

PROCEEDINGS

7th

european congress of

community
psychology

"common values, diverse practices"

Diversity



Health
Promotion

Global
health

Europe



Prevention



Social
cohesion



Community
development

PARIS OCTOBRE 2009

AFPC

Association Française de
Psychologie Communautaire



European
Community
Psychology
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Edited by Thomas Saïas, Wolfgang Stark, David Fryer

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Actes du 7^e congrès européen de psychologie communautaire

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7th European Congress of Community Psychology proceedings

PRESIDENTIAL ADDRESS

Future Perspectives in Community Psychology Potentials and Challenges from a European View

By **Wolfgang Stark**¹

Being a community psychologist always has been a quest for new ways to deal with psychosocial problems not only on the individual level, but also to look for potentials and challenges of people and social settings. Community Psychology also has been and will be in the future a quest for a political identity as a psychologist who wants to improve social justice and individual well-being in a complex world.

That is why Michael Frese's (2006)² challenging question: "What if Applied Psychology Mattered in the World?" fits perfectly if we ask for community psychology's identity in an expanding Europe and a complex and globalizing world. Frese stated that psychology today needs a currency that is as important and respected as money. Therefore, psychology should develop well-being and happiness as a psychological currency in contrast to money and economic goods only. In order to achieve this, psychology needs to have an impact on all spheres of social life – community and social systems, economy, politics etc.

For the future of Europe well-being, individual and collective happiness and social justice will become important elements of a currency which should be more important than money. Many multidisciplinary studies have shown that the key to individual well-being is maintaining social networks, community building, and enhance empowerment processes. Therefore, asking "What if Community Psychology Mattered in the World?" can show substantial categories for a social currency developed by community psychology (CP).

Community Psychology – Concepts of a "linking science"

Community Psychology has had many origins before it has been called Community Psychology (Bennett et al. 1966), to name a few: community organizing (Alinsky 1989) and the Community Mental Health Movement (Bloom 1973) in the US, Conscientiacion (Freire 1996) and Action Research (Fals Borda 1991) in Latin America, Marie Jahoda's (1972) groundbreaking long-term study on the effects of unemployment on the community or the Italian Democratic Psychiatry Movement (Basaglia 1968) in Europe have influenced many community psychologists; many political movements (Civil Rights, Student's Movements of the 60s, Women's Liberation, Gay's Movements, Equal Rights for Handicapped Persons, Survivors of Psychiatric Hospitals and many more) have had considerable impact on research and practice of community psychology. Although the term "Community

¹ Wolfgang Stark is Professor for Organizational and Community Psychology at the University of Duisburg-Essen, Germany, has been founding and executive member of the German Association for Community Research (www.ggfp.de) and Action and the European Association for Community Psychology (www.ecpa.org). He served as President of the European Community Psychology Association (ECPA) from 2007-2009.

² Michael Frese, the past president of the International Association of Applied Psychology (IAAP), delivered this paper as a keynote paper 2006 in Athens

Psychology” has been developed in the US and still is being dominated by the discourse of the scientific community, we have to realize that there are many other developments in many parts of the world with different background and important contributions.

If one compares community psychology to other psychological disciplines, the picture is quite paradox: CP on the one hand looks like an island of science and practice being not very influential within the discipline of psychology, but at the same time CP discourses and research topics seem to have a broad impact on many disciplines. One of the reasons for this paradoxical picture is the concept of CP: CP always has oriented itself towards a systemic view of social dynamics in the world by integrating individual and group levels, community, organizational and societal levels of analysis. Because the concept of community psychology is transdisciplinary by nature, CP identity bears a wide variety of regional and individual scholarly stories, and is trying to integrate personal value systems and scientifically based interdisciplinary research and practice within its boundaries. Julian Rappaport already in 1977 summarized the idea of community psychology: „...the real key to social change is in the attitudes, values, goals and political-economic ideology and social policy of which institutions themselves are composed and on which organisations are based.“ (Rappaport 1977, 180). This systemic view is in the core of CPs belief system and has been developed since 30 years. Nevertheless, having to survive in an academic world of distinct disciplines, there are only few consequences based on this: more than 80% of CP research and practice still is restricted to individual or group levels.

Especially today the transdisciplinary concept of CP has the potential to be one of the most powerful applied psychologies in civil society. By linking

- ❖ the strengths of different traditional disciplines (psychology, sociology, organizational science, anthropology, educational science, social work and social medicine)
- ❖ spheres of academic science and challenges of our time, and
- ❖ the analytical view on the past and creative ideas for the future

CP is going beyond traditional applied sciences: CP is not only applying scientific results for praxis, but adds new new questions and ideas on individual, social and societal issues by using systematically a transdisciplinary approach.

In order to unfold its potentials, a CP “linking science” wants to unleash itself from the limits of traditional academic disciplines and taxonomies: the social network and social support research in the 70s already brought close collaboration between psychology, sociology and anthropology, and is also providing links to virtual networks in the world wide web which are relevant for social network research today. The discourse on empowerment processes (Rappaport 1984) in CP has been influential for many practical areas in community mental health and social work, psychiatry, community development and organizational science. In social policy the concept of empowerment has been adopted in various legislations in Europe and developed as a synonym for innovative approaches to social challenges and the growth of a consumer- and prosumer-oriented civil society. To use the dynamics of empowerment processes in order to enhance well-being and growth in individuals and settings, it is important to link the different levels of empowerment (individuals – group – organization) (Stark 1996).

Community Building in European Civil Society

In the process of globalisation, one can find contradictory movements: the erosion of traditional community structures is alienating both individuals and social networks; at the same time for many continuous change processes in social life and meeting new people and cultures both in reality and the virtual world is both a burden and a chance to discover new opportunities and to develop innovative ideas. By analyzing risks and opportunities of globalization, eminent scholars like Anthony Giddens (2001), Zygmunt Bauman (2000) or Ulrich Beck (2005) all agree, that active community building processes in order to develop a culture of “learning communities” will be indispensable to overcome the risks and dangers of globalization. Castells’ (2000) analysis of the “network society” already emphasized the need for a culture of community which both on the local and the virtual level will determine our future communication.

Here, CP has to readjust a traditional model of community as neighbourhood towards a systemic view of the role of community building in organizations, (real and virtual) social networks on the local level and beyond, and on the level of civil society (citizen groups, local and global coalitions and alliances) (see Senge 1990, Nelson & Prilleltensky 2004, Wildemeersch & Stroobants 2003). Social networks, families, local communities and organizations (both companies and NGOs) in Europe will be challenged by continuing global migration processes, the need to adjust to considerable demographic changes and the quest for a new social justice in the world. And, if traditional structures are eroding, there will be an urgent need to develop common values in society together with all actors.

For CP, therefore, it will be necessary to develop a new identity based on the guiding principles on the future of community psychology developed by an international group of community psychologist (adapted from Wolff et al. 2006):

- Community psychology will become increasingly global in nature. This is why local communities are increasingly important because they are affected by global forces. Community psychology must collaborate with communities so they effectively adapt to such changes.
- A community psychology approach, by definition, must be an approach informed by multiple perspectives. Thus, the future of community psychology will require partnerships with other disciplines and community stakeholders. CP will have to partner with others while maintaining its own unique identity.
- Community psychology will become more engaged in the formation and institutionalization of economic, and social policy. These policies will be based upon the values that are at the core of our discipline and will incorporate psychological principles. Involvement with policy is consistent with community psychology’s ecological perspective on community which recognizes the importance of macrosystem factors, such as business and policy, on communities.
- Community psychology will become a field of research and action that makes a significant difference on issues of social change by promoting social justice. Social justice is defined as conditions that promote equitable distribution of resources, equal opportunity for all, non-exploitation, prevention of violence, and active citizenry.

If the global, demographic and economic change we are witnessing is requiring a new perception of civil society, the role of CP is to initiate and maintain dialogue and mutual support with all actors interested in social change and social innovation. Therefore, CP, among others should start to be a real “linking science” by

- ❖ Discovering empowerment patterns between individuals, groups and social structures not only in the neighborhood, but in all kind of settings where people work and life together (companies, virtual communities, social policy),
- ❖ Learning not only from the past, but sense emerging futures by learning across generations, cultures and institutions
- ❖ Establishing new intersectoral alliances and test new forms of collaboration between different actors in society
- ❖ Enabling mutual risk taking through experimental settings and program evaluation.

This requires to add to “incremental”, step-by-step social innovations forms of profound, more “radical” social innovations for which collaboration with other disciplines and actors are needed (see the works of C. Otto Scharmer (2007) or the concept of “design thinking” (Brown 2009).

Perspectives for Community Psychology in Europe

Traditional values of CP like social change and transformation and current challenges today require more than working in a local community and/or improving the social situation of specific groups. While this work will remain an important core part of CP, the field should empower itself use its competencies to develop social innovations and look at emerging futures by developing shared goals (and take shared risks) by collaborating with other disciplines, companies or other actors in society.

CP as a field in Europe should focus on macro- and micro-issues of community building together with various partners: this is why it is important to develop close ties not only with national community psychology groups in Europe and other parts of the world, but also with other psychological and social science/social action networks and associations. The European Union and the European Commission will be one of the most important partners to foster community building and a sense of community in our society.

To support this movement and to strengthen the capabilities of each community psychologist in Europe, we should form Community Interest Groups (professional, student and practitioner groups) which will be able to maintain, and promote the rich body of knowledge on community building and develop future questions which may be important for our society. We should invest in a joint education and practice in community psychology and CP special topics in order to develop the idea of community psychology for young professionals. For this we can use and institutionalize a rich body of experience of community psychology programs in universities and schools all over Europe. The time of an interdisciplinary community building and social innovation master program should come within the next years. These kind of programs could enhance the skills for the future of community psychology in Europe:

In *Social Skills* students and practitioners will experience the art of community building as a collaborative and empowering background, leading to social responsiveness and inclusion

Design Skills will develop both strategic-innovative and creative abilities in order to nurture mutual knowing, awareness and playfulness, and

Action Skills will focus on how to co-create, implement and evaluate new concepts and social innovations to build communities in different settings.

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KEYNOTE ADDRESS

La Part du Social, en Psychologie Communautaire

Par **Denise Jodelet**¹

Texte lu

« Je tiens à remercier les organisateurs de ce 7ème congrès de Psychologie Communautaire qui m'ont fait l'honneur de me confier la tâche d'ouvrir cet évènement. Je remercie particulièrement Bruna Zani qui a pris l'initiative de cette invitation, Thomas Saïas qui l'a assumée et a montré une grande patience à mon égard, Nicolas Daumerie qui a su m'entraîner dans votre aventure.

Car, il faut le dire, je ne suis pas à proprement parler spécialiste de la psychologie communautaire et je crains de porter un regard que certains jugeront naïf sur cette discipline. Non que j'y sois complètement étrangère. En effet, les contacts avec des chercheurs d'Amérique Latine m'ont très tôt familiarisée avec certaines de ses problématiques. Au début des années 80, au Venezuela, j'accompagnais Euclidès Sanchez et Esther Wisenfeld sur leur terrain quand ils s'occupaient d'un projet d'auto construction résidentielle dans les quartiers défavorisés de la banlieue de Caracas. Nous y avons étudié ensemble les significations données à la notion de participation. Ensuite, au Brésil, j'ai eu des contacts étroits avec le groupe de Sylvia Maurer Lane et Bader Sawaia qui développait, à Sao Paulo, des projets d'intervention communautaire, avec le groupe d'Ecologie Sociale, Eicos dirigé par Inacia D'Avila à Rio de Janeiro. Dans la même ville, j'ai accompagné les activités d'extension de l'Université d'Etat dans des favelas ou des quartiers défavorisés. A Santiago du Chili, j'ai collaboré avec des chercheurs comme Mariane Kruse, Diego Asun. J'ai, comme beaucoup d'entre vous, lu les textes des tenants de la psychologie de la libération et rencontré en Amérique Centrale et au Mexique plusieurs chercheurs de cette orientation ou s'occupant de recherche-action communautaire.

Et c'est précisément cette expérience qui m'a donné une vision « politique », et donc très centrée sur les dimensions sociales, de ce que pouvait être la psychologie communautaire dont la tradition reste vivace en Amérique Latine et trouve aujourd'hui un écho qui se généralise avec les courants critiques de la psychologie dans les pays anglophones et européens. Bien qu'ayant fait une recherche sur les représentations sociales de la folie dans un cadre communautaire, je n'avais pas mesuré le rôle qu'avait joué, pour le développement de la psychologie communautaire, le courant de désinstitutionalisation dans le secteur de la santé mentale avec lequel j'ai renoué au cours des dernières années grâce au travail mené par le Centre Collaborateur de l'OMS de Lille. Et

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la préparation de mon intervention d'aujourd'hui m'a fait découvrir que les pratiques de prévention et promotion de la santé ont constitué, dans certains pays, l'origine et le moteur de cette discipline

Dans cette relative ignorance de l'histoire et de l'état du champ de la psychologie communautaire, et compte tenu de ma vision initiale comme de ma discipline d'appartenance, la psychologie sociale, je me suis posé la question de la part qui est réservée à la dimension sociale des phénomènes auxquels se rapporte la psychologie communautaire. Poser cette question peut sembler insolite, voire absurde, dans la mesure où, historiquement, la psychologie communautaire est apparue comme une critique contre un ordre social donné, qu'il s'agisse de celui certains régimes politiques, de celui des formes et idéologies de la modernité, de celui de l'institution psychiatrique ou de celui de l'institution académique et de ses courants dominants. Que la psychologie communautaire dans ses valeurs, ses principes et ses pratiques ait à voir avec le social est par ailleurs évident. Mais ce qui l'est moins est de savoir de quel social on parle. Ma question porte surtout sur les lieux où l'on peut repérer une dimension sociale et l'intégrer dans les analyses portant sur les contextes et les formes de l'action communautaire. C'est cette imprécision et les conséquences qu'elle peut avoir sur la façon de conduire les interventions qui m'a conduit à vous proposer quelques réflexions sur ce thème. J'examinerai successivement :

- 1) Les valeurs, principes et modèles d'action de la psychologie communautaire.
- 2) Les questions que soulève la notion de communauté.
- 3) Les aspects de dimension sociale et ses lieux d'observation.
- 4) Deux cas illustratifs introduisant le problème de la résistance au changement.

Valeurs, principes et modèles de la Psychologie Communautaire.

Le titre, heureux, de cette conférence met en évidence certaines facettes de la psychologie communautaire, ses valeurs et ses pratiques. Pour mener mon examen, je propose de d'aller plus loin dans les distinctions à opérer pour comparer les différentes conceptions de la psychologie communautaire. S'il convient d'insister sur les valeurs communes aux différents courants de la psychologie communautaire, il faut aussi dégager les spécificités marquant les objets ou domaines dont ils traitent, les conceptions de la communauté qu'ils adoptent, les principes qui en guident l'action, les objectifs concrets qui sont visés, les procédures utilisées qui définissent les pratiques. Ce parcours vous paraîtra peut-être superflu. Il me semble utile comme contribution à une unification du champ qui vous rassemble aujourd'hui.

Je commencerai par les courants qui se sont dégagés historiquement dans la psychologie communautaire. Le plus ancien est sans doute le courant dit « d'éducation populaire » et de « psychologie de la libération » orienté par la défense des populations défavorisées, la recherche de leur conscientisation et l'organisation, le soutien des mouvements sociaux. C'est de lui que découlent les principes fondamentaux de l'action communautaire. Le courant dit de « santé mentale » est ensuite apparu à la suite de la contestation des politiques institutionnelles de traitement des personnes atteintes de troubles psychiques. Centré sur la libération du statut asilaire et la réhabilitation sociale des usagers, il a créé des structures d'inclusion et de soutien dans la cité ce qui suppose

une organisation en réseaux des intervenants et une acceptation des milieux d'accueil de ces structures et de leurs bénéficiaires. Ce courant est assorti d'une opposition aux conceptions individualistes de la clinique thérapeutique.

Vint ensuite le courant centré sur les politiques de prévention et promotion de la santé, impliquant des modes d'information et de prise en charge distincts de ceux de la santé publique et des conceptions bio-médicales concernant l'étiologie et les soins des maladies. Plus récemment un courant de critique psychologique, donnant suite à l'expression dès les années 60, de différences philosophiques, politiques et pratiques entre la psychologie communautaire et les orientations classiques de la psychologie, prône le recours à la perspective communautaire pour contester les paradigmes dominants ou répondre aux menaces sociales liées à la modernité, au libéralisme et à la globalisation. Il va de soi qu'à ces différents courants vont correspondre des objectifs et des principes d'action qui ne se recouvrent pas complètement, même s'ils adhèrent à des valeurs communes.

Certaines des valeurs communes que permet de dégager la lecture des différents textes ont un caractère universel. La défense des droits et intérêts des individus et des communautés et la condamnation de toute forme d'oppression et d'exclusion sociale ; la justice qui renvoie à la distribution équitable des ressources dans la société ; la solidarité qui traduit la préoccupation pour autrui et le bien commun et s'affirme particulièrement à l'égard des personnes et des groupes opprimés et discriminés ; l'autonomisation, la libération et l'émancipation de ces personnes et ces groupes. Des valeurs complémentaires concernent la pratique de l'intervention qui doit respecter la confidentialité des relations, assurer la confiance, la sécurité et le soutien des personnes auxquelles on s'adresse.

A cela s'ajoutent des valeurs spécifiques à certains courants. Pour ne donner que quelques exemples, le courant d'éducation populaire condamnant l'élitisme des psychologues universitaires appelait à se mettre au service du peuple. Le courant de prévention et promotion de la santé recherche l'élévation du bien-être social, l'amélioration du système de soins, la localisation de la maladie dans l'environnement et non dans le sujet. Le courant de santé mentale conteste l'oppression interne et externe des usagers des institutions psychiatriques. Le courant critique insiste sur la légitimité des demandes de savoir, du développement de la réflexivité sociale, d'une idéologie progressiste .

En étroite liaison avec les valeurs revendiquées, différents principes et de modèles d'action sont énoncés. Au plan des principes, on prône l'accompagnement dans la recherche de libération et de bien-être ; le soutien des structures communautaires ; l'aide à l'empowerment individuel et collectif et au développement de la subjectivité et de la réflexivité ; la défense de la diversité ; la contribution à la transformation et au changement social ; la lutte contre la discrimination des personnes souffrant de troubles psychiques ; l'encouragement de la participation et la collaboration au sein et entre les communautés.

Au plan des modèles d'action, la psychologie communautaire présente plusieurs facettes. Certains courants rejoignent la psychologie de la libération. Il s'agit alors de comprendre et analyser les processus par lesquels un ensemble social peut accéder à la conscience de son identité dans les conditions de sa vie quotidienne. Cela suppose que le chercheur ou l'intervenant adopte les postures suivantes : préserver la dynamique existentielle des relations établies au sein du groupe ; éviter toute distorsion ou toute décontextualisation par rapport à ce qui constitue la réalité de la vie du groupe ; s'adresser aux membres de la communauté en leur offrant la garantie qu'ils participent à leur devenir en producteurs de connaissances et d'alternative pour leur propre histoire quotidienne.

Il en résulte une forme de travail collective, menée en collaboration avec les groupes, orientée vers l'identification des besoins et des demandes partagées dans la collectivité. Avec pour conséquence que le chercheur ou l'intervenant analyse ses connaissances de façon continue en fonction de la dynamique de la vie communautaire. Qu'il accepte les possibilités de modification de son action ; qu'il remette en cause la validité de son travail et le soumette à l'évaluation du groupe. Cette conception de l'activité du chercheur ou de l'intervenant qu'il soit sociologue, psychologue, professionnel de la santé, travailleur, social, simple volontaires, définit un nouveau statut ou rôle :

- il n'est plus un expert, seul détenteur du savoir en jeu
- il n'est pas l'unique autorité qui régit le changement,
- il joue le rôle de catalyseur, facilitateur
- il ne traite pas ses partenaires comme des sujets d'enquête mais comme des acteurs libres occupant une place équivalente à la leur avec des aptitudes et des connaissances de nature différente mais tout aussi recevables que les siennes. D'où l'importance du savoir local et sa valorisation. Celle également d'une négociation des savoirs et des processus de resignification des expériences vécues.

On va trouver l'écho de ces tendances dans le cas de la santé communautaire qui prend en compte : l'activité et la participation des usagers des systèmes de soin et l'existence d'une culture propre définie par :

- Un cadre territorial, de la région à l'espace public du quartier.
- Un partage des mêmes conditions sociales d'existence.
- Des relations sociales d'interdépendance et de voisinage.
- Un fond culturel commun qui peut être soit préexistant dans le cas de regroupements ethniques, religieux, régionaux ; soit nouvellement constitué ou émergent en raison d'une communauté de sort : précarité, clandestinité, sans domicile fixe, etc..

La santé communautaire est aussi sous-tendue par des perspectives politiques. Elle vise à :

- dépasser les limitations imposées par le modèle bio-médical de la santé publique : uni-sectorialité, individualisme, privation de responsabilité des usagers, verticalité des prestations sur un mode centralisé et bureaucratique, promotion d'un système ouvert, favorisant à travers des programmes d'éducation, l'acquisition d'aptitudes à une gestion autonome des soins.

- Changer le statut des professionnels de santé qui doivent : se mettre au service de la communauté et de ses membres ; jouer un rôle de promotion, incitation, canalisation des activités sanitaires ; favoriser un nouveau statut de l'utilisateur qui devient co-responsable et participe activement au système de soin.

A ces grandes orientations éthiques, politiques et pratiques ont correspondu des cadres d'interprétation des réalités visées par l'action et de leur cadre. Tous les courants, prenant position contre le caractère purement individualiste de la plupart des approches cliniques et des diagnostics du mal être social, proposent une vision holiste et systémique. Ils opèrent un déplacement de responsabilité : l'imputation aux individus de la responsabilité de leur situation et de leurs troubles est remplacée par la reconnaissance de leur vulnérabilité sociale. Ils postulent l'interdépendance entre le milieu de vie et les états de mal être social ou de maladie correspondant à l'expérience vécue des individus.

Il est à remarquer que cette perspective se rapproche de celle de psychologie de l'environnement qui a émergé dans la même période que la psychologie communautaire et a insisté sur la nécessité de faire sortir la pratique psychologique du laboratoire ou du cabinet et sur la transaction entre l'individu et son environnement. Cette perspective écologique reste cependant silencieuse sur les aspects proprement sociaux affectant cette transaction et caractérisant les contextes dans lesquels elle se déroule. De sorte que si les valeurs, principes et modèles d'action montrent nettement la nature sociale des préoccupations de la psychologie communautaire, un flou demeure quant à l'intervention de la dimension sociale dans les processus analysés.

En effet, à considérer les valeurs et principes qui président à l'action menée au sein des communautés, il apparaît clairement que l'on se réfère au champ social et aux rapports sociaux qui configurent le jeu social et les actions qui y sont possibles. Les situations et les actions sociales sont régies par des normes inscrites dans la matière des rapports sociaux. Dans le cas de la psychologie communautaire, les rapports sociaux sont définis soit en termes de rapports de pouvoir entre dominant et dominé au plan politique ou professionnel, soit en termes de rapports d'inclusion-exclusion entre le même et le différent. Mais l'articulation entre les contextes et les rapports sociaux reste peu explorée ou mal définie. Ce flou peut être attribué au fait que certains phénomènes ou processus sont transférés entre les différents courants de la psychologie communautaire. Ainsi le concept d'empowerment d'abord pensé dans le cadre collectif d'une réflexion politique et sociale est utilisé dans l'approche de phénomènes psychologiques et individuels liés à des états de maladie ou d'affection psychique et au statut des personnes qui en souffrent. Il va prendre de ce fait des portées et des connotations différentes qui ne se recouvrent pas.

À propos de la notion de Communauté

Ce flou est aussi imputable à la façon de conceptualiser la communauté. Le maniement de la notion de communauté, caractérisée par le partage d'un bien matériel ou symbolique, d'une même origine, d'un sort

commun ou d'une même activité. est en effet très divers et a évolué dans le temps. En témoignent les commentaires inspirés par les revues de la littérature en psychologie de l'environnement qui soulignent les variations historiques et les divergences d'interprétation existant dans ce champ (Frey et Laing in press). L'examen du contenu des recherches recourant à la notion de communauté permet de dégager deux grandes tendances, l'une empirique, l'autre théorique.

Dans certains cas, on y réfère pour désigner des ensembles sociaux concrets sur lesquels portent l'observation et l'intervention. Ces ensembles sont alors définis soit par leurs propriétés territoriales, comme le quartier, la favela, soit par le partage d'une même forme de vie, d'une même activité ou d'une même culture, comme dans le cas de communautés indigènes, soit par des relations de proximité et de voisinage qui contribuent à forger, par les échanges un esprit collectif. Il peut s'agir aussi d'organisations à caractère institutionnel comme la famille, l'école, l'hôpital.

Il suffit d'enregistrer cette diversité concrète pour se rendre compte que la dimension sociale peut jouer de façon différente, appelant une liaison entre les processus qui régissent les relations sociales et le contexte particulier où elles s'établissent. La référence aux normes culturelles et sociales qui organisent les transactions au sein de la communauté considérée devient alors essentielle. On pourrait, pour avancer dans ce sens, reprendre le modèle écologique du Behavior setting, proposé par Barker (1968). Ce modèle permet de dégager les prescriptions normatives associées à des unités d'espace-temps institutionnellement définies. Ces unités d'observation spatio-temporelles intègrent toutes les composantes : psychologiques, sociales, organisationnelles, écologiques, sans fixer à priori un ordre de détermination des unes par les autres, une hiérarchie de contraintes. Cette orientation contextuelle permet d'analyser les processus qui adviennent dans un système social de petite échelle. Elle est particulièrement adaptée à l'examen du contexte des systèmes de soins.

À côté des contenus concrets donnés à la notion de communauté, il se trouve des auteurs pour en faire un construit théorique qui répond à plusieurs objectifs. Ce construit fournit un cadre d'objectivation des relations sociales. La communauté est alors considérée comme un espace symbolique et matériel, à charge mémorielle, où se forge l'identité sociale et s'élaborent le sentiment d'appartenance et les interactions positives ou conflictuelles avec les membres de son groupe et ceux des autres groupes. Dans ce cas, les rapports sociaux engagés sont situés au niveau des relations interindividuelles, intra et intergroupes pour emprunter à la typologie de Doise.

Le construit théorique est aussi considéré comme favorisant une analyse du lien entre l'individu et la société et constituant une approche optimale des phénomènes psychosociaux. Sont particulièrement visés ceux qui ont trait à l'élaboration des savoirs par l'échange dialogique dans l'espace public (Jovchelovitch, 2006). Cette conception permet d'aborder le rôle des représentations sociales dans la dynamique sociale qui régit les relations entre les membres d'un collectif social et entre différents collectifs.

En tant que construit théorique, la communauté peut avoir aussi un caractère utopique. Elle devient alors un espace de référence qui renvoie à des formes de socialisation passées ou idéales. Celles-ci s'offrent comme des formes de vie recherchées en réponse aux évaluations négatives inspirées par les constats pessimistes opérés sur l'évolution du monde contemporain. Cette perspective a été critiquée comme une attitude de refuge confortable mais illusoire face aux bouleversements engendrés par la globalisation (Bauman, 2001).

Par-delà cette multiplicité de perspectives, on peut penser que la tendance à traiter de la communauté sans intégrer à proprement parler ses dimensions sociales tient sans doute à ce que, depuis Tonnies, l'idée de « communauté », comme solidarité organique, a été opposée à celle de « société », comme solidarité mécanique. Par ailleurs, si la notion de communauté ou de communautaire est difficile à appréhender, c'est parce qu'elle se situe entre deux pôles qui d'un côté la dilue, et d'un autre la rigidifie. En effet, d'un côté, on entend souvent les chercheurs dire « je vais dans la communauté » pour dire simplement, je vais sur le terrain, le rue, là où les gens vivent. Il n'y a plus alors aucun caractère distinctif de ce qui fait la « communauté » ou le « communautaire ». D'un autre côté, et c'est la raison de la réticence à recourir à l'appellation « psychologie communautaire » dans certains pays européens, on voit dans le phénomène « Communauté » ou « Communautaire », le signe d'un repliement sur des particularismes ethniques, culturels ou religieux qui isole de la collectivité citoyenne et des valeurs universelles, républicaines ou autres. Cette indexation particulariste particulièrement combattue en France, avait déjà été stigmatisée par le sociologue Simmel qui voyait dans les communautés un danger empêchant l'individu de rejoindre les valeurs de l'universalité.

Les lieux d'observation de la dimension sociale

Il n'empêche que ce terme revêt aujourd'hui, dans les sciences humaines, un sens positif avec multiculturalisme et les revendications identitaires assumées par des sujets libres de leur choix. On y repère l'émergence d'une seconde modernité où se dilue l'opposition entre l'héritage des lumières et l'attachement aux traditions et où se conteste toute hégémonie nationale, culturelle, linguistique ou religieuse (Wieviorka, 2008). La réhabilitation de la notion de communauté rend d'autant plus urgente la tâche d'en définir les formes et les propriétés.

Sur la base des considérations précédentes, il est possible de réintroduire la dimension sociale en distinguant les différentes formes reconnues à la communauté. Quand ce terme renvoie à des ensembles comme la famille, l'école, etc. que les sociologues appellent des « agences de la société », on se référera aux normes qui assurent de façon implicite ou explicite leur fonctionnement et la distribution des rôles impartis à leurs membres. Quand on s'adressera à des ensembles définis par une culture partagée, on prendra en considération les modèles de relations et de conduite qu'elle comporte. Quand on prendra comme lieu d'observation des espaces sociaux définis par un cadre territorial et des relations de proximité, on s'attachera aux échanges qui établissent des systèmes de représentation permettant de gérer les relations dans le monde de vie quotidien. Quand on se

centrera sur des contextes mettant en jeu des relations de pouvoir, on examinera les positions sociales affectées aux acteurs sociaux. Quand on considèrera les milieux d'accueil où sont implantées de nouvelles formes d'actuation des sujets en situation d'émancipation, on cherchera les ressorts identitaires et systèmes de représentation qui risquent d'entraver leur acceptation.

A titre d'illustration de ces remarques, je vais me tourner vers un thème qui ne se trouve pas souvent évoqué dans les travaux de psychologie communautaire et qui met directement en jeu ses dimensions sociales, le problème de la résistance aux interventions. On attribue généralement les difficultés rencontrées dans le support à des catégories dominées aux pressions qui s'exercent sur elles « leur imposant un vocabulaire qui ne correspond pas à leur expérience, ne leur donnant pas les clés de l'accès au pouvoir des décisions centrales, même multipliant sous une forme apparemment neutre ou même favorable les signes de dépendance » ou encore « la crainte de ne pas réussir à atteindre les objectifs proposés » (Touraine, 2002). On souligne aussi les inhibitions liées à l'intériorisation de l'image négative que le milieu social renvoie aux victimes de la discrimination et de l'oppression. Cette intériorisation affecte leur estime de soi, donc leur pouvoir d'affirmation et d'autonomisation.

Ces interprétations sont centrées sur les acteurs de l'émancipation. On s'intéresse moins aux obstacles qui peuvent tenir à la dynamique sociale des milieux où se développe l'action communautaire. La centration sur les sujets qui bénéficient de l'intervention communautaire fait parfois oublier que le milieu de vie n'est pas seulement un déterminant de leur situation qu'il faut modifier. Il est aussi un espace d'accueil des transformations proposées et peut à ce titre présenter des formes de résistance contre lesquelles lutter.

Car, le travail communautaire ne se déroule pas toujours dans la transparence et la facilité. Il se peut que la communauté auprès de laquelle on intervient soulève des obstacles entravant les possibilités d'action et de soutien social, en raison même des enjeux sociaux engagés dans la vie communautaire. Je prendrais deux exemples, l'un montrant comment une communauté que lient des intérêts communs peut s'opposer à l'intervention pour préserver un « secret » dont la divulgation risque de nuire à sa cohésion et au maintien de l'ordre qu'elle a établi. L'autre exemple montrant comment l'existence de coutumes fondées sur des normes culturelles régissant les relations sociales, peut engendrer des « conflits » avec les intervenants et conduire à des actions impliquant un conflit au sein de la communauté.

L'échec d'une intervention

Le premier exemple est emprunté à mon expérience au sein de la Colonie Familiale d'Ainay-le-Château qui abritait un système de placement familial permettant aux ressortissants d'une institution psychiatrique ouverte d'être hébergés chez l'habitant et de vivre en liberté, étroitement mêlés au tissu social et à la vie collective d'un ensemble de communes du centre de la France. Bien que leur passage à la direction de cette institution ait conforté des psychiatres comme Paul Sivadon ou Lucien Bonnafé dans l'idée des bénéfices apportés par la vie

hors les murs de l'asile et la libre circulation dans l'espace social, ce que j'ai découvert du système de relations sociales établies entre la population et les usagers de l'hôpital a démontré la force des réticences et des défenses sociales qu'ils provoquent.

Le projet de ma recherche était d'étudier les représentations de la folie et de la maladie mentale dans un contexte de proximité et d'accueil des personnes qui en souffrent et de voir comment s'organisaient les relations avec elles. Il comportait aussi un volet prévoyant de faire retour à la population des résultats de ma recherche et de construire avec elle les conditions d'un accueil optimal des ressortissants de la Colonie.

Malgré le fait que l'expérience d'un contact prolongé entre les membres de cette communauté et ceux de l'institution psychiatrique ait écarté toute idée de danger et rendu particulièrement sensible la similitude entre les uns et les autres, il est apparu que tout un jeu de représentations et de pratiques a été mobilisé, sur le plan symbolique et matériel, pour préserver l'intégrité et l'identité collective. La communauté d'accueil était en effet condamnée par les populations extérieures au périmètre de placement qui imputaient à la présence des malades un risque de contamination, une détérioration de l'image sociale et morale du groupe. Ces imputations trouvaient chez les membres de la communauté un écho étayé par des croyances anciennes sur la contagiosité de la folie. Il en est résulté des pratiques qui ont réintroduit dans la vie quotidienne des barrières que l'ouverture des portes de l'asile était supposée abattre. Faute de temps, je ne retiendrai de cette étude que quelques aspects de cet état chose qui sont pertinents pour notre rencontre.

Le principe de la Colonie Familiale voulait que les usagers soient intégrés dans les familles, partagent leur foyer, leurs repas et les moments de vie commune. Or très vite, la population a obtenu qu'ils en soient écartés. Une étude quantitative du fonctionnement de la vie dans les placements a ainsi permis de montrer que le partage de la vie familiale concernait moins de 10% des placements. Dans les autres cas, les malades vivaient dans des logements distincts, n'étaient pas autorisés à pénétrer dans les foyers et subissaient un régime de traitement différentiel dans l'alimentation et l'activité. Souhaitant explorer les représentations qui sous-tendaient ces habitudes de vie, j'ai mené une étude qualitative, par entretiens en profondeur, auprès de deux échantillons contrastant les foyers qui maintenaient une proximité avec les ressortissants de l'hôpital et ceux qui leur réservaient une situation d'exclusion.

Un premier constat a concerné l'homogénéité des représentations chez les représentants de ces deux postures. L'absence de formation et d'information de la part de l'hôpital a conduit la communauté d'accueil à se construire une représentation de ce qu'est la folie ou la maladie mentale ainsi que des codes pour interpréter les comportements des malades et des recettes pour y répondre. Cette construction s'est faite collectivement par l'échange de conseils et de recettes entre les personnes hébergeant des malades, et leur transmission de génération en génération. Elle conduit à voir la maladie comme créant un état de nature, radicalement différent de celui des personnes dites normales ; à la situer soit au niveau du cerveau qui souffre de déficience, soit au

niveau des nerfs marqués par l'excitation. La maladie du cerveau entraîne une défection du contrôle exercé sur l'organisme et le comportement. La maladie des nerfs conduit à la violence et à des conduites désordonnées.

Cette construction s'appuyait sur les savoirs tirés de diverses sources. L'expérience du contact quotidien avec les ressortissants de l'hôpital ; l'observation des processus organiques (on dira que la maladie tourne les nerfs comme le lait ou le sang tournent) ; les catégorisations religieuses avec l'opposition entre l'innocent (le déficient cérébral) et le méchant (le nerveux); les modèles psychiatriques du XIX^{ème} siècle, avec l'opposition entre arriération et dégénérescence ; ou encore à l'ancestrale théorie des humeurs avec la résurgence de croyances dans la transmission de la folie par les liquides du corps (salive, sueur, morve).

Dans le domaine du travail, l'élément décisif était la notion de contrôle que le cerveau peut exercer. On employait des patients pour les activités ménagères, agricoles ou artisanales, mal ou peu rémunérées. Le travail rassurait parce qu'il était considéré comme un antidote à la folie et le signe qu'elle n'a pas une forme grave. Mais même pour les personnes reconnues comme qualifiées, demeurait la dénégation de leur capacité à exercer de manière autonome une activité professionnelle. Le manque de contrôle du cerveau rendait nécessaire un encadrement de l'activité ou expliquait que le malade ne puisse jamais s'insérer dans le marché du travail, comme agent indépendant. Cette privation du droit à une véritable citoyenneté a trouvé d'autres expressions. Par exemple si une femme épousait un ressortissant de la Colonie, le couple était expulsé de la communauté.

Derrière ces croyances, ces réserves et dénégations, il fut possible d'identifier un processus de défense de la part de la communauté qui ne voulait pas permettre l'intégration de plain-pied des malades en son sein, par crainte d'être identifiée avec eux par les communes environnantes. Il s'agissait aussi d'empêcher qu'ils obtiennent un statut de participation sociale pleine et entière. Ce qui soulève la question de la non-reconnaissance citoyenne des malades mentaux.

Le fait que cette représentation soit partagée par tous tenait à son mode d'élaboration collective par les échanges et la communication sociale. Elle se retrouvait chez les personnes qui avaient établi une relation de proximité avec leurs hôtes. Celles-ci se bornaient à n'accepter chez elles que des personnes souffrant d'une « maladie du cerveau », peu dangereuse. Cependant, le regard que le reste de la communauté portait sur elles faisait fi de cette rationalité. Je devais en faire l'expérience directement.

En effet, j'avais envisagé une intervention postérieure auprès de personnes engagées dans la prise en charge des malades mentaux. Ce projet a avorté et cet échec permet de poser quelques uns des problèmes que la recherche-action peut rencontrer. Qu'est-ce qui m'avait amenée à projeter une intervention ? Tout d'abord l'application de la règle d'or des méthodologies qualitatives, à savoir : la nécessaire honnêteté que l'on doit manifester quand on fait une étude de terrain et que l'on ne veut pas traiter les personnes auprès desquelles on recueille les informations, comme un matériau dont on extrait des données. Ce qui implique de restituer les résultats obtenus et de présenter, pour discussion, les interprétations et conclusions auxquelles on est parvenu.

Cette condition favorise la recherche participative et l'adéquation entre la lecture que le chercheur fait de ses observations et le sens que ses partenaires donnent à leur conduite. De même peut-elle servir le processus de réflexivité sociale par lequel la connaissance produite au cours de la recherche est prise en charge par la communauté et la transforme.

La deuxième raison qui incitait à une intervention était la découverte du dénuement et la dérélliction dans lesquels se trouvait la population en matière de soutien institutionnel. L'absence d'informations communiquées sur les patients placés dans les foyers, le manque de formation concernant leur prise en charge, l'inertie et le laisser-faire des cadres hospitaliers face à une population prompte à défendre ses intérêts au détriment de ceux des ressortissants de l'hôpital, la perpétuation de croyances et de pratiques justifiant et renforçant la ségrégation et l'exclusion sociale, ont certes constitué une configuration propice à l'élaboration de représentations sociales régissant le rapport entre la population et le groupe des malades. Il a été ainsi possible de mettre en évidence la symbolique à l'œuvre pour la préservation de l'identité et de l'intégrité de la population d'accueil. Mais l'on pouvait à juste titre s'interroger sur les moyens de modifier ce système symbolique afin d'offrir aux malades une meilleure intégration dans le tissu social et un régime d'existence sociale plus humain. Dans cette perspective, il devenait important de restituer à la population des données quantitatives et qualitatives qui lui permettrait de prendre conscience des besoins et carences d'information dont elle souffrait comme du caractère insatisfaisant de certains modes d'interaction qu'elle avait adopté ou encore de la persistance de certains modes de pensée obsolètes.

Cela dit, il ne s'agissait pas de céder à l'illusion qu'informer et former suffirait à modifier le système de ce que j'ai appelé les pratiques signifiantes et instituant par lesquelles se défendait un ordre social vital pour l'identité collective. A la transmission de connaissances dont la population pouvait se sentir dépourvue, devait s'ajouter la réflexion. Il s'agissait de donner à la communauté les moyens de mieux comprendre sa propre dynamique, d'en démonter les mécanismes et de faire le départ dans ses savoirs traditionnels, entre ce qui garde pertinence et ce qui relève d'un archaïsme détrimental pour la vie en commun. Ou encore donner des indications pour orienter l'adaptation mutuelle en évitant la constitution d'un savoir indigène par transmission de recettes.

Il m'a été impossible de mener à bien ce projet. Pourquoi, parce que, à la fin de l'enquête, j'ai été mise à la porte de la communauté. Je fus rejetée de tous y compris de la part du personnel hospitalier qui jusque-là s'était montré accueillant, respectueux et coopératif, et qui brutalement devint agressif, insultant, provocateur à un point qui rendit impossible tout contact. Cela s'est produit à partir du moment où l'on s'est aperçu que j'avais pénétré dans les arcanes de la vie locale, avec ses croyances, ses peurs, ses secrets. Un secret fut particulièrement insupportable à voir percé : qu'il existât une minorité déviante par rapport aux normes assurant le maintien à distance des malades mentaux ; que quelques personnes puissent vivre des relations de proximité avec ceux que le groupe tenait à maintenir sur un pied d'inégalité et d'extériorité. Simmel (1999, 36) disait à propos du secret « L'intention de dissimuler prend une toute autre intensité dès qu'elle est confrontée à l'intention de

dévoiler. On voit alors apparaître cette tendance à cacher et à masquer, cette défense quasi agressive contre les tiers qu'on appelle le secret proprement dit ». Secret qu'il définit comme « l'action de dissimuler les réalités par des moyens négatifs ou positifs » et qu'il qualifie d' « une des plus grandes conquêtes de l'humanité ». De fait, ce secret a permis à la communauté de préserver un mode de vie et de relation que l'on pourrait qualifier d'immoral, mais qui était utile à la préservation de l'identité collective et à la cohésion sociale du groupe qui ne pouvait tolérer la déviance ouverte en son sein. Il y a là une beau cas à méditer pour l'étude des relations entre minorité et majorité.

C'est seulement quand cette recherche fut publiée qu'elle a pu porter ses fruits en termes de changement. Un certain nombre de mesures ont été prises pour pallier les insuffisances du système que j'avais mis à jour. Quels enseignements tirer de cet exemple ?

- Face à une intervention, un groupe peut parfaitement mettre en place des comportements ou des procédures qui permettent de se défendre et de protéger des secrets qui le soudent en communauté. Il faut ici distinguer le secret et l'inconscient. Le groupe sait parfaitement à quoi s'en tenir avec ce qu'il pense et fait. Dans ce cas, on ne peut parler de conscientisation, ni de révélation du sens inconscient des pratiques.

- Il peut y avoir des interventions qui ne se font pas directement mais passent par une mise en public des résultats qui confrontent un groupe à ses agissements. Cela vaut particulièrement pour les cas de dénonciation. Mais comme le dit Touraine, il faut aussi travailler avec des groupes qui s'opposent à nos valeurs, sans pour autant les discréditer dans leur démarche. Si le chercheur se veut porte-voix des groupes qu'il étudie, alors la mise en public de situations et des significations qu'elles prennent pour les acteurs au nom de qui ils parlent est une forme d'intervention importante. Elle se base sur un processus social qui consiste à placer le groupe sous le regard des autres, le faire sortir de sa vue solipsiste. Le champ d'application de l'intersubjectivité s'en trouve élargi.

- La réaction de résistance d'un groupe peut manifester que sa dynamique à été bien épousée par l'intervenant. La recherche n'est pas toujours fusionnelle : elle peut être conflictuelle, dérangeante.

Une lutte pour la santé

Le second exemple est emprunté au cas d'une action menée au Mexique, qui donne une vue des conditions d'intervention dans un contexte culturel défini. Une de nos collègues mexicaines, Lourdes Quintanilla, qui était en charge du service de santé maternelle et périnatale au Ministère de la Santé, a animé une recherche action dans le cadre du programme national «Arrenque parejo en la vida » : « Un départ égal dans la vie ». Ce programme vise à donner aux populations pauvres et carencées des chances égales à celles des classes favorisées en matière de préservation de la santé maternelle, néonatale et de la petite enfance.

Cette intervention communautaire a été menée dans la région des Chiapas où le taux de mortalité néonatale est très élevé, et où les services de santé publique ne peuvent couvrir tous les besoins de la population. Dans cette

région vivent des communautés indiennes réparties dans des villages de montagne, relativement isolées et éloignées des centres de santé publique. Elle a permis de réduire de plus de 52% la mortalité maternelle et néonatale en trois ans, et obéit à un modèle innovateur (Quintanilla 2005).

Ce modèle visant un changement intentionnel et non imposé par les autorités sanitaires, est basé sur différents types d'action. D'une part, la mobilisation des habitants, leur appropriation des actions de santé dont ils bénéficient, leur organisation en services de soutien social qui appuient l'action des services de santé, avec le concours des autorités locales. D'autre part, un travail interculturel auprès des personnels de santé accueillant à l'extérieur les membres des communautés rurales pour les sensibiliser à la culture des communautés indiennes. Cette sensibilisation a pour but de les rendre capables d'appréhender des perspectives différentes des leurs, de prendre en considération les valeurs, croyances et coutumes de la population indigène, d'accepter la médecine traditionnelle, de négocier avec les membres de la communauté des significations autres que celles portées par leur contexte culturel. Enfin, la valorisation du travail des sages-femmes traditionnelles qui ont la confiance de la population. Cette valorisation est assortie d'une formation, authentifiée par un certificat de qualification qui renforce leur reconnaissance dans les unités de soins et leur permet d'assurer le relais entre les populations et les services de santé publique et les hôpitaux. Les savoirs et savoir-faire traditionnels des sages-femmes, fondés sur la transmission générationnelle et les croyances locales (Fagetti, 2003) sont reconnus et intégrés dans les pratiques de soins. Ils sont complétés et parfois corrigés par les connaissances médicales nécessaires à l'identification des risques de mortalité pour la mère et l'enfant. Une fois ces procédures mises en place, les communautés assument, avec l'aide des matrones et l'appui des psychologues, la gestion des risques néo-natals. Quand les sages femmes jugent que leur intervention n'est pas en mesure d'enrayer un danger de mortalité, elles prennent l'initiative d'acheminer, avec l'aide de la communauté, les femmes vers des centres des soins, ce qui n'est pas simple.

Il faut parfois les transporter sur une civière à travers les forêts montagneuses jusqu'à une route où un camion peut les véhiculer jusqu'au village le plus proche pour qu'une ambulance les emmène à l'hôpital. Là, la sage-femme accompagne et soutient la parturiente tout au long de son séjour. Cette tâche qui n'est pas mince. Mais ce n'est pas la plus dure car ces accoucheuses se heurtent aux obstacles d'une tradition qui veut que la femme reste sous le contrôle de l'époux, ne quitte pas le foyer, et que l'accouchement se fasse en présence de toute la famille, sous la férule de la belle-mère. Le départ pour l'hôpital occasionne alors des sentiments d'insécurité et des mouvements de révolte contre la destruction des normes familiales. Et il arrive que ces auxiliaires de santé quand elles ont réussi à convaincre les futures mères de la nécessité de recourir à la protection médicale soient contraintes, pour les conduire à l'hôpital, de lutter même physiquement avec le mari et la belle-mère, allant jusqu'à ficeler ces derniers pour qu'ils ne les empêchent pas de partir. Ce cas dessine bien le panorama de la prise en compte des coutumes, des normes et des rapports sociaux régies par la culture dans des actions de santé.

Ces deux exemples me conduisent à souligner l'une des dimensions sociales centrales à prendre en compte dans l'intervention communautaire : à savoir le rôle des croyances, des représentations partagées qui assurent la cohésion et l'identité des communautés et orientent leurs conduites. Cette prise en compte se trouve clairement exprimée par les chercheurs latino-américains. Une collègue brésilienne a parfaitement résumé cette optique « la santé et la maladie sont des conceptions construites dans des espaces sociaux délimités par les relations qui s'y nouent, et traversées par le processus productif, la religion, les croyances, les valeurs morales et éthiques, les conditions d'accès à la structure officielle de santé, entre autres facteurs » (Trindade, 2003). Les penseurs qui ont largement inspiré la psychologie communautaire et la psychologie critique, Paulo Freire, Fals Borda, Martin Baro ont aussi insisté sur la valorisation du savoir de sens commun, sur la conscientisation, et la nécessité de travailler sur les connaissances naïves pour aboutir à une maîtrise de son histoire et potentialiser son action. On peut ajouter, aujourd'hui que le changement des pratiques pénètre le tissu social, au moins dans le champ de la santé et de la santé mentale, il est une autre nécessité : celle de lutter contre les préventions qui y subsistent. La psychologie communautaire a pu accomplir une tâche humaine et sociale ; elle réalise aussi une tâche épistémologique. Une nouvelle tâche s'offre à elle dont l'importance devient de plus en plus évidente pour nombre d'acteurs sociaux. Je lui souhaite de réussir. Merci. »

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CONGRESS AWARDS

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PRIX DU CONGRES

CONGRESS BEST PRESENTATION AWARD PRIX DE LA MEILLEURE COMMUNICATION

Le quartier comme écosystème favorable au bien-être. Le point de vue de résidents paraplégiques ou tétraplégiques et de leurs familles

par **Sylvie Jutras¹, Delphine Labbé², Valérie Lafrance³, Odile Sévigny⁴,
Dominique Jutras⁵ & Coralie Lanoue⁶.**



Selon le modèle du Processus de production du handicap, c'est l'interaction entre les incapacités d'une personne et les différents obstacles ou facilitateurs rencontrés dans son environnement qui déterminera que la personne se trouve en situation de participation sociale ou au contraire de handicap (Fougeyrollas, 2002). Cette vision est au cœur des politiques énoncées par plusieurs États pour favoriser la participation sociale des personnes vivant avec une incapacité. Notons la *Loi pour l'égalité des droits et des chances, la participation et la citoyenneté des personnes handicapées* en France ou la politique *À part entière* au Québec. Le bien-être des personnes à mobilité réduite peut être favorisé ou entravé par des caractéristiques du quartier habité. Plusieurs groupes s'intéressent ainsi à la ville : des groupes militants de personnes avec incapacités qui font connaître leurs positions et besoins, des spécialistes qui proposent une vision inclusive de la société ou encore des organisations qui ont produit des dossiers thématiques. Les relations entre le quartier et le bien-être ont été étudiées en psychologie communautaire (p.ex. : Farrell, Aubry, & Coulombe, 2004), en santé publique (p.ex. : Galea & Freudenberg, 2005) et en psychologie de l'environnement (p.ex. : Jutras, 2002). De ces études, ressort l'importance de l'accessibilité aux services et aux lieux importants, de la cordialité et d'un environnement de qualité (éléments naturels, absence de nuisance). Cependant, à notre connaissance, les chercheurs n'ont pas étudié ce qu'en pensent les personnes les plus touchées : celles qui ont une incapacité locomotrice et leurs proches.

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Objectif de recherche

L'objectif de l'étude était de connaître comment des personnes ayant une incapacité locomotrice et leurs proches perçoivent l'apport de leur quartier à leur bien-être. En particulier, il s'agissait d'identifier leurs perceptions quant aux atouts du quartier et les modifications souhaitées, et de déterminer si ces perceptions variaient selon la perspective du répondant : personne avec incapacité locomotrice ou proche.

Méthode

Pour atteindre cet objectif, des entrevues ont été conduites au Québec auprès de 27 personnes lésées médullaires (PLM) ayant terminé leur réadaptation et 27 proches cohabitants. Les répondants devaient avoir au moins 18 ans, s'exprimer en français et être capables de répondre aux questions. La très grande majorité des ménages interviewés étaient propriétaires de leur logement (93 %). Dans le ménage, les personnes interviewées étaient en majorité des conjoints (70 %), pour les autres, il s'agissait d'une relation parent-enfant (30 %). L'âge moyen des personnes avec incapacité était de 45 ans et celui des proches, de 52 ans. En majorité, les personnes avec une incapacité étaient des hommes (67 %), et les proches, des femmes (63 %). En moyenne, le diagnostic de paraplégie (52 %) ou de tétraplégie (48 %) remontait à huit ans.

Les PLM et les proches ont été rencontrés séparément, à domicile, par deux intervieweuses. Les atouts perçus étaient sondés en intégrant une double perspective (soi et l'autre). Ainsi, les participants ont répondu à deux questions : *Quand vous regardez autour de vous dans votre quartier, qu'est-ce qui, selon vous, ... (1) favorise votre bien-être (pour soi) et ... (2) favorise le bien-être de [...] (pour l'autre)?* La troisième question visait à connaître les améliorations souhaitées : *Si, dans votre quartier, on pouvait modifier des endroits ou des caractéristiques afin de vous faciliter les choses, que souhaiteriez-vous changer?* Les réponses ont fait l'objet d'une analyse de contenu rigoureuse.

Résultats

Voyons d'abord les atouts perçus dans le quartier sans tenir compte de la perspective adoptée (pour soi ou pour l'autre). L'atmosphère est mentionnée par 47 % des répondants qui évoquent la tranquillité, la faible densité de la population, la beauté des lieux. La nature est appréciée par 32 % des répondants qui mentionnent la présence de parcs, d'arbres, de végétation, d'animaux, de cours d'eau. Autant de répondants (32 %) font état de la disponibilité ou de la proximité des services comme les commerces, les lieux culturels et de récréation, les organismes communautaires, les services de santé ou de transport. La convivialité est un atout perçu par 29 % des répondants qui s'expriment sur le bon voisinage, l'entraide, la proximité d'amis ou de membres de la famille. Enfin, seulement 17 % font mention de l'accessibilité en évoquant des éléments physiques facilitant les déplacements et l'accès (trottoir abaissé, rampe d'accès, piste cyclable).

Dans l'ensemble, les perceptions des deux groupes se ressemblent, mais deux différences significatives sont à noter. La première s'explique d'emblée : les PLM (36 %) sont plus nombreuses que les proches (7 %) à mentionner l'accessibilité comme un atout pour elles. L'autre différence est plus complexe : la nature est beaucoup plus fréquemment mentionnée pour soi que pour les autres. Ainsi, 40 % des PLM ont rapporté cet

atout pour soi, tandis que seulement 15 % l'ont évoqué pour le proche. De même, 52 % des proches ont mentionné la nature comme atout pour soi, mais seulement 20 % l'ont évoqué pour les autres.

Les principales modifications souhaitées touchent l'accessibilité (33 % des répondants), la sécurité routière (15 %), l'atmosphère (11 %), les services (11 %), la nature (7 %), la convivialité (6 %). Une seule différence significative apparaît entre les groupes : 44 % des PLM et 22 % des proches souhaitent des modifications à l'accessibilité.

Interprétation

Tous les répondants présentent l'atmosphère, la nature, les services, la convivialité; de plus les personnes avec incapacité apprécient l'accessibilité. Dans une étude de l'Organisation mondiale de la Santé (2007), on a interrogé les aînés de plusieurs pays sur les aspects favorables de leur ville, les problèmes auxquels ils se heurtaient et les améliorations souhaitées. Leurs perceptions concordent avec celles identifiées dans la présente étude. Il faudrait maintenant étudier les perceptions d'autres groupes pour établir l'universalité de ces qualités. Cependant, une différence, non pas entre les groupes mais selon la perspective prise par le répondant, pique la curiosité : les éléments naturels sont davantage perçus comme un atout pour soi que pour autrui. Le rapport à la nature semble perçu de façon idiosyncrasique. Les PLM comme les proches considèrent que les éléments naturels contribuent à leur propre bien-être. Cela appuie les résultats de maintes études concluant aux effets bénéfiques de l'environnement naturel chez des patients hospitalisés, des prisonniers ou des aînés (voir Jutras, 2002). Mais pourquoi les répondants ne réalisent-ils pas à quel point la nature est aussi importante pour leur vis-à-vis? Alors que les éléments naturels dans le quartier font partie du capital communautaire, les individus semblent croire que leur rapport à la nature est intime et unique. Il y a là un paradoxe intéressant à étudier pour les psychologues communautaires, surtout dans un contexte de préoccupation écologique.

Tant chez les PLM que chez les proches, les attentes au regard de la convivialité sont modérées. En fait, près du tiers des participants ont spontanément évoqué cet atout, alors que seulement 6 % des répondants souhaitaient des améliorations sous ce rapport. Faut-il croire que les participants vivaient dans un quartier déjà bien convivial? Ou est-ce plutôt que ces attentes modérées sont le reflet d'une vision individualiste de la vie de quartier?

Conclusion

Favoriser la participation sociale des personnes avec une incapacité suppose assurément l'accessibilité des lieux physiques, mais cette condition essentielle ne suffit pas et doit aller de pair avec la convivialité. Les villes favorisent le bien-être lorsque peuvent réellement vivre ensemble des personnes qui ont des incapacités, des aînés, des enfants, des jeunes, des parents, des immigrants. Avec leur grille de lecture écosystémique, leur vision compréhensive des enjeux sociaux et les valeurs qu'ils proclament, les psychologues communautaires doivent chercher à faire échec à l'erreur fondamentale d'attribution (Ross, 1977) selon laquelle on a tendance à sous-estimer les effets des contextes sociaux immédiats et à surestimer les dispositions personnelles. Les conditions qui prévalent en contexte urbain exercent une influence très importante sur le bien-être du tout-venant et probablement encore plus grande pour les personnes qui doivent composer avec des contraintes, qu'il

s'agisse d'enfants, d'aînés ou de personnes avec des limitations locomotrices. Le bien-être urbain est un chantier dans lequel doivent s'associer des spécialistes de différentes provenances. Une contribution accrue des psychologues communautaires permettrait de mieux comprendre les mécanismes qui, dans la ville, encouragent la participation sociale.

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CONGRESS BEST POSTER AWARD PRIX DU MEILLEUR POSTER

La recherche participative et qualitative en soutien au développement social communautaire

par Sylvie Hamel¹



Problématique

État de situation des gangs de rue

Le phénomène des gangs, ou bandes criminelles, touche maintenant des milliers d'adeptes marginalisés à travers la planète et c'est pourquoi il est devenu un sujet de préoccupation internationale (Hagedorn, 2005). Le Service canadien de renseignements criminels (SCRC, 2006) estimait en 2006 que 300 gangs de rue étaient présents à travers le pays, dont 50 au Québec, comptant environ 11 000 membres. En France, certains laissent entendre qu'il existe au minimum une bande de jeunes par cité, caractérisée comme «zone urbaine sensible», pour un total de 600 à 700 bandes de jeunes (Rizk, Soullez, Monzani & Bauer, 2008).

