Psychometric properties of the spanish version." Psicothema (2017).

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