La répression n'est pas une solution

Devant l'apparente flambée du phénomène, le premier réflexe des services policiers consiste habituellement à tenter d'éradiquer ces groupes, par une action essentiellement répressive. La répression n'offre toutefois que peu de résultats si elle est utilisée de manière unilatérale (Klein, 1995). Non seulement cette stratégie est insuffisante pour faire face au phénomène des gangs, mais elle pourrait même avoir pour effet d'augmenter leur violence, de renforcer leur noyau et de rallier plus sérieusement certains membres.

Le développement social communautaire

C'est pourquoi nous privilégions une autre approche, beaucoup moins répandue cependant : le « développement social communautaire ». Cette stratégie n'est pas centrée sur les situations et les faits criminels, mais sur les causes et sur l'amélioration du tissu social comme moyen de freiner la propagation de gangs et de la délinquance qu'ils génèrent. Le développement social s'appuie sur la population elle-même. Non seulement il contribue à son

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épanouissement, mais il le fait par l'activation de son propre potentiel. Ceci rejoint la position de Chavis (2000) qui définit le développement social comme un processus de coopération volontaire, d'entraide et de construction de liens sociaux entre les résidents et les institutions d'un milieu local, visant l'amélioration des conditions de vie tant individuelles que collectives, sur les plans physique, social et économique.

Approche

Le pouvoir aux communautés

Dans le cadre du projet *Jeunesse et gangs de rue*, nous avons donc recouru aux communautés elles-mêmes, à leurs expertises, leur connaissance des jeunes, leurs moyens et leurs ressources. Ceci rejoint l'idée de plus en plus répandue selon laquelle les preuves scientifiques ne sont pas suffisantes à la conception des programmes et, en conséquence, que la participation des milieux s'impose comme dimension incontournable et essentielle à l'élaboration de l'action des pouvoirs publics. La complexité des problèmes auxquels nous sommes aujourd'hui confrontés, ici le phénomène des gangs, requiert plutôt que des mécanismes soient mis en place permettant qu'une diversité d'acteurs concernés négocient, s'ajustent les uns aux autres selon leur pouvoir relatif et leurs systèmes de valeurs respectifs, pour prendre ensemble des décisions issues d'ententes et de compromis.

Une évaluation participative

Dans cette perspective, nous a voulu mener une *évaluation participative* et, de cette façon, favoriser la participation et l'éducation des acteurs afin qu'ils deviennent plus habiles à contrôler leur vie et leur environnement (Fine, Torre, Boudin, Bowen, Clark, Hylton, Martinez, Roberts, Smart et Upegui, 2003; Jason, Keys, Suarez-Balcazar, Taylor et Davis, 2002). L'éducation conduirait à une conscientisation chez les acteurs concernés les aidant à faire face à leur réalité sociale et aux processus qui y sont associés. En retour, ceci viendrait augmenter leur pouvoir et leur capacité de transformer leur milieu.

Une méthodologie qualitative

L'évaluation que nous avons menée commandait que nous utilisions une méthode qualitative. Nous voulions saisir la réalité des acteurs à partir de leurs propres cadres de référence, ceux avec lesquels ils interprètent les faits, de même que leurs actions et les pensées qui s'y rattachent. Cette approche s'inspire de la phénoménologie qui défend l'idée selon laquelle il est essentiel de prendre en considération le sens qu'accordent les individus au monde qui les entoure, étant donné qu'ils sont en rapport avec lui et qu'ils se projettent en lui, ce qui les amène à développer une conscience à son égard (Boutin, 2006). Nous avons réalisé en tout 141 entretiens semi-dirigés auprès d'acteurs clés du projet, issus de trois localités de la région de Montréal au Québec. Ces acteurs sont des intervenants et des citoyens qui ont uni leurs compétences pour élaborer et mettre en œuvre des plans d'action locaux novateurs, visant à prévenir le phénomène des gangs en s'appuyant sur une approche de développement social communautaire.

Résultats

Innovation et controverse

Dans cette démarche, nous avons vu se dérouler d'abord un processus d'appropriation servant à assembler diverses formes de savoir venant à la fois des faits, des croyances et des expériences des acteurs. De nombreuses discussions ont donc été tenues et, dans cette foulée, divers sujets ont été abordés qui tous ont été nécessaires, même si certains d'entre eux semblaient passablement s'éloigner de l'objet principal. Les plus importants sont ceux ayant soulevé la controverse.

Toutefois, les conflits qui ont émergé au cours de la démarche n'ont pas été tus ou cachés. Au contraire, ils ont été ouverts et longuement considérés. Dans cette perspective, il fallut cependant accorder la parole aux intervenants et créer des espaces de dialogue servant à faciliter les négociations entre eux. Cette étape fut sans doute la plus difficile parce que les discussions ne sont habituellement pas reconnues comme ayant de l'importance en soi. Face à un phénomène qui génère autant de violence et de criminalité, l'action fait bien meilleure figure. Pire encore, une entreprise qui conduit à la controverse peut sembler désorganisée et perdre de sa crédibilité. Quoi qu'il en soit, il aura fallut entre huit et 18 mois aux localités pour franchir cette étape.

Le réseau, la première cible de l'intervention

Les réseaux d'action que les participants ont mis en forme constituent la première cible sur laquelle se fondent leurs plans d'action. Ainsi, les acteurs ont choisi de renforcer d'abord les liens et les dispositifs entre eux, ainsi qu'avec d'autres membres de la communauté élargie, avant même de s'adresser aux jeunes. Cette façon de faire répond assez bien à une expression que nous avons déjà utilisée indiquant que « ça prend un gang pour faire face aux gangs ». C'est de manière graduelle que les membres des réseaux d'action ont voulu ensuite se rapprocher du phénomène des gangs, sans perdre de vue que leur mission première consistait à s'occuper des jeunes qui en font partie. Après le réseau d'action, les autres cibles de ces plans d'action sont les jeunes en général, les jeunes à risque, les jeunes victimes, puis les jeunes membres de gangs. Chaque nouvelle cible s'emboîte en quelque sorte dans la précédente, un peu à la manière de poupées russes : tout en prévoyant des objectifs qui lui sont particuliers, ceux qui ont été définis pour les autres cibles sous-jacentes lui sont tout autant utiles et fondamentaux.

Les jeunes membres de gangs, visés en dernier

D'importants enjeux moraux auraient pu conduire les intervenants à procéder de manière différente, voulant qu'ils s'occupent en premier lieu et en toute urgence des jeunes qui sont le plus à risque ou encore de ceux qui vivent de graves problèmes avec les gangs (victimes ou membres criminels). Ils ont toutefois préféré éviter les conséquences que pouvaient avoir sur ces jeunes les actions incohérentes et mal gérées d'un réseau d'acteurs qui ne se font pas confiance. Un réseau défectueux peut difficilement sécuriser ces jeunes et leur donner envie de s'y joindre plutôt que de se lier aux gangs.

Une communauté mobilisée

En 2004, le projet mettait en scène les intervenants de trois maisons de jeunes, du service de police, de la municipalité, de deux écoles secondaires, de deux centres pour jeunes raccrocheurs et de deux entreprises d'économie sociale qui, ensemble, ont réussi à joindre 7 922 jeunes qui ont participé à des activités régulières et ponctuelles (événements spéciaux). En 2005, 9 631 jeunes se sont inscrits à des activités régulières et 1 404, à des activités ponctuelles (Hamel, Cousineau & Vézina, 2006). En 2006, le projet était mis en candidature pour recevoir le prix d'excellence du Réseau québécois de Villes et Villages en santé qui se consacre aux projets de développement durable.

Des leçons que nous tirons de cette expérience

Les innovations et le développement social ne vont pas de soi

Les entretiens individuels que nous avons conduits auprès des acteurs du projet les ont aidés à traverser les périodes difficiles, en leur cédant la parole et en leur permettant ainsi d'avoir une tribune supplémentaire et même une certaine emprise sur les enjeux se rattachant à la démarche. Leur participation aux discussions en grand groupe a aussi contribué au développement de l'innovation. Les discussions se sont avérées indispensables à l'unité et à la solidarité des groupes.

La combinaison de ces deux éléments – entretiens individuels et discussions en grand groupe –, que nous avons intégrés à la démarche par l'entremise d'une approche participative et qualitative, ont apparemment bien servi à ces acteurs qui tentaient de figurer comment ils pouvaient réaménager les systèmes d'intervention existants. Un tel exercice comporte des difficultés qui sont plus faciles à surmonter lorsque les acteurs s'approprient le nouvel objet qu'ils portent (une nouvelle approche pour la prévention du phénomène des gangs) et parviennent à lui donner un sens commun (Alter, 2002 ; Edquist & Hommen, 1999, Nadeau, 2006). Pour qu'une transformation s'opère, une nouvelle vision doit d'abord émerger (Benoît Lévesque, 2005). Ce qui, par contre, peut être ardu lorsque les acteurs impliqués défendent des systèmes de croyances divergents (Gauthier, 2006). Il s'avère en effet que bien souvent la diversité et l'hétérogénéité des acteurs qui constituent la richesse du réseau qu'ils sont en train de former, peuvent au départ poser plusieurs problèmes de traduction, dont la solution doit passer par la négociation et le compromis (Callon, 1986; Callon, Lascoumes et Barthe, 2001; Klein et Harrisson, 2007).

Le pouvoir du dialogue et des mots

Mais la parole et le dialogue ont le pouvoir d'engendrer un processus critique et réflexif qui en retour favoriserait l'émergence de communautés apprenantes et compétentes (Folkman & Rai, 1991). Chavis (2001) dit que les conflits qui au départ surgissent au sein de coalitions associées à des démarches voulant conduire au changement, ne sont habituellement que le reflet de ceux que l'on retrouve dans la communauté élargie. Ces coalitions ne pourraient entraîner aucun changement dans l'environnement sans d'abord faire face à leurs propres divergences. Celles qui parviennent à les résoudre deviendraient en principe plus fortes qu'elles ne

l'étaient avant. Les intérêts et les pouvoirs divergents qui au départ ont pour effet de générer des tensions deviendraient en retour responsables, une fois que l'on parvient à établir de nouvelles ententes, d'une force accrue qui transporte les nouveaux groupes d'acteurs.

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COMMUNITIES & SOCIETIES

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COMMUNAUTES ET SOCIETES

Les modèles d'application des connaissances sont-ils adaptés pour soutenir l'action au sein des communautés ?

par Cécile Bardon¹, Marie Joelle Gervais¹ & François Chagnon²



L'importance d'améliorer la qualité des interventions par l'application de connaissances (AC) scientifiques est de plus en plus reconnue en psychologie communautaire (Wandersman et al., 2008), comme dans d'autres domaines de l'intervention. Afin de soutenir l'application des connaissances et développer des stratégies adaptées en ce domaine, il est important de modéliser les processus et déterminants en jeu.

Les modèles théoriques d'AC ont leur intérêt dans une perspective de recherche ou ils sont utiles pour mieux comprendre les processus et déterminants de l'AC. Ils sont aussi pertinents dans une perspective de pratique afin de développer de meilleures stratégies d'AC qui répondent à des critères de qualité et d'adéquation aux situations, d'adapter les pratiques aux connaissances nouvelles et de permettre une meilleure évaluation des pratiques en cours. Notons cependant que les modèles d'application des connaissances (AC) ont principalement été développés au sein des domaines médical et psychosocial. Il est donc important d'examiner comment ces modèles peuvent répondre aux besoins spécifiques de l'AC dans le domaine de la psychologie communautaire.

La présente étude vise à évaluer la capacité des modèles d'AC à rendre compte des processus d'AC dans le domaine de la psychologie communautaire. Pour ce faire, trois objectifs sont poursuivis (1) décrire les modèles théoriques de l'AC existants; (2) Évaluer l'adéquation entre les modèles d'AC existants et les spécificités de l'intervention au sein du domaine de la psychologie communautaire; (3) Proposer une modélisation de l'AC en psychologie communautaire.

Objectif 1 : Description des modèles théoriques de l'AC existants

La première étape de ce travail a consisté en une revue de littérature visant à identifier différents modèles d'AC développés dans les domaines médical et psychosocial (Chagnon, Gervais, Bardon, en cours).

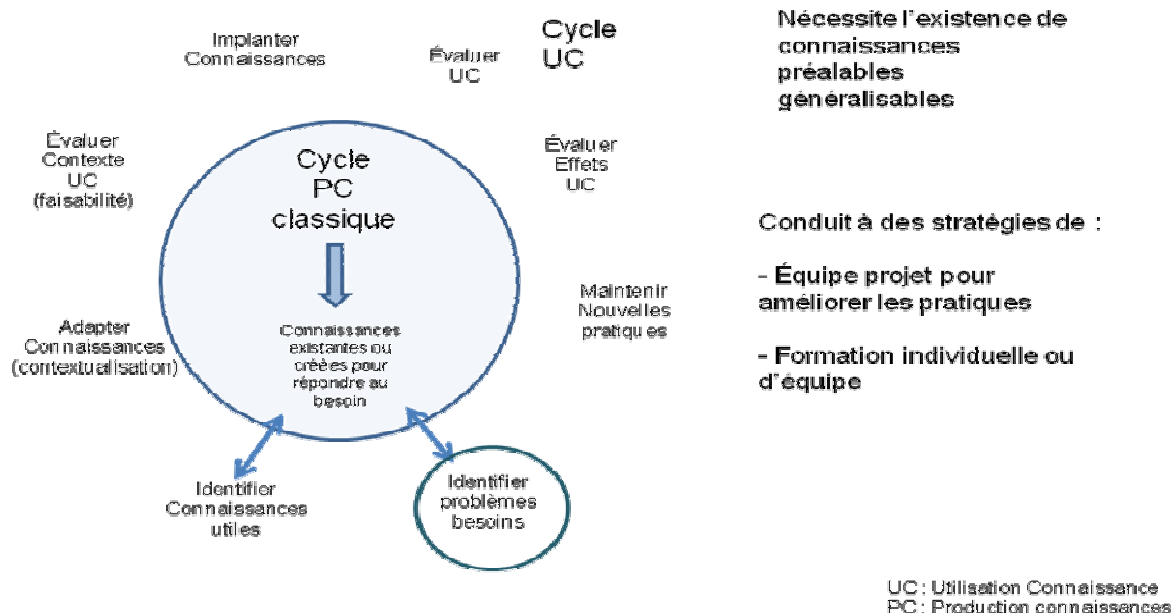
Nous avons commencé par recenser 3500 articles dans des bases de données variées, à partir de mots clés, dont 65 ont été retenus à partir des résumés pour analyse subséquente. L'analyse a été faite à partir d'un ensemble de critères de classification qui a permis de sélectionner 45 modèles théoriques de l'AC dans les domaines médical, infirmier, psychosocial, de l'éducation et du management. Les modèles recensés relèvent de trois types, identifiés dans la littérature sur le sujet, soit les modèles de résolution de problème (N=13), les modèles de dissémination (N=28) et les modèles interactionnistes (N=7). Les trois figures ci-dessous

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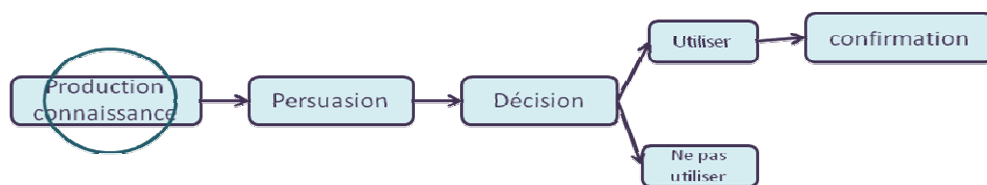
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schématisent les trois types de modèles d'AC tels qu'ils apparaissent dans les écrits. Bien entendu, chaque modèle examiné constitue une variation spécifique de ces schémas généraux.

TYPE DE MODÈLE : RÉOLUTION DE PROBLÈMES



TYPE DE MODÈLE : DISSÉMINATION DES CONNAISSANCES

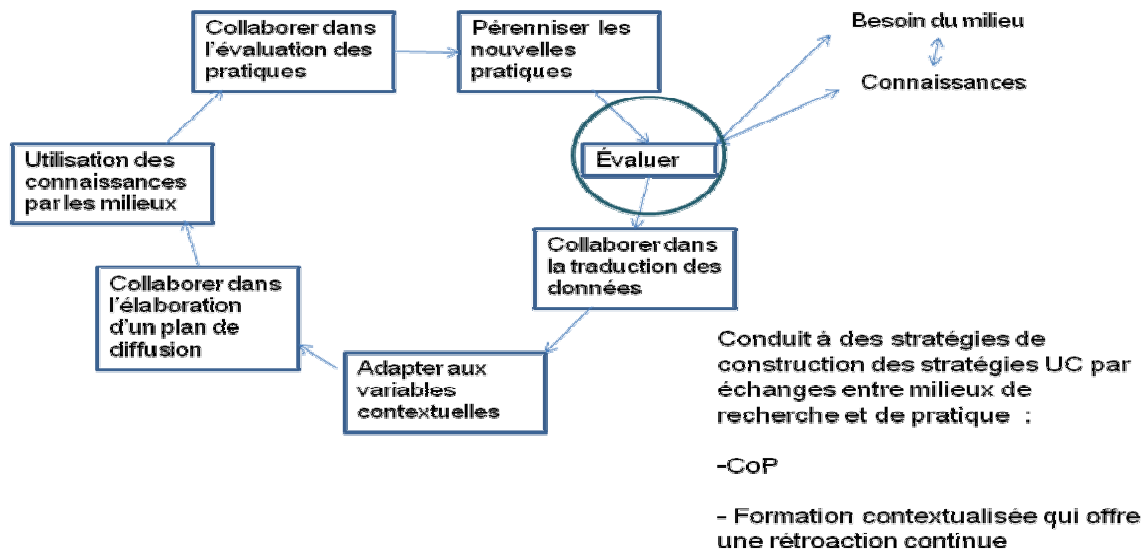


Nécessite l'existence de connaissances préalables généralisables

Conduit à des stratégies de :

- Formation individuelle ou d'équipe
- production de guidelines ou synthèses de connaissances

TYPE DE MODÈLE : INTERACTIONNISTE



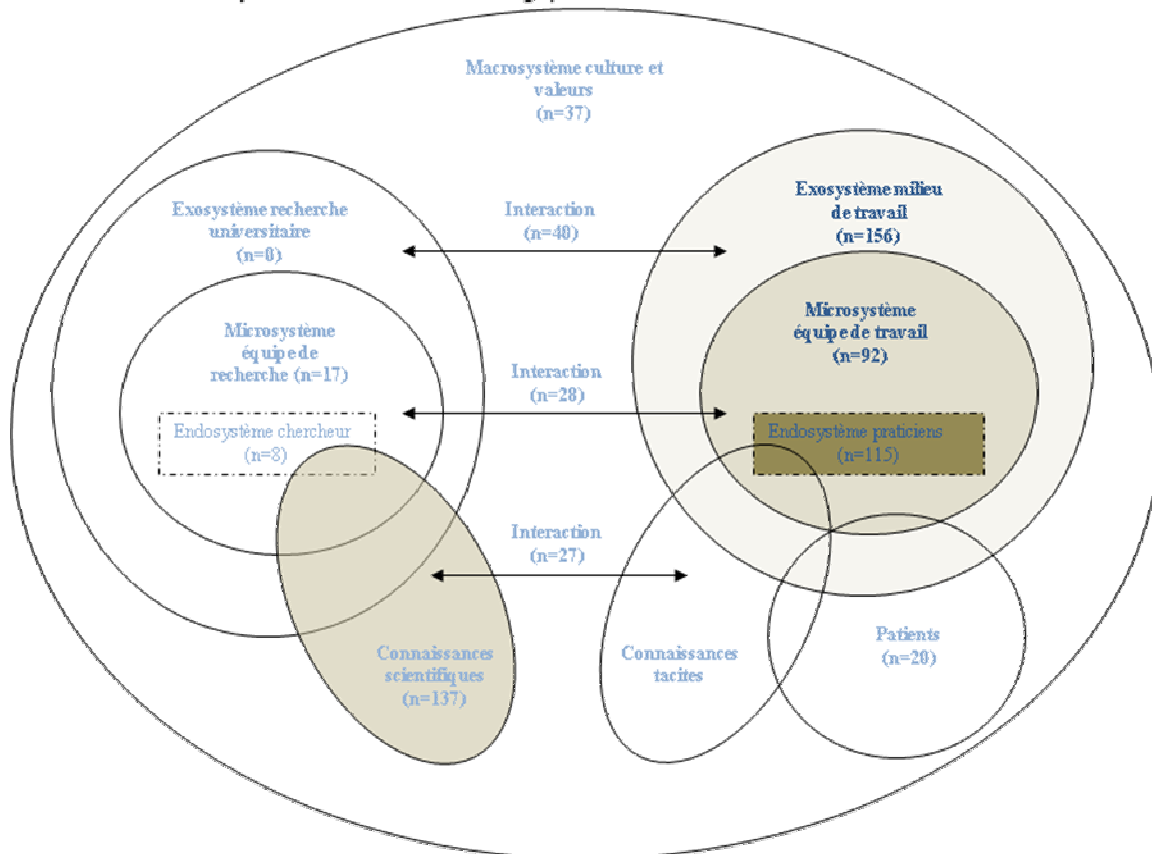
Ces différents modèles ont été développés dans les domaines médical (entre 1992 et 2007, 20 modèles), des soins infirmiers (entre 1992 et 2008, 16 modèles), psychosocial (entre 2003 et 2008, 5 modèles), de l'éducation (entre 1987 et 2003, 4 modèles) et du management (entre 1992 et 2007, 3 modèles). On remarque donc que les domaines liés à l'administration de traitements médicaux ont été la source la plus importante de données sur les processus en jeu lors de l'AC. Ceci est important pour comprendre pourquoi les modèles de dissémination et de résolution de problèmes sont prévalent dans la littérature. En effet, la diffusion et l'utilisation de meilleures pratiques médicales, la plupart du temps constituées de techniques précises de travail, généralisables à différents contextes constitue la trame de fond de ces modèles. Ce type de besoins se trouve mieux expliqués par des modèles de dissémination ou de résolution de problèmes. Par contre les modèles interactionnistes, pour lesquels l'utilisation de connaissances passe par un mécanisme d'échanges entre producteurs et utilisateurs et par une adaptation des connaissances au contexte de pratique ont plus généralement été développés dans le contexte de l'intervention psychosociale, dans lequel les connaissances sont parfois moins généralisables que dans le milieu médical et où les connaissances tacites, liées aux qualités et à l'expérience des intervenants ont une importance plus grande.

Objectif 2 : Évaluation de l'adéquation entre les modèles d'AC existants en fonction des spécificités de l'intervention au sein du domaine de la psychologie communautaire

Afin, d'évaluer l'adéquation entre la capacité des modèles d'AC existants et les spécificités de la psychologie communautaire, l'analyse s'est effectuée selon deux angles complémentaires. Le premier a consisté en une analyse écologique des déterminants de l'AC. En marge du processus d'AC, décrivant les différentes étapes devant se produire pour que l'AC soit efficace dans un contexte spécifique, les modèles intègrent des éléments appartenant au contexte et qui peuvent influencer le déroulement du processus d'AC; se sont les déterminants

de l'AC. Après avoir fait une recension des différents déterminants cités dans les modèles, nous les avons classés dans une perspective écologique. Ce classement nous a permis de constater que la plupart des modèles indiquent que les éléments pouvant le plus influencer l'AC sont associés aux dimensions microsystémiques du modèle écologique, c'est-à-dire ceux liés aux caractéristiques individuelles des personnes utilisant les connaissances. Ces explications individuelles peuvent ne pas s'accorder avec une perspective écologique telle qu'on l'emploie en psychologie communautaire.

Tableau récapitulatif des déterminants cités dans les modèles d'AC en fonction de leur place dans le modèle écologique



Parmi les déterminants les plus cités dans les modèles existants, on retrouve dans les microsystèmes de l'utilisateur de connaissances : l'allocation de ressources de la part du milieu (44%), le niveau de connaissances initiales de l'utilisateur (32%), les valeurs, attitudes, style cognitif de l'utilisateur (32%), la culture organisationnelle de l'utilisateur (34%), la capacité d'adaptation du milieu utilisateur (39%), le leadership des gestionnaires (40%). En ce qui concerne l'autre microsystème le plus souvent cité, celui de la qualité des connaissances (sorties de leur contexte de production), on retrouve : la qualité des connaissances (41%), l'adéquation des connaissances (44%) et l'apport innovant des connaissances (32%). Ces dimensions ne couvrent pas les influences provenant du milieu plus large, des interactions entre chercheurs et utilisateurs, des bénéficiaires des services psychosociaux et des communautés qui les intègrent.

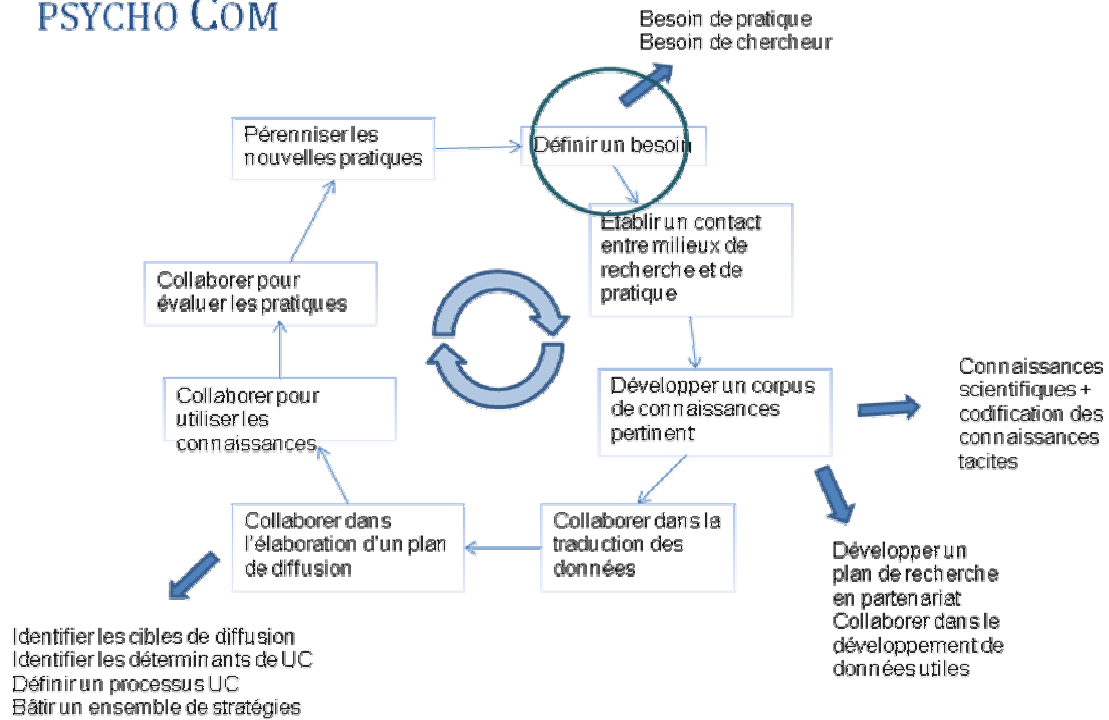
Le second axe d'analyse visait à étudier les objectifs des modèles d'AC en fonctions des objectifs de psychologie communautaire. De façon générale, les modèles d'AC visent l'amélioration des pratiques par des cliniciens ou l'adoption d'une innovation dans un milieu de pratique bien défini. La cible du processus d'AC est rarement une communauté entière et les processus décrits pour définir l'AC ne sont pas forcément adaptés à une approche communautaire.

On peut donc constater que les modèles d'AC identifiés dans la littérature ne répondent qu'en partie aux exigences de l'approche en psychologie communautaire. Les besoins spécifiques de l'intervention communautaire en termes de modélisation de l'AC peuvent s'articuler autour des pôles suivants. (1) les connaissances scientifiques communautaires présentent des qualités spécifiques, dans le sens où elles sont généralement co-construites, contextualisées, issues d'un processus délibératif. (2) Les limites présentées par la difficulté de généralisation des résultats de recherche en psychologie communautaire rendent toute activité de diffusion élargie plus difficile. Cela soulève également, à un autre niveau, la question de la définition de ce qu'est la science en psychologie communautaire (l'aspect scientifique de la psychologie communautaire est peut-être plus dans ses méthodes et sa rigueur que dans des résultats spécifiques). (3) La cible de diffusion des données est différente par rapport aux modèles d'AC traditionnels (une communauté plutôt qu'un intervenant particulier ou une équipe d'intervention). (4) Les objectifs de l'application des connaissances (justice sociale, empowerment) qui peuvent différer de ceux exposés dans les modèles classiques (amélioration d'une pratique).

Objectif 3 : Proposition d'une modélisation de l'AC en psychologie communautaire

Pour finir, nous vous proposons une ébauche d'un modèle pouvant permettre d'analyser les cycles d'AC dans une perspective communautaire et répondre à quelques unes des questions posées par l'utilisation des connaissances dans la construction d'interventions adaptées dans les communautés. Pour répondre au besoin de mieux décrire les processus et déterminants de l'AC dans le contexte de l'intervention communautaire, nous avons besoin de modélisations plus poussées à partir des modèles existants. Le modèle proposé permet d'identifier les processus sous jacents à la circulation des connaissances dans un milieu, d'identifier les déterminants spécifiques sur lesquels on peut travailler afin de faciliter les processus d'AC dans ce milieu, de produire des analyses contextuelles des processus. Ces modélisations seront particulièrement utiles pour développer des stratégies d'AC novatrices, basées sur la coconstruction des connaissances et sur la coconstruction des méthodes de diffusion des innovations sociales.

CE QUE POURRAIT ÊTRE UN MODÈLE D'UC EN PSYCHO COM



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Sense of community and social participation in adolescence

by Elvira Cicognani¹, Monica Chiessi¹ & Christopher Sonn²



Introduction

The relationship between sense of community and social participation has been a topic of theoretical and empirical research within Community Psychology. Sense of community (SoC) is considered a catalyst for community participation, increasing individual and collective action (Chavis & Wandersman, 1990).

Recently, this issue has been investigated also among adolescent populations. Studies on Sense of community development during the adolescent years have emphasized the role of the increasing opportunities of active involvement in the community, that follow from psychosocial and developmental transitions, in influencing adolescents' experience of community and SoC (Evans, 2007). In particular, adolescents' participation in structured group activities provides opportunities to develop relationships with peers and adults, and increase social capital and civic responsibility (Youniss et al., 1997). Albanesi et al. (2007) found that involvement in formal groups is associated with increased civic involvement and higher Sense of community.

Aims

The aim of this research was to further test the relationship between Sense of community and social participation in adolescence. Differences according to age and gender in SoC and social participation were also considered.

Method

Participants included 661 high school students from a medium-size town (25,000 inhabitants) in Northern Italy. Adolescents attended the second and the fourth year of different types of high schools (Lycee, Technical school and Vocational school). Age ranged between 15 and 18 years old.

47% were male and 53% female.

Measures

The study is part of a broader project. In this context the following instruments were considered:

Sense of Community

It was measured using the short version of the Sense of Community Scale for Adolescents (SoC-A; Chiessi, Cicognani & Sonn, 2010), which measures sense of community referred to the local community (town); it includes 20 items (range 0-4) corresponding to five subscales (*Sense of belonging, Support and emotional connection in*

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the community, Support and emotional connection with peers, Satisfaction of needs and opportunities for involvement, Opportunities for influence) (α ranged from .74 to .88).

Group membership

Participants were asked about their belonging to 10 types of formal groups (e.g., sports groups, religious associations, volunteering associations, etc)(yes/no). For the purposes of further analyses, a summary score was calculated (n. of groups).

Social participation

It was measured by 10 items assessing, on a four point scale, the frequency of different forms of participation. Factor analysis indicated the presence of four factors: prosocial participation (e.g. donating money), political participation (e.g. manifestations, petitions), protest-oriented participation (e.g. strikes, occupations) and religious participation (e.g. attendance to religious events).

Results

Differences according to age, gender, type of school

ANOVA on SoC subscales indicated a significant main effect of gender on Sense of Belonging ($F_{(1,648)} = 16.12, p < .001$), Satisfaction of Needs and Opportunities for Involvement ($F_{(1,660)} = 18.04, p < .001$) and Support and Emotional Connection with Peers ($F_{(1,648)} = 8.83, p < .01$): in all cases scores were higher among male adolescents compared with females. ANOVA on Support and Emotional Connection with Peers also showed a main effect of school year ($F_{(1,648)} = 12.49, p < .001$), indicating a reduction in SoC levels in the older group.

Table 1

Differences in SoC scores according to the variables (Means and SD)

	Gender		School year	
	Male	Female	II	IV
Sense of Belonging	2.11 (1.00)	1.76 (1.02)***	1.96 (1.02)	1.91 (1.02)
Support and Emotional Connection in the Community	1.36 (.70)	1.28 (.64)	1.33 (.64)	1.28 (.71)
Support and Emotional Connection with Peers	2.30 (.90)	2.05 (.98)**	2.32 (.89)	2.03 (.99)***
Satisfaction of Needs and Opportunities for Involvement	1.76 (.86)	1.44 (.83)***	1.63 (.86)	1.58 (.85)
Opportunities for Influence	2.27 (.81)	2.32 (.82)	2.30 (.84)	2.30 (.79)

*** $p < .001$ ** $p < .01$ * $p < .05$

ANOVA on the total score of group membership indicated that males (1.54) belong to more groups than females (1.31) ($F_{(1,648)} = 6,108, p < .05$).

Prosocial participation is higher among females than males ($F_{(1,648)} = 14.07, p < .001$), and increases with school year level among females whereas among males, scores decrease ($F_{(1,648)} = 4.33, p < .05$). Political participation is higher among older adolescents ($F_{(1,648)} = 10.23, p < .001$), and is higher among males ($F_{(1,648)} = 4.21, p < .05$). Protest-oriented participation decreases with school year level ($F_{(1,648)} = 19.92, p < .001$). Religious participation only differs according to gender, being higher among females ($F_{(1,648)} = 29.71, p < .001$).

Relationships between sense of community, group membership and social participation

Differences in Sense of community according to group membership were assessed for the three most typical groups attended by participants (sports groups, volunteering groups and religious groups). Sense of community is higher among members of sports groups (sense of belonging, support and emotional connection with peers and support and emotional connection in the community); volunteering groups (support and emotional connection with peers and opportunities for influence) and religious groups (almost all dimensions of SoC) (Table 2).

Table 2

Sense of community: Differences according to group belonging (M and SD)

	Sports groups		Volunteering group		Religious group	
	Y	N	Y	N	Y	N
Sense of Belonging	2.10 (.99)	1.84 (1.05)***	2.07 (.93)	2.00 (1.03)	2.24 (.91)	1.91 (1.05)***
Support and Emotional Connection in the Community	1.40 (.68)	1.24 (.64)**	1.42 (.68)	1.33 (.67)	1.41 (.61)	1.31 (.70)
Support and Emotional Connection with Peers	2.36 (.88)	2.25 (1.93)***	2.48 (.87)	2.21 (.95)*	2.51 (.83)	2.13 (.97)***
Satisfaction of Needs and Opportunities for Involvement	1.65 (.89)	1.53 (.79)	1.76 (.58)	1.58 (.58)	1.74 (.85)	1.55 (.85)***
Opportunities for Influence	2.37 (.80)	2.25 (.84)	2.49 (.84)	2.30 (.81)*	2.50 (.76)	2.25 (.83)***

*** $p < .001$ ** $p < .01$ * $p < .05$

Correlations between sense of community subscales and dimensions of participation indicated that religious participation correlates with almost all subscales of sense of community, even though the coefficients are low (sense of belonging: $r = .10^{**}$, support and emotional connection in the community: $r = .12^{**}$; support and emotional connection with peers: $r = .14^{**}$, opportunities for influence, $r = .15^{***}$). Prosocial participation correlates with opportunities for influence ($r = .14^{**}$).

To test the impact of group membership and sense of community in enhancing forms of social participation, Hierarchical Regression Analysis was conducted, including group membership in the first step and sense of community subscales in the second. As regards prosocial participation, group membership significantly predicts participation (beta $.11^{**}$), both directly and through its impact on perceived opportunities for influence (beta $.12^{**}$) ($R^2 = .03$). Sense of community has no impact on political participation, which appears to be significantly predicted by group membership (beta $.19^{***}$) ($R^2 = .04$). Protest-oriented participation is negatively predicted by group membership (beta $-.09^{**}$) and sense of belonging (beta $-.14^{**}$) and positively predicted by support and emotional connection with peers (beta $.14^{**}$). Religious participation is positively predicted by group membership (beta $.26^{***}$), opportunities for influence (beta $.09^*$) and negatively by satisfaction of needs and opportunities for involvement (beta $-.12^{**}$).

Discussion

Results of this study provide some support to the role of group memberships and sense of community in influencing different forms of social participation in adolescence, indicating a distinct role of the different dimensions of SoC. In particular, perceived opportunities for having influence over their local community only plays a role in influencing prosocial and religious participation, that is the two most typical forms of engagement at

this age. Adolescents' participation to strikes and occupations is enhanced by a lower sense of belonging to the local community and a higher perceived support and emotional connection with peers. Religious participation is stronger when adolescents are less satisfied by the opportunities offered by the local community. Group membership positively predicts all forms of participation, except for protest-oriented participation, further confirming that the latter is related to adolescents' belonging to specific types of groups and not to the wider community.

Even though the magnitude of the effects is low, and require further supporting evidence, results are consistent with previous findings (eg. Albanesi et al., 2007) and indicate the need to investigate more analytically the processes whereby different dimensions of SoC impact specific domains and forms of participation.

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Youth participates in Santa Eulalia. An experience of participatory budgets with young people

by Ruben-David Fernandez¹ & Moises Carmona²



Introduction

In the last decade, different experiences have been developed under the name of 'participatory budgets' in different municipalities of Catalonia (Terrassa, Figaro-Montmany, Santa Cristina D'aro, Rubi, etc.). The aims of all these experiences have been to promote the direct participation of citizens in the distribution of the municipal budget. The diversity of methodologies, experiences, goals, desires and budget involved is the common denominator to all of them. Also, most experiences have been addressed to adults or to the whole population, which has resulted in a low participation of the youth in these processes. In order to deepen into the search of new channels to strengthen democracy, the involvement of young people in these channels remains a challenge, with many more failed attempts than successes.

This communication is intended to provide the process "jóven, participa en Santa Eulalia (youth, take part in Santa Eulalia)". A unique experience in the context of Catalonia, developed in the municipality of Santa Eulalia de Ronsana in the province of Barcelona, addressed to young people's participation only. Young people aged between 15 and 29 took part in the decision of one part of the budget of the Youth Area of City Council of Santa Eulalia Ronsana. Santa Eulalia is a little municipality (6699 inhabitants in 2007) situated a 40 Km from Barcelona. This communication aims to present the methodology carried out based on Participatory Action Research (Ander-Egg, 2003). A process that lasted three months and was divided into four phases: previous agreements (starting the process, constructing the rules, the limits and the different work spaces), Network analysis & raising multipliers (communication process, mapping where and how we could engage the young people and collection and grouping of proposals), setting criteria's for ranking the final proposals (application criteria and selection of proposals for the municipal budget) and feedback of the results (and evaluation). We present the main results of this experiment, both regarding the results of the participatory process and the proposals on the municipal budget for youth. We also discuss the key learnings, insights, challenges and opportunities for youth participation defining this process, parared to with other similar processes developed with other groups.

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About citizens' participation

In our view, citizens' participation is at the same time:

- a citizens' right: we have a legal frame that obliges public administrations to guarantee this right.
- a citizens' obligation: we should develop this awareness within the citizens. (Paulo Freire, 1988)
- a resource: to achieve real social transformations and to face real needs and opportunities, academic knowledge is not the only possible one (knowledge ecology, (Santos Boaventura de Sousa, 2006).
- a human need: if we don't participate, we are not alive! The point is how to take part not only in individual issues, but also in common ones.

Therefore, citizens' participation is...



Process Profile: “Youth, take part in Santa Eulalia!!!”

The process was ordered by the local authority of Santa Eulalia de Ronçana, specifically by the Young and Culture Department, between September 2007 and January 2008 (5 months). The technical team developing the project was composed by 2 members of the Youth and Culture Department and 2 members of ETCS cooperative who work together on participation studies involving the University of Barcelona and the Autonomous University of Barcelona. The target population was young people aged 15 to 25 years (about 600 inhabitants, 12% of the population of the municipality). And the budget open to the participation of young people was 20,000 euros, 40% of the budget for Youth and Culture Department of the municipality of Santa Eulalia (the rest of the budget is used in practice to recruit staff).

The will of the Process was:

1. Give young people a role in the municipal budget,
2. Generate autonomy,
3. Share responsibility with the young people regarding the criteria for spending public resources,
4. Accountability in public policies

And the aim of the process was: “To involve the young people in a process of democratic deliberation and decision - made to decide how to allocate part of the municipal budget, the young and cultural department annual budget”.

Handicaps & challenges

1. Spatial dispersion (Santa Eulalia is divided into 4 separated neighbourhoods with some geographical barriers and distance).
2. Short process period, because of municipality requirements.
3. Engagement of young people within public policies making.
4. Not enough budget to satisfy young people's needs, such as building social housing, cultural facilities, etc.

Strengths

1. Strong local authorities' leadership.
2. Previous networking between young and cultural organizations.
3. A new legal frame that stimulates young people's participation (Regional Young Policies plan, 2007 - 09) and gives a diagnosis about the situation of the youth in Santa Eulalia (needs & opportunities where analysed before).

Phases of the process: step by step

The process had four phases:

Phase 1: Set up previous agreements to ensure the process, with all the actors:

With local authorities: clarifying the process's limits, resources and goals (beware using citizens' participation as political marketing only!!!).

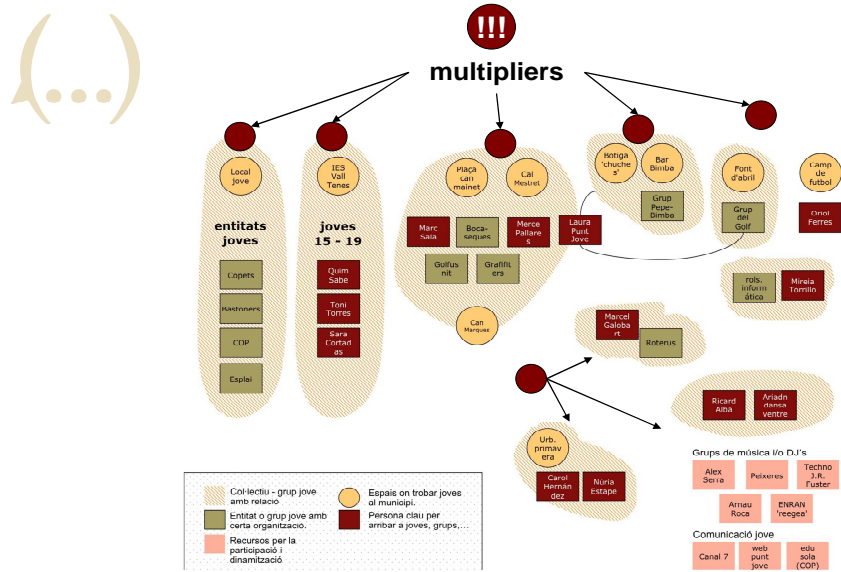
With local municipality staff: we need to involve them during the process. They are going to be the future facilitators. We (as community workers) work for disappearing, empowering local actors in order not to be required in the future.

With young organisations: before starting the process it is necessary to contrast with them the limits and goals, and to set an active group (steering committee)

Phase 2: Network analysis & rising multipliers

In a first assembly we shared the limits and goals of the process with the participants and we created a social mapping tool through a participative workshop with the young people groups. This information was completed with extra inputs from interviews to key informers (not only young people)...

We mapped where the young people are and planned how we could engage them with the process. We collected their proposals for the budget. All this with the aim of multiplying the participants in the process.



Young Social Map of Santa Eulalia.

Phase 3: second assembly & setting criteria to rank the final proposals

The chosen ranking criteria was:

1. We will value the proposals that tackle general needs of the youth, so more young people will be benefit.
2. We will value the proposals that are middle and long term actions.
3. We will value the proposals that tackle basic youth needs: housing, jobs, health and educational issues (excluding leisure proposals).

Phase 4: Feedback of results

By mail, media, internet, newspaper, in high school, etc, and evaluation with the promoters and the young active group (steering committee)

Result and Conclusion

participation details	162 young made their proposals (27% of young people aged between 15 and 25)
average aging participation	15 to 20 years old, less participation over 20 years old
steering committee participation	7 - 9 members, 3 meetings
average attending the two assemblies	25 - 30 persons
Qualitative participation details	all the young and cultural organizations engaged during the process; high consensus with the final proposals
Impact	all the proposals were developed one year later by the local government. Nowadays the process is still running by itself and without us!!!!.

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Responding to climate crisis: challenges to current approaches

by Elizabeth Freeman¹ & Jacqueline Akhurst²



Introduction

This project arose in the context of the development of Peace Studies at York St John University, aiming to research some of the problems confronting the surrounding community, and understanding human relations in the context of crisis and change.

Responding to the challenges of the climate crisis, sustainably and equitably, is arguably the greatest task that confronts global communities. Government bodies and independent organisations have both participated in leading campaigns for change.

The project was exploratory and involved a literature search, thematic analysis, and a community case study drawn from personal experience. The focus of the project was on the communication of climate change messages that aimed to change public behaviour. Two questions were posed: “how are people encouraging others to respond to the crisis?”, and “in what way are they wanting them to respond?” These aimed to provoke thought around the way in which climate change issues are being communicated, what effect these communications have on people and the role of community action and participation in tackling climate change.

Examples

In order to gain a first sense of the consequences of climate change campaigns, in terms of awareness raising and impacts on behaviour, a random sample of university students were asked “If I say the word ‘environment’ what first comes to mind?”. The responses involved words like *re-cycling*, *eco-friendly*, *carbon footprint*, *pollution*, *ozone*, *global warming* and communication tools such as *media* and *news*. Students reflected:

my response feels conditioned;

my view of environment has been corrupted; the ‘eco’ is more like a ‘fashion’ or ‘fad’ rather than people actually trying to do something about it;

environmentally friendly ‘stuff’ is ‘stupid’, ‘nonsense’ and ‘bad’.

The question became “what dominant messages have produced such responses?” To explore these, we looked at ‘traditional’ public service communications, to investigate how these might replicate some of the entrenched power differentials and existing inequalities in society.

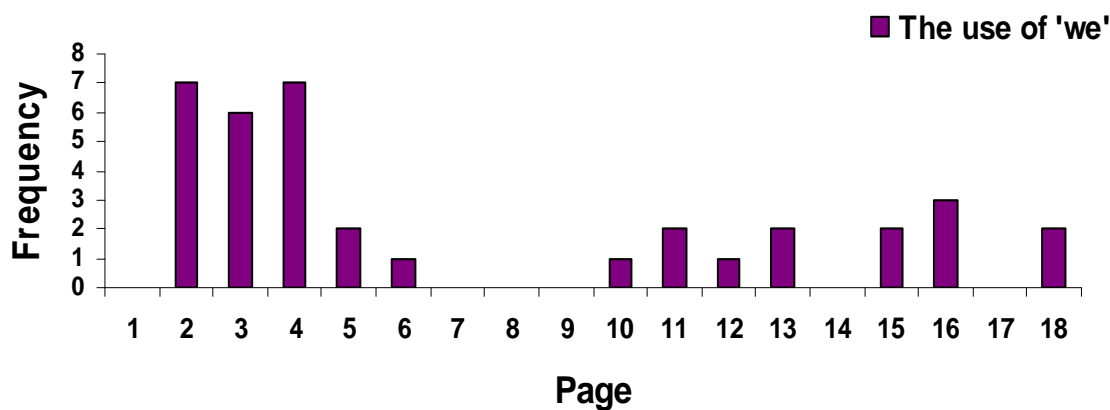
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Key themes emerged from our literature search: individual focus, middle class target audience, shock tactics, and top-down approach. For the purpose of the conference, we gave an example of a chapter from a UK government report on sustainability, *Helping people make better choices* (DEFRA, 2005), a government-sponsored television advert developed by ACT ON CO2 called *Bedtime stories* (October 2009), and an advert developed by an independent climate change organisation, The Energy Savings Trust, called *Meet Dave* (September 2009).

The DEFRA text demonstrated how language and lexical choices are utilised in climate crisis communication, and how individual, middle class focus is constructed and reinforced. Investigating the usage of 'we' in the DEFRA document revealed that in total the word appeared 36 times. At the beginning, there were 20 instances of 'we' in the first three pages, whereas in the latter half of the document the highest frequency 'we' was three on one page (see figure 1.). Literature suggests that the repeated presence of this pronoun can communicate commonality and communality whilst also refutation and authority (Helmbrecht, 2002). Accordingly, proposals that focused on group interests opened the document. As the reader progresses through the document, the message becomes more individual- and government-focused with only tokenistic references to community.

Figure 1. The frequency of 'we' in *Helping people make better choices*



Thus, it was clear that the writer was trying to achieve a sense of collaboration and community support at the start of the document, to lure the reader in, implying an inclusive agenda. Inclusive 'we' personalises the text, with a friendly, 'intimate' tone forming a bond between writer and reader (Inigo-Mora, 2004). In comparison exclusive 'we', referring solely to the writer and persons associated with the writer (*ibid.*, 2004), was used through the rest of the paper.

To demonstrate the theme of the individual and middle class focus the Energy Savings Trust advert was shown. The house interior and its animated character 'Dave' represented middle class stereotypes. For example, 'Dave' wears a v-neck jumper, shirt and tie, and spectacles, and the interior of the house had patterned wallpaper, wooden floors, and items such as video games, music stereo and hair dryer. The message was for individuals in

the household to act in an energy saving way and the advert, went to extremes i.e. 'turning everything off'. The efficacy and relevancy of such methods of communications are questionable when a poll on climate change identified that 60% of Britons thought that it would be best tackled at a global level while just under 1 in 10 Britons (9%) thought global warming would be best tackled by individual households ('Poll on climate change', 2004).

In the second advert, ACT ON CO₂, communication again targeted individual responsibility, and reinforcing this were shock tactics, intended to encourage behaviour change. In the advert there is an interchange of responsibility between adults and children with emphasis on the 'new generation'. Perhaps this reflects the changes and future objectives in education policy to incorporate environmental learning and awareness, but further investigation is required. Themes that arose in addition to those already mentioned were fear and guilt.

The result of these messages is that the reader or viewer becomes overwhelmed with the weight of the incoming messages which essentially disables, disempowers and disengages them. This may leave people feeling helpless and may then lead them to deny the problem. Furthermore, there is substantial evidence that shock-tactics directed at the individual don't work. For example, studies have shown that shock-tactics; raise anxiety levels, but action does not follow (Sherr, 1990), may appeal to one type or group of people but alienates others (Dean, 2005), encourage no increase leaning (Rigby *et al.*, 1989), and that outcomes of shock tactic adverts are not long lasting, with variable degrees of success (Thornton & Rossiter, 2001).

So what are the alternatives? Perhaps, rather than constantly reminding people of the problems and blaming, should we not be communicating a vision of possibilities and encouraging engagement? One promising possibility is community activism, for example a community-driven group, York in Transition (YiT). YiT is part of a Transition Network that exists in many parts of the world. People within the transition movement are convinced that: if we wait for the government, it'll be too little, too late; if we act as individuals, it'll be too little; but if we act as communities, it might just be enough, just in time. YiT aims to raise awareness, train and facilitate smaller working groups within the community to enable action around their agenda. Although YiT is not a campaigning group, it does strive to raise awareness and encourage a reconsideration of life style. Additionally, YiT communicators engage people rather than scare them into action by communicating people to people with messages that are tailored for particular groups and communities.

Many challenges, however, were apparent within YiT. There was lack of consistency in the message: the message is not always clear and there are disputes within the organisation to the most relevant messages. There was also a conflict of agendas: many of the members attended other climate change groups and thus resources tended to be pulled in lots of different directions rather than focusing efforts on an agreed agenda. Also, there was confusion of leadership: at times due to members try to maintain a 'flatter' hierarchy. Due to these issues lack of vision and motivation made activism in the group slow and difficult, and at times emotionally and mentally draining. However, despite these challenges members continued to produce positive results.

This evidence supports a statement made by Paul Cotterill (2006) that “It’s time to support a new breed of people committed to changing the world”. Indeed, more is needed in terms of supporting, promoting and celebrating community activism and participation. Communicators should embrace opportunities of working with community activists and should communicate a vision for the future. Furthermore, we suggest that climate crisis messages that contain less blame, use less shock tactics, are consistent and clear, and tailored to specific groups of people and communities (Lorenzani *et al.*, 2001) would result in more positive and effective communication.

From this exploratory study it seems clear that it is important to evaluate and monitor how communication methods are being used and, the effects and impact of dominant communication approaches (such as traditional approaches) on people’s attitudes and behaviour in relation to climate crisis. For example, the responses provided at the beginning of the presentation demonstrated negative schemas and associations that were produced from the word “environment” and created from climate crisis communication through media and literature. Furthermore, responses were far removed from the words associated with its definition like ‘surroundings’, ‘location’, or ‘ecosystem’. There also seems to be no sturdy bridge connecting individual ideologies (which have been the primary target of communication methods) and planetary ideologies that activists and authors like James Lovelock communicate, and commentators such as Al Gore advocate. It is felt that this gap is something commentators should be aware of and take into consideration when communicating climate change.

Overall, it is clear that some well-meaning commentators are trying to communicate climate change issues, but often their style fails to reinforce the intended goal. Communities have the potential and ability to achieve something that government and leaders often lack: to provide messages that empower rather than disempower people, and offer a vision that is achievable, hopeful and inspiring. Support and guidance provided, therefore, should facilitate and nourish activism, and not suffocate organic, visionary driven processes that characterise participation and activist communities.

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La formation pratique en psychologie communautaire, à Québec, et ses enjeux

par **Séverine Garnier**¹,



Bien que relativement récente, la psychologie communautaire est suffisamment ancienne pour faire l'objet de programmes de formation doctorale, au sein de certaines universités. C'est le cas à l'Université Laval, située dans la ville de Québec, au Canada. Ce texte a pour objectif de renseigner sur la forme que peut prendre un programme de formation en psychologie communautaire ainsi que de partager les questionnements et défis que la formation pratique peut comporter. Dans un premier temps, le texte présente le programme de doctorat en psychologie communautaire (Ph. D. Recherche et Intervention) offert par l'Université Laval. Dans un deuxième temps, il est question de la formation pratique en psychologie communautaire, où quelques milieux de stages sont exposés avec deux exemples de mandats à l'appui. Enfin, l'article aborde la question des défis que rencontre la formation pratique de la discipline.

Formation des doctorant-e-s en psychologie communautaire, à l'Université Laval

L'École de psychologie de l'Université Laval offre, depuis sept ans, un programme de formation en psychologie communautaire qui combine cours, thèse et stages en milieux de pratique, dès l'entrée au doctorat. Cette formation est aménagée en tenant compte des exigences de l'Ordre des psychologues de la province de Québec, qui reconnaît le programme. Ce dernier a une durée prévue de cinq ans, puisqu'il englobe la maîtrise. Il comporte neuf cours obligatoires, trois cours à option, six stages (des practica de 135 h par semestre) et un internat (1 600 h sur un an). Le programme comprend également deux examens doctoraux ainsi que quatre séminaires de thèse. Parmi les cours offerts, on retrouve un cours d'évaluation psychosociale des milieux, d'épidémiologie psychosociale, d'évaluation de programme, de prévention et promotion en santé mentale communautaire, d'éthique et de déontologie de la pratique et de la recherche en psychologie, d'intervention interculturelle, de consultation et un séminaire sur les processus de groupe. Les étudiant-e-s doivent également suivre des cours d'analyses statistiques et/ou de méthodes qualitatives. Enfin, les doctorant-e-s peuvent compléter leur scolarité en choisissant des cours à option, selon leurs intérêts. Pour plus de renseignements, voici le lien du document d'information sur le programme : <http://www.psy.ulaval.ca/formation/programmes/temp/Communautaire.pdf>.

La formation théorique suivie dans les trois premières années d'études permet d'outiller et de préparer à la formation pratique. Les types de stages respectent les thématiques des cours suivis pendant l'année. Ainsi, les

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stages ont comme grands axes l'évaluation (practicum I et II), l'intervention communautaire (practicum III et IV) et la consultation (practicum V et VI). Ces practica sont en lien avec des enjeux sociaux tels que la santé publique, la prévention du suicide, etc. Afin d'illustrer comment peut s'articuler un stage en psychologie communautaire, la section suivante présente quelques milieux de stage partenaires du programme et deux exemples de mandats réalisés dans le cadre de practica.

Formation pratique en psychologie communautaire... Concrètement!

Quelques milieux de stages sont associés au programme depuis sa mise en place dont le Centre de réadaptation en déficience intellectuelle (CRDI) (offrant des services d'adaptation, de réadaptation et d'intégration sociale à toute personne présentant une déficience intellectuelle ou un trouble envahissant du développement), le Centre jeunesse (dispensant des services à des jeunes aux prises à des réalités sociales et familiales difficiles), certains collèges d'enseignement général et professionnel (CÉGEP) et le Centre d'amitié autochtone de Québec (qui maintient un lieu de rencontre afin de satisfaire les besoins culturels, matériels et sociaux des autochtones vivant hors de leur communauté). La personne responsable du programme de psychologie communautaire s'efforce d'établir des partenariats avec de nouveaux milieux, au fil des ans, telle que la Direction de la santé publique.

Les étudiant-e-s peuvent également proposer des milieux de stages. Ces endroits doivent être soumis au Comité de programme, pour approbation. En voici quelques exemples : l'Assemblée nationale, le Service d'aide psychologique spécialisée aux immigrants et réfugiés de l'Université Laval (SAPSIR), un Centre de santé et services sociaux (CSSS), une école secondaire et même la Direction de la Santé et du Développement Social, en Guyane.

Dans le but de démontrer le type de travail réalisé au cours des stages proposés par le programme de psychologie communautaire, voici deux exemples de mandats accomplis. Le premier exemple de stage en évaluation qui a été réalisé au Centre de réadaptation en déficience intellectuelle (CRDI), en 2006, porte sur l'élaboration d'un outil développé afin d'évaluer un centre de jour pour personnes âgées déficientes intellectuelles et atteintes de la maladie d'Alzheimer, selon une approche prothétique élargie. Cette approche suit trois axes d'évaluation : l'environnement, la communication et les activités dispensées. L'idée est de pallier les défaillances liées à la maladie ou au vieillissement normal de l'individu, par l'ajustement de l'environnement, l'amélioration de la communication et des activités, afin d'optimiser son autonomie dans le milieu et d'améliorer sa qualité de vie (Mias, 1992).

L'instrument conçu comporte quatre sections : l'environnement prothétique, la communication prothétique, les activités prothétiques ainsi que les facteurs de réussite en lien avec l'approche prothétique. Cet instrument est une adaptation d'un outil élaboré pour une résidence de personnes âgées en déficience intellectuelle et démence (Salazar, 2006). L'instrument a également été développé (et testé) sur le terrain par des visites comprenant des observations et des entrevues à divers centres de jour du CRDI, dont le Centre Bonne Entente qui devait faire l'objet d'une évaluation, puis grâce à une visite à la Maison Vilar (résidence pour aînés atteints de la maladie d'Alzheimer, adoptant l'approche prothétique). Le travail a été supervisé par un psychologue, à raison d'une heure par semaine. L'instrument et les résultats de l'évaluation du Centre Bonne Entente ont été présentés au

personnel du Centre mais aussi aux gestionnaires des services, en tenant compte du fait que les changements suggérés devaient trouver appui chez les instances supérieures.

Le deuxième mandat a été réalisé au Centre d'amitié autochtone de Québec (CAAQ), entre 2008 et 2009. Le mandat de ce stage consistait à clarifier la vision, la mission et les valeurs du CAAQ, en incluant tous les employés et stagiaires dans le processus. D'autres buts de la démarche étaient de faire la synthèse des points de vue des divers acteurs consultés pour établir le dialogue entre les employés et avec la Direction, de mettre en lumière les demandes et intérêts des acteurs concernés, de favoriser l'émergence d'une identité de groupe ainsi que d'une vision, d'une mission et de valeurs où les employés se reconnaissent.

Les étapes pour réaliser ce mandat étaient de connaître le milieu et ses enjeux, de former un comité, de lire sur la consultation, la vision, la mission et les valeurs, d'informer les employés de la démarche et de réaliser des entrevues individuelles, d'analyser les données, de faire un retour sur les résultats, de rédiger le document final et de le diffuser. Bien entendu, le travail a été supervisé (plus d'une heure par semaine) par un psychothérapeute du CAAQ, et une professeure de psychologie communautaire de l'Université Laval. Les forces de ce stage ont été le fort taux de participation des membres du personnel (la totalité des employés, sauf... la Direction) et la relation de confiance entre les employés et la stagiaire. La limite principale concernait le malaise et la résistance de la Direction par rapport au processus (le processus de consultation faisant émerger des enjeux sur les plans de la gestion et de la communication entre la Direction, les employés et la clientèle du CAAQ). Ce faisant, il n'a pas été possible de faire un retour sur les résultats de la démarche avec tous les employés réunis et la Direction. Dans cet exemple, il est possible de constater que la formation pratique comporte des défis. La section suivante aborde cet aspect.

Défis de la formation pratique en psychologie communautaire

Les défis rencontrés dans la formation pratique en psychologie communautaire sont de deux ordres. Ceux qui concernent le milieu de stage et ceux qui touchent le programme. En ce qui a trait au milieu de stage, il peut y avoir des embûches sur le plan de la collaboration. Par exemple, les résistances au changement ou à la participation ne sont pas rares, et ce, même si le mandat est une demande d'un représentant l'organisme partenaire. Le temps (une journée par semaine durant 14 semaines) est souvent un élément restreignant la portée du mandat. Les attentes importantes du milieu envers l'étudiant-e sont également à modérer en début de stage. L'autre élément à considérer est le suivi. La personne stagiaire émet des recommandations, rédige un rapport, mais n'est plus dans le milieu pour faire le suivi. La portée de ces stages dépend alors du milieu.

Concernant les défis au sujet du programme lui-même, il faut mentionner que peu de psychologues communautaires se retrouvent dans les milieux partenaires, étant donné la relative nouveauté de la profession. Les étudiant-e-s sont alors souvent supervisés par une personne avec une approche communautaire, mais qui n'est pas psychologue, ce qui peut poser problème à l'accréditation du programme par l'Ordre des psychologues du Québec. À cet effet, les professeur-e-s de l'École de psychologie acceptent de co-superviser les étudiant-e-s afin qu'ils puissent intégrer le milieu. Enfin, il n'est pas rare que les étudiant-e-s soient supervisés par des psychologues du milieu partenaire, mais ceux-ci n'ont pas, *a priori*, une approche communautaire. À cet effet, la

direction de programme organise à chaque année une formation auprès des superviseur-e-s afin de les outiller pour l'approche communautaire.

Psychologie communautaire : une formation à bâtir

La formation en psychologie communautaire est une bonne façon de promouvoir, de développer et de la faire connaître la discipline dans les milieux de pratique. Dans le même ordre d'idées, tel que le stipulent Lavoie et Brunson (2010), « L'exposition aux valeurs et modes d'intervention de la psychologie communautaire est, en effet, essentielle au recrutement de futurs intervenants qui feront avancer la spécialité. » (p. 7). Toutefois, selon ces mêmes auteures, peu de ressources sont accordées aux programmes de formation existants, que ce soit au niveau supérieur, au premier cycle, ou même avant l'université. En ce sens, la gestion d'un programme ainsi que le recrutement de nouveaux étudiants représentent des défis que les programmes de psychologie communautaires rencontrent. Malgré tout, il est à espérer que d'autres programmes de formation en psychologie communautaire naîtront et qu'ils pourront bénéficier de l'expérience des programmes précurseurs. Il faut savoir que la mise sur pied d'un programme est un processus itératif. En sept ans, le Ph. D. Recherche et Intervention de l'Université Laval a changé en fonction des commentaires des étudiant-e-s et professeures, des défis rencontrés ou des réalités des milieux de stage. Afin de faire avancer la discipline, il demeure essentiel que les représentant-e-s de la psychologie communautaire partagent et réfléchissent sur la forme que l'enseignement de cette discipline peut prendre et les défis que cela comporte.

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Changing landscape of health care services: delivering collaborative training agenda's for community researchers, health and social care practitioners and researchers

by Jo Hobbs¹



Overview

This paper will present understandings of how multi-agency and community collaboration may be advanced. The findings reported here were gained in part through the process of developing and delivering a series of research training programmes and a roundtable discussion.

The first training event was delivered exclusively to members of the community as part of a concerted effort to engage and provide them with the necessary skills to undertake research alongside academic researchers. The second training event brought together community researchers and health and social care practitioners to work together and develop a greater understanding and appreciation of each other role and the research process.

A roundtable event was organised after completion of the training events to discuss future opportunities for greater assimilation and involvement in the research process by community researchers and health and social care practitioners in order to facilitate service redesign and planning.

Objectives of the first training session

The 1st training events sought to engage members of the community and provide them with the skills necessary to feel confident to work alongside professionals within research settings. With this in mind the first events were delivered in 2 separate half-day sessions. The first was concerned with aspects of the research process, the second with collaborative working, community capacity building and empowerment. Participants were asked to write a short reflective piece after both sessions. Their reflections revealed that they all felt better prepared to undertake greater participation alongside professionals within health research agendas.

Research Training focused on the practical tasks of undertaking: Lit reviews; Conducting data searches and scoping exercises; Collecting and analysing data; Writing up and using the data for change.

Advisor training focused on: Membership of committees; Reading and making sense of papers and reports; Speaking up in public; Voicing opinions clearly, confidently and concisely; disseminating research findings.

Outcomes from the first training event

This first training event had some success in engaging members of the community as part of a wider remit to encourage greater cooperation and working practices amongst lay and professional people who may be working

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towards very different agenda's. The participants grew in stature, acknowledging themselves as experts of their own experiences, and that their knowledge has equal validity with the knowledge that professionals have. All participants felt that the research and advisor training had given them greater confidence to work alongside professionals on an equal footing. In order to feel they had a valued role in the research process participants felt it was important they identify a term by which they would be known. After much discussion they determined they would like to be known as community researchers and advisors.

Objectives of second training session

Research has suggested that there exists within health and social care services a closed culture and that, in combination with inadequate resources serves to restrict service user's involvement. The intention of the 2nd research training schedule therefore was to bring together community researchers/advisors and health and social care professionals in a mutually supportive learning environment. The research training sought to challenge the barriers which marginalise community researchers/advisors by bringing the two groups to work together and acknowledge that all knowledge is co-constructed. It was also our intention that in time the association of community researchers/advisors and health and social care professionals would be supported to develop a cross-discipline, multi-faceted network. This would seek to develop a network which provides support, advice and information concerning research, be instrumental in disseminating research findings and become an integrated and established element of the wider research community.

The training agenda also sought to challenge the barriers which marginalise service user knowledge and encourage the development of a multi-agency network to generate new ways of sharing and disseminating both lay and professional knowledge and understanding.

The 2nd training event sought to build upon the achievements of the first session by providing participants with the practical skills necessary to work alongside professionals within research settings. The 2nd research training schedule therefore introduced those community researchers and advisors who had already undertaken training and a number of health and social care professionals and assigned them into 3 mixed groups. After each session the groups spent 10 minutes feeding back on what they had learnt from the session. The 3 groups all felt that they had learnt a lot about participating either as researchers or advisors but perhaps most importantly felt that the day had presented them with an opportunity to meet and discuss mutually shared concerns in an environment where there was no inherent power imbalance.

Outcomes from the second training event

The overwhelming consensus was that the day afforded people the opportunity to talk openly about perceived barriers to collaborative working between paid health and social care professionals and unpaid community researchers and advisors. Some of these barriers were discussed over lunch and during the final session and were hotly debated. All the participants wrote a short reflective piece and all professed a greater understanding of research methods and of the role of research in facilitating community empowerment and engagement and service planning and redesign.

Roundtable event

Manchester Metropolitan University organised a roundtable event which consisted of 5 presentations and a discussion to showcase: Some of the techniques which university and health and social care professionals have utilised to involve and engage community members in research and service re-design. To explore from a community perspective how successful the approaches used by professionals have been in encouraging their assimilation and involvement in research and service redesign. Assess whether these techniques and approaches achieve a sense of a collaborative working between researchers, members of the community and health and social care professionals.

The agenda for the roundtable discussion was selected in order to represent a diverse range of innovative approaches recently undertaken for research purposes around community research agendas, service redesign and planning.

The Presentations were: Participatory research: liberation or oppression; Engagement and Participation: learning the hard way; Visual Methods: Value and Implications; 'Serendipity - revaluing informal engagement' and Talking Health: NHS Manchester's programme of public engagement

Time was limited so presentations were structured to ensure presenters spoke for no longer than 10 minutes around research methods, techniques or some aspects of training that had been utilised to involve and engage members of the community, outlining what worked and what did not. There was a short question and answer session after each presentation. The roundtable discussion which followed the presentations raised a number of issues upon which an overall consensus was formed.

Roundtable consensus

The key to success is commitment to community engagement at all levels within organisations; this must include a commitment of time, resources and support for the organisational change which is necessary to bring about the level of change in the structures and systems that restrict inter-professional and lay collaborative working. The Individuals involved must have sufficient authority and power to commit their organisation to making the necessary changes which will enable progress. Every organisation must clearly identify its aims and objectives, thus ensuring that collaboration proceeds with mutual joint agreement and a commitment of time, resources and organisational change at all levels, in order to bring about the necessary change to enhance inter-professional and lay collaborative working.

Any structural changes must be underpinned by shared values delivered through: Robust education and training programmes which equip both staff (at all levels and from all settings) and community members with the skills, expertise and trust which will enable them to work effectively together towards a common agenda.

Exploration du sens psychologique de la communauté chez l'individu dans le contexte de deux communautés distinctes

par **Colleen Loomis¹, Keith Adamson¹, Chris McEvoy¹, Dana Friesen¹
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Le concept de communauté a eu différentes significations pendant l'histoire de l'humanité. Une conceptualisation largement connue est celle de la communauté comme une région géographique. Tandis que la notion de communauté comme territoire a perdu du terrain, la signification de la communauté en tant qu'entité relationnelle (Royal et Rossi, 1996) ou politique (Hill, 1996) est devenue plus utilisée. En psychologie communautaire, la conceptualisation la plus fréquente est celle du sens psychologique de la communauté (SPC) qui recouvre quatre domaines: l'appartenance, le sentiment d'influence, la satisfaction des besoins propres et la connexion émotionnelle partagée (McMillan et Chavis, 1986). Les résultats de recherches antérieures ont mis en évidence le fait que l'individu exprime son SPC par ces quatre dimensions et que le SPC est associé à la santé mentale, le bien-être et la participation communautaires.

La théorie du sens psychologique de la communauté et la recherche sur le sujet ont été utiles pour comprendre l'attachement et le sens que l'individu place dans la communauté. Toutefois, la recherche est limitée car elle ne reflète pas la réalité de nos appartenances simultanées à des communautés multiples. La plupart des recherches dans ce domaine porte sur une seule communauté ou sur la communauté primaire d'un individu (Sonn et Fisher, 1998). Par conséquent, quand on explore seulement un contexte singulier, il est possible que les chercheurs manquent totalement le (s) contexte (s) qui compte le plus à l'individu en question (Anderson, 2005).

Comme nos expériences vécues existent dans plusieurs communautés, nous devons élargir le cadre de nos recherches. Les psychologues se rendent compte que les individus appartiennent souvent et sont liés à plusieurs communautés en même temps (Mashek, Stuewig, Furukawa, et Tangney, 2006; Roccas et Brewer, 2002). Par conséquent, l'examen et la compréhension véritables du sens psychologique de la communauté d'un individu doivent être élargis pour englober les multiples communautés auxquelles les individus appartiennent afin d'éclairer la manière dont les individus expérimentent leurs appartenances et négocient au sein de leurs multiples groupes ou communautés.

Peu d'études ont examiné le SPC des individus avec des communautés multiples. Une étude qui a enquêté dans trois communautés imbriquées incluant des formateurs (staff) et des étudiants d'un centre de formation professionnel et d'enseignement, et a mis en lumière le fait que les participants ressentent un sentiment d'appartenance à une communauté géographique mais aussi à la communauté des formateurs et la communauté d'étudiants (Brodsky et Marx, 2004). Les sujets (participants) ont eu un sens nettement plus élevé de

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communauté par rapport au centre de formation que par rapport à leurs quartiers. Les formateurs et les étudiants ont indiqué un sens supérieur de communauté en relation avec le centre dans son ensemble par rapport à la sous-communauté étudiante ou celle des formateurs (Brodsky & Marx, 2004). Loomis (Brodsky, Loomis, & Marx, 2002) s'est interrogée sur la manière dont le sens psychologique de la communauté dans le contexte de communauté multiple peut être compris utilisant la conceptualisation de McMillan et Chavis (1986). Les résultats d'une étude récente montre un aspect différent. Le sens communautaire d'un individu par rapport aux multiples communautés auquel il ou elle appartient est lié à des choix et des préférences (Obst et White, 2007). Parmi trois choix de communautés (quartier, école, groupe d'intérêt), le choix préféré était le groupe d'intérêt auquel appartenaient les participants (par exemple, club sportif, groupe environnemental, groupe politique, groupe religieux). Ces résultats font ressortir la façon dont SPC varie selon les communautés pour un seul individu.

Une des limites potentielles des études précédentes est que les plans de recherche semblent reposer sur l'hypothèse que SPC dans le contexte de communautés multiples devrait avoir les mêmes dimensions que SPC initialement conçu par McMillan et Chavis (1986) au sein d'une seule communauté. Toutefois, on ne sait pas si les quatre dimensions existent dans plusieurs communautés ou s'ils peuvent se réaliser et opérer différemment. Une prochaine étape de recherche sera d'explorer la conceptualisation du SPC des individus simultanément à travers des contextes multiples.

La présente étude a exploré la manière dont le SPC s'exprime dans le contexte deux communautés distinctes choisit par les sujets, en explorant l'expérience vécu dans les communautés sélectionnées. Les sujets ont eu l'occasion de parler en détail de leurs communautés choisies lors de deux entrevues. Les sujets n'ont pas indiqué une appartenance aux mêmes communautés. Donc, cet échantillon indépendant a donné l'occasion d'étudier comment 10 individus (5 hommes et 5 femmes de plus de 25 ans) expriment le SPC parmi 20 communautés différentes. Au début du premier entretien avec chaque sujet, nous avons observé que chaque sujet appartient à plusieurs communautés. Les sujets ont choisi les communautés dont ils souhaitaient discuter. Divers aspects de la communauté étaient couverts tels que la nature de la connexion entre les membres du groupe, la taille du groupe, la fréquence et la durée des liens significatifs, ainsi que les forces et les faiblesses de la communauté. Le sens psychologique de communauté (SPC) avec chacune des communautés ainsi que les influences réciproques entre le participant et le groupe dans son ensemble, et entre les différents membres du groupe, ont également été explorées. Les participants ont également comparé et contrasté leur communauté par rapport aux autres selon leur expérience du SPC dans chaque groupe. Les données ont été analysées à l'aide de plusieurs stratégies de codage afin d'examiner quatre catégories de SPC (McMillan et Chavis, 1986) et d'explorer les thèmes émergents.

Les résultats révèlent que le SPC dans le contexte de communautés multiples se compose de dix dimensions: les valeurs, la satisfaction des besoins propres, les frontières du groupe, la diversité des rôles, l'appartenance, les rituels, les caractéristiques géographiques, l'engagement, la pollinisation croisée entre des communautés et les choix des communautés. Parmi les dix dimensions, quatre dimensions sont les plus importantes et semblent avoir une structure qui rend le développement.

En premier lieu, les valeurs qui constituent la première composante principale signifient le rôle central des principes et des résultats souhaités. Elles motivent et dirigent la recherche par les sujets d'expériences enrichissantes au sein de plusieurs communautés. Aucune communauté ne semblait comporter toutes les valeurs complètes de l'individu. Au contraire, plusieurs communautés sont complémentaires, fournissant collectivement une résolution « Gestalt » à la recherche de valeurs propres à l'individu dans un contexte communautaire. Les valeurs ont influencé non seulement l'assemblage des communautés au sein desquelles l'individu participe, elles ont également fourni l'occasion pour un individu de délimiter les éléments de leur participation dans chaque communauté ainsi que les relations entre communautés.

En second lieu et en dessous des valeurs, il y a la notion centrale de choix qui a fourni le levier et les possibilités d'« empowerment » dans lequel l'auto-sélection des communautés en fonction des valeurs personnelles, permet de négocier la nature et le degré de participation dans chaque communauté, et de s'assurer que les objectifs de participation dans chaque communauté sont atteints.

L'identité de soi et de la communauté était fluide et changeante avec le temps. Le flux et le reflux de l'interaction entre les communautés individuelles et multiples sont restés tout aussi fluides. Cela semblait cimenter le rôle central du choix à mesure que les individus ont en permanence négocié leur constellation et participation à plusieurs communautés en fonction de leurs valeurs. Après le choix, il y a deux éléments tout aussi importants : l'appartenance et la satisfaction des besoins propres.

Les résultats de cette étude sont compatibles avec la notion de connexion émotionnelle partagée, d'appartenance et de satisfaction des besoins propres de SPC conceptualisées par McMillan et Chavis (1986). Le rôle central des valeurs est compatible avec la dimension de la connexion émotionnelle partagée. Le constat que le choix est particulier à plusieurs communautés est convergent avec la recherche précédente effectuée par Obst et White (2007). La nouvelle contribution de cette étude est la nature développementale des valeurs, du choix et de la réalisation de ses besoins propres. Les valeurs dirigent l'agencement du choix à travers lequel les autres dimensions principales, l'appartenance et la réalisation des besoins propres, composent l'expérience significative dans différentes communautés. Cette élaboration du SPC fournit un cadre pour l'élaboration d'interventions pour favoriser le SPC dans le contexte de communautés multiples, qui conceptualise le SPC comme une construction composite, plutôt que d'essayer d'améliorer le SPC dans une communauté particulière, et il respecte ainsi les aspects développementaux. Les résultats de cette étude contribuent à théorie naissante de SPC dans le contexte de communautés multiples.

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L'Écologie sociale et la soutenabilité: une réflexion

par Tania Maciel¹ & Carmen Machado²



Dans ce travail, nous tenterons d'aborder la relation de l'Écologie Sociale avec la notion de Durabilité, en prenant en compte les travaux de la Psychologie Sociale Communautaire, à travers deux études de cas réalisées au Brésil. Cependant, nous commencerons tout d'abord par une petite introduction théorique qui nous fournira les clés de compréhension de nos pratiques.

L'attention particulière prêtée aujourd'hui aux ressources naturelles trouve son importance face aux changements climatiques qui provoquent des déséquilibres significatifs et, qui, si l'on s'en tient au scénario prévu, menacent le mode de vie des générations futures. La question environnementale est, actuellement, un moyen stratégique de négociation entre gouvernements, et est devenue d'une importance cruciale dans l'économie mondiale, étant donné qu'elle oblige les décideurs à prendre position sur diverses questions concernant nos modes de consommation actuels, eux-même imposés par le modèle économique en vigueur.

Il existe bel et bien un besoin de développement mais sans que celui-ci soit forcément lié à quelques objectifs de croissance économique que ce soit. En effet, le développement doit être durable, prenant en compte la qualité de vie, les loisirs, les indicateurs de santé, d'éducation, entre autres, en particulier dans les pays en développement. Ainsi tenterons-nous de mettre en relief le fait que cette croissance ne nous conduit pas automatiquement sur la voie du développement durable, étant donné que, dans ce cas, il est nécessaire de rendre compatibles les résultats locaux avec l'offre de ressources, qu'elles soient d'ordre environnemental, technologique, ou économique.

Le développement, pour être soutenable³ se doit d'être calqué sur les expériences culturelles locales, à travers du regard local, celui qui révèle les nécessités et les demandes de la communauté. Ainsi la soutenabilité environnementale correspond-elle au respect des caractéristiques locales, des traditions culturelles, où l'usage des ressources est profondément lié aux capacités des systèmes, l'objectif étant, en effet, de ne pas épuiser ces ressources.

Ainsi, tous les jours surgit-il une profusion de nouveaux concepts autour de cette thématique, qui ont pour effet de troubler la population, de par leur diffusion médiatique essentiellement axée sur la scientificité du thème. La population, en effet, ne se sent pas concernée, ce qui crée la sensation d'externalité aux problèmes

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³ Même si, en France, le terme "sustentável" est souvent traduit comme "durable", nous employons aussi le terme « développement soutenable » (l'origine anglaise du mot), et qui fut notamment utilisé à partir de 2005 en France, comme titre de livre, par exemple, "Le Développement soutenable", Paris, 2005, de Franck-Dominique Vivien.

environnementaux qui ne considèrent pas une infinité de variables, comme, par exemple, les spécificités culturelles, les traditions, la déforestation, les polders, la production de déchet.

Nous pouvons citer deux grands projets développés au Brésil, le Projet *Sinuelo*, dans le Pantanal, et le Projet de Mobilisation Sociale et Participation Communautaire, faisant partie du Programme de Dépollution de la Baie de Guanabara, à Rio de Janeiro. Ces deux projets ont été confrontés à une très grande résistance lors de leur implantation, de la part du propre pouvoir public, en ce qui concerne les besoins des communautés.

Le Projet Sinuelo Pantanal dans l'Etat fédéré du Mato Grosso do Sul – Brésil a duré 8 ans, comptant avec la participation de 23 chercheurs de différents domaines de connaissance, dont une majorité de psychologues, étudiant les besoins et aspirations de la population concernée, d'environ 110.000 habitants. Furent interviewés et accompagnés, au cours de notre travail, 185 travailleurs/es ruraux, 44 responsables locaux, 155 éleveurs et 167 associations civiles.

Une série d'interviews et de réunions a été réalisée avec la population, en utilisant les *feedback* en plus d'un inventaire de connaissances, besoins et aspirations locales. Plusieurs d'entre elles furent l'objet de conquêtes grâce à ce projet, comme l'assainissement basique, l'organisation de la pêche, la mobilisation des artisans, qui a permis à cette catégorie de s'organiser, de participer d'avantage aux activités de la Maison des Artisans, et de développer des liens plus étroits avec les différentes associations et catégories professionnelles au sein d'un conseil local.

Notre réflexion actuelle tourne autour du constat que, malgré le fait d'avoir travaillé, en termes de gouvernance, avec les pouvoirs publics et acteurs locaux, le projet n'a pas réussi à implanter une des principales demandes locales, qui était l'instauration d'un noyau rural d'éducation dans le Pantanal où seraient réunies et entretenues les connaissances locales de la région.

Cela nous conduit à une réflexion sur la problématique de la gouvernance, au sein des projets de psychologie communautaire, au Brésil, qui ne font que commencer. Une gouvernance, concernant tous les acteurs et mobilisant le pouvoir public dans l'objectif de changements structurels et sociaux, doit parvenir à être mise en place.

Le Projet de Mobilisation Sociale et Participation Communautaire, inséré dans le Programme de Dépollution de la Baie de Guanabara, à Rio de Janeiro, a duré 3 ans, comptant avec la participation, cette fois, de près de 120 chercheurs, dont, de nouveau, une majorité de psychologues sociaux. Le projet a été développé dans les communautés des sept municipalités et a compté avec la participation de près d'un million de personnes, parmi lesquelles furent sélectionnés 1.151 individus pour assumer le rôle de responsable local (528 hommes et 623 femmes). Après avoir été formées, ces personnes se sont vues attribuer la tâche de continuer à mettre en oeuvre le projet, en mettant en place des activités d'éducation et de préservation environnementale, portant un nouveau regard sur l'environnement.

Le projet a aussi compté avec la participation de 33 organes gouvernementaux, 21 groupes informels, 73 ONGs, 210 églises, 214 écoles, 808 associations et 163 autres institutions qui ont encouragé les communautés à développer des attitudes responsables face aux demandes environnementales, en ayant pour objectif de conserver les ressources naturelles. Cela pouvait se traduire, par exemple, par le nettoyage des fleuves, la

réutilisation des déchets, le développement des activités artisanales comme une alternative économique, la ré-urbanisation des quartiers, avec l'installation de services d'assainissement, le goudronnage des rues, l'organisation et le renforcement de ces associations locales, qui font en sorte que, jusqu'aujourd'hui, ces associations soient invitées à participer à n'importe quel projet développé dans les localités concernées.

Malgré le fait que les objectifs fixés n'aient pas tous été atteints entièrement, dans tous les domaines sélectionnés, le projet social a été appliqué. Cependant, la partie liée aux infrastructures, a rencontré quelques problèmes qui ont empêché sa finalisation.

La consolidation des liens sociaux qui ont pu se construire entre les associations et les responsables locaux a fait en sorte que la communauté devienne désormais un acteur, réellement participant et responsable dans les projets de développement communautaire.

C'est donc en ce sens que nous justifions ce besoin d'un nouveau regard interdisciplinaire, où la gouvernance puisse réellement être représentée lors de la participation des acteurs locaux, pour parvenir à une véritable insertion de la communauté dans les projets décisifs.

Conceptualizing community participation: a systematic literature review of the health promotion discourse

by Benjamin Marent¹, Rudolf Forster² & Peter Nowak¹



Background

The notion of community participation is supported by the WHO since the Alma Ata Declaration (1978). It was highlighted as a key strategy for health promotion (HP) by the Ottawa Charta (1986) and is still at the centre of the HP discourse (WHO 2009).

Published reviews on the subject point out that because the term participation is not well specified, it may be exploited as a “cosmetic” value for HP programs “to make whatever is proposed look good” (Chambers 1995, 30). The “participation turn” in health promotion also attracted critique from a poststructuralist perspective: Rather than placing the agency of the community at centre stage, the imperative for participation acts as a mechanism for fostering individual self-discipline and obscuring the way in which power operates. (Peterson and Lupton 1996) The classical approach to unmask the tokenistic character of many participatory initiatives was developed as the “ladder of citizen participation” by Arnstein (1969). Roughly the ladder enables one to differentiate between:

- *non-participatory actions*: which include for example solely providing information to community members
- *tokenistic ones*: whereby the community might voice their opinions but is not involved in the ultimate decision-making
- *genuine participation*: where decision-making power is transferred from the experts to the community

Some models to conceptualize participation within the HP discourse still lean towards this ladder metaphor – renaming, adding or striking out some of its rungs (Hart 1992, Pretty 1995) – others are criticizing its reductionism which states that only full decision-making power for citizens and their dominance over experts should be regarded as genuine participation (Labonte 1997, Tritter/McCallum 2006).

Present debate indicates that the kernel questions of *why* and *how* participation should take place in HP practice might not be answered by such one dimensional models, but would need sophisticated theoretical investigations (Potvin 2007, Stephens 2007).

Scope of research

Referring to this discussion the aims of our research are:

- To systematically highlight the theoretical developments of the discourse since 2000
- To initiate a new theoretical debate on participation within HP discourse

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- To reframe participation as a strategy for professional HP practice (rather than an ideology)
- To guide participatory practice within HP

Method

A comprehensive literature search in eight databases was carried out to identify relevant publications. Two researchers independently screened 2228 retrieved abstracts. For 168 potential relevant publications full-text papers were ordered and assessed (again double-rated). Finally, 11 papers were included in the synthesis.

Results

Compared to previous reviews (Labonte 1997, Zakus/Lysack 1998, Rifkin et al. 2000, White 2000, Morgan 2001, WHO 2002), which brought to light rather simple models to conceptualize participation, this study identified a new strand of theoretically inspired debates. Social science theories are applied in eleven papers to understand process and communicative qualities of participatory interventions and to stimulate new forms of participatory practice. A subset of the arguments elaborated in these papers is presented in the following section as preliminary results.

Participation as a communicative strategy

To answer the question why participation could be seen as a strategy to guide professional HP practice a communicative argument could be deviated from the literature. Successful communication (Baecker 2007) needs to attract its receiver by redundancy (s/he must be able to set it in relationship with something already experienced) and variety (it must make a difference to the already known and thereby surprise (Bateson 1972, 317p)) at the same time. Participation might be a mechanism to ensure both of those requirements.

The culture-centred approach to participation as formulated by Dutta/Basnyat (2008) is up-taking culture as constitutive for the understanding of health meanings. Therefore, the voice of the community is seen as essential to define health needs, and should be considered in the process of designing HP interventions. The aim of this approach is to ensure that HP programmes are responsive to community needs by including communities in program development.

In the context of reflexive modernity, characterized by rapid social change whose direction is not totally predictable, participation is seen as an innovative strategy for HP to manage uncertainty (Potvin 2007). Participation implies the involvement of a multiplicity of perspectives and generates knowledge from the local contexts of communities. For Potvin participation is a necessity to ensure that HP continues to be a relevant institution in modernity, because it supports the adaptation of programs to social change.

Participation as an empowering strategy

Another argument which one can derive from the theoretical literature on participation is concerned with empowerment. Two papers (Campbell/ Jovchelovitch 2000 and Ramella/ De La Cruz 2000) draw on the critical pedagogy of Paulo Freire. It aims to generate conditions for disadvantaged people to problematise everyday life

by bringing its experience into communication, mutual understanding and action. Participatory HP practice (oriented towards Freire) includes people in the critical reflexion of their social & political environment. Thereby they will establish a critical consciousness and learn the skills to voice their opinion (individual empowerment). This makes them also more likely to become agents for change in community affairs (community empowerment).

Essential features of a participatory process

Some theoretical approaches point to essential features of participatory processes and how these could be realised in the practice of HP. The concept of communicative action as formulated by Habermas is applied in two papers (Baillie et al. 2000, Ramella/ De La Cruz 2000). A kernel statement here is that HP practice involves the coming together of diverse people. Thereby, a major challenge is the creation of an open communication. The papers then point out that communicative action may be a guideline for the understanding how a participatory process could be realized in HP practice. Communicative action requires the equal distribution of opportunities to act meaningfully in all aspects of the participatory process. Researchers applying that concept are sensitized to the fact, that primarily vulnerable communities may lack communicative competence to voice their opinion. However, participatory practices oriented towards communicative rationality have to involve values like equality, negotiated content, and inclusion of critique throughout the process.

Conclusion

Following these arguments we suggest a first abstract understanding of participation: Participation could be indicated as a process, which is shaped by community members from the beginning, recruits its strategy from their knowledge and experience, and is governed through their joint decision-making. It has to be seen as an (open) process because the outcome of participation is always unclear, as it emerges from the equal contribution of all its participants.

In this paper we presented preliminary results of a review of theoretical developments on the issue of participation within the HP discourse. We could work out that more theoretical approaches are used which stimulate a new way of thinking and debate. This may help to overcome the stagnation of conceptual developments (still orientated towards the late 1960s) and may support HP practice to reframe participation as a strategy and guide its implementation.

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Responsibility and planning among young citizens of Naples and its province

by Fortuna Procentese¹, Silvia Scotto di Luzio² & Francesca Scafuto²



Introduction

In western society we notice the decline in participation in community life, especially among young people. By 'participation' in this instance we mean social participation, that is simultaneously active, shared and visible (Amerio, 2000). Studies have shown that factors present at a collective level, as a basis of participation are: perception of injustice, a state of so-called relative collective deprivation, feelings of solidarity, social cohesion and sense of community (Chavis, Wandersman, 1990; De Piccoli et al., 2004). Sense of community (SOC, McMillan, Chavis, 1986), especially, has been studied not only as a determining factor in participation but also as an effect of participative action.

The studies in Neapolitan community stated the existence of a sense of community that is *negative* in some of its components, which seems to relate to a kind of *avoidant attachment to their territory* in young people (Arcidiacono et al., 2007). The previous research showed there was also a feeling of powerlessness and anger in relation to the context of belonging, which prevented any form of personal or collective investment in the future. The ability to plan for oneself in the area was totally lacking and only in some cases the wish expressed dealt with running a commercial or food outlet in the future. Besides research had underlined that young people in an underprivileged area had a sense of belonging to their local community that related neither to the projection of their existence inside the community, nor to action in favour of it. Powerlessness and mistrust, like dimensions of SOC, were closely linked to expectations for the planning of future actions in the community (Arcidiacono, Procentese, 2005).

Aims

Research which was proposed, investigated the perception of young Neapolitans in their own community, the bond established with it and their planning in relation to themselves and to their territory, assuming that there were differences among the young people living in the city and those living in the outskirts of the city.

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Method

Participants

The participants were 150 young people with an average age of 22.30 years (range 20- 25 years). 50% of them are living in the Naples and the remaining in its surrounding province. 70% are university students and 30% of them are workers, 60% female and the remaining male. We used a type of theoretical sampling, or step by step research based on the concept of grounded theory (Cicognani, 2002).

Instruments

The instrument used for data collection was the focus group (Krouger, 1995), that is one of the techniques of data collection based on the interaction of the group. The following areas were identified to conduct the focus group: bond with their place; relations with the inhabitants; participation in neighbourhood/village life; planning and future. The coding system applied to the texts of the interviews was the Grounded Theory (Strauss & Corbin, 2008).

Results

Belonging, influence, fulfilment of needs, and participation in their community were present in a different way in the city and in its province. In the province *a sense of belonging* was more evident, including emotional bonding and physical rootedness, identified in literature as the two component of *community attachment* (Riger, Lavrakas, 1981). The bond with their place was also characterized by moods permeated by negative experiences, enclosed in the codes: *backward country*, *the village as a place of passage*, *the village as a hotel*.

The lack of relationships with other young neighbors emerged from both city and province people. They didn't talk about political and social participation (Mannarini, 2004), while they engaged to sport, religious groups, or to socialization activities, like going out to pubs and squares to meet people. So this participation wasn't like a way to solve problems, but it was a way to run away and relax.

With regard to *influence*, a few young people thought about projects, and the majority of them, in both province and city, were influenced by a sense of mistrust.

The sense of mistrust was towards institutions that had just a formal role, even though their potential importance was recognized. This mistrust induced them to have few collective projects that seemed also supported by an individual motivation and frame. By the date analysis, the core category is: *planning*; it has been defined by many people as a complex topic because they did not have plans yet. The key element that revolved around the possibility of conducting projects seemed to be the category *cultural aspects of the community*, which referred to a dimension of *collective responsibility*. They felt influenced in a negative way by the community, through its cultural aspects and formal role of Institutions. But the opposite wasn't true. The young people didn't influence the community, they thought about their own responsibility only when they talked of their need to look for information in order to achieve some projects, to set up an aggregation place or a firm. Even if most of them were university

students, they didn't mention their training as a good resource to achieve their plans. It seems that the only good skill that they could have, is to get information.

For these reasons, it seems that the chance to think about projects is too weak, which appeared theoretical, without concrete and detailed planning. The only thing that was important is "to leave", no matter where, and what they will do, and without looking for a connection with their last and actual experience of work and training.

With regard to the *fulfilment of needs*, province's young peoples perceived their city (or town) lacking in strength and degraded, so it couldn't give them all they wish for.

So even if they lived in a big city, in Naples's provinces, they perceived this place to be a "small town", because there was a scarce supply of services and activities.

The only resource that was actual and individuated is a relational support, which was above all a familiar support. It indicated that young Neapolitans felt deprived of any datum-point outside the family.

Conclusions

Young interviewees expressed an emotional bond to their place, and at the same time attributed a negative value to the image of their own territory. They had a sense of *belonging* to their local community but they didn't have the prospect of their existence within the community and they did not participate in activities in favour of it (Arcidiacono & Procentese, 2005; Arcidiacono et al., 2007). The local culture was characterized by disempowerment, and it seemed have influence on active participation (Procentese et al., 2007). The perception of a negative relation climate encouraged actions in the most part of participants which were anchored to an individual logic rather than being for common good. In this case, the lack of collective responsibility was evident despite the presence of a strong sense of belonging to one's own community. Young people felt it was problematic to think about a plan that could have an effect in their local community, and they reacted with a closed attitude and focused on realising an individual plan far from the community to which they belonged. Their projects about future didn't seem realistic and comprehensive of a sense of responsibility, but they were characterized by a still adolescent feeling of opposition to their country, to their roots. Even if they were "emerging adults", the way they think about their future looked adolescent, it was like "escape", like coping with the avoidance from a suffering situation, from an oppression (Arcidiacono et al., 2007).

This result was similar to other findings (Pretty et al., 1996; Evans, 2007), that showed young people do not generally experience having influence over settings and the influence that they feel in community contexts, is seldom reciprocal. They were the recipients or objects of the influence and power of adults, but the opportunity to return the influence was too often nonexistent.

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Needs and planning of women's associations in the area of Naples

by Immacolata Di Napoli, Caterina Arcidiacono & Filomena Tuccillo¹



Introduction

In the modern age reciprocity and social ties have lost their role as indispensable elements of social relations in the process of individual empowerment (Healy, 2005). This has led to an idea that the family and local associations, which are the contexts of social action that best apply the codes of reciprocity and solidarity, are marginal and residual (Stanzani, 2003). However, associations in a local context also have a role of mediation between citizens and local institutions. Participation is increasingly seen as a strategy for empowering people (Deji, 2007) since it gives them an opportunity to plan within the local context, thereby increasing their levels of social trust (Arcidiacono, 2004; Arcidiacono, & Di Napoli, 2008). The functions of social trust are to reduce social complexity (Earle & Cvetkovich, 1995; Luhmann, 1989), to promote social justice and to improve access to resources (Prilleltensky, 2001). It is likely that these factors create the conditions for welfare (Rothstein, 2001). It is however necessary to further investigate the role of participation. Ditcher (1992) makes a comparison between participation as an "element" in development as opposed to participation as the "basis" for development. When participation is seen as a mere element people do not see themselves as having a direct "stake" in the development of a project and it usually fails.

Aims

This study investigated the role of women participating in women's association and the goals, the organizational systems and the image of various associations promoting women's well being in Naples and surrounding areas, so as to improve our knowledge of their contribution to the development of women's social power. We did this by means of the following steps:

- making an inventory of women's associations in Naples and the surrounding area;
- investigating women's perception of the activities and role of these associations.

We also tried to gain an idea of the development of these associations, especially those involving the younger generations. We tried to understand their commitment towards the future and the way these associations have changed over time.

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Method

Participants

Thirty-three women involved in the 40 main associations of Naples and its province, aged between 31 and 70 years, participated in the research. We assigned these women the role of stakeholders.

Their associations were involved in the fields of culture (16), social (6), political and social (4), services (4), health care (2) and work (1). The women interviewed included 16 Presidents, 4 vice-presidents and 13 volunteer workers involved in social and educational services for women. 17 of the participants were married, 11 were single, 4 were separated/divorced, and 1 was a widow.

Procedures

A narrative interview was specially prepared in order to investigate

- the association's history,
- the exploration of the needs and expectations of women in relation to the association,
- the association's projects and activities,
- the representation and perception of the association's local context,
- a film, book or phrase that the interviewee felt characteristic of the association and the condition of women in Naples.

The women's associations were contacted using the lists of associations collected by the office of the "Consigliera di parità" (Gender equality councillor) of the local area.

At first we made a list of the relevant Neapolitan associations. Their staff were then asked about their availability for an interview. For each association we gathered information about their telephone help-line services and their activities in the areas of consultation, child caring and mutual support.

The study was conducted with the aim of making a brochure useful to all women, providing information about the associations operating in the local area.

The collected and recorded data was transcribed and analysed with the support of the Atlas.Ti software.

We analyzed the textual material with the Grounded Theory approach (Strauss & Corbin, 2008) a methodology and set of procedures which enables one to generate a theory based on the available data.

As a first step we identified 843 codes, which represented an exceptionally large number of categories, due either to the presence of many "in vivo codes" or to the diversity of the researchers' training.

As a second step we re-analysed the codes and we organized them into 8 families (1 Creativity: the essence of the association, 2 Creativity isn't only female, 3 Female skills, 4 The visibility of the association in the local area, 5 The relationship with the local context, 6 Agency of the association, 7 Safety and Inter-generational relationships).

Results

The analysis of the interviews clearly showed that associations were described as a “creative space” for the individual:

The association is a way to create, to discover one's own possibilities and above all to understand the uniqueness of the abilities of any person (54 year old, married, vice president of a cultural association).

It is also important to focus on the role that some associations play within local government (district councils) and in social action by means of cooperatives and projects funded by institutions and public organizations:

Our association is part of the municipal council. (54 year old, married, president of a social association)

However, the association is often a "silent presence" with difficulties in being recognized by the institutions: in most cases, associations take part in local councils, but they have no opportunity to assert their ideas and their rights, and their staff do not feel they offer any opportunities for helping young women to get involved in politics and social action:

I think a number of facilities and services that can assist working mothers are missing [...] I realize that often the women who come to the association [...] have the problem of where to leave children during their absence. (53 year old, married, president of a social association)

The presence of associations and their multiplicity of actions within the institutional network is therefore connected with dissatisfaction and lack of effectiveness.

... We often have problems with the institutions. When you make proposals you have a negative impact on the institutions. The volunteer should be welcomed with open arms, but instead, where there is the will to create projects that should be funded and supported, we encounter obstacles.

(Statement of 45 year old married president of a social association)

Our research represents an opportunity for reflection on the way in which these associations cooperate with public administrations. The information gathered from our respondents shows us that at a social level there is insufficient social recognition of women and mutual support is lacking, and that the shared perception of vulnerability among the women in the association is often the only basis for mutual recognition and support. This factor clearly indicated to us the role that powerlessness plays in women relations by preventing them from acquiring a more powerful role in their social context.

Women's associations seem to provide women with an opportunity to increase their feelings of mutual recognition and appreciation at the individual level and mutual support at the collective level, but a strategy for increasing their visibility, representation, and influence within the decision-making procedure is absent.

A future study will investigate which functions women attribute to such associations and their role in the decision-making procedures of the organisations they interact with and are connected to.

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MIGRATIONS

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MIGRATIONS

Gender violence in couples against immigrant women

by **Roberta de Alencar-Rodrigues¹ & Leonor Cantera²**

Introduction

This paper is about gender violence against Latin-American women in Barcelona, Spain. The literature supports the notion that conditions of the migratory process (language, job, racism, etc.) can increase the vulnerability of abuse. However there are personal and external resources that immigrant women can use to escape violence. Exploratory qualitative methodology was chosen to analyze the process that 13 battered Latin American women go through after deciding seek help. The relevance of this issue lies with the fact that the number of immigrants has increased dramatically in Spain. In Barcelona the overall immigrant population increased from 74,019 in January 2001 to 294,918 in January 2009. Furthermore, Spain is often perceived to be a country of domestic terrorism because the number of deaths of victims of gender violence is greater than the number of deaths perpetrated by the ETA.

We will adopt, in this research, the feminist perspective as a theoretical approach that offers a broader vision of the phenomenon of violence. Cantera (1999) states that it is not possible to explain gender violence in couples through simplistic theories because that is a complex phenomenon determined by a set of variables, and no variable can be considered as the only one determining cause for violence effects. The aggression, according to this author, always occurs in an environment where other factors might contribute as well (conflicts, competition, prejudice, alcohol, ideologies that legitimate violence).

Through the feminist vision, we seek to study gender violence in couples against female immigrants, considering violence as a learned attitude that can be changed and forewarned (Cantera, 2005). On the other hand, we demonstrate that immigrant victims are able to recover their life control through personal and external resources, and they can break off the abusive relationships as well. Therefore, in addition to their capacity of resilience, battered women have the resources to increase their control over interpersonal environments. Besides, as gender violence in couples is a derivative of the history of gender domination, it can be changed if action is taken in social and cultural bases that sustain that violence (Cantera, 1999).

Discussion

This is a doctoral project in progress that makes the information here presented a series of reflections weaved throughout the data gathering process. The analysis of the information allows us to focus on two central points of the violence Latin American female immigrants' experience: a) violence in a migratory situation, and b) actions taken when they attempt to reduce or avoid violence in their migratory status.

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Being an immigrant favors a lack of knowledge about laws, rights, services, and how these are related to a degree of difficulty with the local language and with understanding the Spanish social system. Their migratory status constitutes a factor that makes it difficult for them to seek help, thus putting them in a vulnerable position:

Yo ya me animaba porque ya nunca había recibido un sueldo tan grande, mucho dinero que al cambio en mi país era mucho. Entonces yo no sabía, y cuando me decían mira, tiene derecho a pagas, tiene derecho a esto, yo decía uy tanto dinero más. Y ahí me iba informando pero cuando llegué no sabía nada (P.3).

I kept my spirits up because I had never made so much money, lots of money that at my country's rate was a lot. So I didn't know, and when they told me look, you have a right to payments, you have a right to this, I said, wow, that means more money. And it was there that I started informing myself but when I got here I didn't know anything (P.3).

Bueno, él me convenció de que retire la denuncia, nos quitaron la documentación por hacerle caso, porque hubiese llegado a juicio capaz que no perdía ni los papeles porque dos años nos prendieron los papeles. Porque no llegamos a juicio, yo lo veo así, tal vez por renunciar el juicio, por quitar la denuncia mutuamente (...) No nos asesoraron bien los abogados entonces (.) quitamos la denuncia, no queríamos ir a juicio, pero me quedé sin papeles (...) pero fue él que me hizo daño. Bueno, a raíz de ahí ya, porque no te quiten los papeles a quedarte callada. Yo me quedé callada muchas cosas, me aguanté (P.2).

Well, he convinced me to withdraw my formal complaint, they took our documents because we took his advice, because it could have gone to court that would not lose the papers because they lost the papers for us for two years. Since we didn't get to court, that's the way I see it, maybe because we took back our formal complaint, because we mutually took it back (...) They didn't advise us well, the lawyers at that time (.) we withdrew the complaint, we didn't want to go to court, but I ended up without papers (...) but it was him who hurt me. Well, since then I now, because they don't take your papers you opt to stay quite. I kept a lot of things to myself, I put up with it (P.2).

Additionally, undocumented female immigrants cannot file a formal complaint in cases of mistreatment because they are afraid of revealing their own legal status and that of their partner. This limits the opportunity for them to seek help from emergency centers and other specialized women protection resources for those who are victims of close relationship gender violence. At the same time, this further increases their institutional invisibility and lack of protection (Caro, 2004; Casas, 2009; Montañes & Moyano, 2006; Runner, Yoshihama & Novick, 2009). The participants of the study also express the need to review existing resource access requirements. The act of submitting a formal complaint, for example, should not be a condition for them to be able to access available resources (Caro, 2004).

Although the mother tongue of the study participants is similar to that of the host country (Spain), we cannot forget that every country, region, and every geographical zone and historical moment enjoys styles, meanings, symbols and usages of speech that characterize a territorial meaning more than one that is shared among everyone who speaks the language of the host country. It takes time for people to learn usage and meaning

differences, time that many women do not have. Different theorists concur that language influences the process of settling in and integrating into the new culture (Casas, 2009; Fernández, 2002; Menjivar & Salcido, 2002; Montañes & Moyano, 2006; Runner, Yoshihama & Novick, 2009). Therefore, it is imperative to highlight that due to the migratory situation of a person, language issues may still be present even when in fact they are able to participate in the creation of social networks that can turn out to be very important when they need to face certain obstacles that arise in the migratory process and due to close relationship gender violence. This fact is present in the following testimony:

Pues al principio muy difícil porque llegas a un sitio que no conoces nada, que a pesar de que sea el mismo idioma, es súper diferente al que tú traes (...) no lo entendía nada, a pesar de que, ya te digo, hablamos español todo, pero no me enteraba (P. 1).

Well at first very difficult because you arrive without a place to stay and you don't know anything about the place, even though it's the same language, it is very different to the one you bring (...) no one understood anything, even though, as I said, we all speak Spanish, but I didn't get it (P. 1).

Dependable social networks that can help break an abusive relationship are important (Fernández, 2002; Montañes y Moyano, 2006; Casas, 2009). However, women find themselves alone due to cultural and social uprootedness, language problems, and because of the emotional control their partner has on them. The following examples illustrate how a lack of social support puts the interviewed immigrant women in a vulnerable situation:

Si no hubiese sufrido todo eso, si hubiese tenido más apoyo, porque la niña esté cuidada por un familiar, entonces me ha refugiado mucho en él, pero es que él, aguantarle todo a eso tantos años, tantos años de esto, me he sentido muy mal y más por no tener familiares aquí (...) Yo pensaba si solo había él, no tenía más a nadie, aguantarme todo esto, tantos años (.) que no tenía mi familia y tal, pero que tenía él, pero esto, que no tenía su apoyo, me he sentido sola (P.2).

If I had not suffered all of this, if I had only been able to have support, because the child, she is taken care of by her by a family member, therefore I sought much needed refuge in him, but it's that he, put up with him for so many years, so many years of this, I have felt very bad and more because I don't have any relatives here (...) I thought, if only there was him, I had no one else, put up with all of this, so many years (.) that I didn't have my family and such, but I had him, but this, that I didn't have his support, I have felt alone (P.2).

Habían días en que me encontraba muy sola, me sentía deprimida. Es que a veces uno necesita de alguien y la persona con quien compartes un piso es diferente (.) y te sientes un poco como que mejor me callo antes de decírselo y eso me pasaba a mí, únicamente agarraba el teléfono y llamaba a mi casa allá a Perú y hablar con ellos ya me sentía bien. O meterme los domingos en la tarde al internet, chatear un poco con ellos y mirarlos y ya quedaba contenta (P.3).

There were days when I felt very lonely, I was depressed. It's that sometimes we need someone and the person with whom you share a flat is different (.) and you feel a bit like perhaps it's best that I stay quiet before telling anyone that's what was happening to me, I'd only get the phone

and I'd call my house over in Peru and talk with them and I'd feel good. Or I'd get on the internet late on a Sunday evening, I'd chat with them a bit and look at them and then I'd feel good (P.3).

In the first case, loneliness is an obstacle to handle an abusive relationship. The second one shows that a lack of the physical presence of the family makes the woman seeks this caring space by using the internet to mitigate her loneliness. In such circumstances, we need to keep the migratory grief suffered by these women in mind, as persons who are Latin Americans who have moved and are being abused by their partner.

The women's economic situation is another interesting factor. It is closely related to barriers that block entrance to the world of work, simply because they are women and due to the difficulties they face as immigrants, (Casas, 2009; Montañes & Moyano, 2006), as shown here:

Al tener la niña ya que como hay un poco más de trabas para trabajar, ya no, ya saben que estás embarazada y no te dan un trabajo (P.2).

Because I have the little girl, it's as if it puts a few more obstacles to going out to work, no more, they know you're pregnant and they don't hire you (P.2).

Those who study what women do to reduce or to get out of an abusive relationship also need to take into account the existing barriers to their plan and the available resources they can count on. In general, a triggering situation marks the point at which women begin to end the violence they have suffered in their relationship and this may be related to psychological factors.

The trajectory of reducing or getting out of an abusive relationship coincides with literature that deals with this issue, as a moment that is related to a situation or a set of experiences that, according to Cantera, marks a "before" and an "after" in the history of the relationship. According to this author, this moment is characterized by an "already is" that goes along with a belief in the ability to get out of an abusive relationship (2007, p. 173).

This analysis permit us to identify psychological factors, such as when a woman chooses to not report the father of the daughter in order not to hurt him. How these existing obstacles impede the reduction of the abuse or of escaping it completely are factors that professionals need to look at.

A woman who seeks institutional support that ends up experiencing a secondary victimization turns out to be much more worrisome. It often makes her relive psychological suffering that has not had time to heal. In such circumstances, the abused women seek services due to symptoms that are not directly related to the abuse they have suffered from their partner (anxiety, sleep problems, depression, headaches), but the treatment they receive can often contribute to hiding background violence issues (Cantera, 2004). Here is an example:

Yo ya he me pasado que yo tenía que ir al médico diciendo que estaba enferma, pero realmente no estaba enferma, sino que tenía problemas con #mi ex pareja#. Y no he podido trabajar. Entonces necesitaba ir al médico decir cosas (P.1)

It's already happened to me that I went to the doctor saying I was sick, but I wasn't really sick, instead I had problems with #my ex#. And I have not been able to work. At that time I needed to got to the to say things (P.1)

From this fragment, the importance of institutions training professionals to detect and intervene in close relationship abuse situations becomes evident. Moreover, institutional support can get translated to a secondary

victimization due to the practice of prescribing medicines that help mitigate the impact of the violence and a woman's health problems. In other words, the use of tranquilizers to relieve anxiety and depression are temporary measures but not the most effective means of intervention:

yo tenía depresión, tenía mucha ansiedad, andaba con pastillas (...) andaba con pastillas, no tenía nada (...) tuve dos sobredosis de pastillas y no sé (...) primero me las daba la, el, el médico de cabecera, pero es que las de muy poquitas dosis no me hacían nada, me tenían que dar, o a veces cuando llevaba mucha ansiedad me tenían que inyectar para tranquilizarme (P.9)

I was depressed, I had lots of anxiety, I was on pills (...) I was on pills, I didn't have anything (...) I had two overdoses of pills and I don't know (...) first she, the doctor would give them to me, but the small dosage ones didn't do anything for me, they had to give me, and sometimes when I had lots of anxiety they had to give me a tranquilizer shot (P.9)

Finally, we have been able to see that the process Latin American immigrant women who have suffered gender violence in their close relationship go through after they break the silence to seek help. It tends to be a very long process, filled with various attempts to seek different institutional services. They face great obstacles to get out of an abusive relationship as immigrants. Before ending, we need to put an accent on aspects that can be looked at, such as representations of these women as persons who are voiceless, indecisive, and simply victims of violence. Therefore, we need to shed light on the agency and strength of immigrant women who face many barriers that impede their escape from an abusive relationship.

Conclusion

According to the data analysis through interviewees, there are many internal and external factors related to the decision to break off and exit the abusive relationship. The process is lengthy and contemplates many attempts of seeking help in different social services. Among the Latin American immigrant women that took part in this research, it's possible to identify some common factors that motivate the women to search for help: an increase in the frequency of violence, and the presence of sons/daughters. Although the immigrant women are vulnerable due to the lack of social support, the immigrant condition, the need to find employment, and the difficulty of combining work with family duties, they have a capacity to resist that helps them find ways to escape violence.

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La Diaspora Noire : inégalités de genre et race au Brésil

par Maria Inácia D'Ávila Neto¹ & Cláudio São Thiago Cavas²



Pendant la colonisation ici vivaient ensemble des blancs, des indiens et des noirs et ses descendants. Malgré la diversité, on n'entendait pas parler d'une reconnaissance des différences ; l'ordre colonial obéissait à un critère eurocentrique – la suprématie du colonisateur européen blanc sur des natives indigènes, les esclaves noirs et les métisses, et androcentrique – la suprématie du masculin sur les femmes – en générant des oppressions qui se traduisaient en racisme, discrimination sexuelle et sociale.

Le manque des politiques d'insertion sociale et économique pour les afro-descendants, dans la période post-abolition de l'esclavage a aggravé les énormes asymétries, qui y restent de nos jours, et qui marquent encore plus les femmes.

Selon les données de la Recherche Nationale par Echantillon de Domicile (Pesquisa Nacional por Amostra de Domicílio (PNAD) 2003 de l'IBGE, les femmes représentent 42,7% de la population économiquement active (PEA) au Brésil et les noirs (des deux sexes), 46,4%. Les femmes noires, de leur côté, correspondent à 14 millions de personnes (18% du PEA), en dévoilant une double discrimination de genre et race dans toutes les indicateurs: éducation, marché de travail, revenu et pauvreté, développement humain, survie et mortalité aussi que l'accès à quelques biens et services.

Pour une meilleure compréhension de ces inégalités de genre et de race, il nous faut chercher les antécédents historiques qui remontent à l'époque de la colonisation, du trafic d'esclaves et de la diaspora noire. Le phénomène migratoire, volontaire ou contraint, est aujourd'hui un thème de considérable importance dans le contexte globale.

La globalisation, même s'elle s'est accélérée dans les deux dernières décennies, peut être indiquée depuis le XV^e siècle. Dans sa prétention à l'homogénéisation culturelle, elle provoque des effets différenciateurs qui produisent des formations subalternes et qui ne suppriment pas la différence, au même temps qu'elle affirme et récrie des identités. Ce procès associé à l'accélération du flux migratoire mène à des grandes inégalités. (WOODWARD, 2006.)

Entre les XVI^e et XIX^e siècles ont été importés de l'Afrique environ 4 millions d'esclaves africains originaires de plusieurs cultures et que ici ont été dispersés par tout le territoire brésilien.

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Le colonisateur maintenait sa représentation eurocentrique et hiérarchisée: le Brésil serait peuplé par des races inférieures: le noir, l'indien et ses descendants.

L'analogie entre race et sexe a eu un rôle stratégique dans la théorie scientifique des XIXe et XXe siècles, d'une telle façon que le scientifique a pu user de la différence raciale pour expliquer la différence de genre et vice-versa.

Pour Hall (2006) ce sont des points de vue essentialistes qui structurent l'identité et la différence en termes binaires, qui caractérisent "l'Autre" comme inférieur, soit par des héritages culturels ou biologiques, quand les exclus et les inclus sont déterminés par le groupe hégémonique: l'homme blanc. D'Ávila Neto (1995) appelle ces dichotomies de "la logique de la domination".

Au Brésil, quand nous réfléchissons sur la diaspora noire, en suivant la trajectoire de la colonisation et de l'esclavage, on peut les indiquer comme déterminantes pour la formation d'une société multiculturelle et hybride.

Il faut ici expliquer quelques concepts dans le cadre théorique proposé. Stuart Hall (2006) souligne l'importance de différencier multiculturelle de multiculturalisme. Une société multiculturelle est celle où des différentes cultures sont interconnectées socialement, mais en préservant des caractéristiques d'une identité "originale". Par contre, le multiculturalisme serait la forme d'administrer les sociétés multiculturelles et est connecté aux demandes de reconnaissance. Ainsi le multiculturalisme doit être compris comme un projet politique et épistémologique par rapport à l'eurocentrisme, comme le définit Shoat (2001).

Smith (2006), explique que le terme hybridisme était péjoratif à son origine, utilisé pour affirmer la suprématie européenne par rapport aux autres races et cultures, en perpétuant ainsi l'exclusion des groupes minoritaires. Dans le cadre théorique post coloniale, l'hybridisme est considéré comme une façon d'ébranler le discours des cultures dites supérieures, en traduisant l'appropriation et la réévaluation des cultures minoritaires, en affirmant des nouvelles identités et la quête de la reconnaissance. Cette position est ratifiée par Hall (2006), quand l'auteur pointe que l'hybridation a marqué les groupes hégémoniques et les subordonnés à la fois.

Paul Gilroy (1993), un autre théoricien des études culturels, nous rappelle que le terme diaspora a été importé de la pensée juive pour le vocabulaire des études noirs en fonction des communalités des thèmes concernant les deux peuples, ou soit, dispersion, exil et esclavage, en soulignant l'importance du concept par rapport à l'affirmation de l'identité ethnique et de la différence.

Smith (2006) soutient que la diaspora est un sentiment ambivalent, d'un côté tenu au territoire d'origine et de l'autre côté à l'exil. De cette façon, les pratiques culturelles ne sont pas attachées à un endroit, elles sont des pratiques déterritorialisées, et c'est justement cette mobilité et fluidité qui sont importantes aujourd'hui, parce qu'elles deviennent un acte politique où les nouvelles identités hybrides se forment en cherchant la reconnaissance.

Nancy Fraser (1997), fait l'apologie de la reconnaissance à côté de la redistribution. Fraser théorise la quête pour la reconnaissance en considérant les intersections entre genre et race, ou soit, en tenant compte ses transversalités.

L'auteur expose les relations entre (dés) avantage économique et (manque de) respect culturel qui seraient l'unique forme de combattre les injustices sociales. Ainsi, sous la perspective des axes culturels et socio économiques, d'une forme paradigmatique, le genre et la race irontt questionner sous quelles circonstances une politique de reconnaissance peut soutenir une politique de redistribution.

"En bref, le genre constitue un groupe mixte qui comprend pas seulement l'aspect économique de la redistribution, mais aussi un autre aspect culturel qui le situe comme demande de reconnaissance; (...) (Ces deux aspects) sont d'une telle façon chevauchés qu'ils se renforcent dialectiquement au four et à mesure que les règles sexistes et androcentriques sont institutionnalisées dans l'État et l'économie, et la vulnérabilité économique qui atteint ces femmes contraint ses possibilités de faire entendre leur voix, ce qui présente des difficultés pour la participation égalitaire dans la production de la culture dans l'esphère publique et dans la vie quotidienne". (FRASER, 1997, p. 12)

Ainsi que soit pour le genre comme pour "race", ici traités séparément, la solution la plus adéquate pour solutionner le dilemme redistribution/reconnaissance serait le socialisme dans l'économie et la déconstruction dans la culture. Par rapport aux femmes afro-descendantes, il y a une intersection de plusieurs possibilités de subordination et formes d'injustice qui se touchent mutuellement. Il faut penser à de formes croisées du dilemme redistribution/reconnaissance.

Ce travail intègre une vaste recherche sur les Femmes Migrantes Brésiliennes sous la perspective de reconnaissance sociale, dans le procès de globalisation contemporain, développé par le Laboratoire des Images et données du Programme EICOS – Études Interdisciplinaires de Communautés et Ecologie Sociale de l'UFRJ -, Institut de Psychologie, Université Fédérale de Rio de Janeiro (UFRJ).

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Deportees rehabilitation in Azores within forum theatre the native outcast forum theatre group experience

by **Benita Chaves**¹



This paper presents one of the main categories of the Theatre of the Oppressed - Forum Theatre - as an individual and communitarian empowerment tool used with deportees (from USA and Canada), integrated in the rehabilitation program of ARRISCA in St. Michael's Island. This work started in ARRISCA based on a network with Theatre of the Oppressed Group of Lisbon and Social Governmental Service of St. Michael Island, following the *DiverCidade* Project, financed by Equal European Communitarian Program. The Native Outcast Collective Theatre Group started in April 2008, formed by six deportees as spect-actors and by two professionals of ARRISCA as trainers.

Forum Theatre is a theatrical game in which a problem is shown in an unsolved form, to which the audience, transformed in spect-actors, is invited to suggest and enact alternative solutions. Its operational target is stimulating debate in the form of action (not just words) showing alternatives, enabling the target public to become the protagonist of their own lives. The play presents true life problems of the target public in which the cycle of oppression and the efforts to break it is shown. The procedure is guided by a *Joker*, whose function is to ensure the running of the game.

Since this work practiced with the Native Outcast Group from ARRISCA we can show its efficiency by using theatre to make sense of their own lives, but also developing personal and social skills for empowerment in everyday life problem solving. Self control, creativity, civic and social participation are results which show the positive outcomes of this methodology.

The main goals, rules and principles of the Forum Theatre Approach are presented as well as the activities, exercises and the achievements developed within Native Outcast Group.

Forum Theater Frameworks

Forum Theatre is one of the main techniques of the Theatre of the Oppressed created by Augusto Boal in the early 1970s. It's a theatrical act based on realistic participants experience designed to present a power dynamic circle based on a relation of domination and command that blocks the protagonist (oppressed/problem-owner) from exercising their basic human rights. The argument has a non ending and always finishes with a situation of injustice, reflecting the protagonist's resignation in front of his oppression.

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The intention of the play is to show the real life protagonist/antagonist experiences (social and political dilemma) in motion where the spectators are encouraged in an autonomous, democratic and cooperated way to be the protagonists, enacting the new possible scene solutions.

Bridging the separation between actor (the one who acts) and spectator (the one who observes but is not permitted to intervene in the theatrical situation), the Theater of the Oppressed is practiced by "spect-actors" who have the opportunity to both act and observe, and who engage in self-empowering processes of dialogue that help foster critical thinking.

The process in motion, analyses and exploration group solutions is rooted by a Joker, who mediates the rules of the game, encouraging the spectator to feel free to act.

The Games of the Oppressed

The Games of the Oppressed are an integrated system of exercises proposed to activate the actor's performance: muscular, sensory, memory, imagination and emotion exercises.

Understanding that all our senses, our perception of reality, and our capacity of feeling and reasoning, tend to become mechanical by every day repetition, we tend to become less creative, accepting reality as it is, instead of transforming it. The five categories of the games help us "to feel what we touch", "to listen to what we hear", "to see what we look at", "to stimulate all senses" and "to understand what we say and hear" (Boal, 2004).



Forum Theatre Guidelines

This particular type of interactive theater is designed

- to see and reflect about the situation-problem (social dilemma) lived by the participants,
- to analyze the root causes the situation by stimulate reflection, argumentation, counter-argumentation, and action, and
- to enact the alternative solutions to change the situation following the precepts of social justice and citizenship.

Forum Theatre Institutional Frameworks in ARRISCA

ARRISCA is a Non-Governmental Organization in St. Michael Island, Azores, which follows the Psychosocial Rehabilitation Model based on individual and community empowerment, recovery and advocacy principals. Managed by a multidisciplinary rehabilitation team its main goals are to promote mental health and to prevent

risky behaviours in general community, to promote psychosocial rehabilitation of people under severe social exclusion and to promote technical and scientific professionals improvement.

The Rehabilitation Program which has been started with the use of the Theatre of Oppressed is based on a network with Theatre of the Oppressed Group of Lisbon and Social Governmental Service of St. Michael Island, following the *DiverCidade* Project, financed by Equal European Communitarian Program. The Native Outcast Collective Forum Theatre Group started in April 2008, formed by six deportees as spect-actors and by two professionals of ARRISCA as trainers.

Native Outcast Collective Forum Theatre Group

Goals

To open paths to improve the quality of relationships, communication and problem-solving skills of participants; To stimulate the reflection and critical analyze of participants of their personal and social reality; To encourage a democratic participation citizenship; To open paths to change social and political directions related with citizenship and deportation issues; To promote the conscious of the general Azorean society to the social exclusion/discrimination experienced by participants.

Target Public

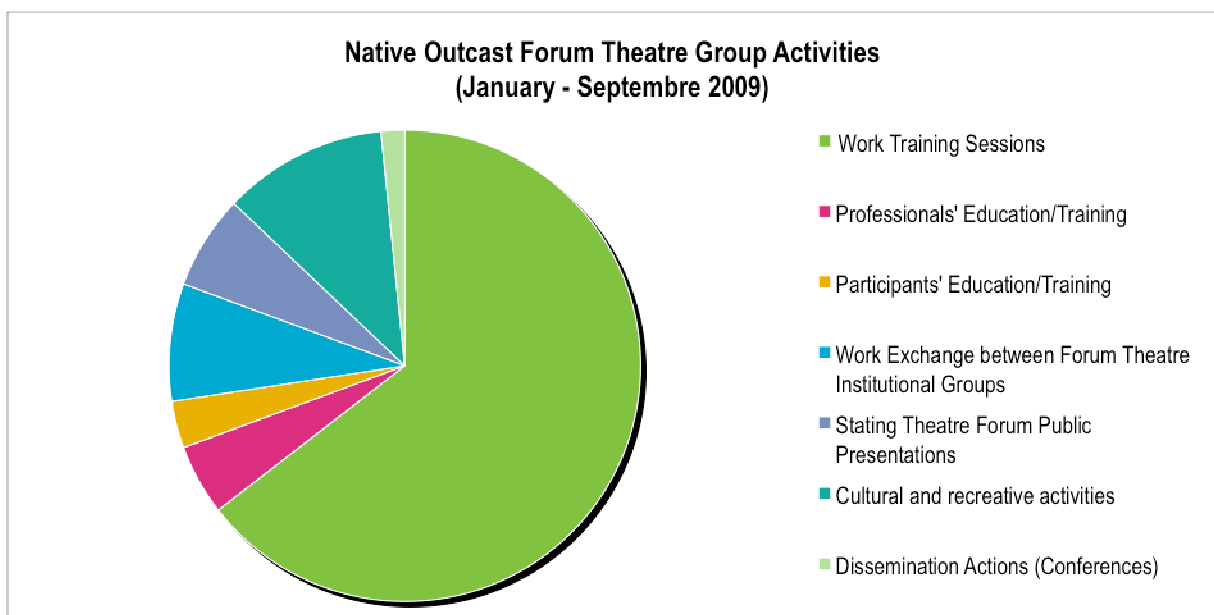
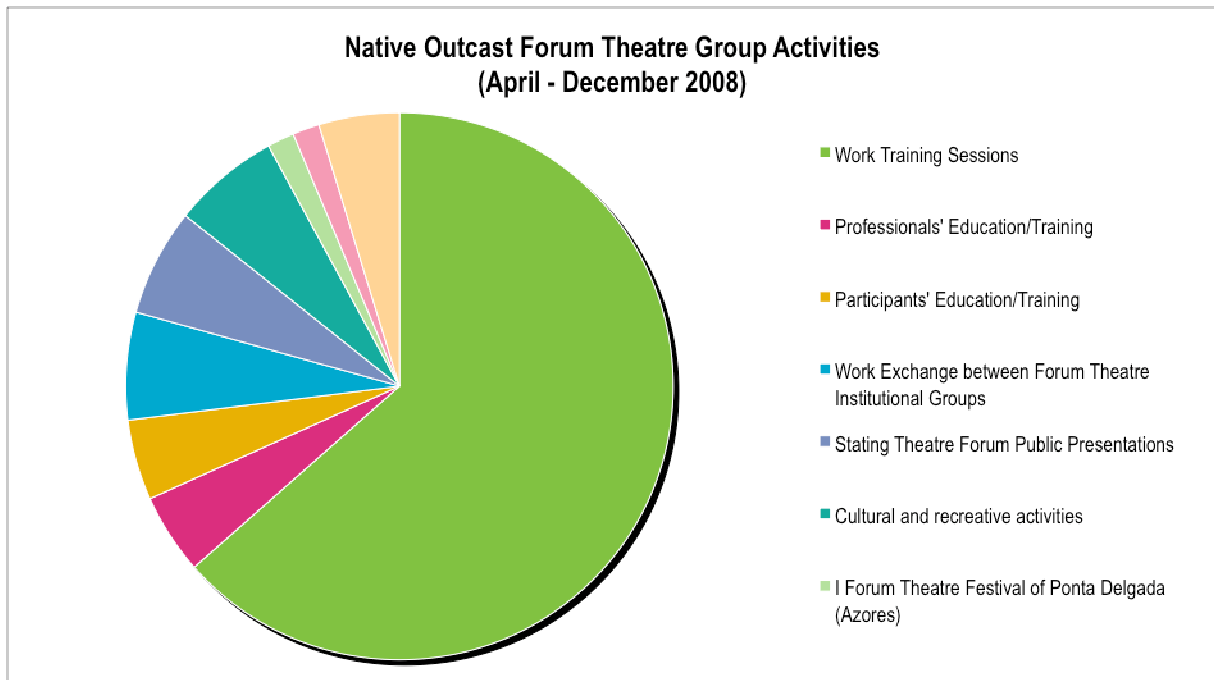
Deported adults from U.S.A. and Canada to Azorean Region; Average of 10 participants per session; Male and female group; Portuguese nationality (Azorean), living in S. Michael Island; Integrated in the rehabilitation program services of ARRISCA; Severe psychiatric disorders or not stabilized are excluded.

Methodological Aspects

Three hours weekly session with a break lunch time; Outdoor and Indoor practice and work sessions; Two member's coach working team; Active strategies with several group exercises based on the Games of the Theatre of the Oppressed (Augusto Boal).

Main Activities

The main activities referenced to 2008 / 2009 within the Native Outcast Group are graphically presented.



The work training sessions is a weekly moment to prepare the actors work, to reflect and to debate individual and social issues and to organize the plan activities. The two professionals (psychologist and social work) whose train the Native Outcast Group are in permanent communication and supervision by The Theatre Group of the Oppressed of Lisbon, who mediate and provide education and training for professionals and participants. The work exchange between Native Outcast Group and other institutional Forum Theatre Groups of St. Michaels Island and Forum Theatre Group of Lisbon is an aim to maintain and develop. On Island these Forum Theatre Groups, exchange between them, training sessions, public presentations and some cultural activities (immigrants group, older people group and women in social exclusion group).

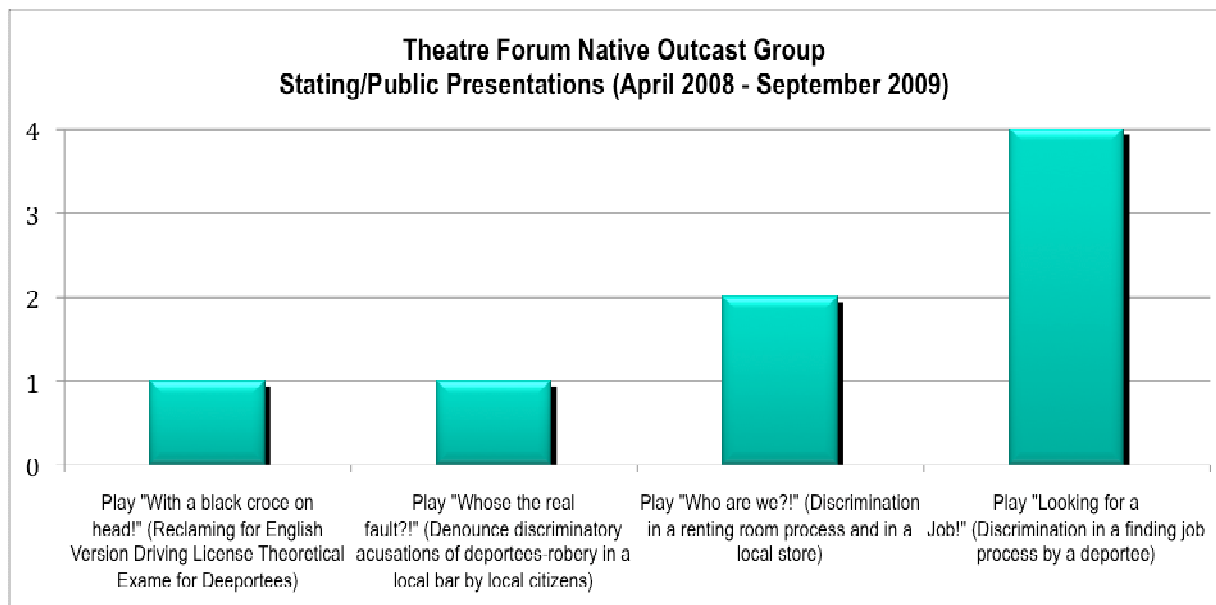
The public presentations are a stating public work as a result of the backstage work and tend to induce the work to follow next. The Forum Theatre Play intends to show discrimination experienced by the participants in the Azorean Region related with job and home obtainence, violence and addictive behaviors that generalize deportees citizens as a non great citizens, explaining the name of the group NATIVE OUTCAST. The plays reclaim and show some rights such as the possibility for deportees having the theoretical driving license exam in an English version (because of their difficulty of to understand and express in Portuguese).

Cultural and recreation activities are an important complementary tool to develop the cohesion and knowledge of local resources. So, guide visits to cultural museums, local gardens, down town library, exhibitions, music and theatrical events are developed.

The public information session for deportees, mediated by the American and Canadian Consulter were also a product of the backstage work created in group debates.

Media information and dissemination about Group work (by national and local radio and news but also in conferences or seminars) is also an important tool as a way to validate and divulgation of the work.

Contents and Frequency of the Theatre Forum Native Outcast Group Public Plays



The Native Outcast Group developed 4 plays to present during the last 17 months. The play ‘With a black croce on head!’ reclaims the need and the right for deportees to have the access of driving license theoretical exam in an English version. The play ‘Whose the real fault?’, presents a wrong accusation related to an assault bar to a deportee, just because of the deportee condition. The play ‘Who are we?!’ presents the discrimination lived by the deportees in a renting room process and in a local store. The play ‘Looking for a job!’ presents the difficulty and exploration of the people whose looking for a job related with a unpaid salary, the language barrier, etc.

Individual and Communitarian Achievements

Self-confidence and self-control in a daily life experiences; Civic and social proactive behaviors in relation with institutional services; Active conscious and respect of social, cultural and natural resources of the Azorean community; Conscious expansion of local and global social and political issues; Introduced knowledge of legislative and social effective changes related to the deportees' situation and rights and started to create a fundraising to participate in local activities.

Discussion/Conclusion

The Native Outcast Group is growing strongest and its cohesion and improvement performance tend to reinforce the cooperation and connection with all region Forum Theatre Groups. Furthermore, the connection to a national Theater of the Oppressed network (for knowledge exchange opportunities) is also a process in motion where the development of the presentations in St. Michael's Island and to the Azorean and national region.

Forum theatre is still in its infancy at ARRISCA in its findings, reaching, explorations and opening up new ways of walking. Although this, Forum Theatre is a real option to apply and to show the magnificence of this intervention in the rehabilitation program of deportees in Azorean region. The importance of the methodological approach itself concrete real motivations to knowledge and effective individual and communitarian empowerment tool used with the target public.

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A study of interactions between Maghrebian and native habitants of San Marcellino (South Italy) according to the Grounded Theory Methodology

by **Caterina Arcidiacono¹, Fortuna Procentese¹ & Agostino Carbone¹**



This paper describes the process and results of a complex action research conducted in southern Italy regarding the modalities of interaction between an Arab community centered around a local mosque and the residents of the surrounding area. The research was conducted from an intercultural point of view with a participatory method. The instruments used for data collection were the narrative interview and field notes elaborated and discussed by the research team together with various local social protagonists (Arcidiacono, Procentese & Di Napoli, 2010; Arcidiacono & Procentese, 2010a, 2010b), Arcidiacono, Procentese, Carbone & Cerasuolo 2010).

As described in the above-mentioned papers this context is characterized by the absence of institutions and by a high crime rate. Interviews were conducted with key local figures (13) and with Italians living in the local area, both with and without contact with immigrants (15). Further interviews were conducted with immigrants (9), 5 of them male and 4 female, from Algeria (2), Tunisia (3) and Morocco (4), both with and without official permission to stay, both recently arrived and some time (at least 5 years) before, and of various different ages (range 21-55) and schooling. For the data's collection was used a narrative interview, lasting an average of 1 and a half hour. For the analysis of the data the approach we used refers to the Grounded Theory (GT), an inductive research method which aims to construct a theoretical model based on the data. GT allows us to find concepts and relationships in the data, and organise them into an explanatory theoretical representation. This method was chosen since it was regarded as particularly suitable for exploring the processes underlying the phenomena considered and measured in all their complex interactions. We felt that the GT was particularly effective in revealing the basic social and psychological processes behind the facts investigated. We agree with K. Charmaz (2006), that neither data nor theories are "discovered", but that the researcher is an integral part of the world we study and the data we collect. In this case, we therefore constructed our theory through our past and present involvement and interactions with people and their points of view.

Procedure and Strategies

According to the Grounded Theory the process of research has a cyclical non-linear structure and there is a redefinition and revision of what occurs during the course of research. The process of analysis proceeds through two phases of "coding" (open and selective²), and it progressively integrates them conceptually on the basis of

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² Originally there were three phases of coding: open axial and selective. In 2008, after Strauss' death, in the third edition of "Basics of Qualitative Research", Juliet Corbin united the first and the second phases of coding and declared that "the distinctions made between the

the categories identified by coding and the reflections arising during the process of their elaboration in a theory (Strauss & Corbin, 2008).

The first phase in the process of analysis is that of coding that consists in categorizing pieces of data with a short definition or phrase that summarizes and identifies each piece of data.

In the first level of coding (open coding) we identified 150 codes, which were then grouped into 59 codes. Subsequently we gathered these codes into the following 32 categories:

Arrival (migration route) and reason for migration	Immigrants as a resource in processes of economic production
Differences in to the period of immigration and length of time in the country	Importance of preserving one's own culture
Camorra and crime	Immigrants' education
"Mind your own business and you will live a hundred years".	Work-seasonal work
Food as a cultural mediator	Mosque
Life conditions	North and South Italy: differences
Knowledge of the Italian language	Key people in the territory
Prejudice	Politics
Desires, hopes and disappointments	Projects and proposals
Differences between the various Arab countries	Representation of immigrants in the media
Difficulties in returning home	Regulation of entry to Italy
Documents	Relationship with family members at home
Women	Second Generation
Heterogeneity of Italian and Arab behavior	Sense of insecurity in Italy
"A person who has studied and who has a family is a good person"	Local support provided by the Arab community
People from Eastern Europe	Violence and aggression against migrants

The next step taken by the work group was to integrate¹ the categories identified into four macro-families: *Travel and initial impact with the country*, *Conditions of life*, *Contact and Stereotypes*, *Future*. The first code-family groups together various experiences and the experiences of travel until arrival in Italy, which is a time usually distinguished by an emotional and optimistic view, which often turns into disillusionment, following the early experiences in the country. The second code-family describes the immigrant's experience within the country at an individual and community level and in reference to the conditions of life. Here the variables regard the importance of having proper documents, a residence permit and employment contract, as well as good housing conditions, which mainly refers to non-seasonal workers. Another issue of major importance concerns the immigrant's modalities of communication and relations with other immigrants, as well as with the natives of the host-country.

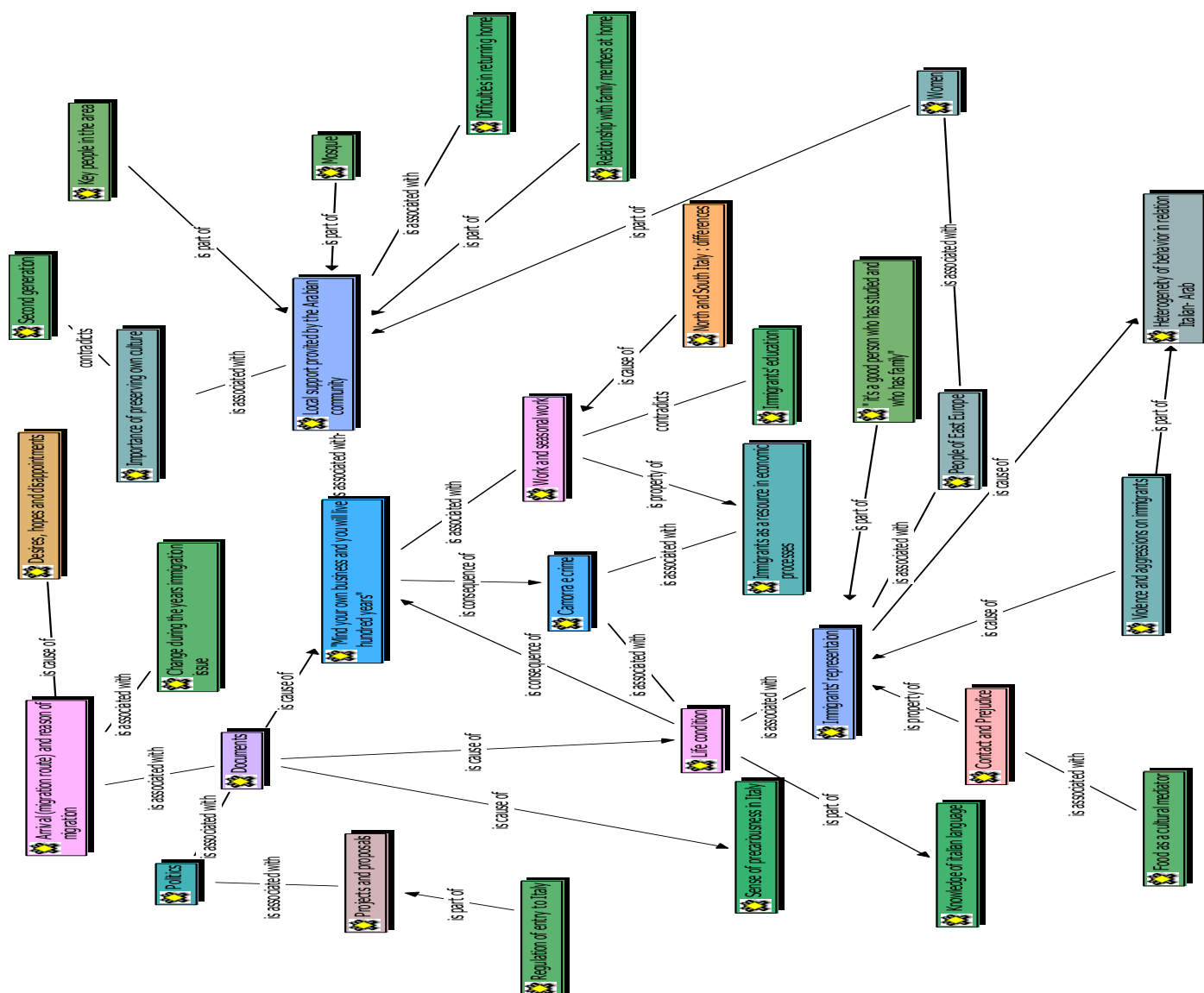
two types of coding are artificial and for explanatory purposes only, to indicate to readers that though we break data apart, and identify concepts to stand for the data, we also have put it back together again by relating those concepts"

¹ Integration is the process of linking categories and refining and trimming the resulting theoretical construction. Strauss and Corbin, 1998)

There are notable differences in immigrants' relationships with native Italians of the host country, depending on their origin from the various African, Asian and Eastern European countries, as well as the attitudes of Italians towards immigrants in general, and towards specific ethnic or national groups. Another factor is the presence of prejudices and stereotypes among immigrants regarding various other ethnicities and nationalities. In general, among all the groups concerned there appears to be the view that the immigrant is a good person if he works and has a family. The representation of marginalized and delinquent immigrant often presented by the media does not seem to be expressed in the words of the interviewees, whether they be Italian or foreign.

Finally, the analysis of the last code family describes and shows the possible future scenarios in relation to both second-generation immigrants and to various projects and proposals for improvement in relations between natives and immigrants and their living conditions.

In the last level of coding (selective) two *Core Categories* emerged. These are the key categories that best expressed and explained the concepts at the basis of the interactions within the local context examined and the logic underlying the fundamental separation between the various ethnic groups. The first of these categories: *"Mind your own business and you will live a hundred years"* (in vivo code) explains how the groups interact while keeping separate from each other. This demonstrates how separation is not just a strategy of the immigrants, but of the natives themselves and the reciprocal social context. The second of these categories: *Local support provided by the Arabian community* shows us how in a regime of separation the minority community of origin has an important function of support. The following network illustrates relations between the categories and concepts previously described, and it led to the discovery of these two Core Categories.. The core categories identified open up a debate on the theme of acculturation, tending to confirm the theories of the scholars who have analyzed the reciprocal processes involved in relationships between immigrants and host communities, often criticizing the univocal interpretation put forward by Berry (Dinh & Bond, 2008).



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Développement, femmes, migration: les enjeux de la mondialisation et la quête de reconnaissance sociale

par Maria Inácia D'Ávila¹, Simone Peres² & Gabriel Jardim³



Une recherche en cours insérée au champ des Études Culturelles et Postcoloniales représente une contribution sur la participation des femmes migrantes et pauvres dans le développement soutenable, en essayant à comprendre ses identités à travers la diaspora, dans ses conditions de *culture hybride et fluide* (Hall, 2007).

Les débats sur le polémique rôle des femmes dans le processus de la mondialisation et du développement sont toujours nécessaires, dus à la maintenance des structures du travail 'invisible', ou de ménage, qui n'est pas inséré dans les chaînes de production (D'Ávila Neto, Nazareth 2005). Ce qui est déjà corroboré dans la division sociale et sexuelle du travail est la transformation de la sensibilisation de la femme et des valeurs sociales produits aux dernières décennies du siècle XX. Rendre des services de caractère informel est une alternative pour les femmes pauvres dans les pays en développement comme le Brésil: la plupart des femmes qui migrent pour des régions plus riches cherche des meilleures conditions de vie ou des emplois temporaires. (MacDowell, 2008)

La lutte pour la reconnaissance sociale est fondamentale pour la compréhension de cette grammaire morale des inégalités. Des auteurs comme Honneth (2003) et Fraser (2005) apportent un important appui théorique en examinant ces questions, en passant par des différentes dimensions, comme ethniques ou de genre, par exemple. Ainsi, ce sont identifiées pas seulement des demandes primaires de reconnaissance comme l'amour, l'amitié, ou des droits civiles / humains, de solidarité, enfin, des demandes de reconnaissance des identités qui ont un côté culturel – dans un sens plus large – des populations et en même temps des demandes économiques par rapport à l'aspect de la redistribution et qui nous mènent aux questions du pouvoir, comme observés par Nancy Fraser (2001), en se référant à la question du genre : « *Bref, le genre constitue un groupe mixte. Il comprend un aspect économique qui le situe dans le registre de la redistribution mais il comprend également un volet culturel qui le situe simultanément dans le registre de la reconnaissance* » (Fraser, 2001).

Les antagonismes du pouvoir peuvent être observés au-delà de l'État, comme dans des relations et des institutions de la société civile: dans les associations volontaires, à l'éducation, dans la famille, la vie religieuse, dans les organisations culturelles et les relations privées, dans les identités de genre, sexe, ethnie, etc. (Hall, 2007). Les opprimés, dominés ou défavorisés ne sont pas des blocs homogènes, Il faut considérer dans la recherche participative la complexité socioculturelle des oppressions. Donner la voix aux opprimés ne met pas en

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évidence tous les types d'oppression, comme par exemple, de genre/sexe dans ses droits et identités d'appartenance. Il y a plusieurs autres fronts de combats et d'antagonismes qui caractérisent le pouvoir dispersé (D'Ávila Neto, 2004). Ce pouvoir dispersé est observé dans les dimensions d'une culture hybride, fluide et 'fragmentée', plusieurs fois pas logocentrique qui s'exprime en tant que 'groupe culturelle ment minoritaire' par son corps, ses arts de tisser, broder, cuisiner, prendre soin, sa musique et sa danse (Braidotti, 2000; Hall, 2007, D'Ávila Neto, 2005). Les femmes brésiliennes des couches plus favorisées, avec prédominance de couleur de peau claire, sont réussies à surpasser cet étage de corps comme seul capital culturel et ont accédé à la culture logocentrique, en dominant la lecture et l'écriture.

Pour investiguer l'univers de ces femmes migrantes, comme par exemple les femmes du Nord-est, qui migrent des régions pauvres du Nord-est du pays vers des régions plus favorisées économiquement, comme celles des grandes villes – Rio de Janeiro et São Paulo (toutes les deux dans la région Sud-est) on est en train de réaliser une recherche avec des techniques de vidéo et vidéofeedback, une fois que très peu de ces femmes ont eu accès à la culture écrite et alphabétisée. Plusieurs entre elles n'arrivent qu'à dessiner leurs noms. En plus, les techniques de registre visuel nous permettent d'utiliser ce qu'on appelle de vidéofeedback, ou soit, une réflexion des propres interviewées au tour des thématiques choisies en caractérisant une recherche participative avec l'aide du vidéo (D'Ávila Neto, 2007).

Dans notre travail, 3 groupes, de différentes tranches d'âge et générations, de 3 régions de Rio de Janeiro: Zone Ouest, Zone Sud et Banlieue ont été observés. Ce qui nous a intéressé a été de rechercher la trajectoire de ces femmes, leurs attentes, rêves et buts dans ce parcours migratoire. On vérifie qu'elles apportent un ensemble culturel, matérialisé par ses différentes pratiques quotidiennes et habitudes, enfin, toute une forme de voir le monde, reconfigurée dans un nouveau territoire culturel. Cette reterritorialisation, malgré étant du même pays, a sa propre diversité, en nous guidant vers un hybridisme culturel, en même temps qu'en dévoilant l'inégalité sociale.

Bien qu'elles soient en pleine bataille pour la reconnaissance sociale et pour des meilleures opportunités et conditions économiques, aujourd'hui à Rio de Janeiro elles occupent des travaux temporaires ou de ménage, comme des femmes de ménage ou des bonnes d'enfants, par exemple. Il faut trouver une nouvelle grammaire du temps, une nouvelle culture politique qui puisse assurer ce nouveau monde postcoloniale afin d'assurer aux femmes défavorisées ce qui Boaventura Santos (2006) indique comme « l'écologie de la reconnaissance ». Il faut établir une grammaire morale des conflits sociaux (Honneth, 2003; Fraser, 2005) si nous prétendons des politiques sociales plus efficaces dans une perspective dite *globalisée* du développement, qui doit être sensible, avant tout, aux différences, sans hégémonies qui prêchent une fausse reconnaissance. (Santos, 2006; Honneth, 2006).¹

Ce travail intègre une vaste recherche sur les Femmes Migrantes Brésiliennes sous la perspective de reconnaissance sociale, dans le procès de globalisation contemporain, développé par le Laboratoire des Images et données du Programme EICOS – Études Interdisciplinaires de Communautés et Ecologie Sociale de l'UFRJ -, Institut de Psychologie, Université Fédérale de Rio de Janeiro (UFRJ).

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Des femmes migrantes, actrices du développement ici et là-bas.

par **Annick Durand-Delvigne¹, Sylvie de Chacus¹, Marie Agbessi¹,
Sabine de Bosscher¹ & Caroline Desombre¹.**



Dans le contexte économique actuel couplant globalisation et migration, la part des femmes est de plus en plus importante. Le début des années 90 se caractérise par la féminisation croissante des flux migratoires. En 2000, les femmes représentent 49 % des migrants internationaux (OIT, 2003). Dans certains pays, elles représentent la majorité des émigrants.

Pendant longtemps, cette migration féminine s'est faite dans le cadre du regroupement familial : on les appelait alors « les rejoignantes ». Actuellement, c'est essentiellement une migration de travail.

La migration des femmes : de nouveaux visages ?

Les femmes migrent de plus en plus de manière indépendante, à la recherche d'un travail ou de promotions sociales et économiques. Les expériences et les stratégies migratoires des femmes se diversifient. Cela se pourrait se traduire par un gain en visibilité, en reconnaissance, en autonomie et par une meilleure mise au jour de leur participation au développement, ici et là-bas. Cependant, leurs rôles au niveau social et économique sont encore insuffisamment peu reconnus dans les pays d'accueil.

Par ailleurs, cette migration féminine a des impacts positifs sur les zones d'origine par le soutien à la communauté, l'aide financière à la famille et la création ou le renforcement de nouveaux modèles de rôle pour les femmes au pays.

Enfin, cette migration des femmes réactive la question des rapports sociaux de sexe : met-elle du jeu dans le système des rôles de sexe, peut-elle contribuer à l'autonomisation des femmes ainsi qu'à la création de nouveaux modèles ?

Développement durable et inégalités sociales : la part des femmes

Un programme de recherche participative, inscrit dans le projet « rapports sociaux de sexe, travail et transition » de la MESHS de Lille, est conjointement mis en œuvre auprès de femmes migrantes originaires de l'Afrique subsaharienne en France et de femmes ayant migré de zones rurales pauvres vers des mégapoles au Brésil. Vivant dans des contextes socio-économiques et culturels différents, elles ont en commun de faire face, non seulement à l'antagonisme matériel et symbolique caractérisant les rapports sociaux de sexe sur lequel repose l'économie des sociétés, mais aussi, plus spécifiquement en tant que migrantes, aux difficultés d'accès aux ressources

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(logement, emploi, santé, éducation pour leurs enfants) tout en étant des actrices sociales du développement par la solidarité et la mise en commun de leurs savoirs faire : artisanes, elles destinent une partie des ressources financières de leurs produits, souvent mis en valeur au sein de coopératives (ex : commerce équitable), aux zones géographiques dont elles sont originaires, actrices sociales donc du développement, ici et là-bas.

Notre objectif est de retracer de manière synthétique, pour le versant français, la trajectoire individuelle et communautaire de femmes africaines immigrées dans le Nord de la France.

Sous l'impulsion d'une leader communautaire, elles sont parvenues, d'une situation d'isolement et de santé mentale fragilisée par un fort sentiment d'inutilité sociale, à la construction d'un réseau informel puis d'une association, encore fragile mais reconnue par les collectivités territoriales, leur permettant de développer des activités, liées au commerce solidaire, génératrices de revenus et, par là, prémices d'une autonomisation (*empowerment*).

Un engagement personnel devenu un projet collectif

La réalisation collective dont il est question ici s'enracine dans l'engagement et la volonté d'une personne : Jeanne. Dans les années 70, apparaît un grand besoin de formations pour les femmes issues de l'immigration. Comme beaucoup d'étudiantes, Jeanne s'est engagée auprès d'associations agréées. La loi sur la formation continue des adultes a créé l'opportunité de mettre en place des formations d'alphabétisation et de français, langues étrangères au profit de femmes migrantes venues alors pour la plupart rejoindre leur mari dans le cadre du regroupement familial. Dans les années 80, elle participe à de nombreuses formations pour des femmes.

La problématique de la santé mentale est, très rapidement, perçue comme préoccupante à Jeanne. L'isolement voire l'enfermement et le sentiment d'être inutiles avaient un effet dépressif sur ces femmes qui avaient toujours travaillé. Elle comprend très vite qu'il fallait aller beaucoup plus loin que l'apprentissage de la lecture et de l'écriture. Sa volonté était de combattre ce sentiment d'inutilité et dit-elle « de nous valoriser mutuellement ». Elle s'appuie sur le réseau d'entraide et de d'échanges réciproques que les femmes reconstituent spontanément comme dans le pays d'origine.

Un problème émerge très vite, celui de l'opposition des maris (crainte que leurs épouses délaissent les activités domestiques, problème de leur présence dans un espace public, remise en cause des rôles sexués traditionnels etc...). Mais la principale difficulté était la relation avec les organismes de formation qui n'avaient aucun intérêt à aller au delà d'un contenu pédagogique classique dans des stages que les formés reproduisaient périodiquement pour assurer quelques revenus aussi bien pour eux que pour les formateurs. Pour rompre ce cycle de dépendance mutuelle, il fallait démontrer l'intérêt d'introduire une activité économique dans la formation. A partir de 1990, Jeanne change de stratégie : elle s'implique dans la vie de la commune et dit et répète au Maire et à ses conseillers que les femmes représentent un taux élevé de participation dans les formations mais qu'elles représentent aussi un taux élevé de chômage. La formation doit déboucher sur des activités. « Il fallait faire front », dit-elle « se battre pour imposer un autre fonctionnement où ce sont les femmes elles même qui produisent leur vie et leur autoformation ». « Je suis copilote, elles sont à la barre ». Il a fallu faire émerger toute

leur autobiographie et qu'elles mesurent à chaque étape leur évolution et leurs besoins. Ainsi, toute l'action est devenue un projet commun à tout un groupe, reconnu par les institutions, un projet porté par le groupe déchargé des médiateurs associatifs.

Jeanne envisage alors une structure qui permette une activité rémunératrice reconnue et davantage valorisée. Elle tente un premier test par la création d'une manifestation culturelle, le temps d'un week-end : un marché avec des échoppes à l'africaine. Dès ce moment, le commerce équitable est apparu comme une solution, il permettait de fournir une rémunération digne dans les pays d'origine et permettait aux femmes immigrées, ici, de sortir de l'isolement et de faire face ainsi à leur problème de santé mentale. Un aspect essentiel de cette stratégie était, en dehors de la rémunération, de gagner en visibilité et reconnaissance. Un projet de marché artisanal, intitulé marché international local (du fait de la diversité d'origine) a vu le jour en 1996. Il a pu bénéficier pendant plusieurs années de l'accompagnement de divers organismes de formation et de dispositifs financiers européens. En 2001, Jeanne est élue aux élections municipales, chargée du développement durable de la ville.

Elle travaille alors avec une dizaine d'associations qui sont en demande de la création d'une plate-forme. Des échanges commerciaux existaient déjà, à l'initiative de femmes africaines, mais qui n'étaient reconnus de personnes. En 2001, le projet devient un projet municipal pour une meilleure visibilité et une implantation sécurisée. Les produits vendus sont fabriqués par elles (bijoux, couture, restauration), certains sont achetés en Afrique. Après une période transitoire difficile (kiosques mobiles installés à l'extérieur d'un centre commercial), il voit le jour en 2009. C'est un exemple unique de commerce équitable mis en œuvre et géré par des femmes originaire des pays.

Perspectives

Au sein de ce groupe, et avec les participantes, nos objectifs actuels sont de rendre compte auprès des partenaires institutionnels et de la communauté scientifique, de cette recherche participative en tant que processus (visant le développement local, la promotion et la solidification institutionnelle de leur groupe) et en tant que produit évolutif (représentations des rôles de sexe et dynamiques identitaires de genre, estime de soi, sentiment d'efficacité personnelle et groupale, représentations du travail, représentations des relations de pouvoir formel et informel, représentations des jeux et enjeux politiques environnant leur groupe).

Les changements travaillés actuellement touchent plusieurs niveaux : les niveaux individuels (en termes de ressources et d'action, amélioration de la qualité de vie pour la personne et ses proches, dont les enfants, les filles en particulier), les niveaux institutionnels et les niveaux structurels de genre et de « race ».

Fighting inequality and promoting social integration: migrant women, actors of social development

by **Annick Durand-Delvigne¹, Sylvie de Chacus¹, Marie Agbessi¹,
Sabine de Bosscher¹ & Caroline Desombre¹.**

A participatory research program is jointly implemented with migrant women from Sub-Saharan Africa in France and with women who migrated from poor rural areas to big cities in Brazil. Living in different socio-economic and cultural contexts, what they have in common is to address, not only tangible and symbolic antagonism that characterize sex social relation underlying the economies of the societies, but also and more specifically as migrants, difficult access to resources (housing, employment, health, education for their children) as social development players through solidarity and combination of their skills : handicraft women, they devote part of their financial resources derived from their products, often valued within cooperatives (for example fair trade) to geographic areas they hail from, hence becoming advocates of development here and over there. We summarize here, the individual and community history of migrant African women in the North of France. Our aim is to give an account of the participatory research as a process (targeting local development, promotion and institutional strengthening of their group) and as a product in progress (representation of sex roles and gender dynamic identities, self-esteem, feeling of individual and group efficacy, representation of work, representation of formal and informal power relations and representation of the political games and stakes surrounding their group), indication of empowerment.

Social Development and recognition in the contexts of migration: the share of women

Women increasingly migrate independently in search of work or social and economic developments. The migration experiences and strategies of women are becoming more diverse. This could result in a gain in visibility, recognition, self-reliance and in better updating of their participation in development here in the host country, and there, in the country of origin. However, their roles in social and economic development are still insufficiently recognized in some host countries. In the contemporary context of globalization, marked by permanent migration, the project of social sustainability of development, the proposal to promote a state of harmony between human beings (the Brundtland Report, 1987), faces the issues of poverty, vulnerability and social inequality. In the social grammar of inequalities (Honneth, 1996)), and in connection with intra- and international migration flows, the feminization of labor and the feminization of poverty (Nazareth, 2003) constitute one of contemporary issues on social justice. Migrant women experience the double situation of economic injustice and cultural injustice to which, according to Fraser (2005, 1997) Fraser and Honneth (2003), two types of solutions could respond: redistribution and recognition. As far as we are concerned, it is this second dimension of social justice that we have chosen as a

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focus of our research given that few empirical studies have previously examined the issue of recognition of the participation of migrant and poor women in socially sustainable development.

A participatory research in progress

The general objectives

A participatory research program, included in the project "gender relations, work and transition" of the Lille MESHS, is jointly implemented among migrant women from sub-Saharan Africa living in France and among women who migrated from poor rural areas to mega-cities in Brazil. Living in different socio-economic and cultural backgrounds, they must face in common not only the material and symbolic antagonism that characterize gender relations underpinning the economy of society, but also, more specifically as migrants, they face the lack of access to resources (housing, employment, health, education for their children) while being social development stakeholders through solidarity and the putting together of their technical know-how: as artisans, they devote a portion of the financial resources of their products, often highlighted in cooperatives (e.g. fair trade), to the geographical areas from which they originate, they are therefore social stakeholders of development, here and there.

This participatory research is implemented as a process (for local development, promotion and institutional solidification of their group, individual and community empowerment) and as an evolutionary product, representational of work, self and power social rapports at work and outside work.

Specific objectives

More formally, the goals that are specific to the collaboration of the two teams, Brazilian and French, were as follows:

- 1) Study the dynamics of representations of labor, gendered identity and the daily life (private and public) of unprivileged migrant women.
- 2) Identify the local potential at the level of associations, leadership, cooperatives, which may participate in the recognition and empowerment of those women
- 3) Promote local development activities and contribute to the sustainability of achievements;
- 4) Promote actions for upgrading women's skills as cultural elements to preserve and / or to renew, in the form of the construction of a database and images box;
- 5) Design and/or enhance research networks from data stored in the base, consultations of which can be made online at the site of the UNESCO Chair on Sustainable Development of UFRJ, EICOS program.
<http://www.eicos.psycho.ufrj.br/>

The current research on the French side

The commitment of the French team is to contribute, in the medium term, to the first three objectives listed above, and based on the principles of participatory research, using repeated individual and group observations and interviews.

In France, the group taking part in the research was built mainly through the commitment and the will of a woman and her own experiences as migrant. The isolation or confinement and a sense of uselessness had a depressive effect on these women who, in their home country, had always worked. At her instigation, from the network of support and reciprocal exchanges that the women had spontaneously reconstituted following the example of their country of origin and on the basis of informal trade with Africa led by some of them, they have developed an association project which, linked to the equitable approach, could ensure a decent wage in the country of origin and allow migrant women to escape their isolation. Besides the compensation, the explicit aim was to gain visibility and recognition.

Currently, they have managed to establish a business of handicrafts made by themselves and/or bought from Africa, in a fair trade center supported by the municipality's website.

The changes updated, in and through research, involve several levels: individual levels (in terms of resources and action), institutional levels including the effective recognition of their roles in the social and cultural life of the city as well as structural levels of gender and "race" observable in families where traditional gender roles were troubled, sometimes, to the extent of inversion (husbands becoming women traders' assistant) and within their customer base. They managed to reach, from a situation of isolation and mental health weakened by a strong sense of social uselessness, the establishment of an informal network and an association, which is still fragile but recognized by local authorities. The construction and solidification of this integral structure gave them the means to develop economic resources generating activities but also cultural activities. This actual success – a unique example of fair trade implemented and managed by women from the countries concerned - but still precarious, allowed them to have access to an individual self-esteem, to develop a strong sense of efficacy and fulfillment.

However, questions remain, mainly related to the dynamics of identity, power and recognition. We give two examples: first, the centering of this site solely on crafts and trade products from Africa by African women is a real risk of *ghettoization* that locks them into an assigned polarized identity. On the other hand, an ambiguous relationship has been created between them and the intellectual elite, including women of the African community in France. Manipulated, they are vulnerable to these elites with strong social and cultural resources that do not resist the temptation to appropriate the "ownership" of their achievement or to try to take leadership for their own notoriety. They have to fight so that the now acquired recognition of their work could not escape them.

Discussion: prospects and challenges of participation

This research is ongoing. Our future prospects will be, with participants, to report to institutional partners and the scientific community on the dynamics of processes that contributed to local development, promotion and institutional solidification of their initiative. Cooperative synergy promoted the expression of initial feelings of subjugation and permitted the realization of their strength, their actual skills, and their own values. This proactive

process resulted in the modification of representations: representations of gender roles and gender identity dynamics, self-esteem, feeling of self and group efficacy, representations of work, but also representations of formal and informal power relations, representations of political games and stakes surrounding and crossing their group. On these last two points, and midway through this research program, it is clear that we must maintain critical vigilance towards the participatory methods, especially by being attentive to the complex issues associated with them. No group, be it oppressed, is homogeneous. It is segmented, crossed by antagonisms, contradictions and issues related to power struggles. Being aware of these antagonisms within the group constituting what Gramsci called the dispersed power as recalled D'Avila (2005), leads us to asking ourselves how to integrate and materialize them in the latter stages of the program. This is one of the difficulties of participation, or rather, one of its challenges to achieve its aim of *empowerment*. For the group, the challenge is therefore that these women remain, at their extent, development actors, both here and over there.

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L'adaptation socioculturelle et psychologique des femmes immigrées au Pays Basque

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Introduction

Les derniers 15 ans le Pays Basque (Espagne) a reçu beaucoup de personnes procédant d'autres pays qui émigrent en cherchant une nouvelle vie pour elles et pour ses familles. Quand ces personnes arrivent aux pays d'accueil elles cherchent une stabilité socio-économique, mais en plus, elles doivent comprendre les différences entre les deux sociétés, et en conséquence elles passent par un processus d'acculturation (Smith y Bond, 1993). Ce phénomène a été étudié par différents disciplines et modèles, théories. Quand l'objectif principal c'est connaître l'effet psychologique du processus, Berry (2005) fait une classification des différents travaux et il propose trois niveaux d'effet: a) le plus facile, le groupe d'investigations qui défendent les modèles d'apprentissage culturelle au changement socioculturel (Ward, Bochner y Furnham, 2001) ; b) le deuxième niveau c'est un peu plus difficile, et c'est le groupe d'investigations qui parlent du stress et du bien-être (Diener, Emmons, Larsen y Griffin, 1985); c) et le dernier niveau c'est quand le processus c'est si difficile que les personnes ne peuvent pas faire face et on doit étudier la situation avec les modèles classiques de la santé mentale.

Le objectif de cette travail c'est examiner la situation socioculturel de deux groupes culturelles de femmes immigrées qui habitent au Pays Basque, celles du Maghreb et celles des pays Latino-Américaines, et connaître l'effet du processus d'acculturation dans le bien-être et la santé mentale.

L'hypothèse de travail c'est que les femmes avec plus de distance culturelle, celles du Maghreb, elles auraient plus de problèmes socioculturelles et plus de stress, moins satisfaction avec la vie et plus présence de symptomatologie, que les femmes qui ont moins de distance culturelle, celles des pays Latino-Américaines.

Méthodologie

Échantillon

Dans cette investigation 185 femmes ont participé, le 27,32% viennent du Maghreb et le 72,68% des pays Latino-Américaines. Elles ont 36,75 ans, le 72,7% est venue au Pays Basque pour motives économiques, le 9,3% a problèmes avec la situation juridique et le 4,9% avec le logement, et le 12,1% n'a pas de travail.

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Questionnaire

On a utilisé un instrument fait pour l'équipe de recherche qui groupe les facteurs sociodémographiques qui décrivent la situation socioculturelle. En plus, on a ajouté des échelles étalonnées pour mesurer le stress (Perceived stress scale, PSS-14, de Cohen, Kamarak et Mermelstein, 1983; version espagnole, Remor et Carrobbles, 2001), satisfaction de la vie (Scale with life satisfaction, SWLS, de Diener, Emmons, Larsen et Griffin, 1985; version espagnole, Atienza et cols., 2000) et la santé mentale (Primary Health Questionnaire, PHQ, de Spitzer et cols., 1999; version espagnole, Diez-Quevedo et cols., 2001).

Résultats

Situation socioculturelle

Dans le situation au le profil socioculturel on étudie les caractéristiques sociodémographiques et la situation que les femmes immigrantes vivent dans la nouvelle société.

Les femmes qui participent dans l'étude ont vers 36 ans et ça fait entre 4,5 et 5 ans qu'elles habitent dans le Pays Basque. Le niveau d'espagnol c'est bas-moyen dans la plupart des femmes du Maghreb, les différences sont significatives en comparaisons avec les Latines (relation directe avec l'origine culturelle). Il y a aussi différences significatives dans la formation, le niveau c'est plus haut dans les Latines. Les motifs migratoires pour les femmes du Maghreb sont diverses, pour contre, les Latines émigrent surtout pour motifs économiques.

Tableau 1. Caractéristiques sociodémographiques

	MAGHREB	AMÉRIQUE LATINE
Age	36,1	36,8
Mois au Pays Basque	61,3	50,2
Langue (espagnole) ($X^2(2)=116,45;p=,000$)		
Bas	43,8%	--
Moyen	37,5%	1,3%
Haute	18,7%	98,7%
Education ($X^2(3)=28,01;p=,000$)		
Sans études	14,3%	--
École	23,8%	12,4%
Lycée	42,9%	52,8%
Université	19%	34,8%
Motifs migratoires ($X^2(4)=23,95;p=,000$)		
Économiques	33,3%	77,8%
Politiques	14,3%	1,9%
Education	9,5%	6,8%
Agrouper avec la famille	23,8%	6,2%
Autre	19%	7,4%

En relation avec la situation des femmes immigrantes dans le pays d'accueil on observe que moins du 10% de l'échantillon a des problèmes pour acquérir les documents de résidence et entre le 10% et 20% pour avoir un travail. La situation c'est pareil pour les femmes du Maghreb et de l'Amérique Latine, mais les problèmes de logement sont différentes: le 19% des femmes du Maghreb a des problèmes mais seulement le 3,1% des Latines ($X^2(1)=10,04;p=,002$).

Le numéro de femmes qui ont différentes nécessités dans le pays d'accueil c'est pareil dans les deux groupes. On peut voir qu'avoir ou améliorer le travail et le logement, sont les nécessités plus demandées.

Finalement, les niveaux de contact et soutien sont moyens. Les différences entre les deux groupes, ils ne sont pas significatifs. En tout cas, le contact et soutien sont plus hauts avec le groupe autochtone qu'avec le groupe de son pays.

Tableau 2. Situation Dans le Pays d'accueil

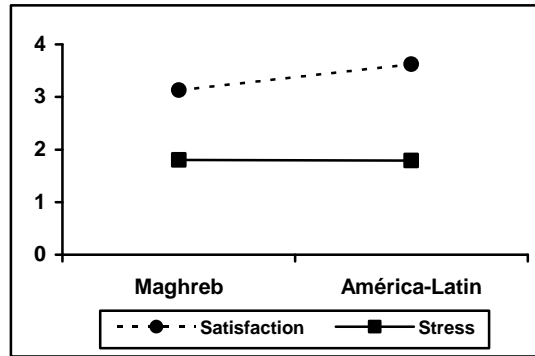
	MAGHREB	AMÉRIQUE LATINE
Problèmes en:		
Situation juridique	4,8%	9,9%
Travail	19%	11,2%
Logement ($X^2(1)=10,04;p=,002$)	19%	3,1%
Nécessités		
Documents	19,1%	23,5%
Assistance médicale	14,3%	14,8%
Assistance psychologique	16,7%	29%
Assistance social	13,3%	34%
Travail	33,4%	49,4%
Logement	23,8%	35,8%
Information	4,8%	11,7%
Contact		
Population autochtone	3,80	3,55
Population de son pays	2,71	3,04
Soutien		
Population autochtone	3,23	3,23
Population de son pays	2,74	2,72

Dimension psychologique

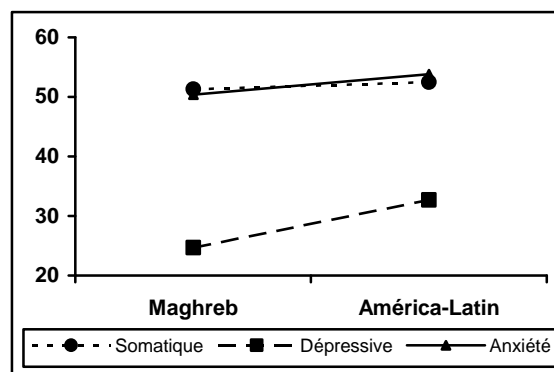
Les résultats montrent que les niveaux de stress de la population immigrant sont moyens et les niveaux de satisfaction sont assez hauts. Le stress c'est très pareil pour les femmes du Maghreb et de l'Amérique Latine (1,8 y 1,79 sobre 4) ($F(1,161)=6,93;p=,009$), mais la satisfaction est plus haute dans la population de l'Amérique Latine et les différences sont significatives (3,13 y 3,62 sobre 5), ($F(1,161)=,005; p=,942$).

La santé mentale, après près la moitié de l'échantillon présente symptomatologie somatique et de l'anxiété. Les symptômes dépressifs se manifestent entre le 25% et le 32,7% de l'échantillon. Dans tous les groupes symptomatiques, les différences ne sont pas significatives, c'est à dire, la santé des deux groupes culturelles est similaire (somatique ($X^2(1)=,045;p=,509$), dépressive ($X^2(1)=,488;p=,614$) et anxiété ($X^2(1)=,096;p=,807$).

Graphique 1. Bien-être



Graphique 2 : Santé mentale



On a fait des analyses de régression pour comprendre les facteurs sociodémographiques qui expliquent les niveaux de bien-être et de santé mentale. Ces analyses montrent des modèles valides seulement pour la satisfaction, et pour les symptômes d'anxiété et somatiques.

Ne pas avoir besoin d'assistance médicale, avoir contact avec son groupe culturel, connaître la langue, être dans le Pays Basque pendant 3-5 ans et ne pas avoir besoin d'assistance sociale, ces sont les variables qui expliquent le 20,9% de la satisfaction. Dans la symptomatologie somatique les variables explicatives sont avoir besoin d'assistance médicale et des documents, ne pas avoir soutien du groupe autochtone, être dans le Pays Basque pendant 3-5 ans, et, ne pas avoir besoin d'assistance sociale (17,4%). Finalement, les symptômes d'anxiété viennent expliqués pour les variables d'avoir besoin d'assistance médicale et pour ne pas avoir de travail (19,9%).

Tableau 3. Analyses de régression

	Satisfaction	Somatique	Anxiété
Entre 3 et 5 ans au Pays	,332	,809	--
Basque	,558	--	--
Connaître la langue	,360	--	--
Contact avec son pays	--	-,742	--
Soutien groupe autochtone	--	--	-,717
Travail	-,445	1,697	,709
Assistance médicale	-,539	-,735	--
Assistance social	--	1,28	--
Avoir besoin de documents			
Adj. R ²	,209	,174	,199

Conclusions

Les caractéristiques sociodémographiques et situationnels des femmes immigrantes montrent que leur situation dans le pays d'accueil est assez bonne, bien qu'elles ont différentes nécessités, surtout de travail et de logement, et, les niveaux de contact et de soutien sont moyens. Il y a des différences qui décrivent quelques inconvénients socioculturelles dans les femmes du Maghreb: le niveau d'espagnole et la formation est plus basse et elles ont plus de problèmes pour trouver un logement; les motifs migratoires aussi sont différents, la plupart de latines émigrent pour motifs économiques et les femmes du Maghreb ont des motivations différents (cela a relation avec les rôles migratoires des femmes du Maghreb et des pays Latino-Américains).

Les niveaux de stress et la satisfaction dans la vie sont moyens. Malgré ces niveaux de bien-être les femmes immigrantes montrent symptomatologie psychologique, surtout somatique et de l'anxiété. Les analyses montrent que la culture n'a pas influence dans le stress et la santé mentale des femmes immigrantes, mais par contre, il y a de différences dans les niveaux de satisfaction dans la vie. Les analyses de régression montrent l'influence des variables socioculturelles dans la satisfaction de la vie, et avec les symptômes somatiques et d'anxiété. Les résultats montrent différences significatives entre les deux groupes culturelles qui permettent de prédire la majeure détresse psychologique (satisfaction de la vie) des femmes du Maghreb.

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Opération d'urgence auprès des populations déplacées du Sud-Liban ; Juillet- août 2006

par Hyam S. Kahi¹



Le 18 juillet 2006, une semaine après le début de la guerre contre le Sud-Liban, *le Centre Universitaire de Santé Familiale et Communautaire (CUSFC)* de l'Université Saint Joseph met sur pied deux équipes mobiles formées de médecins, d'infirmières et d'assistantes sociales, assurant ainsi une présence sur le terrain. Ces équipes fournissent consultations, soins de proximité et soutien à la population du Sud-Liban déplacée en raison des hostilités et regroupée dans les écoles publiques.

Quelques jours plus tard, cinq nouvelles équipes rallient les deux premières.

Les consultations médicales sont bien souvent aussi l'occasion d'apporter un soutien nécessaire, de prodiguer des conseils individualisés et de donner, au cas par cas, les moyens de mettre en pratique les mesures d'hygiène. Mais très vite, elles s'avèrent insuffisantes en l'absence d'une prise en charge des conditions d'hygiène collectives vu le nombre important de déplacés et l'état des lieux censés les accueillir. Cela étant, plus de 20 personnes sont mobilisées entre infirmières, cadres pédagogiques de l'Université et étudiants en sciences infirmières et médecine pour veiller à l'hygiène individuelle et collective dans les centres de regroupement, effectuer les vaccinations nécessaires et assurer des permanences régulières de 6 à 7 heures/jour pour tous les jours de la semaine afin de dispenser soins et secours de première ligne.

La santé mentale et la prévention des traumatismes liés à la guerre sont également à l'ordre du jour. Cette dimension, dont l'importance est indiscutable dans ce genre de situations, est intégrée à l'ensemble des activités d'information et de formation.

Les activités d'urgence s'achèvent le 16 août 2006 avec la fin des hostilités et le retour des familles de déplacés pour reprendre sous une forme différente destinée à assister les populations dans leur mouvement de retour.

Le Liban est un petit pays dont la superficie ne dépasse pas les 10 542 Km². Sa population, formée de 18 communautés religieuses, s'élève à 4 millions. Près de 16 millions de Libanais vivent à l'étranger, constituant l'une des diasporas les plus nombreuses au monde.

De 1975 à 1990, le Liban est le théâtre d'une guerre civile aux facettes multiples. Les enjeux en sont libanais, mais aussi régionaux et internationaux.

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Le 12 juillet 2006, Israël attaque le sud du Liban.

Le bilan de la guerre est très lourd en victimes civiles et dégâts matériels. La guerre fait près de 1 200 morts et plus de 4 000 blessés. Environ le quart de la population est forcé de se déplacer, essentiellement vers Beyrouth, trouvant refuge chez des parents, des amis ou dans des centres de regroupement (*écoles, stades municipaux...*). Les dégâts matériels directs sont estimés à 3,6 milliards de dollars.

Face à cette situation, la société civile se mobilise. L'Université Saint Joseph de Beyrouth ne peut rester indifférente face à l'exode et aux malheurs de la population. C'est le début d'une autre forme de résistance: accueil de la population, hébergement des déplacés, préparation et distribution de repas chauds, organisation de secours d'urgence...

L'équipe du Centre Universitaire de Santé Familiale et Communautaire (CUSFC) de l'Université Saint Joseph est parmi les premiers à se mobiliser. En effet, le 18 juillet 2006 au matin, quelques membres de l'équipe du CUSFC se retrouvent spontanément et décident d'organiser des « cliniques mobiles » dans les centres de regroupement des populations déplacées situés dans le secteur géographique de l'université.

Dès la 2^{ème} semaine, l'équipe du centre sollicite : la Faculté des Sciences Infirmières, la Faculté de Médecine et le Département de Médecine de Famille. Plusieurs professionnels de la santé se mobilisent ainsi entre médecins, infirmières et assistantes sociales, sans compter le personnel administratif et de nombreux étudiants de la Faculté des Sciences Infirmières et de Médecine.

Deux genres d'équipes se constituent alors:

des équipes logistiques basées au centre universitaire de santé et chargées d'organiser les activités et d'assurer la coordination avec les différentes instances nationales et internationales impliquées dans les secours d'urgence (*structures étatiques, ONG, personnes-ressources...*)

et des équipes mobiles qui se déplacent dans les centres de regroupement des déplacés pour fournir des services de santé à travers les « cliniques mobiles ».

Trois axes de travail se précisent dans le cadre de ces cliniques mobiles :

- La santé physique, la prévention des épidémies et l'hygiène individuelle/collective
- La santé mentale et la prévention des traumatismes
- La formation des bénévoles

La santé physique

Les équipes des cliniques mobiles sont formées de médecins, d'infirmières et d'un étudiant en médecine, sciences infirmières ou service social. Leur mission se décline comme suit :

- La mise en place d'une clinique de fortune dans chaque regroupement : *1 lit, 2 chaises, le matériel de soins nécessaire, sous réserve du respect de l'intimité et des conditions d'hygiène...*

- La mise en place d'une infirmerie dispensant les 1ers secours
- Des consultations médicales: 7 ou 3 fois/semaine selon le besoin
- Des conseils d'hygiène (*avec distribution, au cas par cas, de sous- vêtements, savons, cuvettes, draps, etc.*)
- La vaccination contre la rougeole et la polio selon les recommandations de l'OMS pour la période concernée
- La distribution de médicaments, notamment pour soulager les maladies chroniques
- Et l'orientation des personnes nécessitant des soins hospitaliers vers les structures adaptées.

Les conditions de vie de ces populations et la promiscuité posent de sérieux soucis d'hygiène : 20 à 30 personnes/chambre, 30 à 40 personnes/W.C, absence de douches, problèmes de ramassage des ordures, de gestion de l'eau (*eau potable, eau d'usage, eaux usées*), d'égouts, etc.

Tous ces problèmes imposent une prise en charge urgente tant individuelle que collective.

Et ceci en vue :

- d'organiser l'entretien et l'hygiène des locaux
- d'améliorer les conditions d'hygiène collective (*entretien des WC, douches, locaux, gestion des déchets, des égouts...*)
- de dispenser une éducation pour la santé par petits groupes et individuellement (*prévention des maladies contagieuses, des poux, de la gale, des problèmes gastriques...*)

La santé mentale

Le 2^{ème} axe de travail porte essentiellement sur la santé mentale ou la dimension psychosociale, très souvent sous-estimée dans ce genre de situations.

En effet, les catastrophes qui s'accompagnent généralement de pertes douloureuses d'êtres chers, de biens matériels, ou encore de milieux d'appartenance laissent de graves séquelles dans la vie mentale de ceux qui les vivent. Précisons que les catastrophes liées à l'activité humaine (*guerres ou conflits armés*) génèrent, en général, davantage d'incertitudes, d'ambiguïtés et d'angoisses autant sur le plan individuel que collectif. Leur impact psychosocial sur la population est souvent beaucoup plus lourd.

Ceci nous amène à intégrer le volet « psychosocial » à notre plan d'urgence.

Il s'agit dans ce cas:

- d'accepter et de reconnaître les réactions psychologiques des populations déplacées ;
- de faire la différence entre les réactions normales de détresse et les difficultés psychologiques graves exigeant un suivi ;
- de mettre en place des activités susceptibles d'atténuer la détresse et de prévenir les traumatismes ;

- de répertorier et d'assurer la prise en charge des personnes nécessitant un suivi psychologique.

De nombreuses activités sont ainsi organisées dans les centres de regroupement pour :

- faciliter l'adaptation psychologique aux événements et en minimiser les impacts négatifs (*écoute, organisation, secours...*)
- rétablir le plus rapidement possible la régularité de la vie et du fonctionnement psychologique et social des individus et de la communauté (*régularité des repas, aménagement des locaux,...*)
- lutter contre le sentiment de peur et d'incertitude (*information régulière...*)
- restaurer le sentiment de confiance, d'autonomie et de contrôle (*soutien, renforcement, respect de l'intimité, des coutumes, des habitudes...*)
- préserver et reconstruire les réseaux naturels de soutien social (*contacts avec la grande famille, les proches, le voisinage, ...*)
- prévenir les escalades de panique (*éviter rumeurs et désinformation...*)
- constituer des réseaux de collaborateurs (*spécialistes de 2^{ème} ligne, ONG...*)

La formation

Très vite, le besoin de former les bénévoles se fait sentir. Ainsi :

Plus de 10 séances de formation sont organisées

Près de 300 bénévoles sont formés, sans compter les nombreuses rencontres de soutien à l'équipe de professionnels

La formation porte sur les thèmes suivants :

- L'hygiène :
 - personnelle: *mesures à prendre par les bénévoles eux-mêmes*
 - individuelle: *respect des us et coutumes...*
 - collective: *nettoyage/aération/moustiques, ramassage des ordures, traitement des déchets, évacuation des eaux usées, entretien des égouts*
 - alimentaire: *conservation des aliments...*
 - de l'environnement: *gestion de l'eau*
- Les « premiers soins psychologiques » : compétences de base en matière d'intervention psychosociale en situation d'urgence (*connaissance des réactions psychologiques, gestion du stress, gestion des conflits, détection et orientation...*)

La guerre de l'été 2006 se termine le 16 août 2006.

Pendant les 33 jours qu'aura duré cette guerre, la clinique mobile, dans ses 3 aspects, enregistre les réalisations suivantes:

- Entre 700 et 800 consultations médicales dans 7 centres de regroupement de déplacées ;
- Plus de 40 bénévoles mobilisés sur 33 jours ;
- Plusieurs séances d'éducation pour la santé animées :
 - auprès de femmes, de jeunes et d'enfants
 - en plus de 10 séances de formation de bénévoles (30 à 40/ séance)
 - et l'ébauche d'un manuel « *l'ABC d'une intervention médico-psychosociale en situation d'urgence* », en cours de préparation par l'équipe du CUSFC.

L'opération d'urgence, qui s'était achevée avec la fin de la guerre de juillet le 16 août 2006, a repris sous une autre forme pour accompagner le mouvement de retour des déplacés.

Cette Opération baptisée « Opération 7ème jour » par l'Université Saint Joseph se poursuit toujours, mobilisant étudiants, enseignants et personnel administratif dans des actions citoyennes auprès des populations en difficulté.

Romany (Gypsy) community, stigmas and preconceptions

by **Monika Krajcovicova**¹



Introduction

The image conjured with the word Roma (and its equivalents in other languages) now represents a man who leads a particular way of life, often alternating between places of residence, or living outside the law. The fictional picture has its origins, from the idealized Roma population in Western Europe during the Industrial Revolution, when they were, in literature, a symbol of an ancient, idyllic lifestyle, intrinsically linked with the land. The established middle age European image, of a "noble savage", pagan and living in amongst civilization, but in great need of having their souls saved through Christianity (Hancock, 2005, p. 111).

Still today, many people continue to take information of Roma from books, rather than first hand experience. Much of the population perceives the Roma as a stereotypical group of people with an increased propensity towards crime, a noncommittal attitude for work, an inability to learn current styles of living and unable to coexist, unable to learn and continually abusing the states welfare system. The results causing discrimination against the Roma, which in turn makes a large proportion of them, lose interest in participating with society. To date, not all Roma are willing to publicly acknowledge their Romany ethnicity.

Roma in Slovakia

The Romany minority in Slovakia have their own internal structure (except for sub-ethnic differences) consisting of the family – gender relationships, thereby discerning the nationality and identity of the Roma (ethnic, social), with levels of status within their own family, and then in the local community, being led by their "vajda" (leader of the community). The cultural identity of the Roma creates even more layers of social and cultural levels. Within the internal identity, there can be sub-ethnic differentiation (Lehozcka, 2006). It follows that the Romany cultural identity is heterogeneous, which increases the difficulty of presenting the topic.

Despite the fact that the Roma have obtained and declared their Slovak citizenship and claim to be Slovaks, the majority of the population have still maintained a social distance from the Roma for a very long time, being more tolerant of other minorities, than they are of Roma.

Prerequisites, reasons for official confirmation of Slovak nationality (the census act), by the Roma living in Slovakia may have objective and subjective reasons (Lehozcka, 2006, p. 42 to 49): a Consequences of long

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held attitudes by the state in the past - a complex trust and therapist approach towards Roma until 1989 (paternalism, Roma were regarded as backward people of Roma origin. They received status of ethnic minority after 1989; b/ Some Roma may be influenced by experiences of various discriminatory practices from within their environment and other negative attitudes in the form of inter-ethnic communication (ethnocentrism, xenophobia, discrimination, racism and various forms of extremism); c/ Other Roma can not bear the negative social situation accompanied with Roma, or living in settlements being concentrated in segregated communities and the way of life that takes place there, especially if there is an extreme form of loss of human dignity; d/ Some Roma are unable to cope with the loss of positive characteristics of their identity and feel they are gaining more negative ones, mainly social problems; e/ Others are unable to accept the fact that they belong to a minority group of low status called "low caste", which consists of a number of socio-psychological preconceptions.

Ethnic Identity and the Roma

Some Roma hold the opinion, that if they do not have their own homeland, they must then belong to the country in which they live. That country is considered their home and there they affirm their ethnic/ national nationality. The role of mixed marriages is also another factor, along side with the current, changing ethnic climate. Nevertheless, many of them are still interested in their own culture and native language. They consider these important attributes of their ethnicity, roots and identity, which they feel within themselves; even if the feeling is not that dominant.

In relation to the ethnic composition of its own population, the current Slovak Republic belongs to the most heterogeneous countries in Europe. The multi-ethnic character is shown, with the figures of which, at least of 20% of the population, being of "non-Slovak" ethnicity. At the same time its Roma minority, which is the second largest minority in Slovakia, places Slovakia amongst the most highly populated (Roma) countries of Europe, together with Romania and Hungary, and when calculated by a percentage share of the population, along side of Macedonia and Romania (Slovak Republic Government Office, 1998-2008). Currently in Slovakia, the Roma have divided into the groups of: Slovak Roma, Hungarian Roma and Olas Roma (Dubayova, 2001, p. 25).

Jurova (2003, p. 17) divided the Slovak Roma as follows:

Rumunger – In Slovakia, they represent the largest group, Roma which have been settled, for the last three hundred years. Although originally the label applied to the Hungarian Roma (Ungro).

Hungarian Roma - Roma Ungrika, according to the linguistic environment of the population majority.

Olas Roma - Roma, who came to Slovakia in the nineteenth century from Wallachia and Romania and had been travelling up until 1959 - Roma Vlachika.

Despite the absence of comprehensive historical research, we can clearly present the Romany population in Slovakia as a long standing and settled population. But today, they are in a very difficult situation, with their own ethno-cultural and ethno-emancipating development. Long periods of violent assimilation policies have encouraged the negative attitudes they have, towards their own ethnic cultural heritage, including language, overcoming fear, reluctance and inability (de facto ethnic uneducated and illiterate) to declare their ethnicity, which the majority of the population grudgingly accepts.

Stigma and preconceptions against Roma

Significant stigmatization, preconceptions and negative media coverage of topics called "Romany problem", "Romany problem", "Romany issue", do not contribute positively towards the Romany identity crisis, or help overcome the fragmentation of ethnicity and inexperience on the Romany political scene, like its repeated failure with elections and thus making it impossible to actively participate with decisions regarding their own ethnic developmental issues during the transformational process. Conversely, some previously mentioned factors which operated throughout the 20th century, such as the development and status of the Roma ethnic group, together with other factors, continue to deepen the enormous problems and risks of this minority group. The high number of long term unemployed, the collapse of whole communities within social networks, the deepening poverty in the settlements, worsening health conditions, inability to solve their own existential problems, increasing crime, aggression and growth of animosities between the majority and the Romany ethnic group.

Preconceptions toward Roma are also a concern in education, such as claims that Roma have a negative attitude towards education. However, research by Minova (2009) found these preconceptions to be invalid. „Roma claim that it is essential that their children go to school and learn Slovak. They consider pre-school education a good preparation for primary school“.

The problem viewed from the outside, is very often seen as the ethnic distinction and assessment of Roma, usually through visual anthropological characters (as the Roma suffer negatively). Racist prejudices by the majority, applied without distinction to all Roma and the display of various forms of distance behaviour, becomes a very difficult burden on the Roma.

This is highlighted by the "voluntary" waiver of his identity and the attempts of assimilation by the majority.

Geographically, the Roma minority is deployed throughout Slovakia and is particularly concentrated in the southern and eastern areas and specifically up until the 20th century, the Roma minority in isolated, backward settlements was barely surviving. The conditions and way of life for this minority are reflected by the marks left on the sites and regions inhabited (accumulation of poor, uneducated and culturally backward, huge population increases and also an increase in the number of settlements) with increasing environmental devastation and overpopulation in very close proximities. Romany settlements and residential groups of the very low socio-cultural level are negative consequences of the states approach, towards issues addressing housing the problems of its citizens. Post-war, Roma were refused integration into communities of the majority population (where they historically and administratively belonged). They were driven further into isolation from civilization.

In Slovakia there are still a lot of different defective Romany settlements (segregated and isolated settlements, separated or single street villages in rural locations, neighbourhoods and ghettos in the cities, settlements dissipated within the majority). Romany housing, together with some further specifics of their total way of life, is a frequent cause of conflict between the Romany minority and the majority of society, which culminates in tensions and is not a good example of coexistence (Rosinsky, 2006). According to the author, negative experiences are viewed as typical of the whole community. On this basis, some Roma inadequately respond in return, maybe even worse and then a vicious cycle begins.

Conclusion

A calculation and brief description of individual groups of Roma in Slovakia and in Europe is not and can not be exhaustive. Exploring the entire territory of Europe, the cultural "accommodation" acculturation competencies, social and economic pressures, often minimum requirements for everyday comforts of life and many other qualities, abilities and circumstances do not permit the perfect capture of the diversity, richness, cultural and social diversity of Romany groups. Although in the Europe there are still many exclusive culture-social groups, un-openness of the Romany community is still extremely strong.

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Photo 1 Living standard of a Slovak Romany family from the low social – economic level



Photo 2 Living standard of a Slovak Romany family of a higher social-economic level



Photo 3 One of the living standards of the Slovak Romany families in a city

Pathological gambling. Chinese community in Southern Italy

by **Gioacchino Lavanco¹, Mauro Croce¹, Carolina Messina¹,
Cinzia Novara¹, Floriana Romano¹ & Liana Arcuri¹**



Background

It is indicative to observe that, against increasing gaming opportunities, and the more evident problematic nature of the gambling (as reported by the news and by the mass media, and the data collected by public services and by voluntary organizations), it seems strange that the social policy is inadequate, and that large scale epidemiological research has not been carried out.

Gambling is formally forbidden by the Italian law, according to the Articles 718-72 of the Penal Code 2, while Art. 110 of the Social Welfare Act contains a list of illegal games. Namely, since the latter half of the 1990s, there has been a progressive and relentless offer of new games, of more and more opportunities to play different forms of gambling in different places, while the social problems linked to forms of gambling are becoming more and more evident alongside a lack of appropriate action. There are many indicators highlighting this dramatic change. The first one relates to the expenditure on different forms of gambling. From €7.73 billion in 1993 (value relative to the prices in 2006) to €54.4 billion in 2008.

This fact makes it difficult to evaluate the real dimension of the phenomenon, and of the cost/benefit relation related to increased gambling in Italy, for example about the strangers' gaming. This research conducted between October 2008 and February 2009 in Southern Italy had the objective to examine the prevalence of gambling behaviour and pathological gambling in a group of Chinese population.

Methods

This cross-sectional study investigated the psychosocial issues that can arise as either an antecedent to the gambling or a consequence of it. The research on Chinese people examined the relationships between various risky behaviours such as excessive drinking, smoking and problem gambling, too. This study was cross-sectional and investigative in design, involving the answers to a self-reporting questionnaire. Participants, recruited from multiple social structures (n = 81) were allocated to either an experimental group (pathological gamblers) or a control group (social gamblers).

The 16-item questionnaire was specifically constructed to measure psychosocial attitudes and beliefs across four subscales: (a) distress arising from gaming differences, (b) worry about social changes after gaming, (c) expectations involving the discrepancy between expected and real outcomes after gaming, and (d) dependence involving the desire for repetitive gambling. Each item was rated on a 4-point Likert scale across the range of

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“almost never”, “sometimes”, “often”, and “almost always”. Identical questionnaires were given to the participants in both groups. The questionnaire displayed high reliability and validity, with an overall Cronbach alpha of .88.

Results

Approximately equal numbers of participants were recruited for the two groups. Table 1 provides an overview of the data demographics for the whole sample, indicating that the highest number of participants recruited were in their 40's, and that the majority (>87%) were women.

A closer inspection of the two groups shows a difference in the mean ages, with participants from the control group in their 30's, as compared with the treatment group in their low 40's. Inferential statistics using nonparametric analysis demonstrated this difference to be significant ($p < .001$; Mann-Whitney $U = 453.5$).

Highly significant differences between the two groups were found ($p < .001$) using Mann-Whitney analysis across all four questionnaire domains. The Likert scores were higher for the treatment group (in the “almost never” and “almost always” categories) than for the control group.

Table 1. Sample demographics

	n	%
Control & pathological		
Control group	40	49.4
Pathological	41	50.6
Total	81	100
Age		
18-20	6	7.4
21-30	16	19.6
31-40	18	22.2
41-50	24	29.6
51-60	14	17.3
61-70	1	1.2
Not specified	2	2.5
Total	81	100
Gender		
Female	71	87.7
Male	10	12.3
Total	81	100

The profile of the control group was similar across the four domains, with the highest rating for the “almost never” item, followed by a reduction in reported scores for the other three items: “sometimes,” “often,” and “almost always” (Fig. 1).

With respect to the pathological group, there were some differences between scores across the four domains. Scores for both the distress and the worry domains were rated primarily on the “sometimes” item (Figs. 1 and 2). However, scores for the benefits domain were rated highest in the “often” category. Finally, the participants

reported “almost always” for the dependence domain, indicating that they agreed more saliently with this domain than any other (Figs. 3 and 4).

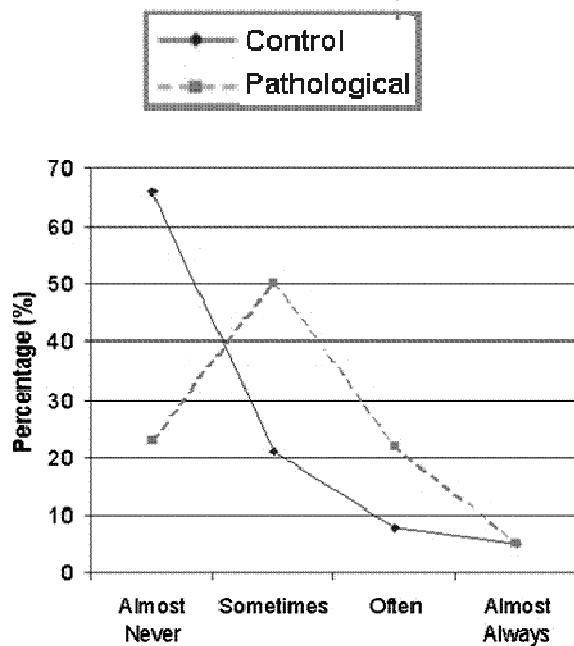


Fig. 1. Distress associated with gambling.

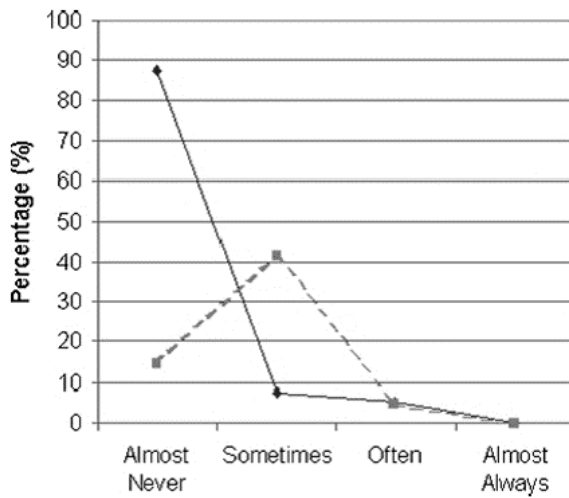


Fig. 2. Worry concerning changes.

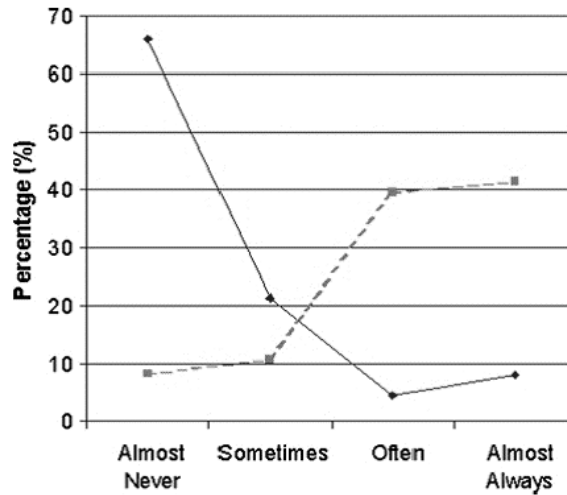


Fig. 3. Dependence.

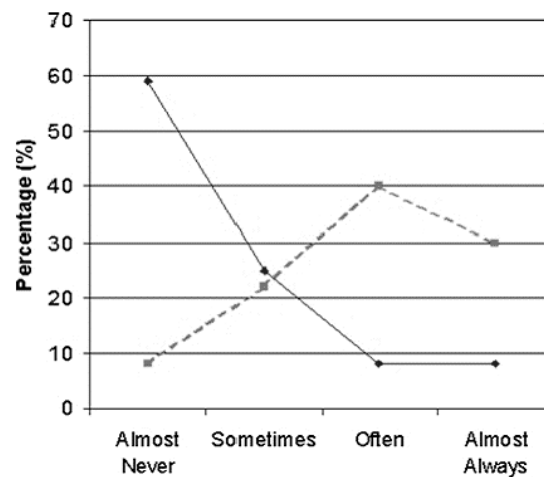


Fig. 4. Expectations.

Discussion

The results of this study clearly demonstrate that the psychological profile of pathological gamblers differs significantly from the profile of social gamblers. Across all areas of the model investigated (distress, worry, benefits, and dependence), more than 65% of the responses on the questionnaire were in the “almost never” range for this latter control group, indicating that psychosocial factors (particularly negative factors) do not play a major role in their decision to game.

In comparison, the pathological group demonstrated significantly higher scores in both the distress (Mann-Whitney $U=438.000$; $p<.001$) and worry (Mann-Whitney $U=175.000$; $p<.001$) domains, with 40% to 50% of the responses in the “sometimes” range. As predicted by the proposed model, the participants scored higher on the responses related to the expectations domain than on those related to the distress and worry domains. This supports the idea of a cognitive appraisal process in which decision making for the treatment is based on weighing the benefits against social conditions. In a few words, the results of this study provide support for this by

demonstrating that more than 40% of the responses in the dependence domain were in the “almost always” range of the Likert scale. This study suggests what are gambler’s expectations, which underestimate the social consequences of the game. This study highlights the importance of psychosocial characteristics inherent pathological gamblers. Pragmatically, it is a procedure that involves a higher level of physiologic distress during games, but it also is associated with more underlying psychological consequences.

Conclusions

The impact of gambling on the psychosocial functioning of individuals was investigated in this study from psychosocial and clinical perspective. Pathological gambling strongly is correlated with gambling out of habit, to relax, or to demonstrate personal skill through chance games (e.g., erroneous cognitions). These findings suggest the need to work on the prevention of pathological gambling. This study empowers the Chinese community in Italy to understand the basis for the relative contraindications of social gambling, and thus to ensure its diffusion in a safe and responsible manner.

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Migration and Women's Narrative

by **Maria Inacia d'Avila Neto¹ & Beatriz Aceti Lenz Cesar²**

The present work aims to reflect on the scope of narrative analysis in studies on women and migration processes of the inhabitants of poorer regions towards to the big cities. To do so, tried to articulate in discussing feminist studies, postcolonial studies, the question of recognition, which has been decrying narrative analysis as an important instrument of analysis in these fields.

Narratives are a form of communication with the environment. In this sense, taking power as revealing of social relations because they allow the subject to dwell upon their world view and their representations. Through the narratives people evoke memories of situations that happened, reports their experiences, sequence of these experiences and still play with the chain of events that build individual and social life (Jovchelovitch & Bauer, 2007).

The inclusion of narrative analysis in studies of the female condition came to power, considering these aspects of the relationship of the reports with the culture, social environment and subjective experiences formatted in this environment. According to Bruner (2002) the stories are personal constructions that blend a multitude of other stories, allowing access to a social and cultural factors shared. As already pointed out Benjamin (1994), narration is the ability to exchange experiences.

The connexion between the women's narrative in the context in which they emerge, addressing the analysis of social relations and the significance of gender in women's lives and society, has been the focus of several studies (Braidotti, 2000; Hirsch, 2002; Baptista, 2006; D'Ávila Neto & Baptista, 2007) whose concern is the construction of the female condition and how this construction was the casting or undergoing changes, in fact upgrading from criticism and reflection in the process of discussion on this subject, with a strong influence on women's lives. Within this perspective, the question that arises is what aspects of that favor a comprehensive understanding of women's studies in different contexts. The first step in this path was the realization that the narratives, given their conceptual characteristics, makes the common experience or the collective trajectory materialized through a first person (collective) of the singular, which is a self syntactic, as pointed Lefèvre (2006). Thus, while indicates the presence of a subject's speech, express a collective reference to the extent that self speaks for or on behalf of the collectivity. Following this line of discussion, the women's movement realized that found there was enough material to discuss important issues concerning the status of women, such as violence against women, sexual division of labor, dual employment, among others.

Later, with the reflections from the date of post colonial relativization, this theme was broadened to a perspective where within the same context of shares, for consideration of the female condition, attention would need to cross-cutting issues, taking into account the existence of differences within the difference. That is, generational

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differences, cultural, social class, race and ethnicity. Whether in the same or different continents. Be in different regions or the same. The debate was also enriched by discussion of studies on migrant women.

Mies (1993) had already pointed to the different needs of women from North and South. Similarly, we can see from the reflections made by D'Ávila Neto (2006). The author points out the income gap still exist between men and women, denouncing however, that this discrepancy is still very high in Latin America and even more problematic when it comes to women of lower classes. The range of perspectives represented coupled with the postcolonial studies, has pointed to significant reflections in the sense of trying to understand social and cultural aspects related to the female condition in this context. In other words, combining the inequalities arising from the difficult social condition that is embedded in the migration processes such as the plight of the female condition.

What has been observed is that the narrative analysis allows us to extract the real experience of the female condition, as suggested in reports of women. Women of flesh and bone, in the sense given by Braidotti (2000). An experience fraught with its own meanings. In this respect, no matter if women accept or challenge the rules, but that "their narratives recount the process of constructing a self, and are rich in illustrations of female identity" (Baptista, 2006). Francis (2002) reflecting on the work of writer Leila Sebar, algerian who emigrated to France as a teenager, discusses the issue of the recount, focusing on the body's narrative of culturally minority subjects, particularly the female subject, pointing the resonances of issue otherness as a work of fracture: "cette altérité a des résonances dans l'oeuvre postcoloniale, qui en tant qu'oeuvre de rupture en quête d'une expression susceptible de traduire des expériences de vie radicalement différentes d'une tradition européenne..."(Francis, 2002, p.5). This issue of otherness related to female subject, across borders, with many different reflections, plus the issues of ethnicity and social class.

Studies that focus on the question of social recognition has enriched this debate. Bring to discussion the possibility to understand the facts, actions, movements and groups that bring people into the social dynamics. This includes the issue of social conflicts have roots as the struggle for recognition, as pointed out by Honneth (2003) and still the update brought by Fraser (2007) through her analysis of the importance of not leaving aside the redistribution, under penalty of eventually lead to a deletion of the issues relating to economic inequalities, in a social order which is marked by global and social injustices. Fraser's thesis (2007) is that feminism today, facing a transnational politics, is fully capable of making a synergy between recognition and redistribution. And this brings us to another important step in the narrative analysis in discussions involving the female subject. It is perceived that this approach has a broad feature, which can cross the debates at the time of their investigation practice. These two notions are important categories and should serve as a basis for building new understandings when it tries to articulate the information brought by the narratives collected.

Another issue is the use of audiovisual resources as supplements to the narrative analysis. For D'Ávila Neto and Baptista (2007), it eventually became a key strategic and as a complement to the elucidation of the narratives. Telling stories is a possibility to rescue the body testimony, the authors add. In this sense, Hirsch (2002) reports an interesting photographic work done by Lorie Novak in the USA in 1988, titled "Self Portrait". This work alludes to Ellis Island, first place of entry of generations of immigrants and refugees from Europe to the USA. The photographer tried to do, according to Hirsch, an analogy between the picture of Ellis Island and the "self portrait"

of Ellis Island, where the author herself fit, as an immigrant, and who also had relatives who went there. The narrated object exposed by the photo and its projection on the walls, looking to play with this ambiguity and the ambiguity of the situation of migrants.

Borders can "delete, define and subdue the other as different, strange, keeping it a part," emphasize D'Ávila Neto and Baptista (2007). However, they add, the narratives, the narratives in any order is written, spoken, gestured or counted, can dissolve these arbitrary limits.

Final Thoughts

We have a fertile field studies that include narrative analysis, where its breadth suggests its importance, in seemingly different contexts, but are crossed by a thin line that puts as an object for further reflections. In the studies on female migration, the richness of this approach is even more present. The ability to articulate the stories of past and present, in a nonlinear way, favor a review of reports based on a temporal dynamic and fluid passage, which enriches the understanding of mobility in the sense given by Braidotti (2000) as a nomad.

Finally, the resources that may be added as complementary to narrative analysis, such as audiovisual resources, has brought rich and significant elements, pointing to another way of looking, which undoubtedly has contributed to understanding the social and cultural lines that crisscross.

This paper is part of a wide research on Brazilian Women Migrants from the perspective of social recognition, in the process of contemporary globalization, developed by the Laboratory of Images and Data Program EICOS- Interdisciplinary Studies in the Social Ecology, UFRJ - Institute of Psychology Federal University of Rio de Janeiro (UFRJ)

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A trans-disciplinary approach to researching youth identities, youth culture, and youth communities

by Colleen Loomis¹ & Abdeljalil Akkari²



Multiculturalism is a new common reality in this period of globalization and we need to learn how to better integrate minority youth into the process of schooling. Schools all over the world continue to reproduce unfair systems that discriminate against some students and privilege others, as indicated by experiences and outcomes. In France, students whose parents emigrated from Africa are marginalized in schools. In Switzerland, a study found that when you compare of primary school students' learning outcomes (as assessed by standardized tests) by the type of classroom ("normal" versus "remedial") foreign students in remedial classrooms learn less than their counterparts in normal classrooms (Coradi & Wolter, 2005). In Canada, lower levels of integration into schools impact First Nations and immigrant students. With an increase in people from different backgrounds living together there is an increasing need to know how to coexist and to optimize our resources.

Perhaps one of the most widely used models to explain lack of school integration was offered by anthropologist John Ogbu who distinguished between two kinds of minority groups: involuntary and voluntary (Ogbu & Simons, 1998). According to Ogbu, these two groups have different behaviors and expectations from schooling, such that the voluntary group does as well as the majority group and the involuntary group falls behind. The central thesis in Ogbu's theory is that in different national contexts (e.g., U.S., England, Japan) there are always ethnic minorities with oppositional attitudes towards schooling. Refusing success at school is refusing to be identified by the majority group as a member of their group; in the case of Ogbu, refusing to be White in the U.S. it is about behavior and results. The theory does not account for diversion by some minority group members who will take the unequal schooling situation and use it as a tool for social transformation. Even if the intention is to put people into boxes some people escape. In Ogbu's theory it is not possible to escape to oppositional or conformist attitudes toward schooling.

From a psychological perspective, John W. Berry (2000; Berry, Phinney, Sam, & Vedder, 2006) explains integration using an acculturation framework model based on two main principles -- cultural maintenance and contact and participation with host culture -- with four possible outcomes: marginalization, assimilation, separation and integration. While Berry's model addresses individual characteristics, it fails to analyze a more global perspective of acculturation.

From an educational sciences perspective, Cummins analyzes school failure of minority groups by saying that we need to change the relationship between the "schooling world" and the "community world" and that

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learning will occur when two factors are present: maximum cognitive engagement and maximum identity investment (Cummins, 2001). Cummins claims that schools failed to give to some groups the tools and possibilities needed to change their lives and that schooling still disempowers some groups. What is interesting in the Cummins model is that the empowerment of minority youth is directly connected to the relationship among educators, youth, schools and communities.

Research shows the power relationships have in academic outcomes. Teachers' perceptions of parent involvement is more important in predicting student outcomes than actual parental involvement or student ability (Mandara, 2006). Teachers' role in immigrant youth integration includes teacher-student relationships, gender-race matching, quality of teaching, and a teacher's character. A reciprocal relationship between teachers and students influences the confidence youth have in making learning possible (Katz, 1999). Relationships in school contribute to school climate. One study found that immigrant youth have negative perceptions of school climate in a new setting and that having a negative expectation shapes relationships with non-immigrant peers and with teachers, as well as with parents around school issues at home (Pong & Hao, 2007). Another critical resource identified to impact relationships is students' identities. Immigrant youth identity includes being multiethnic (McAndrew & Ciceri, 1999) and a member of youth culture (Akkari, 2007). When it comes to social integration, Akkari and colleagues (Akkari, Perregaux, & Cattafi, 1999; Perregaux, Akkari, & Cattafi, 2000) found that at the end of primary school (ages 11 – 12) most youth (both immigrant and non-immigrant youth) in Geneva have an identity not mainly related to their ethnicity but related to sport, music and languages. Identities serve as a basis of power for students and all stakeholders in multicultural education.

To analyze and understand the relation between multiculturalism, minority status and schooling we need to conduct studies that gather in-depth qualitative data that elaborate and increase fidelity of research findings and methodological problems of past research inform future research. First, research designs are often correlational and focus solely on a minority group. Second, research on multicultural education relies heavily on quantitative data, which limits seeing and understanding the context of (dis)empowering students. Third, research constructs are over simplified. There are more mixed-race people and categorizing ethnicity, nationality, and related characteristics take on different meanings in multicultural contexts. A fourth issue is the grade levels examined. Many studies on multiculturalism have been conducted in primary school years and fewer studies of students in secondary education. We suggest addressing these methodological problems in future studies.

For future research we suggest designing comparative studies and gathering qualitative data on youth identities in secondary school. By comparing contexts we can illuminate how power is structured and used in relationships. Inherent to our suggestion for designing comparative studies is the internationalization of research and an understanding that doing so involves politics. Scholars already do international research by applying theory from one context to another. Existing international comparative studies have examined educational outcomes, but have not examined power structures and how identities affect relationships among all stakeholders involved in schooling (youth, parents, teachers, and policy-makers). We agree with James Cummins (2001) that power dynamics are central to the problem of disempowering minority students and we propose adding an explicit component to incorporate youth identities into research. Better understanding of immigrant youth identity provides

a foundation for using students' strengths to address weaknesses in integrating into a host country's school. Identities serve as a basis of power for students and all stakeholders in multicultural education. We propose that exploring identities is fundamental to uncovering the complex interactions among stakeholders and between schools and communities that shape power within relationships.

We have a pilot study in progress that will inform the design of subsequent comparative international studies of integration into schooling in multicultural contexts. Some multicultural cities with the world's highest immigration rates include London, New York, Toronto, and Geneva. Our project is embedded in the local context of the Geneva canton where in 2004 40% of school population was foreign with Portuguese and ex-Yugoslavia being the largest two sources. The overarching goal of this research project is to show how three critical dimensions of schooling work together in a very dynamic way to impact youth development: (1) academic achievement and learning, (2) youth identity development, and (3) the context of schooling. Primary data from youth, social workers, parents, teachers, and political representatives will be gathered. Research on this topic is by definition international. Our next step is to work with research partners working on the same topic to conduct a comparative study across Italy, Switzerland, France, and Canada.

In closing, we need a theory with principles that explain how structures and individuals involved in formal schooling (i.e., in the process of teaching and learning) use power to include some students and exclude others. We propose building upon recent comparative studies, using conceptual frameworks and methods drawn from several disciplines to aid us in analyzing and comparing education, schooling, and youth identities in multicultural contexts. Findings from these studies can change our understanding about teacher education and educational policies.

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La poupée russe des savoirs¹

par Marie-Claire Dubois², Emina Herdic³ & Christel Richoz⁴



Le cours « Santé et Migration », dans le cadre de la faculté des Sciences sociales et politiques de l'Université de Lausanne, existe depuis une dizaine d'années. Y participent des étudiants⁵ (niveau master) en psychologie, en sciences sociales, parfois mais rarement en sciences politiques. Ce cours a dès le début été conçu de manière à : stimuler l'auto-réflexion des étudiants sur leur manière d'aborder et considérer les migrants ainsi que, par extension, toute forme d'altérité ; favoriser le lien entre théorie et pratique, l'activité professionnelle de l'enseignant⁶ à l'extérieur de l'université lui permettant d'en tirer nombre d'exemples concrets illustrant les concepts théoriques développés ; à donner une place aux mémoires des étudiants écrits sur ce thème.

Parallèlement, l'enseignant est impliqué sur le terrain, en tant que psychiatre travaillant avec des personnes et familles migrantes, et collabore régulièrement avec des travailleurs sociaux et des enseignants.

En décembre 2006, l'enseignant a réuni des ex-étudiants qui avaient réalisé un mémoire sous sa direction. Son premier objectif était de mettre en valeur ces travaux : les mémorants réalisent souvent un travail de grande qualité et parviennent aussi à utiliser les connaissances acquises durant ce travail de mémoire au cours de leur vie professionnelle ultérieure ; malheureusement, la plupart de ces écrits ne sont guère lus et ne reçoivent guère d'échos une fois la soutenance passée. Au moment de cette première rencontre, son projet était encore vague : il souhaitait qu'émerge un projet collectif dont les ex-mémorants seraient partie prenante.

Ce groupe, s'étant choisi le nom *Partages*, s'est réuni avec l'enseignant et un projet concret fut conçu pour le semestre de printemps 2008. Nous avons tous accepté de le réaliser bénévolement.

Nos objectifs furent ainsi définis : permettre aux actuels étudiants de mieux faire le lien entre les concepts abordés et leurs traductions pratiques ; se projeter dans une vie professionnelle future ; développer et étayer davantage une attitude critique vis-à-vis des pratiques institutionnelles ; imaginer des manières d'apporter une touche innovante dans ces pratiques ; donner une valeur à leur travail de mémoire qui excède la seule obtention d'un titre académique.

¹ Le présent texte se réfère au document "La poupée russe des savoirs. Amélioration de la qualité de l'enseignement par la collaboration d'ex-mémorants", co-rédigé par: K. Brakna, M.-C. Dubois, M. Gelsomini, C. Hildbrand, E. Herdic, S. Herdic Schindler, B.-A. Khamsi, G. Le Berre Antezana, C. Richoz, E. Shubs, V. Vasseur Peiry. Université de Lausanne, 2008. Ce document peut être demandé au cabinet du Dr. Jean-Claude Métraux, pédopsychiatre FMH, Villamont 23, CH-1005 Lausanne, Suisse, 00 41 21 312 18 73, jcmetraux@bluewin.ch.

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⁵ Pour des raisons de simplicité de lecture, le texte n'a pas été féminisé. Cependant la forme masculine utilisée s'adresse autant aux femmes qu'aux hommes.

⁶ Jean-Claude Métraux

Ainsi, nous nous sommes mis d'accord avec Jean-Claude Métraux pour intervenir dans son cours « Santé et Migration », afin de présenter nos travaux et nos pratiques professionnelles. Nous nous sommes répartis en fonction de nos intérêts personnels, des thèmes de nos mémoires et de nos activités professionnelles. Quatre groupes d'intervention se sont ainsi constitués autour des thèmes suivants : « Approche Communautaire », « Les Requérants d'Asile en Suisse », « Des Familles Migrantes et des Pratiques Professionnelles » et « Pratique de l'Interprétariat ».

Les étudiants ont pu choisir le thème qui les intéressait et se sont donc répartis en quatre sous-groupes. Nos interventions se sont échelonnées sur trois fois deux heures, à environ un mois d'intervalle.

Il convient de préciser que la forme d'intervention choisie n'était pas identique à un séminaire usuel.

Les treize ex-mémorants (issus de psychologie, de sciences sociales ou de sciences politiques) ont maintenant une activité professionnelle en dehors de l'université, liée de près ou de loin au thème « santé et migration », et aucun d'entre eux n'est assistant à l'université ni n'a envisagé une carrière académique. Le lien entre enseignement universitaire et pratiques professionnelles se situait ainsi au centre même de l'option pédagogique prise, de par le fait entre autres que les ex-mémorants avaient terminé relativement récemment leurs études et pouvaient dès lors aisément relier l'univers académique et l'univers professionnel. Si l'aspect théorique n'a pas été négligé, une place essentielle a été donnée à nos perceptions subjectives de l'altérité et aux techniques relationnelles propres à éviter l'enfermement du migrant dans une figure figée d'altérité. De plus, dans la mesure où les institutions tendent fréquemment à réifier le migrant, dans la mesure aussi où les institutions de la santé, du social et de l'éducation se montrent excluantes vis-à-vis de certaines catégories de migrants, l'approche élue doit être comprise dans une optique de changement social : comment le jeune professionnel peut avoir un rôle incitateur au sein de l'institution qui l'emploie pour promouvoir une autre manière, respectueuse des droits d'autrui, de concevoir et aborder les différences culturelles et sociales ?

Nous nous sommes inspirés principalement de l'expérience accumulée par diverses universités latinoaméricaines dans les domaines de la psychologie sociale et de la psychologie communautaire. Il est possible de citer ici l'université de Montevideo en Uruguay et l'Université Central de Venezuela à Caracas. Au sein de cette dernière, il faut en particulier signaler le travail de pionnière de Maritza Montero, professeure de psychologie sociale communautaire. Le travail pratique des étudiants dans des communautés paupérisées, associé à la collaboration à une recherche-action participative, est directement inscrite dans l'enseignement universitaire à titre de crédits obligatoires.

Le lien entre l'enseignement académique et les pratiques professionnelles a aussi été abondamment réfléchi au Canada, en particulier à l'université de Sherbrooke et à l'université Laval, où par exemple les formations universitaires en psychologie et en service social comprennent des stages professionnels organisés conjointement par l'université et l'organisme professionnel ; ces formations incluent aussi dans leur cursus des cours de psychologie communautaire.

Du point de vue théorique, notre projet pédagogique s'appuie sur les principes de la psychologie communautaire qui a émergé en Amérique latine dans les années 80. Ce modèle s'inspire des mouvements de l'éducation populaire, initiée au Brésil dans les années 60 par Paulo Freire. Celui-ci remet en cause l'enseignement

traditionnel, car ce modèle découle de l'idée que l'enseignant serait seul détenteur du savoir scientifique. Au contraire, la psychologie communautaire privilégie une pédagogie basée sur la co-construction d'un savoir nouveau, émergent d'un processus d'apprentissage mutuel. Cette forme d'éducation dialogique implique donc une participation active de la part de l'étudiant.

Le soutien du Fonds d'Innovation Pédagogique permet de financer la phase ultérieure, soit une réflexion concertée des ex-mémorants et de l'enseignant, au cours de l'automne 2008, dans le but de tirer les enseignements de cette première expérience et de concevoir des améliorations pour le semestre de printemps 2009. L'évaluation faite en juin 2008 avec la collaboration du Centre de Soutien à l'Enseignement a constitué une des bases de ce travail, l'évaluation personnelle des treize ex-mémorants en constituant l'autre fondement.

L'élaboration commune de ce texte nous a permis de théoriser notre action pédagogique et d'en mesurer les bénéfices. Globalement, cette appréciation se révèle très positive.

Bénéfices de cette action pédagogique

Pour l'enseignant

Ce projet a permis à l'enseignant d'instaurer une collaboration de professionnel à professionnels entre lui et ses anciens étudiants.

Dans la mesure où Jean-Claude Métraux a toujours remarqué l'importance du travail fourni par les ex-mémorants et l'apport des jeunes professionnels, ce projet lui a permis d'insérer concrètement ces savoirs et ces pratiques dans son cours.

En outre, il lui a permis de relier son activité d'enseignement à l'état d'esprit et aux apports de la psychologie communautaire. Il a aussi pu réaliser à quel point les étudiants bénéficiaient de ce type d'applications concrètes.

Pour les ex-mémorants

Grâce à ce projet, nous avons pu valoriser nos mémoires. En effet, cela a été très satisfaisant de pouvoir partager notre travail avec d'autres et d'en faire profiter les nouveaux étudiants.

Nos rencontres nous ont donné l'occasion de réfléchir en groupe sur nos pratiques et de nous repositionner. En effet, cela a été très positif de prendre conscience des liens entre la théorie que nous avons développée au cours de nos études et notre pratique actuelle.

Les réflexions des étudiants sur notre pratique nous ont également donné un éclairage nouveau sur ce que nous faisons dans nos professions.

Par ailleurs, au cours de nos discussions, nous avons pu dégager des problématiques communes, au-delà de la diversité de nos pratiques. Cela a donné du sens à notre identité professionnelle dans les domaines de la psychologie ainsi que des sciences sociales et politiques. Cela est précieux pour nous, car cette identité s'avère a priori passablement floue et mal établie.

Cette expérience a de plus été une magnifique opportunité de développer des compétences dans le domaine de la formation et de l'animation.

Pour les étudiants actuels

Dans d'autres contextes, l'université accorde une importance particulière à faire un lien entre la théorie et la pratique professionnelle et nous souhaitons également mettre cet aspect en évidence lors des séances. L'évaluation révèle que l'aspect pratique et concret a été précieux pour les étudiants. Nous avons accordé une importance particulière aux mises en situation, que ce soit au travers de vignettes cliniques ou par des jeux de rôle. Il était en effet fondamental de travailler ensemble, participants au cours et ex-mémorants, afin de mettre en évidence les aspects concrets de nos pratiques professionnelles. Il était important également de ne pas négliger les questions théoriques. Au contraire, le fait d'expérimenter des situations susceptibles de se produire réellement et d'y réfléchir ensuite a permis d'établir un lien avec la théorie. Des concepts théoriques jusqu'alors abstraits ont pris une forme très concrète et ancrée dans la réalité. Puis, cela a rendu les séances dynamiques et riches en échanges et en réflexions.

Autre objectif du projet : favoriser une co-construction du savoir entre les anciens mémorants et les étudiants. Cette méthode d'enseignement participative a été évaluée très positivement par les participants au cours. Les étudiants ont relevé la quasi absence de hiérarchie et ont apprécié ces échanges entre pairs.

Ainsi, le savoir n'est pas transmis de manière unilatérale par les intervenants mais élaboré en commun. Cette méthode, inspirée de la psychologie communautaire, permet aux participants de se sentir impliqués et de stimuler la réflexion au sein du groupe. La proximité, au niveau de l'âge et de l'identité professionnelle, entre les intervenants et les étudiants a très nettement facilité les interactions et a véritablement permis la co-construction d'un savoir nouveau. La plupart des participants ayant répondu à l'évaluation juge cette forme d'enseignement innovante. Cet avis peut traduire un manque de sentiment d'implication personnelle des étudiants lors des cours ex-cathedra « classiques » donnés à l'Université de Lausanne.

Un aspect important puisé de la psychologie communautaire est celui de construire son champ d'action à partir des besoins identifiés au sein de la société. Il devient donc fondamental de connaître la réalité du terrain et d'être à même de l'étudier de manière critique. Or, l'esprit critique envers les pratiques des institutions se forge, entre autre, justement dans l'expérience de la pratique de terrain. Le cursus universitaire de la Faculté des Sciences sociales et politiques de Lausanne n'offre que peu cette possibilité.

Peu d'enseignants universitaires ont une expérience pratique qui leur permettrait d'ancrer leur enseignement dans la réalité et beaucoup d'entre eux négligent l'aspect pédagogique.

Etudiants actuels et ex-mémorants

Quant aux bénéfices partagés par les participants au cours et les anciens mémorants, le projet pédagogique visait à instaurer un lien de solidarité entre ces derniers, dans le sens où nous sommes tous issus d'un domaine professionnel semblable. Les réponses des étudiants au questionnaire montrent que les trois séances ont été

perçues comme des instants de « *don* ». Les participants ont accueilli très positivement notre vécu personnel et nos parcours professionnels.

Pour notre part, la participation importante des étudiants, leurs remarques et réflexions et finalement l'évaluation des interventions se traduisent à nos yeux en autant de « *contre-dons* ».

Finalement, la co-construction du savoir lors des séances a permis l'émergence de savoirs pluridisciplinaires au sein du groupe. En effet, selon Paolo Freire, chacun détient un savoir particulier et c'est dans l'échange des différents points de vue que peut se construire la compréhension du monde. Ainsi, les séances se sont révélées riches en apprentissages pour chaque membre du groupe. De plus, l'expérience de chaque intervenant a permis d'offrir des pistes concernant une insertion professionnelle et concernant le développement d'un réseau.

Perspectives

Cette expérience s'est véritablement avérée positive et nous allons la reconduire. Toujours dans l'esprit d'une collaboration constructive et créative avec l'Université et les étudiants, nous pourrions alors encore nous enrichir de ce travail de théorisation et d'évaluation pour améliorer et développer notre modèle d'action.

En particulier, il nous tiendrait à cœur de partager cette expérience avec d'autres intervenants universitaires, afin de l'élargir à d'autres cours et d'autres facultés. En effet, nous sommes convaincus que ce modèle est applicable dans divers contextes et pourrait profiter à d'autres étudiants et professeurs.

Par ailleurs, de ces échanges est également née l'idée du renforcement de la place de la psychologie communautaire à l'Université de Lausanne. Notre démarche représentera peut-être les premiers pas vers de nouvelles visions et de nouvelles perspectives de formation.

Enfin, à l'image d'une poupée russe, nous avons souhaité que d'autres futurs ex-mémorants nous emboîtent le pas. Ainsi, nous développons notre groupe en leur passant progressivement la main. En effet, une telle action n'a de sens que si elle est actualisée par les nouveaux professionnels, encore proches des préoccupations estudiantines : pour que les savoirs continuent toujours à s'enchevêtrer, à se déconstruire et se co-construire, à se partager et à se vivre.

Female migration in Brazil and the role of networks in the daily life of migrant women

by Juliana Nazareth¹ & Maria Inacia D'Ávila Neto²



Background

The increasing number of migrant women throughout the globalized world (about 100 million estimated by the United Nations) gives strength and representativeness for the issue of female migration, while pointing to the importance of deeper reflection and more systematic studies about their specific questions (Bilac, 1995).

In Brazil, as in other parts of the world, there is a growing percentage of women who migrate from poorer regions, like the Northeast, to the more developed regions, like the Southeast, especially to Rio de Janeiro and São Paulo, and there are few studies that contemplate this reality.

This paper aims to fill this gap, by attempting to map and to discuss, briefly, the everyday strategies of survival of migrant women that come to urban centers in search of better living conditions and recognition (Fraser, 2003; Honneth, 2002). Although, once in a big town, it is common to see them included in significant vulnerabilities contexts, involved in low prestige and pay activities, living in places with little urban infrastructure, faced with exclusion, prejudice and inequality.

Study and Results

An environment that allows an approximation with other migrants, outlining a sort of creative and informal network, that helps to overcome many adversities and also brings for them the experience of belonging and recognition. Facing significant new challenges, they are able to find support and solidarity in these informal networks that, quickly, becomes an important survival strategy for them. Not only to circumvent the more concrete daily adversities, but also the more subjective ones, like the longing for family and the distance of the habits and the codes of their origin culture.

The encounter with other migrants, mainly from the same city, seems to promote the formation of an intersubjective field, where these women experience belonging, acceptance and identification. The networks would be formed by all these ties, the most, to least significant. The place that each migrant holds in the network implies a greater or lesser recognition, and the possibility of its materialization (Honneth, 2002).

The importance of networks for the study of migration has been highlighted earlier (Durhan, 1984). Much of the literature, however, addresses issues related to international migration (Fusco, 2002; Goza, 2003; Smith, 2004). Although there are those who point to the relationship between gender and social networks, showing the key role

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of women in their maintenance (Assis, 2003), most studies are related to international contexts, focusing the middle class or the affluent population. Regional migration of poorest women seems to exhibit features that emphasize the importance of networks to ensure their survival and also the maintenance of migration.

Although informal, the northeastern migrant's networks, have characteristics of cohesion and organization that influence directly the chances of success of the new migration. As they can facilitate a good physical and psychological adaptation, the networks also affect the satisfaction of women in their migrational projects. Moreover, a lack of network, or the absence of significant links, seems to generate a more negative connotation of this experience. With a more sustained discourse, although a similar material and labor conditions¹.

In fact, the migration movement of these women itself promotes and is, dialectically, promoted through a network, that, even informal, sometimes seems to be specialized in a migratory network, with basic and specific ranging – from the financing of the trip to the viability of employment and housing.

Each new migration that takes place, each new character that comes from the same city to Rio de Janeiro, brings satisfaction and generates a kind of recognition for whom who has contributed, making possible the migratory project of others. Who succeeds in turning possible the others migration demonstrates a differentiated, better established and more prestigious position in the network. Configuring a dialectical process and reciprocity. The migrants set out in Rio de Janeiro provides a basis for the newcomers contributing significantly to their physical and psychological adjustment. On the other hand, the newcomers expand the network of the established migrant increasing her chances of satisfaction and recognition.

The fact that the vast majority of these women end up involved in activities of low prestige and pay, working as nannies and maids can be partly explained by these networks, since most of the time, employment was made possible by another woman of the network that works in the same function and that has only this universe to explore². Which in one hand points to fundamental questions about women's work and continuities of gender inequalities – because despite all the recent increases, poorest women still have little access to education and, consequently, to good job opportunities (D'Avila Neto, Nazareth, 2005). But on the other, brings an important debate about regional inequalities within a country like Brazil, so that the salaries of these migrant women, although considered very low by the standards of the Southeast³, are perceived as satisfactory by the women who remain in the northeastern inner cities dreaming and planning to their own migration.

Added to this, the lack of employment opportunities in cities like Pirpirituba (PB), limited to a few places in the city hall, used to be the main motivation for the migration of these women.

¹ How those that we interviewed during the research, Northeastern Migrant Women, coordinated by Professor Dr Maria D'Inacia'Avila Neto, and others who participated in my doctoral research, developed the program EICOS-UFRJ, about women from a small within the city of Paraiba (PB) - Pirpirituba, with about ten thousand inhabitants - who migrated to Rio de Janeiro - with over fifteen million inhabitants.

² When looking at your work place is perceived that is common to work nearby, usually in the same neighborhood. Indicating the importance of the network to the viability of the work and tighten it up.

³ The average income of them is between one and two minimum wages. Which is currently a monthly gain of U.S. \$ 300.00 to \$ 600.00. Even though it looks a negligible value, provides guarantees for those who have their formal contract by employers, and should be seen as something much more than an average of U.S. \$ 40.00 received in the city of Pirpirituba (PB), for example, by those who get a tip, taking care of the house and children neighbors, without any guarantees

Discussion

As a result, an increasing number of women who migrate in search of better living conditions, and end up living in precarious situations. Living in areas of poor infrastructure and flirting with urban poverty¹. But, although they recognize the difficulties in the big city and the high cost of living - exhausted by the payment of inevitable expand rents (none of them have own property) – , these women connotes in a positive way their migratory experience. Largely because the decisive experience of satisfaction and autonomy that they have found entering in the labor market and starting, even precariously, the redistribution process (Fraser, 2008). Being part of the consumer market seems to be so special like being able to help their families sending regular money and presents.

But that's not all. The participation and relevance in the networks bring for them the possibility to feel welcomed, supported and at the same time, recognized - as winners - not just in their migratory project, but in life.

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¹ The mapping of the place of residence indicates small groups of women from the same city around the Rio de Janeiro. No one lives alone. They tend to cluster in areas of lower cost.

Drug use among immigrant and non-immigrant adolescents in Italy

by Luca Scacchi¹, Francesca Cristini¹ & Gianmarco Altoè²



Introduction

Adolescent drug use is often embedded within a context of socio-economic disadvantage and many studies have outlined how social and cultural environments influence adolescents' drug use (Herman-Stahl, Spencer, & Duncan, 2003; Yu, Huang, & Singh, 2004). Immigrant adolescents often live in families that face socio-economic hardship and related problems, however drug use among immigrant adolescents is an area that has received little research attention, in particular as regards the comparison between immigrant and non immigrant adolescents. Findings from the studies about the adaptation of immigrant youth are inconsistent. Some studies indicate that minority immigrant status does not increase the likelihood of problem behaviours (e.g., Atzaba-Poria, Pike, & Barrett, 2004; Guarnaccia & Lopez, 1998). Other studies outlined that immigrant young people report higher risks of problem behaviors (e.g., Bengi-Arslan, Verhulst, & van der Ende, 1997; Pawliuk, Grizenko, Chan-Yip, Gantous, Matthew, & Nguyen, 1996). Finally, recent studies conducted mainly in North American and Canada, showed that immigrant youth reported better mental health and adaptation than their national peers, in spite of the fact that they lived under challenging conditions and higher socioeconomic risk. This phenomenon has been called the "immigrant paradox" (e.g., Fuligni, 1998; Garcia Coll, 2005). The label "immigrant paradox" is related to the counterintuitive fact that although immigrants often live in socio-economically disadvantaged context, health outcomes among immigrants do not always correspond to their relative socioeconomic status (Reijneveld, 1998; Winkleby, Jatulis, & Frank, 1992). Many studies showed the negative influence of socio-economic hardship on adolescent development (Duncan & Brooks-Gunn, 2000; McLoyd, 1998), in particular as regards the inverse relationships between socioeconomic status and drug use among adolescents (Chen, Matthews, & Boyce, 2002). Compared to non immigrants, recent immigrants have higher unemployment rates, are more likely to be working in low-skill occupations, and are more likely to work for low wages and have earnings that are less than those of comparable national workers (Schellenberg, 2004; Khan et al., 2000). In spite of socio-economic hardship, some studies showed that immigrant adolescents reported lower levels of drug use than non immigrants (Acevedo-Garcia, Pan, Jun, Osypuk, & Emmons, 2005; Georgiades, Boyle, Duku, & Racine, 2006; Harker, 2001). The objectives of the present study were: to examine whether immigrant adolescents report lower levels of SES than Italian adolescents; to examine whether immigrant adolescents are less likely to use drugs when compared with Italian native adolescents.

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Methods

Participants

Data were provided by a sample of 2533 adolescents attending high schools in Italy. Adolescent participants were from the first to the last year of the Italian high school system. The average age was 17.26 years (SD=1.63). The sample was 66.7% male and 33.3% female.

As regards country of origin, 2.3% students of the sample did not indicate where they were born, 13.1% students did not indicate where their mother was born (95.7% of these students were born in Italy), 13.7% students did not indicate where their father was born (94.9% of these students were born in Italy). As regards family composition, 1.4% students reported they do not have a mother or they never see her and 4.0% students reported they do not have a father or they never see him. Those pupils were excluded from the study analysis. In the sample used for the present study (N=2034), there were 9.1% immigrants (N=186; foreign born with at least one foreign born parent).

Measures

Native or immigrant status was based on the country where the adolescent and his/her parents were born. Based on these items we created two groups: Italian adolescents (born in Italy from both Italian native parents) and immigrant adolescents (foreign born from at least one foreign born parent). To measure SES we used: family affluence and parental educational level. *Family Affluence* was measured by the Family Affluence Scale (FAS; Currie, Elton, Todd, & Platt, 1997). *Parental educational level* was measured both for mothers and fathers.

Marijuana use was measured as follows "Have you ever taken marijuana in your life?". Responses were from 1 ("Never") to 7 ("40 times or more"). We used a dichotomous measures: 1 (at least one time) and 0 (never).

Other illicit drug use was measured using 9 items asking "Have you ever taken some of the following drugs in your life?", referring for example to "Ecstasy", "Amphetamine", "Opium" etc. Responses were from 1 ("Never") to 7 ("40 times or more"). We summed the nine items to obtain a unique variable about illicit drug use and we recoded this variable as a dichotomous measures: 1 (at least one time for at least one drug) and 0 (never).

Results

With regard to SES, results showed that immigrant adolescents' families are characterized by lower family affluence ($F_{(1, 2011)} = 31.44$; $p < .001$) and higher parental education level ($F_{(1, 1589)} = 87.60$; $p < .001$) than non immigrant adolescents.

In this respect, we found that immigrant adolescents reported lower levels of marijuana ($\chi^2_{(1, 2021)} = 7.63$; $p < .001$) and other illicit drug use ($\chi^2_{(1, 1959)} = 13.18$; $p < .01$) than Italian native adolescents. 37.2% of Italian natives adolescents tried to use marijuana in comparison to 26.9% immigrant adolescents. Similarly, 24.7% of Italian natives adolescents tried to use other illicit drugs in comparison to 12.5% immigrant adolescents.

Table 1. Descriptive statistics on demographics, drug use, family and peer factors comparing immigrant and non immigrant adolescents.

	TOTAL SAMPLE	BORN IN ITALY	FOREIGN WITH AT LEAST ONE FOREIGN PARENT	BORN AT LEAST ONE BORN	Test statistic
Mean (SD)					
Age	17.19 (1.60)	17.15 (1.60)	17.53 (1.60)		$F_{(1, 2017)}=9.56$; $p<.01$
Parental educational level	2.80 (0.93)	2.73 (0.90)	3.53 (1.01)		$F_{(1, 1589)}= 87.60$; $p<.001$
Family affluence	9.26 (1.65)	9.33 (1.62)	8.61 (1.75)		$F_{(1, 2011)}= 31.44$; $p<.001$
% (n)					
Gender (male %)	66.2% (1339)	66.2% (1216)	66.1% (123)		$\chi^2_{(1, 2023)}=0.01$; n.s.
Marijuana use	36.3% (734)	37.2% (685)	26.9% (49)		$\chi^2_{(1, 2021)}= 7.63$; $p<.001$
Other illicit drugs use	23.6% (462)	24.7% (440)	12.5% (22)		$\chi^2_{(1, 1959)}=13.18$; $p<.01$

Discussion

The aim of the present study was to analyze whether, in spite of socio-economic disadvantages, immigrant adolescents report lower levels of drug use as compared with non immigrants (Acevedo-Garcia et al., 2005; Georgiades et al., 2006; Harker, 2001).

Results showed that immigrant adolescents' families were characterized by lower family affluence and higher parental education levels than non immigrant adolescents. We found the hypothesized economic hardship for immigrant adolescents (Schellenberg, 2004; Khan et al., 2000).

With regard to drug use, the results of the present study confirmed the immigrant paradox hypothesis. We found that immigrant adolescents reported lower levels of marijuana and other illicit drug use than Italian native adolescents (Acevedo-Garcia et al., 2005; Georgiades et al., 2006; Harker, 2001).

Future research should analyze the processes that lead to adaptive and better outcomes among immigrant adolescents in order to better understand which factors explain the immigrant paradox.

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Theoretically-, empirically- and community-based intimate partner violence prevention program in an immigrant community

Mieko Yoshihama¹



Background

In the United States, the population of foreign-born individuals is steadily growing; they currently make up 12.6% of the nation's population, up from 7.9% in 1990 (Camarota, 2007). The Asian population is the fastest-growing minority group in the United States. Despite the population increase, research on intimate partner violence (IPV, also known as domestic violence) among immigrants, Asians in particular, remains limited. This limitation, in turn, makes it difficult to develop empirically-informed IPV prevention and intervention programs for immigrant populations. Analyses of reported homicide cases have consistently documented an overrepresentation of Asians (Yoshihama & Dabby, 2009). For example, 31% of women killed in IPV-related homicides 1993-97 in California's Santa Clara County were Asian, although Asians comprised only 17.5% of the county's population. Of women and children killed in IPV-related homicides in Massachusetts in 1991, 13% were Asian, although Asians represented only 2.4% of the state's population. The higher IPV-related homicide rates among Asians call for urgent prevention efforts.

The Shanti Project

To address this gap in research and prevention programs, we developed and implemented a theoretically-, empirically- and community-based IPV prevention program in an Asian Indian immigrant community in the Metro Detroit Area of the State of Michigan. Because of the enormous socio-cultural variations within the Asian or Asian Indian population group, we chose to work with a specific ethnic group of Asian Indians, Gujaratis, who came from the western region of India and have their own language (Gujarati). The campaign called, The Shanti Project, builds on the notion of *shanti* (harmony and peace), a cherished value and strength of the Gujaratis.

Gujaratis are one of the largest subgroups of the Asian Indian population in the nation and region. They are often regarded by other Indian groups as a "pioneer" in achieving socioeconomic prosperity. Our decision to focus on the Gujarati community reflected a recognition of their leadership position. Furthermore, the Gujaratis uphold a strong value of nonviolence, as practiced by fellow Gujarati, Mahatma Gandhi. Building on this value, we hoped to develop an IPV prevention program that is grounded in the community's strengths and consistent with its sociocultural context. In the fall of 2005, we began working with a small group of interested community members and leaders to develop a communications campaign to prevent IPV. The campaign used a combination of mass

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media to disseminate key messages and local activities to promote interpersonal interaction. We drew from feminist theory, social exchange theory, theory of planned behaviour, and social cognitive theory and applied social marketing approaches. The program was aimed at creating new community norms that denounce IPV, promoting more egalitarian attitudes and behaviours in interpersonal relationships, and encouraging bystanders to confront abusive behaviours.

Challenges

Developing and implementing a theoretically-, empirically- and community-based IPV universal prevention program is filled with many challenges. Especially when working in an immigrant community, the paucity of empirical data, untested applicability of behaviour change theories to the specific target community, and difficulty translating certain Western concepts into the target language can be challenging. At the time we began our project, a large segment of the community members and leaders denied or minimized the seriousness of the problem of IPV in their community. Thus, an additional major challenge was to find a way to address a topic that is largely regarded as taboo. We used a wide range of participatory methods, intentionally and continuously involving community members, leaders and other stakeholders in various stages of the project. These participatory approaches embodied our commitment to the importance of developing socio-culturally relevant and sustainable IPV prevention strategies, which was untenable without meaningful participation of community members, the very people whose wellbeing the project tries to promote.

Strategies

One concrete approach we used to ensure ongoing community input and feedback was the establishment of a Community Action Team (CAT). We recruited individuals who are diverse in age, immigration status, and educational level. Having participated in an initial 40+-hour training and ongoing working meetings and additional training sessions, CAT members played a central role in planning, development and implementation of the prevention campaign.

Conducting formative research was another important way to incorporate community's voices and experiences into the prevention campaign. We assessed community members' and leaders' knowledge, attitudes, beliefs and behaviours (KABBs) regarding IPV using multiple data collection methods, including focus groups, individual interviews, and written/Web surveys. Respondents tended to define IPV narrowly, focusing on physical violence; deny or minimize the prevalence of IPV and its impact in their own community; and view IPV as a private matter rather than a community issue. In addition, among respondents there are varying degrees of tolerance and/or justification of husband's exertion of control over and use of violence against wives.

Although the findings from the formative research were generally consistent with those of previous studies among Asian and Asian Indians (Dasgupta & Warrier, 1996; McDonnell & Abdulla, 2001; Yoshihama, 2002, 2009)(Abraham, 2002; Dasgupta & Warrier, 1996; Yoshihama, 2002b; Yoshioka, DiNoia, & Ullah, 2001), it helped identify additional critical factors to be addressed in the prevention campaign, such as the pervasiveness of gossip; respondents repeatedly mentioned that although IPV is not discussed openly among community

members, they tend to gossip about women who have been abused. The respondents saw that gossiping was hindering not only survivors' help-seeking but also community members' candid dialogue about IPV as a community problem. This information prompted us to address the difference between gossip and discussion that promotes awareness among people in one's social network, and to design campaign messages and activities to promote the latter type of discussion of IPV. During the campaign activities, we often pointed out the pervasiveness of gossip, which resonated with the experience of many of the event participants. This served as a point of initiating a dialogue, not a gossip, about IPV among event participants.

Informed by findings from the formative research, as well as ongoing discussions with CAT members and consultation and discussion with community leaders, we determined the campaign's target populations, objectives, main strategies and messages. Prior to developing campaign materials, we conducted concept testing. The concept testing was another important means through which we obtained community feedback regarding the campaign concepts, approaches and messages to further strengthen their socio-cultural relevance. We created multi-media campaign materials in English and Gujarati, including posters, brochures, and print and radio public service announcements (PSAs). We distributed these materials through various media channels and community venues, such as radio, Internet, publications of community-based organizations, and community events. In addition, we created various opportunities open to all interested community members to further develop their knowledge and skills in IPV prevention. For example, we hosted film and theatrical presentations, training sessions and small informal discussion group meetings, where participants were encouraged to engage in interactive discussions of IPV and how to prevent it. Furthermore, we worked with the leadership of community- and faith-based organizations to engage them in discussions of IPV prevention. These discussions were aimed at strengthening their interests, knowledge and skills in IPV prevention so that these organizational leaders, in turn, would initiate, sustain and expand prevention activities at their respective organizations.

As we developed the campaign messages, we were faced with tension between theories, empirical data, and community perspectives. On the one hand, feminist theories and previous studies of IPV (Ahmad, Riaz, Barata, & Stewart, 2004) pointed to a strong association between patriarchal attitudes and IPV perpetration. Thus, prevention of IPV needs to challenge the patriarchal ideology and associated traditions and practices (e.g., rigid gender roles). On the other hand, our formative research and ongoing meetings with community leaders and members repeatedly found a considerable degree of reluctance, and outright opposition in some cases, to address and change "traditions." To avoid the risk of alienating the very audience we hoped to engage, we sought ways to elucidate patriarchal aspects of family and community practices so that community members can begin to recognize the role of *some* aspects of traditions in supporting IPV and explore ways to change them, while still validating the importance of many aspects of their traditions.

The formative research and ongoing discussions with CAT members and community informants identified the central importance of the concept of respect in family and community relationships. Although expectation of respect for those in power was often used to support hierarchical family and community structures, we realized that the importance of respect can be used to promote egalitarian couple/family relationships. Specifically, we developed campaign messages by incorporating the notion of respect: "everyone deserves respect, regardless

of age, gender, education, or socioeconomic status; and the best way to be respected is not through power and control but through respecting others." Thus, the notion of respect provided an opportunity to challenge patriarchal structure and practices within the family and community in a manner that was socio-culturally more congruent and less threatening than more direct, often individually-oriented, "Western" approaches that stress "women's agency and empowerment."

Often, efforts to prevent IPV are seen as contributing to breakup of the family; we sought ways to promote IPV prevention that embraced the importance of keeping families together. In fact, our campaign message went beyond keeping the family together, and emphasized "strengthening" family relationships through mutual respect and open communication.

The campaign activities ended in the spring of 2009. A small group of CAT members chose to remain active by joining another community-based participatory action research project on IPV prevention directed by the author, New Visions: Alliance to End Violence in Asian/Asian American Communities. As of December 2009, we completed post-campaign telephone interviews with a random sample of over 550 Gujarati residents, and evaluation of the campaign effectiveness continues as we analyze the pre- and post-campaign interview data.

Please visit <www.shantiproject.org> for more information about The Shanti Project, and <www.ssw.edu/newvisions> for New Visions: Alliance to End Violence in Asian/Asian American Communities.

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4

SOCIAL VULNERABILITIES

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VULNERABILITES SOCIALES

Building community capacity: a comprehensive community approach for social development on poverty fighting

by Joao Aguiar¹



This paper describes and reflects on an entrepreneurial process of the Portuguese NGO “O sonho” aiming to fight poverty, in Setúbal (PORTUGAL).

Research method

We used a multi-method approach, using the naturalistic method. We were part of the action research process. The techniques used were participative observation, informal interviews and study of reports and other documents. It took two years in following and participating in this process (2007-2009).

Object of study: community intervention of “O sonho” in its geographical area.

Community Context

Setúbal is a city 40 kms far from Lisbon (PORTUGAL). The geographical area for intervention has three different sub-areas: urban, social neighborhoods and rural. They are contiguous places in the suburbs of the city. The urban and social neighborhood areas have a large number of people unemployed and low income families and with low levels of formal education. The population in rural areas are mostly adult and elderly people, some also with low levels of literacy.

Entrepreneurship Process

“O sonho”, in its early beginnings, opened in 1980 a kindergarden for children in the suburbs of Setúbal. It grew slowly, so they started to offer free time activities for children between 3 and 5 years in 1995, and cradle child support for children between 0 and 2 years old in 1999. Focusing its work on children during the first 15 years, “O sonho” conducted a new entrepreneurial process since 2005, when it was chosen to represent Setubal’s NGO’s in the Local Social Action Council.

Located in a geographic area where few social intervention programs were reaching out, they applied for a formal partnership with the National Social Security Institute for implementing these neighbourhoods the national program “Social Integration Income” (SII). So, in October 2007 the team started to support low income families in

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their social, professional and community integration – on dimensions like employment, training, education, housing, civil rights and duties, and others.

This program analyzed and showed the lack of resources and opportunities at the local level, in areas like education, training, and other assets. As resources for families, like personal belongings and other assets (clothes, electric appliances, furniture, etc.) were found to be important for the integration process, “O sonho” started to build the foundations for a social store, receiving these kind of assets for family support.

The lack of training and educational programs was also evident. So, 2008 was the year to build partnerships and get started with education and training programs: IT professional training and education (with FSIT); alternative educational programs for adults (with FSIT); and literacy programs (with Education Ministry local delegation).

Three other programs also started in 2008: Local Contract for Social Development; Microcredit; and Community Program for Food Support. Local Contract for Social Development is a national program aimed to fight poverty and social exclusion, implemented by local NGO's, and built around 4 major lines: employment, training and qualification; family and parenting intervention; community and institutional capacity; information and access (IT) – directed to youth (in Setúbal). A partnership was also established with a Portuguese NGO to enable this population to benefit from microcredit, since “O sonho” ensured the settings for ANDC (National Association for the Right of Credit) to develop its work with low income people. The Community Program for Food Support was another partnership that allowed the organization to provide the families food supplies. In times of crisis, food supplies needs have increased and a partnership with the NGO Banco Alimentar became more relevant for supporting low income families throughout difficulties. “O sonho” also collaborated at the local level in the National Program “Solidarity Supplement for the Elderly”, run by Social Security Institute.

In 2009, a year marked by the international crisis and with increasing consequences on local unemployment, hunger and families' income, “O sonho” developed and strengthened the food support program; and was granted a Professional Integration Office, from the National Institute for Employment and Professional Integration.

Due to a partnership with FSIT (Foundation for Spreading Information Technology) it was also possible to execute a gesture language training program and training for trainers program.

Discussion

We analyse this process according to two major topics: the entrepreneurial experience and poverty fighting intervention.

The entrepreneurial process is complex and several factors contribute to its success. Nevertheless, we reflect on a few basic elements. One crucial element was the possibility to participate in decision-making in Local Social Action Council. This participation brought a more consistent knowledge about social intervention networks and

programs and helped to broaden its focus from children to families and later on to training. It also helped the organization to build more consistently a critical awareness on these matters.

Another element is the creation of a team focused on innovation – small teams oriented to innovative solutions to community development – and also on integrating teams and projects inside the organization and networks (Cash, Earl, and Morison, 2008). These teams should have flexibility and capacity to search for new solutions and should be supported by leaders (Drucker, 2001). This implies having a discovery-driven planning orientation, based on an action-research approach (Aguiar e Moniz, 2006). The possibility to develop these capacities was essential to search for, develop and implement new projects in the geographical area initially defined.

Therefore, finding new ways to supporting the institutions that aim social innovation, and not only specific projects, might be a good solution (Chavis, Trent, Crocker, Fatiregun, and Mahon, 2007) to foster its capacity to boost these dynamics for social change.

These initiatives were created building different types of partnership and collaboration, in order to build capacity (cf. Butterfoss, 2007). Some were based on subventions from grant makers like Social Security Institute and Institute for Employment and Professional Training – for programs like Social Integration Income, Local Contract for Social Development and Professional Integration Office; some were based on own management, like Kindergarden, free time activities for children, cradle child support, social store (added with some grants); and some based on an outsourcing partnership, where “O sonho” plays a follow up management role, like microcredit, literacy, training and educational programs. These partnerships and coalitions clearly imply different intensities and functional roles (Butterfoss, 2007).

So, “O sonho” has been playing a mediator role merging social intervention and development programs in several areas (education, training, family support, etc.) with the local needs for development – taking on a community development active role in fostering opportunities for development and social change.

The second topic is poverty fighting intervention. In the first place, we should acknowledge that poverty is a multidimensional phenomenon (Narayan, Patel, Schafft, Rademacher, and Koch-Schulte, 1999; Sousa, Hespanha, Rodrigues e Grilo, 2007).

So, the set of programs generated by this entrepreneurial process has brought out several answers to people's needs. Considering the 5 major areas that low income families consider to be crucial for their development (Narayan, Patel, Schafft, Rademacher, and Koch-Schulte, 1999), we should acknowledge that SII program intends to address all 5 dimensions – Vulnerability to risk, incapacity to be heard and participate; lack of employment, income, housing and clothes; lack of access to health care; lack of access to education. However, this program it is a starting point to support families, who need other community-based and adapted solutions. Some of the solutions developed address these dimensions: SII, training and educational programs – for Education; SII – Health; SII – for lack of voice and participation; SII, Professional Integration Office, Local Contract for Social Development and social store – for employment and income, housing and personal belongings.

Conclusions

This study allowed us to have a more deep understanding of poverty fighting intervention. Therefore, we may conclude that the NGO “O sonho” has been creating gradually a more comprehensive intervention in its geographical area, throughout an entrepreneurial process, confirming that entrepreneurship is a process built with one step at a time (Drucker, 2001) and it takes time and effort so it can have an impact in community and social change. So, this organization is building a poverty fighting intervention, focusing mainly on children, families, and training and education.

“O sonho” is also fostering local innovation, as it is playing a role of catalyst and mediator between national’s and public programs, and local people’s development needs and interests. By this approach, it created new settings and solutions that were implicit needs and that was still remaining as gaps in this territory.

It is also important to state that establishing strategic partnerships and creating teams focused on innovation and integration was also relevant factors, as well as participating, contributing and integrating the networks of city institutions that work around these issues – developing a more collaboratively and thereby sustaining coalitions (Butterfoss, 2007) and boosting community empowerment and community capacity.

Poverty can be therefore fought through development (Yunus, 2007), and comprehensive community approaches at the local level can be an innovative way to bring policies and programs closer to families and communities needs and development.

Future Research

Future research can focus on issues like the crucial elements that enabled organizational capacity to develop an entrepreneurial process; and matching results and strategies used.

Research limitations

The main limitations may come from the researcher’s participative role that also enabled the action research method.

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Exploring dimensions of masculine subjectivity, violence and gender equality in a group of men who exercise violence in their affective relationships

by Adriano Beiras¹ & Leonor M Cantera²



Making the masculine subjectivity into a research, problematization and intervention subject is a relatively recent event. Its visibility is important for the increase of efficacious actions; following the considerations achieved in the United Nations Conferences (Cairo, 1994 and Beijing, 1995) – in terms of intervention and public policies related to violence. The objective of this study is to explore the relationship between the process of subjectivity, masculinities and violence; and reflecting the construction and deconstruction process for men who exercise violence in their affective relationships in contexts of group intervention. It also aims to interject a critical view on the discursive practices that subjectify them and influence the laws and assistance programs directed to these subjects. The methodology is participatory; the method being used is qualitative. It is conducted through participant observation and in-depth semi-structured interviews. The investigation was performed through participating observation and interviews with men who participate in a rehabilitation group for men who have exercised violence in their affective relationships. These reflexive and therapy groups are conducted weekly and coordinated by psychologists. Interventions will occur through therapeutic conversations or dynamic previously developed. The analysis of the data had been obtained utilizing Anglo-Saxon discourse analysis (ideological and rhetorical analysis) and dialogue with the theories which base this investigation (masculinity, queer theory, performativity, subjectivity studies, feminist theories, discursive psychology, social constructionism). As initial results, we can say that the group has given the participants a greater contact with their emotions, the understanding of violence as a process, alternative mechanisms for containing violence, deconstruction of idealizations and essential, asking themselves for the traditional gender's roles, contact with their own vulnerability. In other words, giving to them the first steps for the construction of subjectivity that help them integrate the complexity and diversity of humankind and to cease violence. The reflexive deepening and result analysis in process in these questions it will contribute through the betterment of assistance public policies and the possible refinement of legislations about violence.

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Introduction and Background

We need to relate the studies on violence and the studies in masculinity for a more efficient and appropriate understanding of male violence against women (Machado, 2001, Villaseñor Farías & Castaneda-Torres, 2003, Minayo, 2005, Ramirez 1999, Ramirez 2005). In recent years, after indications from the International Conferences on Population and Development, organized by the United Nations (UN) in Cairo (1994) and Beijing (1995) on how to work with men in different areas, an increase of public attention on areas including male sexual and reproductive rights, paternity and parenting, male health and violence, research and public policy in various countries occurred. In 2009, a Global Symposium in Rio de Janeiro was held with the participation of NGOs from 80 countries to discuss the engagement of men to promote gender equality.

Many of these countries, in varying conditions, promote intervention with men who are perpetrators of violence in addition to implementing different initiatives with persons who are victims in these incidents.

It is important to clarify the diversity of terms used to define male violence groups. We find such terms as "rehabilitative", "educational", "psycho-educational", "reflexive", and "therapeutic". The variety is related to the theoretical approach and the objectives of the group.

The first re-education, rehabilitation, and reflexive groups with male perpetrators of violence began in the USA and Canada towards the end of the 70s and they have since multiplied in many countries under various theoretical perspectives and formats. On these years, several authors had done studies about interventions with men who have abused, like Corsi (1994); Adams & Cayouette (2002); Nascimento (2001); Corsi, Dohmen, Sotés & Méndez (2006); Beiras, Clímaco, Lodetti, Lago & Toneli (2007), Lima, Buchele & Clímaco (2008), Quinteros-Turinetto & Carbajosa-Vicente (2008), Toneli, Beiras, Clímaco & Lago (2010).

A major concern relates to violence against women. Changes were made in the laws of European and American countries, in regard to legislation on gender violence. In some of these laws the penalty against any domestic assault violence became more rigid, with strong criminalization of the one who exercises the violence.

In this context, discussions about the identity of those who commit acts of violence have gained momentum, although often still as a part of conceptions of behavior. Explanation like psychologizing and pathologizing has been used in different ways. Both in the legal field as in the social assistance, if we think about discursive practices, there is a production of male identity involved in violence. This production is present in the media and discussed at various forums on public policy and also appears in changes in the laws of each country.

Goals

This investigation is derived from a PhD Thesis (still in process). In this communication, we want to present the idea of this study and some initial points about the relationship between the identity process, masculinity and violence, reflecting on the construction and deconstruction of identity of men who have exercised violence in their affective relationships, when they participate in a group intervention process. We wonder, what is an "aggressor" or "abusive man"? What linguistic resources are activated on social interaction for the construction of this subject? What gender issues are involved? The objective of this research is not to victimize or criminalize them, but cast a critical view on the discursive practices that constitute subjectivities and influence laws and welfare

programs directed at these subjects. We want to understand how they are constructed in social interaction and what kind of attention is being given by psychology as a field of studies. Another intention is to reveal the ideologies, subjective processes of identity and gender aspects involved on this process.

Considering all this, the research is guided by the following research question: *what kind of masculine identities are constructed and deconstructed on a process of intervention with groups of men who are violent? What are legal implications and what kind of gender constructions are influencing this process?*

Methodology

The methodology is participatory; the method being used is qualitative. It was conducted through participant observation and in-depth semi-structured interviews (applied on the beginning of the process group and after the group's end).

These reflexive and therapy groups used for sampling were conducted weekly and coordinated by psychologists. Interventions occur through therapeutic conversations and group dynamics developed previously. The analysis of the data will be obtained utilizing Anglo-Saxon discourse analysis and/or narratives studies, in dialogue with the theories which base this investigation (masculinity, queer theory, subjectivity studies, feminist theories, discursive psychology, social constructionism).

The participants were men of different ages and economic conditions, necessarily participants in these reflexive and therapy groups, who have used violence in their relationships. Participation in the group was voluntary, but some participants were already subjects of legal proceedings because they had been denounced by their partners and were strongly motivated to go to the group for this reason in particular. We are interested in the possible changes on their subjective identities influenced by their participation in the group interventions and possible discursive changes.

In this investigation, we want to emphasize a different perspective to understand men who exercise violence, contrasting essentialist and pathologizing contributions and heteronormative influence presented in the literature on the perpetrator of violence. This study brings the possibility of deconstruction of dichotomies reflecting about the implications of the process of subjectivation and the work with gender violence.

To continue, we want to comment briefly about some initial perceptions of the group's experience. In the group, the blaming of women for all the violent acts occurred in the relationship prevails. In this sense, we work hard to make them conscious about their own responsibility for their violent actions. This was a constant work and the first step for accountability and change. Another important point was the contact with their personal emotions. This was a problem for many of them who could not say what they felt in different situations constantly. They rarely had any attention to their feelings. In consequence, emotions are expressed in different ways by attacks against others or somatic ailments. The group allowed them to become aware of all this and to develop different ways to express emotions without the use of violence, improving their interpersonal communications.

The group intervention builds a new socialization experience for these men, deconstructing traditional views of masculinity, the relationship between masculinity and violence and promoting the contact with their own personal history, their childhood and violent life experiences. The group experience and the interventions produced there

entail the revision and questioning of certain practices, which were seen before as common or natural and thus promotes change.

It is important to emphasize the strong influence of the justice system and other institutions in the process of constructing male identity on the cases studied, sometimes increasing the problem of violence instead of decreasing. Their own understanding of themselves as subjects passes through the vision of the judicial process about them, also, the health system, their families' and partners'. This process of subjectivation is revised and reconstructed in the group process.

With the experience of the group and interventions that promote subjective changes, these men start to understand the consequences of their violent acts, the complexity of the violence and deconstruction of their previous understanding of violence as the best way to solve their problems. They improve interpersonal communication, develop tools for change and exercise alternatives to violence. The strength of the group reveals new possibilities of subjectivation, relationships and of being a man. Promote the empowerment of alternative masculinities, reviewing traditional masculine behaviors.

However, these changes are complex and, for some participants, continuous, requiring counseling and follow-up sequence, post-group. These issues are currently under investigation.

Discussion

What we would like to emphasize in this communication is the importance of working on identity and the changes of subjective self-images of these men, beyond just behavioral changes or anger management. Another thing is to believe in change and not in pathologizing or psychologizing the theme or look for a "profile" of battering men. This infers a psychoeducational and therapeutic work continuous and further in-depth, where these individuals can construct new narratives of subject, discovering new and alternative ways to the constitution of the subject and social interaction, a path of respect, justice and gender equality.

As initial results, we can say that the group has given the participants a greater contact with their emotions, the understanding of violence as a process, alternative mechanisms for containing violence, deconstruction of idealizations and essentialisms, questioning the traditional gender roles and contact with their own vulnerability.

In other words, giving them the first steps for a new construction of subjective identity that help them integrate with the complexity and diversity of humankind and to cease violence. In the sequence of this investigation, the reflexive deepening and result analysis in process will contribute through the betterment of public policies of assistance and the possible refinement of legislations about violence.

The construction and reconstruction of identities, worldviews and cultural reflections of gender derived from these kinds of experience with men can promote better health actions against violence, less individualistic and fragmented approaches and engage men to the construction of gender equality, human rights and citizenship.

The intersection between gender theories, reviewing traditional masculinity, interventions centered on subjectivity changes and studies on violence against women show effective alternative possibilities of intervention in this sector with men who exercise violence, deserving further studies and more emphasis on public health, legal aspects and family violence studies.

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Children on the streets: is it a problem for the families?

by Lirene Finkler¹, Nathalia Matos Pereira¹, Gabriela Vescovi¹ & Débora Dalbosco Dell'Aglio¹



Children on the streets is a serious issue, unfortunately very frequent, in most big cities all around the world where poverty dominates everyday life. We expect families to protect their children, as well as being responsible for the formation of individuals, teaching society's rules and values. It's a place for children and people to feel included, to feel a part of, a space for intimacy. Because of the importance of family in human development, as well as its relevance for social policies, this study aims to evaluate the perception of families about the fact their children are on the streets. Is it a problem for these families? It's important to enhance that in this research we don't consider the nuclear or consanguineous concept of family. Family is taken in an amplified sense, as relevant and affective relationships kept along life.

The context of families with children on the streets is usually hard. Poverty, daily survival challenges, violent environment, all this issues increase social and affective difficulties to take care and raise children. Children on the streets frequently have families in a poverty context. They are exposed do different risk factors, as drug abuse, intra and extra-familiar violence, physical, sexual and emotional abuse, lack of food and basic sanitary conditions, child labor and school dropout (Granpal/UFRGS, 2004; Paludo & Koller, 2008). Because they are exposed to strong economic problems and serious lack of affection, studies show that populations living at risk are said, generically, as presenting a gap in physic, cognitive and/or socioemotional development. Child labor and the school dropout is frequent. On the other hand, they can develop numerous strategies for survival and health maintenance, the protection factors, and family can be one of these protective factors (Alves, 2002; Yunes, 2006).

To understand how families experience and feel about the fact their children are on the streets can contribute to qualify interventions and families' and community's protective abilities as supportive network. The main questions of the study are: Is being on the streets a problem for the families? How do they feel about it? What are their hopes about their children's future?

Method

14 families took part in the study which had experienced street situation and which were accompanied or followed by Ação Rua, a social program in Porto Alegre, south of Brazil (PMPA, 2006). Families were represented by mothers and grandmothers. These families were also being followed in social assistance municipal system and

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receiving financial or social support. They were invited to participate in the study after they took part in a focus group to discuss the Ação Rua Program.

A structured interview and sociodemographic form were used. The questions were: how long has your son/daughter/relative being in street situation? What does he/she do on the streets? How do you perceive and feel about this fact? What do you hope for the future of your children? Interviews were filmed or recorded, and transcribed.

Data were analyzed through content analysis, as proposed by Bardin (2004), and is presented in four topics: 1) sociodemographic data; 2) the characterization of the street situation for these families 3) Families' perceptions about the street situation and 3) their perspectives for the future.

All ethical procedures to research with human beings were taken. Results will be presented to participant institutions, local and Municipal Rights Councils (Social Assistance Council, Child and Adolescents Council, Tutelar Council). A specific meeting will return data to participant families.

Results and discussion

Sociodemographic data

Within the 14 participants, twelve are mothers (between 22 to 47 years old) and two are grandmothers (56 and 62 years old). They have 1 to 6 years of study. The number of children varies from 3 to 12. Most participants have a partner (8), 3 are divorced, 2 are widows and 1 is single. There are nuclear families, composed by a father, a mother, and children, but there are several variations in the composition of the domestic nucleus, sharing the housing with brothers, grandchildren and grand-grandchildren. Most participants are housewives or are not working, but doing occasional activities as general and domestic services.

Street situation characteristics

- *Who is/was on the street:* children at school age (from 10 to 15 years old); young children (until 5 years old) that are on the streets with their mothers.
- *Length of time on the street:* from 15 days to 6 years.
- *Activities on street:* begging, adult and child labor (collecting garbage for recycling, selling products, working for the drug trafficking), ludic activities (electronic games), drug use

Families perceptions about their children being on the streets

a. Legal prohibition and Governmental Control

This category shows that families know that their children being on the streets is legally prohibited, but it doesn't mean they think being on the street is necessarily bad. Families that receive financial support from social programs try to prevent their children from being found on the streets, because it can make them lose governmental resources, and the children can be put in a shelter or care institution. Some quotations can express these opinions: "Now it is worse! The social service doesn't let them work, at all! And sometimes you're there,

working, and they just don't let you work there, in the city center" (Family 3); "I was worried the Local Council could put my children in a shelter" (Family 4); "If there wasn't this law, it wouldn't be a problem" (Family 7).

b. Dangers of the street

Being on the streets is seen as dangerous because it puts life at risk due to urban violence, drug use and drug trafficking: "It's mean, it's dangerous, because he is putting his life at risk on the street (...) You can see a lot of things like stray bullets nowadays. Now it is too dangerous... They are killing innocent people..." (Family 3).

c. Helplessness and suffering

The fact their children are on the streets worries and exhausts family members, arousing concern and feelings of helplessness and impotence: "For me it is terrible, a feeling of impotence... that I didn't know how to set him limits, I messed up somehow" (Family 9).

d. "Easy" money

Money easily achieved on the streets has a double meaning: in a positive sense, it helps the families economically; on the other hand, it makes it difficult to drop off the streets: "You know, this business of easy money, those guys that take care of cars, they earn a lot of money, they stay there one hour, two hours and make money ... It is difficult to leave the street, you know!! It's hard to keep them at home because outside there is the money ... I think people who give them money, maybe if they didn't give them, I think they would not go on to the streets that much" (Family 1).

e. Protection and bond

This category shows that being on the streets sometimes is perceived as a protection factor, because many times they are on the streets following parents in their activities on the street, and this keeps the bond between them: "It was good when he was with me, because I could keep an eye on him" (Family 13).

f. Labor (denying the street situation opposing it to begging)

Working on the streets is not seen as being in street situation. The fact the holes families frequently work on the streets, the transgenerationality of working on the streets, justifies the validity of the work, as opposed to begging: "I worked on the streets and I didn't die. They (the children) should work, and not beg" (Family 12).

Perspective for the future

As perspectives for the future, families desire: to have comfort (meaning to have a house, or the existent house to have a bedroom or a toilet); study, children to finish school, go to the university, to have a better job than the parents, to quit the streets, change their life, not to use drugs, not to be a gangster, not to think about having children during adolescence: "I want them to be what they want" (Family 3).

Final Considerations

Data indicate that families have ambivalent feelings, perceiving positive as well as negative aspects in the fact their children are on the streets. Mothers frequently feel helpless, unable to modify this situation, requiring help from the social assistance services and local network protection. One of the central questions to qualify the interventions is to focus on the transgenerationality of being on the streets, as well as on the dichotomy of child labor and the social value of work. A limitation in this study is the fact we interviewed only mothers, as representatives of families. For further studies we suggest an analysis of fathers', at home siblings' and other relatives' perceptions about being on the streets.

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Children on the Streets: Family's Perceptions about a Social Program's intervention

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Interventions to cope with children living and working on the streets (children in street situation) were first centered on the children and the adolescents, but now start to focus on the families. The Ação Rua Program is a public social project implemented in 2007 in Porto Alegre, RS, Brazil, which is responsible for approaching and monitoring children and adolescents that live and work on the streets, as well as their families (PMPA, 2006). This study is part of a broader research that aims to evaluate program implementation and interventions. The global objectives are to investigate the awareness of the group involved and assisted by the program (managers, social workers, families and children and adolescents) concerning the impact of the interventions made by 'Ação Rua', as well as to evaluate the implementation of the service (different stages, teamwork composition, community insertion and the integration between teamworks and community).

Social program and project evaluation research point out the relevance of individual's participation, in the evaluation process (Uchimura & Bosi, 2002). This study evaluated *family's* perception concerning the impact of the interventions made by Ação Rua program, in order to identify fundamental elements in the family's and the community's rebounding.

Method

Participants: 11 families took part in this study who had experienced street situation and were accompanied by Ação Rua. These families were also being followed in the social assistance municipal system and receiving financial or social support. Families were represented mainly by mothers and grandmothers, but some children also took part in the project.

Instruments and procedures: Focus Groups were used in order to discuss how these families experience the street situation of their children and how they interpret the intervention of Ação Rua. Sessions have been videotaped and transcribed for analysis purposes.

All ethic procedures to research with human being were taken. Families signed an informed consent paper. The Project was evaluated by the Ethic Committee at UFRGS. A Term of Agreement was signed by participant institutions and families signed an Informed Consent. Results will be presented to participant institutions, local and Municipal Rights Councils (Social Assistance Council, Child and Adolescents Council, Tutelar Council). A specific meeting will return data to participant families.

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Analysis: Data were analyzed through content analysis, as proposed by Bardin (2004), and is presented in five topics: 1) characteristics of families, 2) family's comprehension about the Program objectives, 3) family and program relationship, 4) intervention's impact and 5) social workers abilities regarding social intervention. These are the initial analysis.

Results

To present the results, we begin with a quotation from a focus group, that express a shared experience between families:

"...they (Ação Rua) found my children begging on the streets, you know. I was unemployed, used to collect garbage for recycling, stuff like that. And my children were always going out to beg, so they were most of time begging on the streets instead of at school. Then I met the social worker, and the two guys that work with her on the streets, approaching the children that were begging, and stuff like that... They took the children home. Then they talked to me, we talked about the reasons I was in that situation, that I was unemployed... Then we talked a lot! Then they started helping me to go to places where I had to go (to change this situation)" (Mother)

1) Characteristics of families

Within the participant families, women are the main caregivers. The extended family is living nearby or sharing housing, and usually is responsible for 3 to 12 children. Unemployment is very frequent, and family members do occasional activities, as general and domestic services, and collecting garbage for recycling.

2) Family's comprehension about the objectives of the program

In the beginning, families fear the program team would take their children, send them to a shelter and also expected them "to say families what to do"; after, they express a better comprehension about objectives of the project.

3) Family and program relationship

Families expect the presence of the program team on a daily basis, home visits, and constant but transitory approaching on the streets.

4) Intervention's impact

Families refer to insertion in school and in network services as the main impacts of the intervention of the Program in their lives. They also express that the contact with the program team forced families to reflect about child labor, led to changes in families' interactions and parental styles and increase the dialogue between relatives.

5) Social workers abilities regarding social intervention

Families say that it is necessary for social workers to have patience, empathy, conversational abilities, not to fear to be in the community environment, to have the ability to mediate conflicts and to have knowledge and ability to help families to integrate in places relevant to its protection and citizenship.

Discussion

As can be seen by the initial analysis developed until this point, there are different experiences of intervention with children and adolescents at risk, and they are perceived in different ways by the families. Generally, these interventions work with strategies of approaching, believing it is important to have time for a process to build relations, and that the construction of life projects, together with children and family, are relevant.

Families tend to underline the relevance of actual steps to reach the social re-insertion of the family into society: adaptation of children at school, or social activity during the day, drug treatment, to reinsert the child into a home environment (shelter, or other family members, as aunt or grandmother), groups to generate wages. But families, as the work process goes on, perceive more subjective and interpersonal aspects of intervention, as how they express affection, limits and how they communicate into the family. All this elements go to the direction of empowering family's abilities of taking care of their children.

Data show predominantly a positive perception about the Program, and can contribute to the evaluation process of the strategies used, as well as to its improvement. However, families did not point out relevant elements related with reinsertion in the community, and this deserves careful analysis. This study is still undergoing further analysis, seeking to make comparisons with the results of the evaluation of the same program by the social workers and by the children, among other possibilities.

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Pour une approche communautaire des souffrances psychologiques chez les populations africaines en zones de conflits

par **Espérance Fontes**¹



Les conflits armés des dernières années ont plus que jamais pris pour cibles les populations civiles. Les guerres tribales ou interethniques qu'a connues l'Afrique depuis la fin du dernier siècle ont eu pour particularité la destruction et l'anéantissement de l'Autre. Il ne suffit donc plus de gagner une guerre mais de tuer massivement, d'infliger des souffrances innommables aux victimes, de détruire les biens et de violer les femmes et les jeunes filles.

Ces souffrances portent le nom de syndromes post-traumatiques ou névroses traumatiques communément appelés traumatismes. Les recherches actuelles admettent des variations liées à la personnalité et aux conditions socioculturelles de chaque individu. Le contexte dans lequel un événement traumatisant se produit compte énormément. Les ressources dont disposent les communautés pour faire face à cet événement sont d'une efficacité non négligeable et s'avèrent le plus souvent plus adaptées.

Pour illustrer cette démarche, je propose de présenter et de discuter les résultats d'une recherche doctorale ayant porté sur la construction d'un outil de prévention et d'intervention en matière de santé mentale auprès de Rwandais survivants du génocide et des massacres. Cette recherche a abouti à l'élaboration d'une « théorie locale » du traumatisme basée essentiellement sur une approche communautaire.

Les situations de souffrances psychologiques collectives obligent l'intervenant à réfléchir aux nouvelles façons de faire avec des outils et une méthodologie adaptée pour une meilleure efficacité. Il peut aussi s'agir de réactiver et revaloriser les formes traditionnelles et communautaires de traitement du malheur.

C'est dans cette perspective que s'est inscrit ma démarche auprès de rescapés rwandais vivant en France et au Kenya, enfin d'élaborer ensemble le sens à donner à ce qui leur est arrivé ainsi que les ressources dont dispose ces communautés pour y faire face.

Quelques interrogations ont servi de base à mon hypothèse de travail :

Quel sens donner aux génocides et massacres de masse ?

Qu'en disent les anciens, les sages ?

Quelles sont les limites des interventions thérapeutiques centrées sur les théories importées ?

Quelles sont les ressources dont dispose la communauté rwandaise pour faire face aux souffrances massives ?

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Trois étapes m'ont permis de tenter de répondre à ces questions :

1ère étape : Groupe de réflexion de Rwandais vivant en France

Ce groupe constitué essentiellement d'universitaires rwandais a permis une réflexion commune sur le sens à donner aux événements. Nous cherchions surtout à saisir les éléments pouvant expliquer le génocide et les massacres en les articulant à la pensée traditionnelle rwandaise.

2ème étape : Entretiens avec les rwandais vivant au Kenya

Ces entretiens sous forme de groupes de parole ont permis aux personnes rencontrées de parler de leurs souffrances. Une large part a été faite à l'histoire du Rwanda y cherchant des facteurs permettant d'expliquer le génocide et les massacres.

Leur présent est fait de souffrances dont la principale cause n'était pas essentiellement la mort des proches mais les conditions dans lesquelles ils ont été tués ainsi que l'absence de rituels funéraires. Il ne suffisait pas de tuer mais d'humilier et de faire souffrir les victimes le plus souvent en présence des survivants qui n'auront même pas la possibilité de récupérer les corps pour les enterrer dans la dignité.

3ème étape : Suivis thérapeutiques

L'exploration du vécu psychologique des rwandais réfugiés au Kenya m'a permis d'expérimenter les modalités thérapeutiques auprès de familles rwandaises reçues en consultation au Centre Georges Devereux de l'Université Paris 8.

Nous avons passé beaucoup de temps à essayer de comprendre. Les familles avaient besoin de poser des questions même si elles savaient très bien que je ne pouvais pas y apporter de réponses.

L'important pour elles était de pouvoir les poser : pourquoi le génocide, pourquoi je ne suis pas morte, comment les humains peuvent-ils faire cela ? Elles cherchent du sens, elles voudraient comprendre mais une personne des personnes me dira plus tard qu'un génocide ça ne s'explique pas.

Lors d'autres consultations, les personnes ont parlé de leurs rêves ou plutôt cauchemars dans lesquels prédominent 2 thèmes : les images de morts et le retour au Rwanda à la recherche éperdue des membres de familles.

Aux séances qui ont suivi, les récits de souffrance ont tout doucement cédé la place aux doux souvenirs d'enfance : la maison familiale, les voisins, les amis, les soirées passées à se raconter des histoires et à rigoler et beaucoup d'autres doux souvenirs.

A partir de cette situation clinique qui est loin d'être un cas isolé, j'aimerais donner 3 exemples d'événements permettant d'illustrer la complexité des souffrances causées par les conflits armés, particulièrement en Afrique. Il s'agit de la mort des proches et les conditions dans lesquelles ils ont été tués, du viol des femmes et du phénomène des enfants soldats.

1er exemple : La mort des proches et les conditions dans lesquelles ils ont été tués.

Les tout récents ou actuels conflits armés qu'ont connus les différentes régions d'Afrique nous montrent à quel point il ne s'agit plus uniquement de tuer mais de mal tuer c'est-à-dire faire souffrir la personne avant de la tuer

ou infliger des traitements dégradants à son corps mort. A cette notion de mauvaise mort s'ajoute l'absence de sépulture et par conséquent de rites funéraires car la plupart du temps les personnes survivantes aux conflits n'ont pas pu ou eu le droit d'enterrer les leurs comme le prévoient les croyances ou les traditions. Ainsi ces personnes survivantes sont non seulement hantées par la mort mais aussi par la mauvaise mort à laquelle elles ont assisté ou qu'elles imaginent ainsi qu'à l'absence de rites funéraires qui facilitent l'acceptation de la mort et le travail de deuil.

2^{ème} exemple : Le viol des femmes et des jeunes filles.

Le viol est aujourd'hui utilisé comme une arme de guerre. En effet, les guerriers ne violent plus pour assouvir un quelconque désir sexuel mais bien pour abîmer, salir, humilier voire transmettre des maladies comme le SIDA qui tuent la personne violée à petit feu.

A l'innommable souffrance des femmes de tous les âges s'ajoute le regard que la société africaine porte sur elles. L'exemple le plus récent est celui des jeunes filles et des femmes séquestrées et violées par les combattants dans l'Est de la RDC. Celles qui parviennent à sortir des forêts et à témoigner préfèrent (mais ne peuvent pas) rester pour tout le reste de leur vie dans les centres de soins qui les accueillent plutôt que de retourner au village affronter la honte et le regard impitoyable des voisins. Ces jeunes filles savent qu'elles ne trouveront jamais de fiancés et les femmes mariées sont rejetées par leurs maris.

3^{ème} exemple : Les enfants soldats.

Ces enfants sont prématurément arrachés à leurs familles mais il s'agit aussi d'enfants déjà orphelins abandonnés faute de structures adaptées pour les accueillir. Beaucoup d'entre eux sont récupérés ou capturés par les combattants qui en font des esclaves ou des enfants soldats. Ils sont le plus souvent obligés de servir et de combattre du côté des assassins de leurs parents. Ils subissent de la part de leurs ravisseurs des violences physiques et morales sans aucune mesure. On leur vole leur enfance. Ces enfants sont aussi rejetés par leur communauté ou s'excluent eux-mêmes pour avoir combattu du côté des bourreaux de leurs familles.

Par ces exemples précédents, j'ai voulu mettre en évidence la complexité des désordres psycho-sociaux touchant les populations en zone de conflits ou post-conflits. Cette complexité oblige les intervenants en matière de santé mentale à sortir du cadre conventionnelle pour intervenir efficacement.

Quelques outils expérimentés lors de ma recherche-action me paraissent pertinents :

S'intéresser aux techniques de prise en charge traditionnelles et/ou communautaires des désordres psycho-sociaux et s'en inspirer dans la mesure du possible (groupe de réflexion ou de parole).

Recourir à l'histoire, le droit, la géo-politique, la sociologie l'anthropologie et d'autres sciences pour mieux saisir la complexité des situations.

Prendre le temps de travailler la question du sens (pourquoi le génocide ? pourquoi moi ? comment l'être humain peut-il faire ça ? pourquoi la communauté internationale n'est-elle pas intervenu ?). Les survivants ont besoin de poser toutes ces questions même s'ils savent qu'aucune réponse concrète n'est possible.

Repérer et former des « personnes ressources » issues de la communauté pour servir de relais et permettre de toucher et soutenir un plus grand nombre de personnes.

Ces outils expérimentés dans le cadre limité d'une recherche doctorale mériteraient d'être complétés, adaptés et utilisés de manière plus large auprès de populations en zone de conflits ou post-conflits.

Everyday perceptions: the history of marginal urban communities in Durango City, Mexico

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Introduction

The community intervention programme called "*Integral Formation Programme: Community, Adolescence and Family*", has been working since August 2007 thanks to interinstitutional collaboration between government and academic bodies in Durango City, Mexico, and has been operated by the School of Psychology and Human Communication Therapy of Juárez University of the State of Durango since the beginning to its current third operational phase.

In this context, three neighborhoods in the outskirts of Durango City have received attention from the theoretical and conceptual perspective of Community Psychology in order to promote health and well-being as well as self-organized psychosocial processes and networks.

The development of the programme, both methodologically and in its scope, has demanded optimisation of all available resources –and validation of others– in order to establish a specific research area which includes alternative research projects that will strengthen community-based activities. Apart from the reflection on our intervention and the assessment of its impact, understanding the target population and its problems has been crucial. In this context, the characteristics of the first research actions are hereby presented.

Objective

There have been three reasons to construct a longitudinal (historical) image of the community and to delve into the sociocultural recognition of the human settlements which emerged to the neighbourhoods mentioned above: (1) to gain a deep understanding of the values, beliefs and thoughts which manifest in the communication of the community dwellers which transcends their individuality. This can be seen as an approach to their world or subjective reality that binds them and identifies them and from where they observe their reality and interact with other social actors.

(2) the recognition of the *shared emotional links* amongst the community members as "the conviction and commitment shared by members who will thus share a history, everyday places, time together and similar experiences." (Ornelas, 1998: 40). This is a key element for the construction of a community feeling that strengthens communitarian bonds, commitment, trust and security.

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(3) to understand the link between that reality and other ones, which in this case will always be our own viewpoint towards the world and its events, sometimes placing us in the perspective of the intervenor or the researchers and on other occasions from our gender, social class or territory, but constantly recognising the limitations of our interpretations. It is our interest to find out what binds these communities together, beyond the immediate work or professional link, in an attempt to establish a genuine and responsible approach.

Method

From a qualitative perspective, the research principles of Community Psychology were adopted (Balcazar, 2003) in which individuals are conceived not as passive subjects but as participants who collaborate in the process, applying the contextualist epistemological approach that forces researchers and community members to work together to achieve understanding of a common interest phenomenon and considering methodological pluralism that encourage the use of innovative and context-sensitive methods.

The main instrument used was the *narrative autobiographical interview* (Appel, 2005) – grounded in Symbolic Interactionism, Social Phenomenology and Ethnomethodology– of relevant actors in the community who are a passkey to untangling the social and historical weaving of the community.

This procedure of the interview encourages free, spontaneous narrative of lifetime stories of the interviewee, by simply proposing them to "tell us their life". Additionally, everyday scenes were recorded at the suggestion of the interviewees.

The interviews were analysed based on Grounded Theory principles. From the first interviews' analysis, clues to interpret and understand the social and biographical processes emerge, which also enable selecting informants for further interviews. Also, the experience of interviewees as participants of the project has been elicited, which permitted to find out about the fit of the programme in the context of their habits, culture and everyday life.

Results

Analysing the data collected has been an opportunity to reconstruct fragments of the communities' history compared to other neighborhoods: foundation, growth and current affairs, not only in a geographical, but also in the social, psychological and sociocultural sense. They are depicted in a documentary which tries to show the elements and imagery which represent everyday life of these communities. The visual, auditory and narrative language used in the study therefore is easy to understand for the actors involved in this intervention: community, research team and participating institutions.

Poverty, marginality of these "forgotten ones", women who sail upstream only with their children on board, are the characters and circumstances that permeate the narrations of the dwellers of these communities. We do not expect that interventions and analyses of our project will diminish their situation, but it raises the capacity to be named and recognised and interact with the outside world, whose awareness is expected to be raised.

This ethnographic documentary has been presented in a "closing report event", where members of the community, representatives of financing institutions and programme operational staff met.

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Empowering strategies in health and social services for homeless

by **Patrizia Meringolo¹, Alessandro Morandi², Nicola Paulesu³ & Mirella Riccardi⁴**



Introduction

Homelessness is a multidimensional problem characterized by powerlessness and social exclusion, poverty, lack of affordable housing, lack of public assistance and health care (Freire, 2002; Tinsley Li, Nussbaum & Richards, 2007; Toohey, Shinn & Weitzman, 2004). Homelessness is shown as a step in a *descending spiral process* (Garzia & Kazepov, 2004, p.117), where it's possible to enter through different paths, owing to financial difficulties or to a life event which becomes a decisive factor for lack of suitable resources (Atkinson, 1998; Bagnasco & Negri, 1994; Zupi, 2003). So homelessness comes with the risk of getting chronic, and with a negative perception of one's personal and social identity (Toohey, Shinn & Weitzman, 2004). Psychological approaches therefore play an important role to understand the factors that enable people to escape homelessness and to reduce chronicity (Epel, Bandura & Zimbardo, 1999; Haber & Toro, 2000; Philippot, Lecocq, Sempoux, Nachergael & Galand, 2007; Shinn, 1992; Toro, 2007; Toro, Trickett, Wall & Salem, 1991). Empowerment theory and networking based interventions in health care services, public and private shelters, public authorities and NGOs interventions seem to be important to promote the transition from institutional and temporary housing to social inclusion, to improve capability in maintaining a stable accommodation and well-being (Calysn, Morse, Klinkenberg, Yonker & Trusty, 2002; Fisk & Frey, 2002; Zimmerman, 2000).

Aim

This study is related to a wider research area aimed at increasing knowledge of the condition of homelessness and of social services. The aim of this step is to highlight the theoretical and empirical model which support interventions of homeless services, and to gather qualitative data on the key informants' perceptions about empowerment-oriented practices in social services.

The research was carried out in Florence. Local public and private shelters have different schedules, from a 3 day shelter to 3 years or more, and they have 355 beds in all. In 2008, when inhabitants in Florence were 369.659, 53% female, 11% migrants (Municipality of Florence, Municipality Statistical Office, 31 December 2008), the number of sheltered persons was 1051, (15% female and 60% migrants -Municipality of Florence, Local Councilor for Social Affaires and Social Inclusion, 2009)

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Method

Participants

15 key informants: 5 care workers, 1 volunteer, 2 psychologists and 7 shelter managers, coming from different organizations, involved in assisting homeless people.

Instrument

Deep interviews to collect information about positive and negative aspects of relations between helper professionals and homeless people, empowerment strategies and resources. All interviews (mean length one hour each) have been recorded and transcribed verbatim. Participants have been told about law in force on the matter of privacy.

Qualitative analysis was carried out, data were processed by means of Atlas.ti software.

Results

A *manipulative* attitude of some homeless is one of the aspects highlighted as critical (Fig.1). In some cases, a critical aspect is the attribution of features, needs and behaviour typical of a homogeneous group of homeless people, underlying a stereotypical view of the phenomenon: *“Our social service has financial contributions as instruments for intervention, assessing needs financially, but financial grant doesn’t get positive outcomes, doesn’t help ... they perceive standardization as a negative factor: we are all homeless and so we have the same treatment.”*

A positive aspect is mutual trust, which may support homeless’ motivation to face changes, improve skills and promote self-esteem, in order to reach a positive personal identity. Further positive aspect seems to be that social workers take in account different expectations and needs, avoiding judging attitudes: *“To be able to customize interventions doesn’t mean satisfy all demands, but trying to understand exactly what their demands mean, having a look at people and their problems, without treating each of them as any homeless who is coming to service.”*

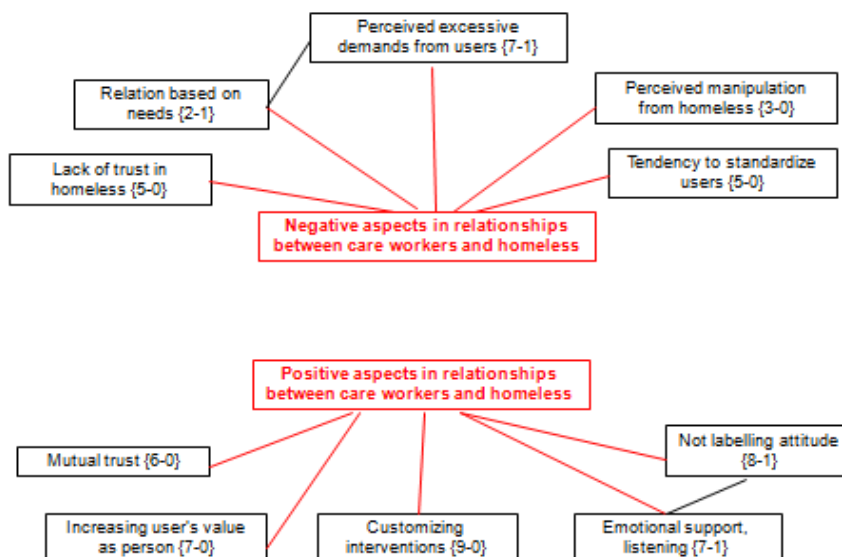


Fig. 1 – Positive and negative aspects of relations between helper professionals and homeless people

One dimension of an empowering intervention (Fig. 2) is awareness: “that’s exactly making individuals aware of their responsibility about their life... the central role of persons. ... I agree in this kind of intervention, I think that this is the only possible way.” Particularly, interventions aimed to promote social and relational skills could be important to make homeless aware of their social networks: “Encouraging socialization also in other social environments, not only among homeless... getting people in touch with other situations that aren’t social services, that is giving a chance to take part in other social contexts”.

They speak about advocacy, referred to local institutions and decision makers, in order to pay more attention to homelessness and to changes in social policies, supporting risky groups, for instance women, migrants and persons with disabling diseases.

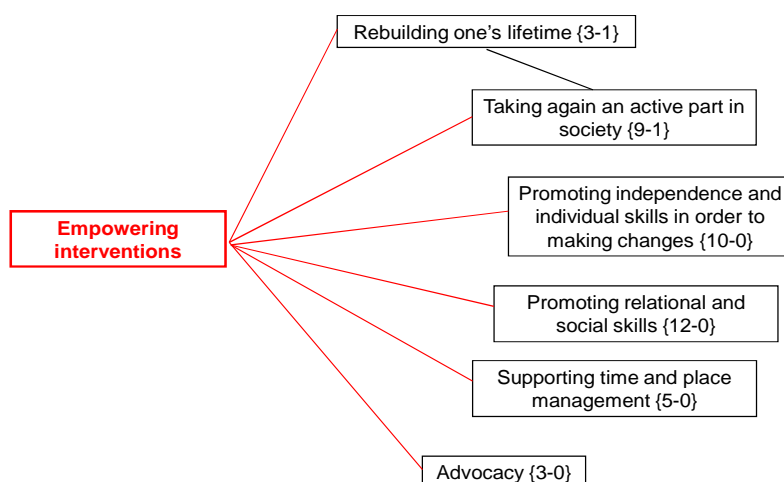


Fig. 2 – Empowering interventions.

Weaknesses in social services

The interviews show two kinds of weaknesses: on the one hand the services organization, on the other the service system in the local context. Regarding the organization, a lack of flexibility and customized interventions is shown, because of more standardized resources available. Thus, the focus of intervention is not on the person but on the procedure: *“the quality of service traditionally concerned giving a blanket, a place to sleep and to eat, but without quality care means working on relationship, and about this issue we are getting back”*. Another weakness is the risk of care workers’ burnout, resulting from the difference between the expectations and the real possibilities of achieving the goals. The lack of financial and human resources seems to be sometimes a structural condition of the participants’ work. The system of services is thought often as marked out by *outdated features typical of social security*, with interventions based on the representation of the poor as a deviant, where bureaucracy may slow down any new project.

Strengths in social services

Skills and training of care workers are positive aspects: relational and listening skills are thought as important dimensions in a work characterized by relational helping and caring. It seems moreover to be useful *monitoring and evaluating* the individual treatments and the work carried out by the service. Promotion of *networking* seems to be, according to participants, an important aspect for improving interventions that need integration of different competences. For some of them the network would be a method that may facilitate an empowering approach based on the “individual project”: *“It’s important to build a network among organizations, small enterprises, artisans, families too, for promoting empowerment strategies.”*

Conclusions

Results highlight that homelessness should not be considered only as an individual situation, marked by lack of skills and capacities and in need of social aid, but rather as a problem that requires community based research and intervention. This viewpoint is particularly important to promote empowerment-oriented strategies aimed to inclusion of marginalized people.

Empowerment-oriented interventions for homeless would be based on a set of practices: a) for Users: evaluating different needs, customizing intervention on personal strengths and social skills (time and space management; positive self identity); b) for Social services: networking, monitoring and evaluation of interventions, care givers’ specific training (f.i. in psychiatric disorder).

This approach may reduce the *“revolving-door”* phenomenon, related to many homeless moving continuously among different services and shelters.

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Action humanitaire et programmes de psychologie communautaire en situation post-conflit.

par Marie-Thérèse Neuilly¹



En situation post-conflit, des programmes de psychologie communautaire et de psychologie sociale sont appelés à contribuer à des actions de stabilisation ou de paix. On peut noter aussi que certains programmes de psychologie sociale s'appuient sur la communauté pour atteindre des objectifs humanitaires.

Pour reprendre ces deux approches, on peut questionner chacune des disciplines. En sachant que sur le terrain humanitaire la co-existence des nationalités des intervenants, les difficultés linguistiques venant s'ajouter aux différentes références théoriques, la confrontation avec des situations souvent empreintes de violence et dépourvues de modélisation accentuent la confusion par rapport aux positionnements d'école.

L'objectif de l'action humanitaire présentée ici est de favoriser le mécanisme « d'empowerment », la reprise de pouvoir sur leur vie par les individus et par la communauté.

La psychologie communautaire se situera comme psychologie « engagée », au côté des plus pauvres, des plus vulnérables, de ceux qui sont atteints dans leur santé mentale par le désordre du monde, la violence des éléments naturels, la douleur engendrée par la cruauté.

Ces programmes humanitaires auront aussi pour spécificité une articulation entre santé physique et mentale, santé environnementale et santé dite selon les cas santé psychosociale ou santé communautaire.

Les programmes de santé, via la réhabilitation d'hôpitaux et la lutte contre le VIH/Sida et les activités de réhabilitation développées dans des Centres communautaires et des Centres de Jeunesse doivent permettre dans les situations de post-urgence de rétablir de meilleures conditions de vie pour la population.

Etude de cas

La situation

Nord de la République Centre Africaine, Province de la Vakaga, Préfecture de Birao.

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La population majoritairement de confession musulmane (70% de musulmans, 25% de chrétiens et 5% d'animistes) est de 52 258 habitants (UNFPA - 2003). Elle est fortement caractérisée par un découpage ethnique. Les principales ethnies sont les Karas, les Haoussas, les Goulas, les Rungas, les Saras et les Youlous. Les tensions claniques existent depuis longtemps mais la situation tendue et non sécuritaire des récentes années exacerbe particulièrement celles entre les Goula et les Runga. En juin 2009 les karas à Birao prennent les armes, et on voit à nouveau des déplacements de populations qui se réfugient dans la brousse.

Alors que l'économie de la région se base principalement sur l'agriculture, avec un peu d'élevage et de commerce, l'insécurité est un facteur entravant le développement agricole, les champs sont soit laissés à l'abandon soit pillés, les marchands venant des années précédentes du Tchad ou du sud de Soudan ne se déplacent plus, les échanges commerciaux de la région sont largement amoindris.

En 2004 et 2006, des affrontements entre les milices rebelles et les forces du gouvernement ont éclaté dans le Nord du pays, contraignant des milliers de personnes à fuir et à se déplacer au sein même de leur pays ou à se réfugier au Tchad ou au Soudan, pays frontaliers.

La situation dans la Vakaga reste instable et le banditisme –« les coupeurs de route »- empêche régulièrement l'aide humanitaire de parvenir auprès des populations les plus vulnérables.

On trouve donc sur cette zone de nombreux déplacés internes, marqués par les violences des conflits, et des réfugiés venant du Tchad et du Soudan.

La question de la réintégration des enfants soldats démobilisés et des enfants qui ont participé aux conflits est un problème psychologique et social qui peut gravement affecter leur devenir et celui de leur communauté si elle n'est pas traitée.

Depuis juillet 2007 des programmes financés par des institutions internationales et mis en oeuvre par des ONG devraient permettre de faire redémarrer les structures éducatives –(reconstruction des écoles, formation des maîtres-parents) et sanitaires (restauration de l'hôpital préfectoral de Birao et de dispensaires, programmes de santé publique, eau et assainissement) et de répondre aux besoins psychosociaux de la population.

Il s'agit d'améliorer les conditions de vie des populations affectées par le conflit et d'apporter un soutien psychosocial global aux personnes traumatisées. Un projet psychosocial pour la protection de l'enfance financé par l'UNICEF a pour bénéficiaires les enfants et les jeunes enfants vulnérables et ex Enfants Associés aux Forces et Groupes Armés (AEFGA).

Les activités du programme psychosocial ont pour objectifs

a. La prévention des désordres psychologiques

- par la remise en place de processus communautaires dans des quartiers composés de familles d'origine et de familles déplacées.

- en organisant des groupes de paroles dans chaque quartier et chaque village, de façon à rétablir un esprit communautaire et à développer les liens entre les générations.
- les personnes isolées, comme les personnes âgées, bénéficient également de visites et une fois par semaine des groupes de paroles s'organisent avec elles.
- la prise en charge des personnes traumatisées s'effectue par des débriefings psychologiques et la réalisation d'activités créatrices pour empêcher les crises d'anxiété.
- un soutien est également apporté aux personnes souffrant d'une dépendance à l'alcool pour mettre en place des changements de comportement.
- dans le but de prévenir les désordres mentaux chez les enfants, des groupes d'expression sont organisés une fois par semaine ainsi que des formations au théâtre et aux activités artisanales ce qui permet d'évaluer leur état de santé mentale et de développer leurs facultés de communication.
- des animations promouvant la non violence sont organisées dans les écoles. Des femmes se réunissent une fois par semaine pour s'informer sur la relation mère/enfant et l'éducation sanitaire.

b. Activités Communautaire

- création d'un Centre communautaire, lieu de rencontre où diverses activités éducatives, récréatives, culturelles et de soutien psychologique sont proposées, film, théâtre, discussions thématiques, spectacle de marionnettes... pour reconstruire un tissu social.
- mise en place de « paillotes communautaires », pour favoriser l'intégration sociale dans les quartiers (une vingtaine de paillotes à Birao entre 2007 et 2008)
- création d'activités génératrices de revenus (AGR), pour permettre une reprise d'activités économiques en créant des formations dans les domaines afférents : atelier de couture, de menuiserie, des jardins communautaires, un moulin...

c. Prévention VIH/Sida

- des mobilisateurs font de la prévention dans les villages de la province. Ces activités consistent à faire la promotion du dépistage, la distribution de préservatifs, fournir de l'information sur les modes de transmission... Une consultation est en place à l'hôpital préfectoral.

d. Le problème des enfants soldats et des enfants associés aux conflits

Sur la zone concernée, les différents conflits, et plus particulièrement les attaques de 2007 et les luttes entre FACA (Armée régulière Centre Africaine) et UFDR (Union des Forces Démocratiques Républicaines) ont entraîné des déplacements importants de population. Des villages ont été brûlés, des meurtres et des viols ont été commis.

Dans de nombreux villages (Tiringulu, Gordil, Sikekede, Boromata, Mele, Vodomassa, Ndifa, Aiffa, Maka et Amar), on estime que 25% des enfants ont participé directement aux hostilités, d'autres y ont participé indirectement en apportant une aide logistique. Nous pouvons également noter que :

Au moins 20% des enfants enrôlés par l'UFDR étaient des filles.

Beaucoup de filles enrôlées ont fréquemment servi d'esclaves sexuelles.

De nombreux cas de viols ont été rapportés, particulièrement dans les villages de Tiringulu, Gordil, Mélé et Boromata. (cf. Human Rights Watch, « Etat d'anarchie », rapport du 13 septembre 2007 sur « La rébellion dans le Nord Est »).

Le nombre d'enfants toujours associé à des groupes armés est difficile à évaluer, notamment au sein des groupes rebelles récents tels que le CPJP, le FDPC et le MLJC¹. Pour autant, ceux associés aux principaux groupes rebelles constitués par l'UFDR et l'APRD² étaient évalués à 450 par l'UNICEF³ et 300 par le Ministère des Affaires Etrangères français⁴.

Plus récemment, et concernant Birao et la Vakaga, des troubles ont remis en question l'équilibre fragile de la zone concernée.

Du 5 au 16 juin 2009, des attaques ont eu lieu dans la ville de Birao, amenant une partie de la population à fuir.

De nombreuses maisons ont été incendiées, et des enfants ont été impliqués dans ces affrontements ethniques. Des milliers de personnes se sont réfugiées dans la brousse, les chiffres avancés allant de 2000 à 4000 (évaluations du CICR et de l'ONG Triangle)

La Minurcat est sensée sécuriser la zone.

Besoins des enfants ex-combattants relevés après le désarmement.

Les enfants ex-combattants traversent des difficultés d'ordre psychologique et social et il est donc nécessaire de les réinsérer dans leur société afin d'anticiper des dérèglements qui seraient dommageables à eux et à leur communauté :

- Difficultés psychologiques : peurs et trauma de guerre

¹ MLJC Mouvement de la Libération de la Jeunesse Centre Africaine

² APRD Alliance Populaire Pour la Restauration de la République et de la Démocratie

³ DDR de Gordil, 2007.

⁴ Donnée issue de l'Appel à proposition du Service de Coopération et d'Action Culturelle de l'Ambassade de France du Soudan, Juillet 2009.

- Difficultés à avoir des conduites fondées sur le contrat social. Exercice de la violence pour arriver à leurs fins (ne respectent que la loi du plus fort).

Alors que les leaders du conflit attendent la mise en place du DDR que le gouvernement prépare, il devient important de préparer la réinsertion des enfants via une prise en charge psychosociale.

Besoins des enfants victimes du conflit de la ville de Birao

A côté des enfants ex-combattants, c'est l'ensemble des enfants de la ville de Birao qui ont souffert des événements de juin 2009 et nécessitent aujourd'hui un suivi particulier.

Les Centres Communautaires prennent en charge les enfants de moins de 12 ans et les jeunes, avec des activités d'éveil pour les plus petits, des activités de créativité, des activités sportives, de sensibilisation à l'hygiène, de l'initiation au bricolage...

Axes de l'action

a) La prise en charge de la santé physique et mentale des enfants ayant subi des privations, des mauvais traitements et connu la peur.

La santé est un des chemins les plus sûrs vers la paix : l'enfant, le jeune, doit pouvoir recouvrer un équilibre, se libérer du trauma, lequel s'accompagne de conduites violentes, d'addictions, et redevenir capable de décider de son avenir.

b) Le soutien psychosocial, avec pour finalité la réinsertion sociale.

A côté du soutien psychologique de lutte contre le stress, des objectifs de réinsertion passent par la mise en place d'un projet individuel, avec des stratégies d'apprentissage scolaire et professionnel.

Pour les filles, un traitement particulièrement attentif à leur réinsertion doit être élaboré, compte tenu des souffrances qu'elles ont pu subir et du rejet éventuel qui peut accompagner ces situations.

c) Prévention à l'enrôlement

Conclusion

Il nous semble en effet essentiel que la communauté soit le vecteur de cette réinsertion et bénéficie dans son ensemble de cette approche intégrée, incluant la santé physique, le psychosocial, le socioéconomique et la réintégration scolaire, dans une démarche *d'empowerment* qui consolidera le processus de réconciliation. La participation de chacun des membres de la communauté sera ainsi recherchée. Les différents niveaux du projet, social, psychologique, psychosocial, économique, éducatif, de santé...seront portés par une dynamique impulsée par l'ONG et soutenue par la communauté.

Cependant s'il est important de travailler selon des axes de psychologie communautaire, on doit noter ici les difficultés que présente une « communauté » divisée en ethnies éventuellement hostiles, en familles polygames dans lesquelles chaque femme développe une hostilité par rapport aux co-épouses en particulier pour pouvoir assurer la subsistance de ses propres enfants.

Le concept « communauté » qui a généré des « paillotes communautaires », pour que puissent se tenir les réunions dans lesquelles sont prises les décisions qui doivent impulser une dynamique au quartier concerné, le Centre communautaire rétrocedé à l'association des femmes afin qu'elles puissent y tenir leurs réunions et mener leurs apprentissages et activités de couture est ici réinterrogé par les vulnérabilités sociales réactivées par les affrontements ethniques.

Fighting for diversity: the better the conscientisation, the greater the chance of positive change in attitude for marginalised sexualities in Manchester, UK.

by **Michael Richards**¹



In my capacity as a boy's and young men's worker with a young people's organisation, I deliver informal sessions that challenge the stereotypical views young men have on homosexuality and alternative sexualities. The response I have received from these young men has been negative. They generally refuse to acknowledge that gay people have emotions and human rights like everyone else. In this article, I will explore a potential way that homophobia can be tackled.

I work with young men (13-25 years old) on issues of identity, masculinity and relationships in some of the most deprived parts of Manchester, UK, which in itself remains one of the most deprived districts in the UK (Talukder and Frost, 2008). One of the most serious social issues affecting young people in the UK today is the teenage pregnancy rate. This can be attributed to many things including poverty and incomplete education. I am employed to ensure those young men have an adequate sex education and thereby hope to reduce teenage pregnancies. The projects on which I work create a place for young men to leave their macho image behind and say what they really think, believe and feel: they enable young men to develop critical consciousness about themselves in a wider social context.

I work with young men in groups, creating relaxed spaces for dialogue that combine my expertise with the tacit knowledge brought by them. I developed the themes and facilitation methods for the sessions in consultation with other stakeholders, such as youth workers and community workers, and young men are invited to join the sessions via various young people's agencies in Manchester. The sessions focus explicitly on sexual behaviour and relationships, and implicitly on the men's feelings about themselves and their place in society. Through the groups, I am aiming to enable the men to find new ways of thinking about themselves and acting in society: moving beyond their internalised expectations of excluded youth to positive and active community participants. I aim to establish dialogical relationships through which the processes of deideologisation and conscientisation can occur (Freire and Faundez, 1989; Montero, 2004). My approach is that learning is best achieved through dialogue between people. I believed that my sessions on sexual health were a good opportunity for me to challenge young men and their stereotypical, negative attitudes towards lesbian, gay, bisexual and transgender people.

I used a simple tool to initiate conversation about stereotypical themes around sexuality (see table 1). I developed this resource from youth work resources as a simple tool to challenge prejudice towards alternative

¹ Manchester Metropolitan University

sexualities. The simple statements helped begin conversation and the young men simply needed to tick the box they agree with the most. The simplicity of this tool allows all young men to get involved. Overall, I have worked with approximately 200 young men aged 13 – 25 around central Manchester, using this tool and talking about themes to do with sexuality.

Statement	Agree	Disagree
Transgender is natural.		
Gay relationships don't last very long.		
All lesbians hate men.		
Bisexual people are confused about whether they like men or women.		
Gay men fancy all men.		
All gay people talk about is about being 'gay'.		
Gay men are child molesters.		
Lesbians shouldn't have children.		
Being gay is normal.		
Some lesbians want to be like men.		
Being gay is a choice.		
All gay men have anal sex.		
It is acceptable for men to wear women's clothes.		
People with HIV are normally gay.		

Table 1 – Tool used to initiate conversation around themes stereotypically associated with 'alternative' sexuality.

In my experience, working with young men who are outwardly heterosexual, there is no obvious reason why they hate gay men, apart from the fact that gay people presumably have different sexual practices. Initially, when discussing this issue in groups, there was an outpouring of humourless, insensitive vitriol. For example, insults and rude gestures towards gay people. However, this juxtaposed the later stages of discussion, which once they were challenged they still expressed their initial negative views, but expressed understanding of my challenging arguments (anti-homophobic). I believe this can be explained understanding 'social homophobia', which is the fear of being identified has a gay person (Thomas, 2000). Homophobia in men can be correlated with insecurity about masculinity. In one incident, I challenged a group on their homophobic attitudes, but their response was to throw paper at me and at one point in anger a few of them were about to throw a table in my direction. Their behaviour demonstrated social homophobia because it was an over reaction to a non-offending debate, but they needed to act masculine to demonstrate to their peers that being gay was unacceptable. This coincides with Chodorow's (1999) argument that homophobia is a method of protection of traditional male masculinity.

The negative attitudes against gay men can be explicitly analysed listening to the language that young men use to describe gay people. Words used include 'puff', 'fagot' and 'arse licker', which are common negative words used by the young men. This harsh language promotes traditional, masculine attitudes towards gay people, but marginalises gay young men and people from gay communities. In addition, young men who I have worked with define gay men has either 'camp' or men who have anal sex with other men. I asked them how they knew this information if they were not gay themselves and they found this difficult to explain. I found that they do not know themselves why they are homophobic and when they are faced with this challenge they often go silent or try to change the subject. Norton (2002) suggests that the existence of 'queer' language is believed to have evolved

from the imposing of structures and labels from the external mainstream culture. It is pervasive and common place as a means of describing an object, person or activity as bad or unimportant.

However, not all sessions were dominated by me challenging homophobia. For example, one young man felt that the anti-gay attitude in the class was not fair and he told the class his feelings. The reaction was one of silence and surprise that he had the 'guts' to say this in front of his peers. This demonstrated the importance of heterosexual males needing to stand up and tackle homophobia and challenge traditional heterosexual masculinity issues. With these men as role models, homophobia can be challenged effectively and begin to change attitudes.

Overall, most of the young men were publicly homophobic and refused to acknowledge that difference is acceptable. Through peer pressure and narrow-minded attitudes, they generally refused to agree with my challenges. However, when one of their peers occasionally agreed with my challenges, their negative attitudes became silent. This indicates to me that they are aware that their attitudes are wrong, but in their particular environment, at their particular age, being more respectful to diversity is unacceptable. One young man did comment, after nearly throwing a table towards me in anger at my challenges on his homophobic attitudes, that it is a matter of age. He suggested that they would not be as homophobic when they were older. He felt it was a process everyone has to go through when they were younger. This indicates that family life, peers, employers and education all play a role in promoting diversity because being homophobic to non-homophobic is not a process, but an unnecessary attitude to maintain.

This small study demonstrated the importance of tackling homophobia because there is clearly still a lot of resentment for alternative sexualities. This study highlights that diversity is important and the promotion of this through suitable role models is important. It is clear that much more work needs to be done in changing the contexts that surround young men in terms of schools, youth organisations and families. In particular, it is crucial for more heterosexual positive role models to be available to tackle homophobia. Despite my work challenging resentment for alternative sexualities and seeking to change attitudes, for attitudes to actually change, the narrow-minded attitudes of these institutions need to change too and act as suitable role models. My work is a good way to approach the subject with challenging groups and there are a lot of initiatives that are fighting against the oppressive and exclusive nature of heteronormativity. They do not necessarily transform attitudes towards gay people. For that to happen, political and educational attitudes need to change and be more progressive in fighting for the rights of alternative sexualities.

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School underachievement from ‘underachiever’s point of view

by Çare Sertelin Mercan¹



Abstract

Main purpose of this study is to increase our understanding about the feelings of underachievers related to their underachieving. Six focus groups were conducted with students from grades 7-8. Discussions are analyzed via qualitative content analysis. In addition to definition of underachievement four categories were defined: self-pity, relations with family, teachers and classmates (friends). Sorrow and shame were frequently highlighted by participants.

Introduction

The present study differs from previous research by focusing on students’ views towards their underachievement. As qualitative inquiry can provide a better understanding of the attitudes, perceptions and feelings of the participants focus group discussion was used to collect the data. Underachievement can be defined as, ‘school performance, usually measured by grades, that is substantially below what would be predicted on the basis of the student’s mental ability, typically measured by intelligence or standardized academic tests’ (McCall et al., 1992, p. 54). This paper focuses on the educational experiences of a group of underachieving students from their own perspectives, in terms to understand how students report their experiences of school, achievement status and feelings related to this.

Method

The researcher intended to view the phenomenon of underachievement through the lens of those experiencing it using qualitative research technique. In order to understand the participants own definitions and meanings achievement, and to avoid imposing a particular definition, a qualitative research design was adopted for the study. This allowed the researcher to probe participants’ views, conceptions, and experiences more vividly.

Participants

Participants were 38 (14 females and 24 males) students attending primary school (grades 7 & 8). All participants who took part in the study were attending two different urban schools in the same part of the city, which gets migration from eastern regions of Turkey. The socio-economic profile of the area was predominantly lower class, parents are unskilled and not educated enough and most of them working without any social security and in most

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of the cases parents are temporary workers. Because of low family income twelve of the children is working after school hours. Study, was conducted with the students who are underachieving.

Data collection & Analysis

Data was collected via focus group discussions. Following the aims of the study, the interview guide consisted of semi-structured questions. Participants were asked to what do they think about achievement, how do they percept their school achievement, and what do they experience due to their achievement status in different settings.

All of the focus group settings took place in one of the offices in the schools and lasted between 50 to 60 minutes. Upon the consent of the participants, the sessions were recorded on audiotapes and later transcribed. Qualitative content analysis was conducted for analyzing the data. Following a close reading of the transcripts, recurrent themes among the transcripts were identified, interrelated themes were categorized, and by working through over the data, the emerging categories were gradually revised, and deduced to form the main categories. Finally, emerging categories and subcategories were organized with respect to the research questions. Participants' names are not used for the purposes of confidentiality.

Results

Achievement (meaning)

Participants' general tendency was to determine an achieving student as hardworking student. Hardworking student and achiever were expressing same meaning for the participants.

"Achieving student is hardworking student" (girl, 7th grade)

"Achievement means hardworking. If you want to achieve you must study" (boy, 8th grade)

Self-pity

Most of the students involved in this study recognized the need to succeed in school and they were dissatisfied about their school performance

"I'm an underachiever, it is important to achieve, I would want to be an achiever" (boy, 8th grade)

Their statements about themselves show that they explained their underachieving status with "not working for exams, and not doing homework properly". The feelings most accompanied to underachievement were 'sorrow', 'sadness', and 'shame'.

"When I get bad results I say if only I have studied, and get good grades, *I feel sorrow not to studying* but later on I don't study again" (boy, 7th grade)

"When I get low grades *I'm so sad about it, I cry*; I promise to my self to work harder, but I can not focus on my lessons... I want to work hard but I can't, I want to struggle but I can't" (girl, 8th grade)

"You are *ashamed*, you say yourself "they can do, why can't I" (boy, 8th grade)

Family relationships

Subcategories were shaped out regarding to family are happiness / sorrow, threat / anger, and lack of involvement. In most cases children feel sorrow and shame because their parents were so sad with their school performance.

"When I get bad grades *mom feels sorry, and I feel so bad because she feels sorry*. I promise everything will be ok next year" (boy, 7th grade)

"Mom can not read and write, she wants me to be a conqueror. This month my school performance was good, and after the parent-teacher organization meeting *she was happy, and I was happy to see her like that*" (boy, 8th grade)

As mentioned above, research was conducted in a disadvantaged part of the city. Families who live here have many economic problems; family income is generally too low to live in a big city like Istanbul. To maintain food and to pay for the electricity are the essential matters of families. Some of them send their children to school just because it's an obligation due to law. As a consequence of the economic problems and cultural background children have economic values for their families (Kağıtçıbaşı, 1982). So they expect their children to make some contribution for the family income. Most of the children participated in the study were threatened by not to be allowed to continue their education.

"Parents expect me to earn money, our economic conditions are not good enough, they couldn't send my sister to secondary school, she is working now, they say to me also 'after finished elementary school you have to work', *its important for my family that I have to earn money* (girl, 8th grade)

"I have struggled too much to bring you up, you have to get the responsibility of your self and you have to look after me" says mom, and others (our relatives) says "your mom had many pains for bring you up, *you have to take care of her*" (boy, 7th grade)

"Generally, I have no time to do the homework or study for exams, *I wake up early in the morning, go to work* (working in a restaurant) then I came to school, and after school I came to home, fall down and just want to sleep (boy, 8th grade)

Although parents expected their children to do well in school, they were not really concerned about their children's school outcomes. In a study Ogbu (2003), argues that parents' attitudes and behaviors as lack of parent involvement result mainly from their lack of education and/or from a feeling of alienation from the system.

Teacher relationships

Two main subcategories were mentioned about the teacher relationships. Distinguish and support. Also shame has a significant effect on participants. In most of the cases they expressed that they are ashamed of their performance on the face of their teachers. Support was mentioned as the most motivational factor for studying.

"*When teachers trust in you, you can focus on the lessons, if the teacher ignores you, then you ignore the lessons* (girl, 7th grade)

"I've changed through the concern of teacher Gülser. I couldn't read and write until this year. I was always saying if I would know how to read and write I could study my lessons, but now thanks to her I can read and write so I can study my lessons (girl, 8th grade)

In some cases they also mentioned that teachers may make discrimination between achievers and underachievers:

"Sometimes teachers distinguish hard workers and support them, when I ask something that I didn't understand well, she answers me negligently or gets rid of me, but if a hardworking student asks something teachers answer him/her with sympathy (girl, 7th grade)

"When an underachiever raises his hand to answer a question, teacher ignores him, like a bit moody for him (boy, 8th grade)

Shame is the feeling most accompanied to underachievement

"When I got a bad grade from an exam I am ashamed. When teacher read the results of the exams in the class loudly, I put my head on the table and try not to have eye contact with the teacher (girl, 7th grade)

Classmate relationships

Three main subcategories were mentioned about the classmate relationships. Reject, tease and support.

"Hardworking students, don't accept underachievers' friendship they generally spend their time with other achievers (girl, 8th grade)

"There were some friends making fun of me because I can not read and write (girl, 7th grade)

"Achievers, overwhelm underachievers (girl, 7th grade)

Support of the classmates is also important for participants although it's not mentioned as much as teacher's support. Classmate support is indicated as helping behavior in lessons:

"Sometimes, hardworking ones guide us, they show the right answers (boy, 7th grade)

Discussion

While the aim of this paper is not to identify causal effects, its specific goal is to provide a brief description of what do the students who underachieve experience about their underachievement. The study highlights that being an underachiever brings many emotional difficulties. As a suggestion for further research these emotional difficulties may be studied in a larger context. Families and teachers own perceptions may contribute to understand these children better.

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Judiciary environment and poor families: risk or protection for relationships?

by Simone de Biazzi Ávila Batista Silveira¹ & Maria Angela Mattar Yunes¹



Abstract

The quality of family relations has an expressive role over the human existence and may constitute a context for processes of development and learning of competencies. It also contributes to the improvement of social structures. The bioecological approach of human development puts forward the importance of those and other interactions. This study aimed to investigate the relational processes and mechanisms operating in the judiciary environment that attend poor families involved in judicial conflicts. The results pointed towards a disconnection between the professionals representing the judiciary system in family conflicts and the general population. This fact seems to bring more difficulties for the problems' solution which is a paradox considering the duties of protection established at the Brazilian Federal Constitution.

Key-words: family relations, poor families, judicial environment

Introduction

Although the quality of family relationships constitutes an important context in building processes of healthy human development (Rodrigo & Palácios, 1998), there are other proximal interactions in different contexts that may also have a relevant influence on the aspects of learning competences that promote better life quality (Yunes, Mendes & Albuquerque, 2007). The bioecological theory of human development of Urie Bronfenbrenner (Bronfenbrenner, 2005) is a reference that further explains these systems and their dynamics of influences. In the specific cases of families who go through judicial conflict, the relational processes and mechanisms which operate in the judiciary environment may represent elements of risk or protection for the family relationships. It is also known that the condition of poverty might bring additional adversities for some of those families (Garbarino & Abramovitz, 1992). Therefore, our interest in this present research had the following aims:

Investigate the relational processes and mechanisms which operate in the services attended by poor families involved in judicial conflicts;

Investigate the beliefs` system and perceptions of the professionals and the families;

Search indicators of risk and protection that might contribute to minimize or increase the quality of the relational life in the families.

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Method

The ecological engagement method (Cecconello & Koller, 2004) was employed during all the steps of this research. That means the “insertion” of the researchers in the judiciary environment with frequent and proximal contact with the participants. Data collection instruments were: field book with *in loco* observations and open interviews. Data interpretation followed procedures of textual analysis of the field book and the interview transcripts.

Participants

Four professionals of the judiciary environment: one (01) district attorney, one (01) judge, one (01) public defender and one (01) social worker;

Poor families and their members in judicial conflict who searched the service in Rio Grande-RS/BRAZIL;

Follow up of one family.

Results

According to the analysis of the observations and of the transcripts texts of the interviews -with professionals and families-, the main unities of categories led to these interpretations:

With the professionals

In general, their beliefs’ system is organized by the nuclear family as the ideal model of family. Thus, this may affect the connections between them and the specific families who do not prescribe this configuration. In consequence it can produce incompetence feelings in the families who perceive themselves as not adjusted to the normative discourses of the professionals. Additionally there were some other factors in the functioning of the Brazilian judicial environment that indicate risk conditions during the judicial processes:

1. The opponent system (the family members are “labeled” as adversaries);
2. The community lack of confidence in the judiciary system;
3. The recognized limited knowledge of the professionals on psychological subjects;
4. The demands of quantitative production (proved by numbers of families attended);
5. Distorted notion of the justice power by the population who need the service;
6. Poverty was affirmed in their difficulties that causes and increases the conflicts reinforcing the stigmatization of poor families.

With the families

Most families demonstrate that perceive the judicial system as the last chance of resolution of conflicts, but do not recognize it as protection. They also feel distant to the staff and do not comprehend the peculiarities in the functioning of the system, such as: time of processes and the specific lawyer’s language); The followed family affirmed that after the judicial process their family relationships have less dialogue and less personal contact.

Conclusions

As described above, the objectives of this study were: to analyze the forms of interactions established in the reception of families and to investigate factors which may decrease or increase familiar conflicts, turning them into risky or protective conditions. The results indicated that professionals believe that the nuclear model of family is the ideal one and their beliefs' systems affect the connections between them and families who usually do not prescribe this familiar configuration. On the other hand, the studied families denoted a distorted perception of the judiciary system, as long as they did not recognize it as a protective *locus* of Estate power offered to the population to preserve its interests. The absence of understanding among the people involved in the processes must be emphasized, since the distance between the population and the involved professionals is measured by a specific language employed in the judiciary system. The occurrence of few and short meetings between the participants was also detected.

In conclusion the presented results pointed towards a disconnection between the professionals representing the judiciary system in family conflicts and the general population. This fact seems to bring more difficulties than solutions. That is a paradox considering the duties of protection established at the Brazilian Federal Constitution.

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Les femmes victimes de violence entre rejet familial et absence d'aide sociale : Étude en Italie et en Algérie

par Samira Touafek¹, Daniela Belli² & Patrizia Meringolo³



Introduction

La violence contre les femmes est l'une des formes les plus graves et les plus répandues de la violence, pour les coûts sociaux et les conséquences qu'elle engendre. C'est un phénomène universel qui touche autant les pays en développement que les pays développés, sans discrimination sociale, ethnique ou religieuse. Elle ne connaît pas de frontières géographiques, de différences culturelles, de statuts ou d'âge. L'OMS définit la violence contre les femmes comme un des principaux problèmes de la santé publique (2002). Une des formes de cette violence est la violence familiale: un ensemble de conduites abusives incluant de mauvais traitements physiques, sexuels et psychologiques, employés par une personne en relation intime, pour conquérir pouvoir et contrôle sur celle-ci (Walker, 1999). Un des facteurs importants pour atténuer l'impact de ces conséquences résulte de l'existence de réseaux sociaux qui fournissent un soutien aux victimes (Levendosky et al., 2004).

Objectif

L'étude a eu pour objectif celui d'explorer le réseau de soutien social pour les femmes victimes de violence et leur parcours de recherche d'aide dans deux pays, Italie et Algérie.

L'enquête d'exploration en Italie, décrit:

a) le parcours de recherche d'aide des femmes victimes qui se sont tournées au centre antiviolence (*Artemisia* de Florence) ; b) le support social reçu des membres de la famille et d'amis; c) les éventuelles différences entre le groupe d'*Artemisia* et un groupe de confrontation constitué de femmes recrutées parmi la population florentine dont les caractéristiques socio démographiques sont semblables.

En ce qui concerne l'étude en Algérie l'objectif a été celui d'explorer le parcours d'aide et de prise en charge d'une adolescente victime d'inceste.

Méthode

L'étude italienne comporte 112 participantes subdivisées en deux groupes:

- 1) 51 femmes appartenantes au groupe d'*Artemisia* (âge moyen 44 ans);
- 2) 61 femmes constituant le groupe de confrontation (âge moyen 45 ans).

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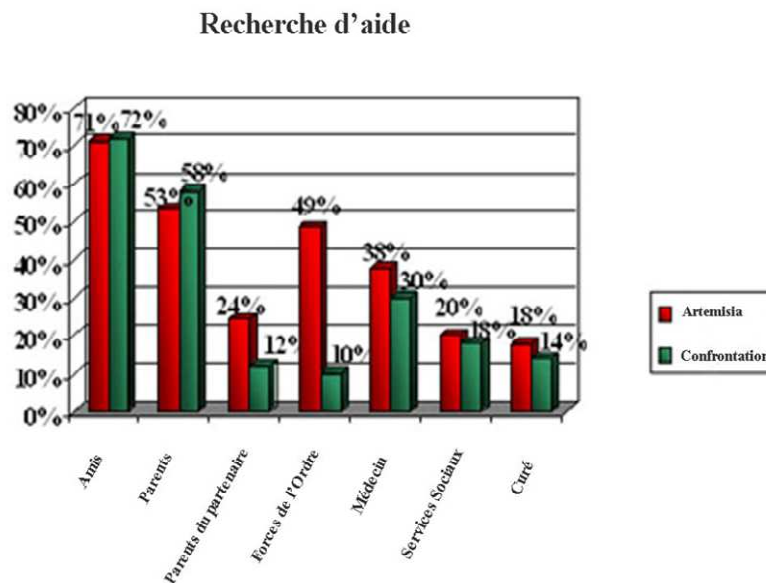
Outils: Utilisation de trois questionnaires sur: 1) le réseau de soutien qui étudie les perceptions des femmes en ce qui concerne le support social formel primaire et secondaire (Forces de l'Ordre, Curé, Médecin, Services Sociaux); 2) questionnaire sur le Support Social qui renvoie à la perception subjective du support reçu ou disponible dans le domaine familial, amical, de la vie quotidienne, émotif et de participation; 3) questionnaire sur l'estime de soi (Rosenberg, 1965).

Pour l'Algérie, l'étude est basée sur une recherche qualitative avec l'étude de cas d'une adolescente victime d'inceste. Outils: une enquête de type qualitatif avec l'entretien semi directif à visée de recherche et l'anamnèse de la victime.

Principaux résultats

L'étude italienne

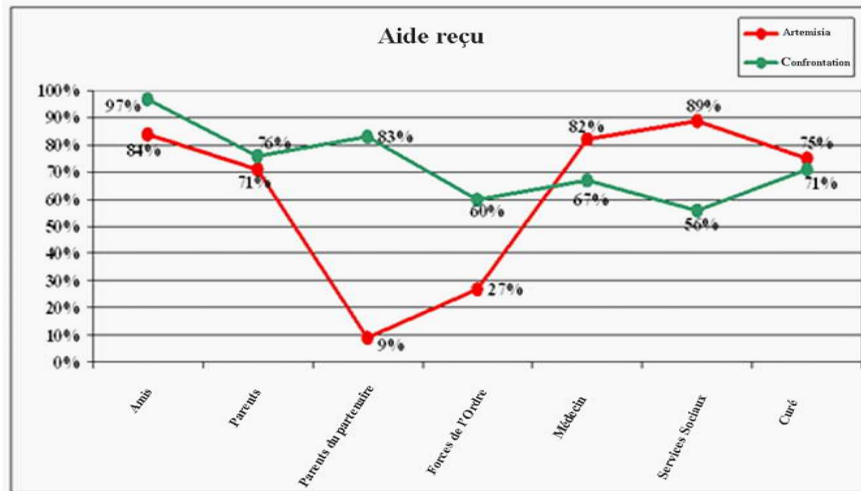
L'analyse des parcours de soutien des femmes appartenantes aux deux groupes révèle l'existence d'une ressemblance par rapport aux sources contactées : le réseau primaire semble être celui le plus développé mais aussi, avec l'apparition d'une certaine difficulté pour ces femmes à se référer, dans leur recherche d'aide, aux réseaux de services présents à l'intérieur de la communauté (graphe 1, ci-dessous).



En outre, les femmes du groupe de confrontation, au moment de la demande d'aide, perçoivent de recevoir des réponses positives de leur réseau par rapport aux femmes victimes de violence d'artémisia, particulièrement par rapport aux réponses des parents, du partenaire et des Forces de l'Ordre. Toutefois, il est à souligner la différence existante entre les deux groupes (Artémisia et de confrontation), en ce qui concerne la perception des réponses reçues du partenaire et des forces de l'ordre. En fait, pour les femmes qui se sont tournées à Artémisia, les réponses reçues de ces deux sources possibles de soutien sont en prédominance négatives.

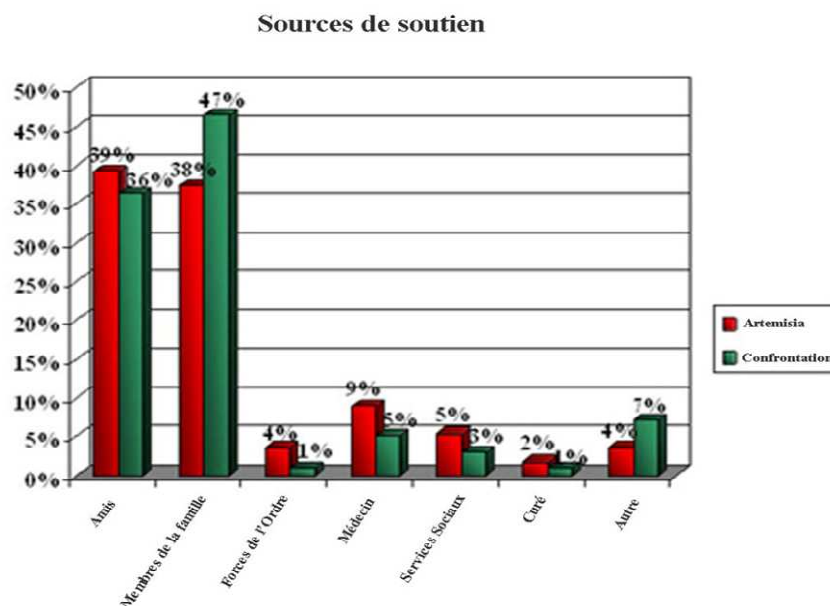
En revanche, en ce qui concerne les réponses reçues du médecin de la famille et des Services Sociaux, les résultats ont montré une tendance plus positive pour les femmes d'Artémisia. Cette donnée peut être un indice de

la préparation des deux services pour faire face à des demandes d'aide avancées des femmes victimes de violence familiale.(Graphe 2, ci- dessous).



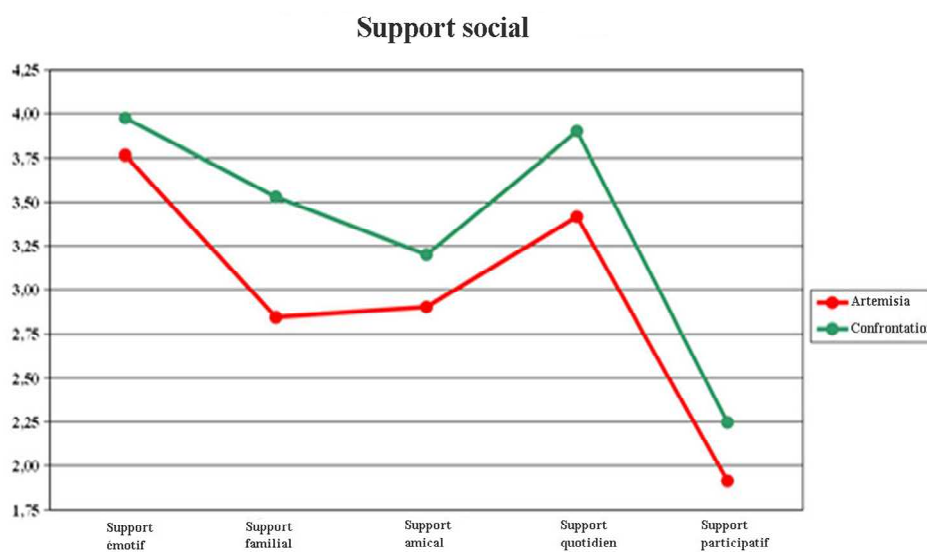
En ce qui concerne les motivations qui poussent les femmes à se tourner à une source déterminée de soutien, les résultats de l'étude n'ont pas révélés de différences significatives entre les deux groupes, mais le motif prédominant dans le choix de la source c'est la recherche de partage émotionnel. Autrement dit, la recherche du partage du point de vue émotionnel constitue, et cela pour les deux groupes d'étude, le motif principal qui pousse ces femmes à se tourner à une source de soutien déterminée plus qu'une autre. et déterminer de ce fait, leurs choix d'aide

En outre, en ce qui concerne les sources de soutien perçues comme fiables actuellement ou celles disponibles au moment de la demande d'aide, le réseau primaire semble toujours être celui le plus développé pour les deux groupes (graphe 3, ci - dessous)



Par ailleurs, nous constatons que les femmes appartenantes au groupe de confrontation présentent des statistiques supérieures dans toutes les dimensions du support social: émotif, familial, amical, quotidien et

participatif ; en particulier il y a deux différences significatives concernant le support familial et quotidien ce qui est clairement observé dans le graphe 4, ci-dessous..



L'étude algérienne

Il s'agit d'un inceste père/fille. C.H âgée, à l'époque de notre étude (2004), de 17 ans, originaire de C., elle habitait E-H. Son niveau scolaire est de 9^{ème} année fondamentale. Ses résultats scolaires sont moyens. Elle est l'aînée d'une fratrie composée de 4 enfants dont une sœur, un demi frère et une demie sœur. Elle ne présente aucun antécédent pathologique mentale ou organique.

Elle décrit son enfance comme une enfance sans problème, plutôt heureuse jusqu'à l'âge de 12 ans. Elle a vécu avec sa mère et sa sœur à C.E.A. Son père par contre, a des antécédents judiciaires. La mère de C.H est morte d'un cancer alors que celle-ci n'avait que 6 ans, ce qui l'obligea d'aller vivre avec sa sœur chez leur père remarié avec une prostituée.

Au début, les relations étaient bonnes jusqu'à ce qu'elle ait atteint l'âge de 12 ans. Dès lors, la situation familiale est allée en se dégradant et la relation avec le père est devenue de plus en plus mauvaise. Elle se plaint de maltraitance et de violence physique de la part d'un père alcoolique, chômeur, toxicomane et incarcéré pour affaire de mœurs (viol).

Le père de C. H est aujourd'hui en prison après le dévoilement de l'inceste. Après le dévoilement et pendant la procédure judiciaire, la victime et sa sœur sont restées chez leur grand-mère paternelle jusqu'à au jugement final. Sa belle-mère a refusé de s'occuper de C. H et de sa sœur quand le père a été incarcéré après la condamnation. Et malgré la conviction de tous quant à l'innocence de la victime vu les antécédents du père concernant ses violences sexuelles, personne n'a voulu d'elle chez lui, que ce soit par peur d'elle, de reproduire les mêmes actes une autre fois avec eux, mais surtout par honte sociale. Après qu'elle ait été abandonnée par toute la famille, la grand-mère paternelle les a abandonnés aussi, ce qui eu pour cause leur placement dans l'orphelinat pendant presque un an. Ensuite, et vu la non-spécificité de l'établissement pour accueillir ce genre de personne, elles ont été transférées au Centre de Rééducation Spécialisée (C.R.S.) de C, appelé populairement « prison des

mineures ». La vie dans le centre de rééducation n'était pas facile et sereine pour les deux sœurs (la victime et sa petite sœur innocente). La victime en côtoyant d'autres adolescentes toxicomanes et perverses, elle a abandonné complètement ses études et elle a fugué plusieurs fois en allant à autres villes où elle passe ces jours chez des inconnus. L'avenir de cette victime ainsi que sa petite sœur paraît inquiétant et sombre, précisément lorsqu'elles quitteront, à l'âge de la maturité légale, le centre. Surtout qu'aucune structure d'accueil n'a été prévue pour cette victime abandonnée à son sort.

Discussion et conclusion

Il est ressorti des résultats des deux études réalisées que le parcours des femmes victimes de violence ainsi que l'existence et le fonctionnement du réseau d'aide social, en Italie et en Algérie, sont nettement différents

En Italie, le réseau d'aide primaire est celui le plus présent pour les femmes victimes de violence. Toutefois, on met en évidence la difficulté de se référer au réseau de services de la communauté territoriale. En plus, on constate l'importance de l'attente de partage émotionnel et emphatique, comme motifs qui pousse les femmes à choisir une source de soutien au détriment d'autres sources, ainsi que les différences significatives entre les groupes en ce qui concerne le support familial et quotidien. Tel étude empirique fournit des premières indications sur le fonctionnement des réseaux de soutien et de support social pour les femmes victimes de violence familiale.

En Algérie il est émergé l'absence de réseaux de soutien social soit primaire que secondaire spécifiques pour les femmes victimes de violence, ainsi que le rejet familial et l'exclusion de la part de la Communauté. Cette communauté, comme montre le cas présenté, semble condamner l'agresseur et la victime en mesure presque semblable. La victime est considérée responsable de l'acte qu'elle a subi, une personne non chaste qui n'a pas de possibilité de se marier, vu que cela constituerait une atteinte à la virilité de l'homme, à son honneur personnel et à celui de toute sa famille. La chasteté et la virginité sont en effet encore deux conditions fondamentales pour le mariage en Algérie.

Toutefois, on constate qu'en Algérie, la situation concernant le soutien et l'aide aux victimes de violence commence à changer. En 1992, elle est née une ONG « SOS femmes en détresse », qu'elle siège à Alger et qui s'occupe de femmes victimes de violence, et en se dédiant même au soutien et à l'accueil de toutes les femmes en difficultés (répudiées, divorcées, mères célibataires). Il a deux centres d'aide: le centre d'accueil et de logement pour femmes et enfants, et le centre d'écoute juridique et psychologique (CEJP) créé en 1995, qui offre un accueil téléphonique psychologique et juridique pour femmes victimes de violence.

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Community interventions in a multiethnic neighbourhood: promoting intercultural dialogue through community profiling

by Maura Benedetti¹, Minou Mebane¹, Manuela Tomai¹ and Donata Francescato¹



Introduction

We analyzed an intercultural neighborhood of Rome Esquilino where different ethnic communities reside (a large historical Chinese community and other ethnic groups that have immigrated more recently). Our research intervention was based on the ecological model of migrations. This theoretical approach maintains that the process of interaction of migrants and hosting context, involves both a) the individual that tries to integrate in the new cultural context b) the hosting society that facilitates or hinders his integration (Golini, Strozza and Amato, 2001). According to this model minorities and the dominant group could build different types of relations (consensual, problematic or conflicting) according to the acculturative strategies that both have chosen .

Moreover our research examines not only the relations of Italians and minority ethnic groups, but also interactions among different ethnic groups

Objectives

- To analyze how Italians and members of six groups of migrants, different for power and size, perceive positive and negative aspects of the multiethnic community where they live together.
- To examine the social-networks of young Italian students and immigrants and their social capital
- To promote a local network, formed by key people of the community, to plan together projects that aim to promote integration and inter-culture.

Méthods

Local community was analysed through an Action research using the profile methods: demographic, natural features, institutional, productive activities, services, anthropological, psychological, future. (Martini and Sequi, 1998, Francescato, Tomai and Ghirelli, 2002)

Instruments

- “walk” and photos of the neighbourhood to notice the most relevant aspects of the area
- narrative techniques such as movie-scripts in which members of the focus-groups invent stories of their community
- interviews of key persons (informal or formal leaders of the community)
- focus groups with representatives of the main groups that form the community

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Phase I of the research

Creation of the interdisciplinary group of research in which 15 representatives of the community participated:

- People in charge of services
- Cultural Mediators
- Members of associations present in the community
- Teachers and headmasters of middle school and Ctp

With this interdisciplinary group we began a research intervention focused to analyse the local community. To understand the local community fully in all its different aspects we used:

- The preliminary analysis
- The movie script on the community
- The future profile
- Identification of experts to interview

Phase II of the research intervention

Analyses of the profiles of the community through:

- Preliminary analysis
- Structural data available from records
- Interviews to 9 key-witness
- Focus Groups, movie scripts and analysis of the future of the community with 6 groups of adults (Chinese, Bengalese, Somale, Philippine, interethnic, and members of an association active in the territory): 7 groups of young adults (Italian and foreigners).

Phase III of the research intervention

Interpretation of the data collected by community psychologists together with members of the interdisciplinary group, identifying links between the weak and positive aspects of the community identified, planning specific applied interventions aimed to promote integration and inter-culture.

Results

Results of the interviews and of the preliminary analysis:

- Experts of the interdisciplinary group had a more empowered vision of the community with respect to the other ethnical groups
- Great relevance given to the children's education opportunities
- Degradation associated to dirt, traffic, crime (perceived more by adults of ethnical groups)
- High family stress due to intense working hours, distance of relatives and inadequate living conditions.
- Minority ethnic groups hold negative stereotypes of the dominant ethnic Chinese group

- Positive integration occurs mostly in institutions (schools, associations) where there are daily interactions
- Adolescents are more integrated than adults
- The neighbourhood is seen as an intercultural meeting place but also as possibly dangerous
- Trust on institutions and territorial services
- Media increase the perception of insecurity
- Groups most at risk, unaccompanied minors

Results analysis of movie scripts

1) Common elements of movie scripts:

- Focused more on their ethnic group than the neighbourhood
- Dissatisfaction with respect to their low- qualified works
- Desire to maintain their own culture, worries that their children could develop sentimental and sexual relations with members of other ethnic groups
- Adults and adolescents share sentiments of frustrations with respect to their present and future work. They fear that they are not going to be able to do the work they aspire to and have to adapt to low paying jobs.

2) Gender Differences

- Movie scripts of women are more positive: daily sacrifices will guarantee a better life to their children
- Movie scripts of men are more negative: higher levels of discrimination, more hostile laws will make useless efforts of integration, possibility of violence.
- Males are more unsatisfied of their work
- Females describe experiences of socializations such as: parties, neighbourhood reunions, intercultural positive experiences.
- Hope, solidarity, joy mentioned more often in female movie scripts

3) Generational differences

- Adolescents are more integrated than their parents, more similar to Italians of their same group age and make more friendships
- Adolescents movie scripts show more presence of violence, aggression, fear that in the future they could find themselves in difficult and sometimes dangerous work situations (for example movie scripts of children exploited by their own parents that decide rebel, but at the end get killed).

4) Differences between Italians and ethnic groups

- Italians underline positively the anthropological and psychological factors and the possibility to integrate , together with china women and the African group while the other groups see more problems of integration in the cohabitation of the groups.

Social Capital Scale

Youngs who spend time with people of different nationality and young people resident in Esquilino have higher social capital, both bridging and bonding.

Projects proposals elaborated by the interdisciplinary group of research

- Empowering training interventions in schools that aim to help students to understand both their own skills and potentialities and the resources of their context to better plan their future life projects.
- Building up family networks. Informal opportunities for families of different ethnic backgrounds to meet to improve parents' capacities and the social capital of the community.
- Promotion in the local community of intercultural intergenerational meetings that involve adults and young people of different ethnic backgrounds in common activities, helping youngs in balancing a dual identity or sense of belonging to two communities: the one in the country of origin and that in the host country.
- Create, a counselling service for minors not accompanied, to be activated in the elementary schools and Training centre for foreign minors, to prevent minors work.

A WHO multi-country study on women's health and domestic violence against women

by Henrica A.F.M. Jansen¹



Introduction

Intimate partner violence (IPV) against women (a.k.a. domestic violence against women or DVAW) cuts across national, cultural and socioeconomic boundaries.

In order to respond to the need of comparable data and to collect data on the health impact of violence across various regions in the world, the Multi-Country Study on Women's Health and Domestic Violence against Women (WHO VAW Study, hereinafter), conducted since the late 1990s under the auspice of the World Health Organization (WHO), used a standard questionnaire and protocol over 15 sites in ten countries (Bangladesh, Brazil, Ethiopia, Japan, Namibia, Peru, Samoa, Serbia, Tanzania, Thailand thus ensuring comparability). The report with initial results of the WHO study (2005) is based on interviews with 24000 women in these 10 countries. New Zealand (2 sites) was also part of the WHO Multi-country study but results were not in time available to be included in the report.

The WHO VAW Study methodology and the accompanying ethical and safety recommendations for conducting research on violence against women is in the public domain, is now considered best practice and is widely replicated. For example research projects on violence against women using the same methodology (with local adaptations) have been undertaken with technical assistance of the presenter in the Maldives, Equatorial Guinea, Turkey, Viet Nam and a number of countries in the South Pacific Region (note that these countries do not form part of the WHO multi-country study).

Comparable results based on research with the same methodology in many different countries/cultures now give us a unique opportunity to examine differences in experience of IPV as well as communalities, between and also within countries.

Objectives and methodology of the WHO study

The population-based, cross sectional survey aimed to:

- Obtain valid estimates of prevalence of violence against women in several countries;

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- Examine the associations between partner violence and health variables;
- Identify risk and protective factors for domestic violence against women, and compare them within and between settings;
- Document the strategies used by women who experience domestic violence.

Besides the main objectives just mentioned, we are also committed to achieving additional process- and action-oriented objectives, including:

- The development and testing of new instruments for measuring violence cross-nationally;
- Increasing national capacity and collaboration among researchers and women's organizations working on violence against women;
- Increasing sensitivity and responsiveness to violence against women among researchers, policy makers and health care professionals; and
- Promoting a model of participatory research that is ethically sound, fully addressing safety issues and safe-guarding women's well being.

The research employed both quantitative and qualitative methodologies (including focus group discussions with both women and men and key informant interviews). The main survey used face to face interviews with randomly selected women 15-49 years of age. We developed and followed ethical, safety and quality control procedures to ensure robust data which permits comparison across and within countries.

Types of violence assessed

The WHO VAW study method placed a special emphasis on measuring violence by intimate partners: physical violence, sexual violence and acts of emotional abuse and controlling behaviours by these partners. The study also explored physical and sexual violence after the age of 15 by non-partners — such as friends, family members, acquaintances, or strangers. Finally, the study explored child sexual abuse by family members, teachers, strangers and others, in these same women, by asking the women retrospectively about their experiences prior to age 15.

To measure violence by an intimate partner we used behaviorally specific questions (acts). Because words (loaded terms) such as "violence", "abuse" and "rape" are "loaded" and subjected to the respondent's interpretation, we avoided using these terms.

For example, to measure physical violence by intimate partners, women were asked the following 6 specific questions:

Did your current partner or any other partner ever:

- Slapped or threw something at you that could hurt you?

- Pushed or shoved you or pulled your hair?
- Hit with his fist or with something else that could hurt you?
- Kicked, dragged or beat you up?
- Choked or burnt you on purpose?
- Threatened to use or actually used a gun, knife or other weapon against you?

We calculated the proportion of women who have experienced physical partner violence based on the report of one or more of these acts. Women are then further subdivided into whether they experience only moderate violence (the first two types of behaviors listed above) or severe violence: beating, kicking use of weapons, etc.

The study used the following three questions to measure sexual violence by intimate partners:

- Were you ever physically forced to have sexual intercourse when you did not want to?
- Did you ever have sexual intercourse you did not want because you were afraid of what he might do?
- Did he ever force you to do something sexual that you found degrading or humiliating?

Similar to physical violence, we calculated the proportion of women who experienced sexual violence by a partner based on the report of at least one of these behaviors. For both physical and sexual violence for any of the acts mentioned, follow-on questions were: if it happened in the past 12 months and how many times it had happened.

Summary of results

Prevalence of violence

At key finding of the study is that physical and sexual violence is extremely common in women's lives. Across sites between one in five up to three out of four have been physically or sexually abused by someone (partner or non-partner) at least once in their lifetime.

Among women who were physical or sexually abused by anyone, the women's greatest risk of violence is from an intimate partner. Indeed, women are more likely to be beaten or raped by their partners or husbands than by any other person, with in all sites but one, between 60% and 95% of abused women reporting abuse by an intimate partner (the person who should love and protect her). This is in most sites 4 out of 5. While the home should be a safe place, women are more at risk at home than in the street.

Another finding is that the rates do vary enormously, from one out of six up to more than two out of three women suffer partner violence in their lifetime.

Associations with health

With respect to the impact on health, a strikingly consistent finding is that women who have experienced partner violence compared to women who were never abused, were more likely to have

- Worse general health
- More symptoms of ill health such as pain, memory loss, dizziness in the past 4 weeks
- More signs of mental distress
- More suicidal thoughts and attempts
- More induced abortions and miscarriage

Violence seems to have similar impacts on health both in settings where it is very common and in setting where it is relatively rare. This was true in setting after setting, equally true for rural women in Ethiopia or Thailand, or cosmopolitan women in Brazil or Serbia and Montenegro.

Violence: normalized as well as stigmatized

Another key finding of the study is the extent to which women are socialized to accept violence and think that it is normal. A remark of this woman interviewed in Bangladesh illustrates this:

"My husband slaps me, has sex with me against my will and I have to conform. Before being interviewed I didn't really think about this. I thought this is only natural. This is the way a husband behaves. "

What participants shared in the interviews tell us that the way this woman thinks is not unique.

Another troubling finding was the degree to which violence remains hidden. At least one fifth (to two-thirds) of abused women across sites had never told anyone about the partner's violence prior to being interviewed. The social consequences of disclosing abuse can be severe. As a middle class, urban Bangladeshi woman reported:

"If I protest I'll be marked in the society and then my daughter wouldn't be able to get married...If I voice my protest the community will blame me for not bearing it in silence. This helplessness is a torture in itself."

Ecological framework to understand violence

Despite the fact that IPV occurs in the private sphere and is hidden, it is a public and social issue. IPV is supported by and simultaneously reinforcing gender inequality that permeates across different levels of the ecology: relationship, family, community and the society as a whole.

Thus violence must be understood in the context of influences at the multiple levels of ecology with at every level factor that can be either protective or increasing risk.

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Lessons from Japan: Intimate Partner Violence and the Community: WHO VAW Study in Japan

by Mieko Yoshihama¹



Introduction

Despite the importance of paying attention to multiple levels of the ecological systems (Bronfenbrenner, 1994), studies of intimate partner violence (IPV) tend to focus on individual-level factors. This paper explored the association between IPV and social support and social capital among a probability sample of women in Yokohama, the city of Yokohama, the second largest city in Japan. Data were collected as part of the World Health Organization's (WHO) cross-national research effort, Multi-Country Study of Women's Health and Domestic Violence.

Methods

Sampling

Using an official resident registry, we drew a stratified cluster sample of 2,400 women between the ages of 18 to 49 in the city of Yokohama. 1371 women completed a face-to-face interview (57.1% of the original sample and 69.7% of eligible women who could be reached). Of these, 1287 had had at least one intimate relationship with a male partner. The mean age of the respondents was 35 years. At the time of the interview, the majority had had some post-secondary education, were married and/or cohabiting, had one or more children, and were working. Based on available population-based statistics, the distributions of the respondents' characteristics were comparable to those of female residents aged 18–49 in Yokohama with respect to age, educational level, and marital status.

Measures

Social Support and Social Capital. As indicators of social network and connection, we assessed social support and social capital. Three dimensions of social support were assessed: availability, frequency of contact, and degree of satisfaction with the available social support. The availability of social support is a 3-level variable: having family/relative living nearby and having someone to depend on in times of need (2); having family/relative living nearby or having someone to depend on in times of need (1); and having neither (0). The frequency of contact is also a 3-level variable: having contact with family/relatives at least once a week (3); at least once a month (2); and less frequently than once a month (1). The satisfaction with the available social support was an

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average score of perceived satisfaction with two types of support--emotional and tangible support (both measured on a 4-point scale).

Definitions of social capital or community cohesion vary; however, it is generally understood as a multi-dimensional construct, involving such dimensions as trust, volunteerism, participation, togetherness, neighborhood connections, and norms of reciprocity (Coleman, 1990; Gittel, Ortega-Bustamante, & Steffy, 2000; Lochner, Kawachi, & Kennedy, 1999; Narayan, 2001; Putnam, 1993). The following questions from the WHO Core Questionnaire were used to assess various aspects of social capital:

- Do neighbours generally tend to know each other well?
- If there were a street fight would people generally do something to stop it
- If someone decided to undertake a community project would most people be willing to contribute time, labour or money?
- In this neighbourhood, do most people generally trust one another in matters of lending and borrowing things?
- If someone in your family suddenly fell ill or had an accident, would your neighbours offer to help?

Experiences of Intimate Partners' Violence. The respondents were asked whether they had ever experienced each of six forms of physical violence and three forms of sexual violence at the hands of their current or former intimate partners. We trichotomized the respondents into the following groups: those who had experienced IPV in the previous 12 months (IPV past-year); those who had experienced IPV prior to the last year (IPV 1+ year ago); and those who had not experienced IPV (No IPV).

Childhood Sexual Abuse (CSA). Each respondent was asked whether she had experienced unwanted sexual touching and/or was forced to perform sexual acts against her will before age 15. We created two variables: CSA by perpetrators known to the respondent and CSA by stranger.

Adulthood Physical and Sexual Violence by Non-Intimates. Respondents were asked whether they had been physically abused by individuals other than intimate partners since age 15 and whether they had been forced to engage in sex or sexual acts against their will by individuals other than intimate partners since age 15.

Physical and Emotional Distress Symptoms. The Self-Report Questionnaire (SRQ) (WHO, 1994) was used to assess physical and emotional distress symptoms that the respondents experienced during the previous month. The SRQ was developed by the World Health Organization as a screening instrument for psychiatric disturbances and has been found to have good reliability and validity with diverse populations. Respondents were asked whether they had experienced each of the 20 listed symptoms during the past month, such as, headaches, poor appetite, sleep disturbances, nervousness, poor digestion, and crying more than usual.

Socio-demographic and Other Characteristics. In addition to age, education, employment status, marital/relationship status, number of children, and socioeconomic status, the length of residency at the current address and participation in community groups was assessed. The length of residency at current address was calculated by dividing the number of years in which the respondent had lived at the current address by her age at interview.

Results

Experiences of Abuse and Violence

One in six respondents (15.4%) reported having experienced IPV. One in ten (9.7%) reported childhood sexual abuse, with 6.7% reporting CSA by a stranger, and 3.1% by a known person. A smaller proportion of respondents reported having experienced physical violence (4.7%) and sexual violence (3.8%) since age 15, perpetrated by individuals other than an intimate partner.

Factors Associated with Social Support and Social Capital

Of the three dimensions of social support, only the degree of satisfaction was associated with the experience of IPV. Those who had experienced IPV in the past year reported a lower level of satisfaction with available social support. In contrast, social capital was associated with experiences of IPV 1+ years ago but not with the past-year IPV.

Childhood sexual abuse by stranger was associated with lower levels of both satisfaction with social support and social capital. Social capital, but not satisfaction with social support, varied by the length of residency at the respondent's current address and participation in community groups. There was a positive interaction effect between the length of residency at the current address and the experience of IPV 1+ years ago.

Factors Associated with Physical and Emotional Distress Symptoms

Both past-year IPV and IPV 1+ years ago were associated with a larger number of physical and emotional distress symptoms experienced in the past year. Of the three dimensions of social support, only the degree of satisfaction with social support was associated with the number of distress symptoms. Women who reported higher levels of satisfaction had experienced a smaller number of symptoms. This finding is consistent with other studies, including a study of Japanese American women in Los Angeles (Yoshihama & Horrocks, 2002), that found that the degree of satisfaction with social support, but not the size or frequency of social support, is associated with distress. Social capital was not associated with distress symptoms.

Discussion

The results of this study suggest that prior experiences of abuse have lasting effects on women's wellbeing. Not only IPV in the past year but IPV experienced prior to the past year was associated with higher distress symptoms. In addition, those who had experienced childhood sexual abuse by stranger were less likely to enjoy

the available social support and a sense of social capital during adulthood. Prevention of abuse is imperative in promoting wellbeing of women.

Although it is often believed that an abusive intimate partner interferes with a woman's social support network, this study found that experience of IPV, whether it occurred in the past year or more remote past, did not affect the current frequency of contact or the number of available individuals. However, IPV in the past year was associated with lower level of satisfaction with the available social support. Coupled with the finding of higher symptom counts among respondents with lower satisfaction with social support, assistance programs for abused women designed to alleviate distress and those that are designed to enhance the quality of social support are needed.

Not surprisingly, social capital is related to the women's residence and participation in community affairs, i.e., the length of residency and participation in community groups. The significant interaction effect between the length of residency and IPV 1+ years ago suggest that among those who had experienced IPV 1+ years ago, living in the same neighborhood is more critical to feeling connected and having a sense of trust in the community compared to those who had not experienced IPV. Unfortunately, women who experience IPV may have no choice but leave their home and familiar surroundings in order to escape the abuse. In fact, in this study, IPV 1+ years ago was negatively associated with the length of residency at the current address. This suggests that prior IPV would likely to lead to relocation to a new area, which in turn contributes to a lower sense of social capital. Although emergency shelters are a critical resource for women who need to escape violence, it is important to expand resources for abused women so that they can remain in their familiar surroundings¹.

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Lessons from Serbia: men's characteristics associated with violence

by **Henrica A.F.M. Jansen¹, Dosiljka Djikanovic²**



Introduction

A cross-sectional, population-based household survey was conducted in Belgrade as part of the World Health Organization Multi-Country study on Women's Health and Domestic Violence, using an adapted version of the WHO questionnaire. Face to face interviews were conducted with 1,456 women 15-49 years old.

Overall 24% reported physical and/or sexual violence by a partner at a certain point prior to the interview.

Methods

The analysis aimed to identify risk factors for intimate partner violence.

Lifetime, and not current IPV (past 12 months), was selected as dependent variable because the prevalence of current IPV in Belgrade was only 4%, and low numbers in the exposed group would reduce the power of the analysis. Moreover other studies have shown that risk factors correlate in similar ways with current and lifetime IPV except for age, with young age, in most contexts, being a predictor for increased current violence, but generally not for lifetime violence.

The analysis focused on selected potential risk factors related to the woman, her partner and their relationship, based on the conceptual model (the ecological framework) and published findings on risk factors. Descriptive cross tabulations were conducted for each of these potential risk factors and the lifetime experience of physical and/or sexual violence, with the risk factors as the independent variables and lifetime IPV as the dependent variable.

The factors related to women examined were demographic data (age and education); women's informal social support network (proximity of members of family of birth; frequency of communicating with family of birth, and counting on their support; women's experience of childhood sexual abuse before age 15 years; experience of

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physical and sexual violence perpetrated by non-partners; whether her first sexual intercourse was wanted or coerced; and her mother's experience of partner violence.

In addition to their socio-demographic characteristics, the following factors related to partners were examined: alcohol consumption, drug consumption, fighting with other men, having parallel relationships with other women (infidelity), mother's experience of partner violence, and being beaten as a child.

Relationship characteristics included household's socio-economic status (3-levels), whether the couple lived with his or her family of birth, and difference in education between partners.

All variables that were significant at univariate level, as well as age, were subsequently included in the multivariate model (see box below), to identify those that remained independently associated (i.e. after controlling for all others) with intimate partner violence.

Variables considered in logistic regression modelling

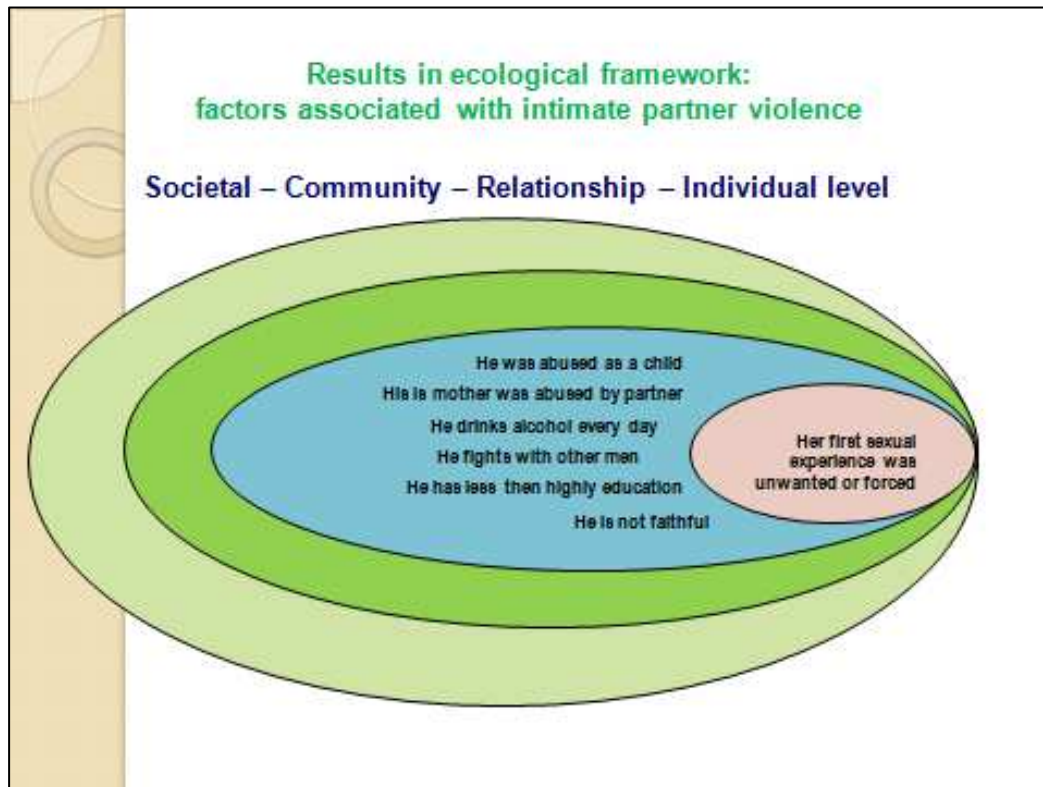
<p>Women's characteristics</p> <ul style="list-style-type: none"> • Age • Education • Frequency of talking with her family members • Experienced physical violence by non-partners • Experienced sexual violence by non partners • Nature of first sexual experience • Women's mother was beaten by mother's partner 	<p>Partner's characteristics</p> <ul style="list-style-type: none"> • Age • Education • Alcohol consumption • Drug consumption • Fighting with the other men • Having parallel relationship with other women • Partner's mother was beaten by mother's partner • Partner was beaten as a child, by family member <p>Relationship characteristics</p> <ul style="list-style-type: none"> • Socio-economic status (SES) • Cohabitation with partner's family • Cohabitation with women's family
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Results

Multivariate logistic regression modelling revealed that partner violence was significantly associated with a number of factors relating to the male partner: daily alcohol consumption (AOR 4.25; 95% CI 1.78-10.11), having parallel relationships (AOR 3.97; 95% CI 1.62-9.57; fighting with other men (AOR 3.62; 95% CI 1.91-6.88); his mother having experienced partner's violence (AOR 2.71; 95% CI 1.40-5.23), and he himself being beaten as a child (AOR 3.14; 95% CI 1.48-6.63).

Among the factors related to the women, only forced or unwanted first sexual intercourse was independently associated with exposure to partner violence (AOR 2.50; 95% CI 1.05-5.96). All other factors (including the relationship factors) were not independently related to IPV.

The box below shows all factors that are significantly associated with IPV in a pictorial representation of the ecological framework.



Conclusions

The majority of risk factors for IPV, when controlling for all others, are related to the male partner. A long-term violence prevention programmes should target boys growing up in families where the father is violent, as they were three times more likely to be perpetrators of IPV in their adulthood compared to other men (without experience of DV in their childhood).

Reference

Djikanovic, B., H.A.F.M. Jansen, S. Otasevic. Factors associated with intimate partner violence against women in Serbia: a cross-sectional study. *J Epidemiol Community Health*, published on 24 Aug 2009; doi: 10.1136/jech.2009.090415.

Lessons from Turkey: men's perceptions on violence against women

by Henrica A.F.M. Jansen¹



Introduction

The study in Turkey was not part of the WHO study. This EU funded research project was implemented by consortium ICON/Hacettepe University Institute of Population Studies /BNB for the Turkish Government (KSGM: Directorate General of the Status of Women).

Methods

The study combines quantitative with qualitative methods. Structured face-to-face interviews were conducted with 12795 women 15-59 years, representing 12 regions. It used a shortened version of the WHO questionnaire and apart from big sample size followed the same procedures and ethical and safety recommendations.

The large qualitative component included in-depth interviews with women, mothers/mothers-in-law, men, representatives of NGOs and professionals. Also focus group discussions with men and professionals were conducted.

Results

Most findings presented in this paper are based on focus group discussions with men.

Prevalence of partner violence

Overall 39% of women in Turkey reported to have experienced physical partner violence (4 out of 10) at least once in their life, while 10% reported physical violence in the 12 months preceding the interview. There were significant variations across the regions, with the highest prevalence found in NE Anatolia where more than twice as many women reported physical partner violence compared to women in West Marmara.

It is more difficult for women to disclose experiences of sexual violence compared to those of physical violence. Likewise to talk about sexual violence within marriage is not regarded as appropriate. Nevertheless in the interviews 15% of ever married women reported to have experienced one or more of these acts. Again enormous regional differences were found: almost one in 3 in NE Anatolia compared to less than 1 in 10 in west Marmara.

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When talking about partner violence it is to some extent artificial to speak about physical and sexual violence separately as both are usually aspects of the same phenomenon, perpetrated by the same person. In all regions we saw that physical violence is reported by more women than sexual violence. Nationwide, the prevalence of lifetime physical or sexual partner violence among married women is 42%, just slightly higher than physical violence 39%.

Issues around silence and stigma

As in many other countries, also in Turkey, about half of the women had talked for the first time in their life about the violence they were experiencing from their partner, when being interviewed for this study. When women in violent relationships do reach out, they tend to do so to family and friends. Unfortunately, many women report that the response they get from their closest support system, family, made them feel more isolated and guilty:

"I went to my mother first.... I told little by little. Her reaction was 'Didn't we tell you?' 'You brought this upon yourself, now you pay for it', 'There is the child, what will you do? Where will you go?' and so on" (Woman, 20 years old, married, one child)

In large parts of Turkey women are seen as a man's property, as can be seen from this quote from a woman in our study focus groups discussions:

"He thinks 'she is my legal wife,... she doesn't have a place to go, no salary, no money, no future, she has kids... , what is she to do, she can't go, no matter how much I torment her, I can do whatever I want, she won't leave..." (44 year old woman)

Men's attitudes towards women and violence

The focus group discussions with men showed in particular the following attitudes of men towards women and violence:

Men and women live in different worlds, putting men and women at different poles with no meeting point.

Men have power and women need to accept. If this doesn't happen it creates a tension.

The attitudes towards women and violence were different among the different age and educational groups, along a scale, as summarized in the following sections.

Young men, married, high education

Young and educated men (who often had working wives) were ambivalent; they did not want to (solely) follow their fathers role (economic role – providing for / supporting family) but also had difficulty handling the tension created by not having all control any longer, while at the same time the women expected their contribution. These young men considered this a form of violence towards them, from their point of view.

“...she is working too, but my wife for instance is asking me to buy a refrigerator... Why does she want it from me? Isn't this a contradiction? I mean she puts her money into clothing, but when something is needed for the house then she wants it from you.... , that role continues...” (focus group participant: male 25-30 years, married, education above high school)

Although they did not assume the same classical authority roles as their fathers these young men felt very uncomfortable when it came at the critical point of women earning more than they, while their role as providers remains an expectation.

They believe they have no authority over their educated wives who are conscious about their rights and have economic freedom, and they consider this a threat to the traditional family. This is further complicated by the fact that these men find it also hard to accept that their women earn and contribute (more). In the eyes of parents/relatives this undermines their authority - *“what kind of man are you?”*

These men say they are driven crazy by the women's demands, aggravated by the economic crisis. They react by beating the wives or working overtime.

Young men, married, lower education

Young men with little education generally had the following attitudes/perceptions:

Women should know they are women and men that they are men

If everybody accepts the role given to us everything would be simple

If the wife does not do this, this opens the way to violence and the woman deserves this

It's a men's right to stop his wife from working, sometimes the social norm dictates this. This should not be considered violence

Older men, married, lower education

Older men with little education generally had the following attitudes/perceptions:

“Women should not have eyes outside”

Connect roles of men and women with Turkish nation, culture and honour

“If she cares about her honour she knows her place”

Shaming honour justifies killing as proper reaction

Can men change?

Most men consider that their role is given and that they cannot change.

“You can't do anything about men.. You can't teach anything to a man after 30. His ideas are set. What he knows is best” (34 year old man, married, 1 child, primary school)

This statement illustrates the belief expressed by many men that a man cannot change, certainly not after certain age when they are already formed. On an optimistic note, perhaps an opportunity for intervention can be seen in their perception that men become unchangeable only after 30. They do not say that men are born like that!

The focus group discussions with men showed similar attitudes among the groups: that once married a wife is forever a man's property. State interventions and programs that put distance between perpetrator and victim are not accepted by the men. For example, the men consider a restraining order as unacceptable, only interfering with the family and their status as men. A similar perception was expressed about therapy: this would bring shame and is not helpful.

A divorce is certainly not regarded as appropriate or acceptable.

"Getting a divorce is not good, I mean I can't think of it, to give my wife to somebody else, my kid will call somebody else father... I am totally against it" (32 year old man, married, 1 child, primary school)

Also women are taught by their mothers: *"where you go in your wedding dress you can only leave in your death shroud"*.

According to focus group participants' view, men are "proud creatures" and these interventions offend their pride and do, in their view, not contribute to a solution.

In the views of the men the woman is responsible for everything:

She is provoking violence, blamed for the violence

She is responsible for keeping the family honour, bearing the violence in silence and accepting it

But, when living with violence, also she is also responsible for keeping the family stays together, including the children.

Conclusion

We need to understand how men think to be able to challenge the notions that cause them to behave violently towards women. We have also seen that men do change over generations and that there are entry points for working with men and boys.

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5

INNOVATIVE ACTIONS - ACTIONS INNOVANTES

Gearing Up: a participatory project exploring cycling in York

by Jacqui Akhurst¹, Stephanie Meysner¹ & Alan Dunnett¹



Context

The UK city of York is one of 12 towns awarded 'Cycling city' status in 2008, leading to a £1 million grant to the city council. York has amongst the highest number of cyclists per capita in the UK, so a research group of cyclists employed at YSJU decided to use participatory research to begin an investigation into the contribution of cycling to the building of healthy communities. A multidisciplinary research group comprising six cyclists (of varying ability) from five disciplines was awarded some funding to undertake a pilot study, with the hope of being able to apply for external funding to continue the work, if successful.

It was decided that our engagement in various forms of cycling would be the 'vehicle' for the research: as a way of meeting other cyclists (of differing abilities and interests, from different communities in the city), a means of data collection (through various narrative data collection methods), and to engage in activism (hoping to use the findings of our study to lobby for cyclists and cycling in the city). Multiple approaches to data collection were chosen by group members, and this paper aims to explore an example of the use of 'photo-voice' methodology, the results of an online survey to YSJU staff members and interviews with willing volunteers.

Before presenting the findings from the above research, it is important to outline the tensions inherent in the research process, over the time period of six months.

The Participatory Action research (PAR) process is, due to its very nature, responsive to the contributions and constraints of workload and life challenges of the participants. In the case of the research aims and objectives, a variety of unexpected work-related problems arose due to the financial crisis and contraction in university funding. This led to the retrenchment of one of the central researchers in the project after only a few months, and other staff members had to take on additional work responsibilities. In addition, the research assistant was unable to access continuation of funds for her studies, and had to withdraw earlier than expected. Our intentions in planning the study were therefore different from the more modest outputs that resulted.

A second set of challenges related to the experiences of collecting data through the creative data collection methods we had planned. These related to the ethics of taking photographs or video footage of cyclists, whilst on the move, yet needing to gain informed consent, and ensuring that no participant felt coerced into taking part. We gained overall ethical approval for the study from the university ethics committee; however the more general ethical approval did not cover all the nuances of using progressive technology. These experiences highlighted the

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power differentials between researchers and the general public, which could potentially impact on ethical data collection.

Access to, and responsible use of funds, was the third issue that we needed to work through. YSJU 'seed' funding was granted for the project, on condition that certain 'products' eventuated from the work. These included this conference paper, a report for the funders, and a further funding bid, which remains to be written (due to the lack of notification from the city council regarding bids from research-active bodies in the city). We have therefore not been able to utilise all the funding granted, because some of the pragmatic issues summarised above impacted on the work we could deliver.

'Cycle' one: Example of a trial of photo-voice: My cycle route from home to work

The slides related to this part of the presentation may be viewed at:

http://www.yorks.ac.uk/Test/gearing_up/random_xml_banner_cycle2.html

The following comments are linked to photographs taken on one of the researchers' routes between home and work:

Cyclists in York span the ages - it's great to see, even though there are obstacles ...

Sometimes people feel safer on the pavements (not surprising, given how close some buses pass)

Here's a part of a cycle route that works well (due to the marked cycle lane)

But then the cycle route disappears ... and one can feel vulnerable

It feels good to be part of the cycling 'tribe', which is so diverse in York

Though, you need to be wary – drivers sometimes underestimate how close you are (if they notice you at all)

Oh good - a cycle lane where there are few cars - but beware the tourists!

This route through the 'Bar' works quite well, giving cyclists a safe start

But then where do you go when this happens? However, it's okay, work is just across to the right!

This methodology illustrated some of the ethical challenges referred to before, and though we had hoped to gather similar narratives for six different routes into York, we only have one other, located at <http://w3.yorks.ac.uk/research/research-cluster-projects/healthy-communities/gearing-up.aspx>.

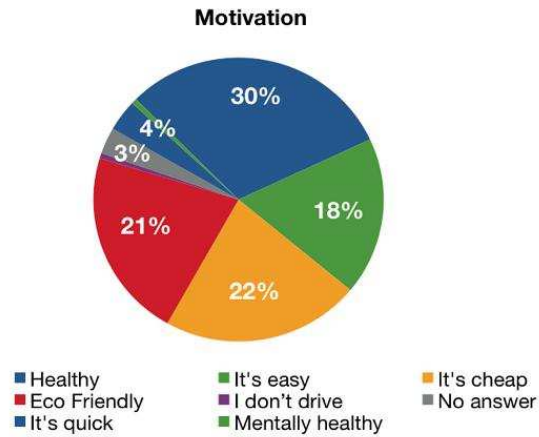
'Cycle' two: A survey of colleagues' attitudes to cycling

Survey Participants: over 50% cycle daily, and 2:1 of them were females.

Ages 18-60+

All City of York citizens

We asked participants about their motivations to cycle, this provided insight into participants lived experience and their relationship to the environment.



'Cycle' three: Post survey interviews of a number of respondents who volunteered

A number of interviews (4) of volunteers from the survey were then interviewed, and examples of their responses (coded by themes) follow:

The need to be in more natural places

If I had a mountain bike, I'd cycle out of York, maybe into the countryside.

You sort of go up the road and you're out of the ring road and you're in the country, so I think they could maybe do more with having routes, eh, a bit more advertising routes with more to the country...

Speed

I cycle because it's quick.

I'm quite conscious of time ...if I can cycle then I can get there a bit quicker.

Emotional impact:

I love the feeling ...it's so nice for cycling; you can take time out to enjoy the views. If you're sort of cycling in the country, and you can go at your own pace and it's environmentally friendly as well.

Relationship with cycling

What type of cyclist are you: Leisure, commuter? I think I am all those things really. It is commuter. It is leisure. I like cycling.

Barriers to cycling

On a hot day like today maybe I wouldn't cycle, because you're going to work. If it was leisure I would, but if I had to get somewhere, I'd end up being really sweaty when I got there.

... I think if I was commuting, and it's raining all the time then I wouldn't cycle.

I cycle in all weathers.

(Would you be able to fix the bike yourself? And does this help your independence as a cyclist?) Oh yeah I would be able to fix that myself, yes.

Cycling and the city

It's a bit of a pain, because you've got a painted cycle route on the road, but it's not a proper cycle route because you can still get cars parking in the way, and of course there are traffic jams.

(Cycle lanes are) incorporated into a pavement and you've got a pavement split into walking and cycling.

(Suggestions of what might encourage people to cycle more?) Mmm, I suppose if you could get more safe cycle lanes.

It's not often that you have a cycle path that is continuous.

We were particularly interested in the possibility that cycling could play a role in 'flattening' societal differences between various socio-economic groups, because of its potential ability to enable people to socialize across possible barriers. One of our theories was that there are different 'types' of cyclists, designated by types of bicycle and the clothes people choose to wear. However, despite cycling for a variety of purposes, the participants were reluctant to categorise themselves as a 'type' of cyclist... the purpose of the ride seemed to determine the 'kind' of cyclist that they felt at the time, but this state is temporary. It would seem, though that being a cyclist may become a part of self-description; using self-propelled two-wheel vehicle may mean becoming part of a 'group'. Our earlier concept of 'communities' of cyclists was shown to be far too simplistic. There are likely to be real tensions related to class factors, aspirations and rights, and though cycling may have the potential to diminish some of these differences, we need to take the research much further.

Results of participating in this research group

For the group, the following benefits accrued from participating in this pilot study:

Participatory research methodology highlighted ethical challenges related to traditional research;

It promoted interdisciplinary communication and breaking down of some of the traditional barriers to research in different university faculties;

Engagement in something that drew us together, and that we believe to be of benefit, led to frank and open discussions;

It highlighted some of the power dynamics implicit in research.

We are hoping that the project may continue in some form ...

Capabilities Theory in Practice: collaborative research with people with an experience of mental illness

by **Beatrice Sacchetto¹ & Maria Vargas-Moniz²**



The main aim of the study is to understand in-depth the role of a community-based organization in promoting capabilities and effective integration in the community for individuals with severe mental illnesses.

The private non-profit organization AEIPS - Association for the Study and Psychosocial Integration - was founded in 1987, by a group of families, professionals and people who experience mental illness. Its mission is to promote recovery through empowerment strategies and strengthen community-based services for people with mental illness in order to increase their social integration in terms of employment, education, housing and social activities and to improve their quality of life and satisfaction. At present it runs a Community Center (105 users) and three group-homes, in the center of Lisbon city.

The principal contractor of the research is the University Institute of Applied Psychology (ISPA) of Lisbon. The research team is composed of members of the Research Unit Psychology and Health of the University Institute, research consultant Mary Beth Shinn (Vanderbilt, USA), a graduate of Catholic University of Milan (IT) and users of the organization which agreed to collaborate.

The main variables to be studied are dimensions of integration and capabilities such as employment, housing or education as well as variables related to quality of physical and emotional health, influence and belonging, access and effective use of community resources and social networks (cf. Nussbaum, 2000).

The recovery perspective used in this study includes the belief that all people, including those with a diagnosis of mental illness, have a right to full community participation and membership.

How should community participation be defined? We take two approaches. One derives from focus groups of users of the service studied here. The second is the theoretical capabilities framework inspired by the work of Sen (1993) and Nussbaum (2000). The capabilities approach was first introduced by the Indian economist Amartya Sen (1993, 1999), who was involved in the draft of the Human Development Report for the Development Program of the United Nations. In this context, the capabilities approach has been proposed to evaluate and compare individual quality of life.

Subsequently the capabilities approach was developed and integrated by the philosopher Martha Nussbaum (1993, 2000), who has used this theory to study developing countries, including India, and particularly, women whose life conditions are very low. This approach recognized and valued human dignity, asking people what they can do in their society - whether and to what extent - and if they are free to choose their own lives according to

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their particular conditions. According to some authors (Hopper, 2007, Davidson et al., 2009) the capabilities approach can be used as a tool and a guiding principle in the field of public mental health with the essential prerequisite of adopting a recovery perspective, which focus on people and their experiences. Resulting from years of cultural studies, Nussbaum articulated 10 capabilities or freedoms that should be afforded to vulnerable populations, selected as central and important capabilities to all human life. We will take these capabilities as dependent variables for this study.

The second approach that we take to define community participation derives from focus groups of users of the service to be studied here.

The research team decided to implement a two-step design. Therefore the study will consider a first exploratory and qualitative analysis, in order to identify the gains of the members derived from the participation in the organization, followed by quantitative analysis. In this second step the research team proposes to interview a sample of 100 users to create evidence of AEIPS efficacy in fostering community involvement. Results of the first stage will be used to produce an interview protocol for the further quantitative phase.

The procedures and methods for the first qualitative phase, carried out between October 2008 and July 2009, involved eighteen discussion groups conducted to collect data about the improvements of AEIPS members, focused on accomplishments stemming from participation in the organization. Respondents were 36 members, 11 women and 25 men, between 20 and 58 years (average = 41), 22 % were currently studying, 33 % were working and the remaining 47 % were involved with other services of the organization. Each group was composed of four participants and one discussion facilitator. The domains covered in discussion included areas of community involvement like employment, education, housing, personal network development, and how these accomplishments have contributed towards a recovery path.

The second stage of the qualitative phase is the data analysis occurred during 4 months of work. The goal is to describe the phenomenon of community integration with words and experiences of research subjects, in order to get closer to their perspective. A panel composed of three AEIPS members and two professionals categorized topics from the discussion groups and observed regularities across them. Once every three weeks video conferences were conducted with the American supervisor to ensure ongoing technical advice on work in progress. The content analysis identified several improvements reported by the participants, which were converted into an 84 item questionnaire to be used in the quantitative phase.

In the domain of employment, for example, members of one group answered that they became more professional, another that they had gained opportunities for more competitive employment, and again, another group said that they have learned to work in a team. These answers have been converted into items that compose the interview protocol and each item is supported by a 3-point Likert scale.

The last stage of the qualitative phase consists in adapting the interview protocol to the Capabilities Approach of Nussbaum. The same panel of professionals and AEIPS members reviewed each item of the interview protocol and adjusted it to domains proposed by Nussbaum, in order to give to the instrument an objective measure of diversity of choices and variability derived from AEIPS services. These conditions are seen here as necessary to achieve a community participation and membership.

To give an example, the items were coded with the social and personal affiliation capability. In Nussbaum's work we can find the following definition for that capability: "In work, being able to work as a human being, exercising practical reason and entering into meaningful relationships of mutual recognition with other workers."

Others items of the questionnaire, derived from accomplishments concerning education, like "I realized I was able to study" and "I increased my knowledge" were coded with the capability of senses, imagination and thought. In Nussbaum's work we can find the following definition "being able to use the senses, to imagine, think and reason – and to these things in a truly human' way, a ways informed and cultivated by an adequate education (...)" (Nussbaum, 2000, pp.78).

This combination of capabilities and users' improvements took 8 meetings of two hours each. The protocol resulted from this qualitative work reflect Nussbaum's ten capabilities or freedoms, and include a balanced mix of closed questions and open-ended questions lasting about 1 hour on average.

Empowerment and participation are also promoted involving service users, identifying their accomplishments and their actual experiences. The involvement of AEIPS users in the research team has increased along the project: during the data analysis and the construction of the interview protocol they were the majority against professionals.

According to Nelson and Prilleltensky (2005), a research team composed of both professional and users with community representatives attend at least 51% of the team is most appropriate for participatory research. Collaborative research also promotes the empowerment of participants (Trickett, Espino, 2004) through acquiring knowledge, choosing and decision making (Airhihenbuwa, 1994). The study aims to protect the right of expression and choice, giving voice to participants, through discussion groups and also through participation in data analysis. Beyond the aim of evaluating AEIPS effectiveness, the research tries to encourage participants to reflect on their own journey of recovery and to self-evaluate personal aims and strategies for achieving them.

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Le Collectif « Pratiques en santé mentale communautaire » (Bruxelles) : une méthodologie issue de l'éducation populaire et adaptée à nos contextes d'intervention

par **Yousra Akleh¹, Fatima Kaddur¹, Paulina Romero¹,
Nathalie Thomas¹ & Namur Corral¹**



« *Exister humainement, c'est dire le monde, c'est le modifier.* » Paulo FREIRE

Depuis un peu plus d'une dizaine d'années, des intervenants du secteur psycho-médico-social bruxellois, réunis au départ autour de formations organisées par le Service de santé mentale « Le Méridien », se sont progressivement constitués en un Collectif de réflexion et de pratiques autour de la santé mentale communautaire.

Intégré dans une zone urbaine marquée par la précarité, Le Méridien est un Service de Santé Mentale ambulatoire, né dans le giron du courant antipsychiatrique des années soixante et de la psychiatrie sociale. Il est situé dans la commune de Saint-Josse-Ten-Node, une des communes les plus pauvres de Bruxelles. Les quartiers qui la composent hébergent, comme la majorité des quartiers populaires bruxellois, des populations diversifiées au niveau social, culturel et économique.

Le Méridien a rapidement mis en place, à côté des consultations de guidance et de psychothérapie, une équipe communautaire chargée de développer une démarche abordant la santé mentale par un autre biais que la pathologie. Dans ces quartiers populaires, les problématiques rencontrées dans les consultations outrepassent en effet généralement le cadre d'un travail thérapeutique classique : problèmes de logement, de non-emploi, d'exclusion sociale, etc. Notre démarche envisage donc une conception de la santé mentale qui dépasse le curatif tout en l'incluant dans son champ, mettant en tension ses dimensions à la fois cliniques et politiques.

Ce travail a permis la naissance du Collectif « Pratiques en santé mentale communautaire » qui regroupe des travailleurs de différents secteurs (médiation scolaire, santé mentale, planning familial, toxicomanie, éducation permanente, maison de quartier, hôpital,...) et de diverses formations (psychologue, assistant social éducateur, animateur, médecin,...). Actuellement, les membres du Collectif animent ou co-animent des groupes d'habitants dans divers quartiers de Bruxelles.

Afin de mieux rendre compte de ce que peuvent vivre les habitants au sein de ces groupes, nous avons choisi de vous en faire partager quelques témoignages : *«Ca aide à relativiser, à se déculpabiliser. Dans les sous-groupes,*

¹ Collectif « Pratiques en santé mentale communautair » www.meridien-communautaire.be - e.mail : info@meridien-communautaire.be

c'est bien car même ceux qui ne parlent pas facilement peuvent s'exprimer. Si j'avais vécu ce groupe avant, j'aurais été plus forte dans ma vie. Je n'aurais pas vécu cette solitude. Je me rends compte que je ne suis pas la seule à vivre ces choses-là », « je viens pour voir si je vis la même chose que les autres femmes. J'ai besoin de parler avec d'autres mamans pour savoir si je suis une bonne mère », « au début, je pensais : ce qui est à moi est à moi. C'est trop intime. Je ne vais pas pouvoir en parler. Il faudrait une confiance extrême en chacune pour pouvoir parler de ça. J'ai pensé plusieurs fois arrêter le groupe. Et puis la sincérité des récits des autres m'a animé, m'a donné du courage pour poursuivre », « j'ai senti un engagement envers ce groupe, une responsabilité, comme si je contribuais à construire quelque chose. Mon avis comptait. Rien n'était imposé. Je me sentais écoutée. Je sentais que mon expérience valait, qu'elle était utile à d'autres », etc. ».

Les idées-forces qui guident nos pratiques sont les suivantes : aborder la santé mentale par un autre biais que la pathologie ou le soin, considérer la santé mentale comme une affaire collective, envisager un rapport aux savoirs basé sur le partage d'expertise, la réciprocité et la mutualisation, un rapport au pouvoir basé sur les notions de co-construction et d'empowerment individuel et collectif, une articulation entre l'intime et le politique.

Comment ces idées-forces s'appliquent-elles concrètement dans notre travail ? A titre illustratif, nous vous proposons le récit d'une pratique développée par un des membres du Collectif, au sein d'un service de santé mentale.

« Nous sommes lundi, il est 5 heures du soir. Comme à leur habitude, les hommes arrivent au compte-goutte. Certains prennent des nouvelles. D'autres font remarquer leur absence. Nous sommes aux « Ateliers 210 », un théâtre de quartier qui a accepté de loger provisoirement notre groupe. L'hiver est aux portes, et autour d'un thé à la menthe chaleureusement préparé par Abdel, nous discutons des objectifs que nous souhaitons poursuivre. Philippe explicite son impatience latente à rendre publique l'existence de notre groupe alors que Mario insiste sur l'embarras, que représente pour lui, la possibilité de « sortir » de l'intimité. Le temps, puisqu'il s'agit de ça, est mis à l'épreuve et nous ne pouvons faire l'économie de travailler, au préalable, sa notion subjective.

Nous avons proposé à chacun d'énoncer la façon dont il vit le groupe. Ce moment nous a été fort d'enseignements ; il a permis à chacun de se différencier davantage mais surtout d'exprimer des déceptions et de proposer de nouvelles modalités de rencontre. Les membres ont pu partager la possibilité de passer par une phase d'écriture des expériences pour ensuite en dégager certaines transversalités. Nous avons aussi « négocié » la possibilité de publier, dans l'espace public, ce travail d'écriture. Cette proposition nous a semblé être un bon compromis entre, d'une part, la nécessité pour les uns de se déposer dans un espace-temps plus ou moins long et, d'autre part, le besoin pour d'autres de publier une souffrance masculine multiple.

A travers ce récit, c'est l'articulation entre l'intime des récits et l'interpellation politico-sociale des maux énoncés au sein du groupe « Paroles d'Hommes » qui est en jeu. Il met en évidence la difficulté d'établir des ponts entre l'espace privé et l'espace public.

Si ce passage de l'intime au politique semble être une étape nécessaire au travail de « Psychologie Communautaire », il soulève néanmoins plusieurs enjeux. Il interroge non seulement la capacité du groupe à se penser comme « acteur social » mais renvoie aussi à chacun la possibilité d'entendre que d'autres peuvent avoir des positions divergentes et vivre le processus différemment.

Ma clinique en Service de Santé Mentale me confronte régulièrement à des hommes qui oscillent entre revendications et remords, entre colère et tristesse, entre espoir et désespoir,... Très peu d'entre eux parviennent à définir les motifs qui les amènent à pousser la porte. L'analyse de leur situation sociale et de leur contexte de vie permet cependant de comprendre leur besoin de se déposer, surtout de se reconstruire. Ces histoires singulières, dont je suis un témoin privilégié, se déposent exclusivement dans un cadre individuel. La sensation d'être seul face à certaines injustices crée, chez beaucoup d'entre eux, un sentiment d'impuissance, accompagné la plupart du temps, d'un brouillage de l'avenir où la situation n'a plus d'issue... et le cadre de ma consultation psychosociale s'avère souvent insuffisant à la (re)construction psychique de ces hommes.

Que proposer à ces hommes emprunts de souffrances et dont les ruptures multiples créent un sentiment de solitude ? Comment les sortir de cet isolement et travailler leurs difficultés au dehors d'un Service de Santé Mentale souvent considéré comme stigmatisant ? Comment aussi les aider à travailler les versants positifs de leurs savoirs expérientiels aux fins de les sortir de cette position ? Autant de questions partagées par notre Collectif.

Mais ce travail en santé mentale communautaire n'est pas un long fleuve tranquille ; il n'est pas exempt de doutes, de questionnements et de défis. Nous avons souhaité en partager quelques-uns avec les membres de l'atelier.

«Faut-il faire le deuil d'un projet construit ? » La santé mentale communautaire s'inscrit dans un processus, mais le concept de projet n'est pas absent de nos pratiques. Quelle serait la fonction d'un projet selon notre approche communautaire ? Doit-il être conçu comme une finalité, avec un cadre garant et clair (analyse des besoins, objectifs, résultats) ? Dans ce cas, le désir d'action ou de changement préexiste et le professionnel sait par où il faut aller pour y arriver... Ou bien faut-il davantage envisager le projet comme un projet-prétexte, sorte de porte d'entrée, d'occasion pour du travail communautaire ? Ici, le sens serait créé au fur et à mesure et le rôle du projet serait de donner une impulsion pour que le groupe devienne autre chose...

Le deuxième questionnement concerne le paradoxe de la position du professionnel dans les démarches communautaires. Dans ce type d'interventions, les professionnels sont sensés travailler le plus possible dans « l'horizontalité » avec les participants, les habitants, les usagers. N'y aurait-il pas quelque chose de paradoxal en soi à impulser ou s'insérer dans une démarche communautaire à partir d'une position de professionnel ? Cette position est-elle tenable ? Penser la place du professionnel au même titre que celle des participants ne constitue-t-il pas un leurre en soi ? Vouloir occuper une place équivalente à celle des participants, n'est-ce pas illusoire ?

Le troisième questionnement porte sur les enjeux du pouvoir. L'horizontalité des relations est peut-être une utopie vers laquelle nous tendons, mais comment garder cette utopie vivante sans masquer les pouvoirs qui se jouent dans un groupe, pouvoirs liés aux statuts, à la classe sociale, à l'accès aux ressources, etc. ? Comment dès lors travailler à partir de cette configuration du pouvoir ? Que faire de cette « place-pouvoir » dans laquelle l'intervenant est généralement placé d'emblée ?

Nous avons ensuite questionné la manière dont nous tentions d'articuler la sphère de l'intime et celle du politique au sein de nos groupes. Notre conception de la santé mentale pose la question de savoir comment articuler des objectifs relevant de la sphère de l'intime, du subjectif, d'un travail sur soi et une démarche qui ambitionne, selon les termes de Paulo Freire, « une transformation du monde », signifiant ainsi de grands ou de petits changements structurels. Quelles sont les méthodes qui peuvent faciliter ce passage de l'individuel vers le collectif, de l'intime vers le politique ? Ne s'agit-il pas de manières de travailler différentes, impossibles à réunir au sein d'un même dispositif ? Mais face aux difficultés actuelles des démarches de mobilisation collective, des questions jaillissent : une visée politique est-elle inhérente à la santé mentale communautaire ? Le travail en santé mentale s'arrête-t-il à la sphère du privé ou peut-il comporter une intention de changement structurel ? Et, qu'entend-on par « politique » ?

Nous avons finalement pointé la question du conflit au sein de nos pratiques : la notion de pouvoir empêche-t-elle de penser le conflit ? Quelle position occuper face à celui-ci au sein des groupes ? Doit-on viser l'évitement du conflit au risque de dissoudre le groupe ? Ou, au contraire, le conflit fait-il partie des relations sociales et l'aborder au sein du groupe permet-il de dépasser une identification trop massive au groupe avec le risque d'une négation des subjectivités individuelles ?

The family debate: an engagement tool to promote children and families' participation

by Moises Carmona¹ & Ruben-David Fernandez²



Introduction: Reflections on participation in Catalonia

During the last 15 years, different experiences of citizen's participation have been developed in the region of Catalonia. They were promoted by local and regional governments and have tried, in different ways, to foster citizens' participation in public policies. We find different participative processes on urban design, health, youth, immigrants, etc. And we understand citizen participation as an evolution in the relationship between government and citizens, looking towards complementing representative democracy with participative democracy, to ultimately build citizenship.

In many of these experiences, the main criticism has been around the number and diversity of its participants. Some of the discourses that we usually find on arrival at a neighbourhood to start a participative process are, for example: "We are always the same" or "People don't want to participate" or "People aren't interested in policy ...", etc. In this situation we have two options: whether we go back home assuming that it's impossible to promote the participation of more citizens, or we take this as the CHALLENGE, which is the goal of our work.

If we choose the second option, we face the challenge of promoting citizen participation in order to achieve a plural and representative participation of our municipality, district, etc. To face this challenge it's necessary to guarantee creativity in the design of tools that are appropriate to facilitate the participation of each group. If we do the same as usual, we obtain the same result, in our case involving the "usual" participants. Well, this does not mean that it's wrong or that their participation should not occur. What we mean is that if our challenge is to incorporate new participants, we also need to do different things. To overcome this challenge it must be guaranteed to be creative in the design of instruments that are appropriate to facilitate the participation of each group. And be creative means to think and to experience, not just waiting for a great idea.

To facilitate public participation it's necessary to add allies and new actors. The school and the children are a potential amplifier of participation we should not miss. "2 + 2 = is 5". We don't want to introduce mathematics to promote citizen participation. Whether we foster a participative process, as if we are promoters or just a participant, "we must realize that to facilitate public participation is necessary to gather allies and to promote the involvement of new actors. This is when the math is different, as each new participant who managed to "seduce" the participative process to become a potential dynamic communicator and of the process, exponentially increasing the possibility of expanding the diversity of participation.

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What is a Family Debate?

Family Debate is an engagement tool (questionnaire, open survey,...) which allows us to promote family participation in the design and development of public policies. It is especially useful to open the process rather than to close it.

Therefore this is a useful tool to promote the participation of groups that 'usually don't participate': children and families. And that's where we use the slogan "if Muhammad doesn't go to the mountain the mountain should go to Mohammed."

Backgrounds and experiences

The first experience started at the Master degree studies in Participation and sustainable development (Autonomous University of Barcelona (UAB)) in 2002. Over 10 experiences have been done in the last 7 years, involving many different participative processes. So, like other tools for citizen participation, the family debate is a highly flexible tool, and because of this flexibility it has to be adapted to the particular process set up, as a metaphor: using same ingredients, we can obtain always different tastes and textures.

When to use the Family debate?

In the opening moments of the participatory process, for instance, to do Diagnosis/analysis, or to do Proposals or for do Assessment/Evaluation.

With Who?

Through educational centres (schools, nursery, high school, childhood houses, etc.).

Our Research: the Figaró-Montmany case

Figaró-Montmany is a small town near the mountains of Montseny, 50 kilometres from Barcelona, in Valles Oriental Region. It has 957 inhabitants (2003), 12.6% is 0-14 years old. Part of this 12.6% population group was the target of the family debate, 5 to 11 years old.

Participatory budgeting process started in 2005 at Figaro-Montmany. Proposals for the 10% of the local municipality budget (102,000 Euros) were made, existing three ways of collecting citizens' proposals: Individual Proposals, for Adults, Proposals for civic organizations and Family Debate Proposals, for Children.

How do we build the Family Debate tool?

To build the family debate, we needed four stages.

Stage 1: tool construction

In order to create the tool we should start answering these questions:

Who is the tool design for? It is important to adapt the content, language and design of tool to the ages of the target group, in our case Childs 5-11 years old and their families.

Why is important their participation? What type of information we aim to collect: more quantitative, more qualitative, ultimately what kind of proposals we hope for? How will we manage their outcomes? What information is necessary to make to facilitate participation?

What do we want to communicate? What values do we want to convey? Also: What information on the participatory process do we provide? On what is he/she involved? What point are we at? What direction are we going to? And regarding the notebook: What is it? What does it do? What is expected of it? What will be done with your results?

Stage 2: school to home

In this stage the first step is "school dynamics", we start managing classroom work with children. You must be in good harmony with teachers from the school to try to find the right moment. Not only adequate time and space to work must be taken into account, but also the type of dynamics that will take to promote classroom discussion and understanding. It is necessary that after this activity the children have clear which is the participative process that we are promoting and what we ask them and their families.

The second step is "home's debate". Some important aspects to consider incorporating into our notebook, with the aim of facilitating this debate within the family are, for example:

Information to introduce the participatory process (goals, timetable, agreement, and so on).

Information to introduce de family debate (goals, timetable, and how are the results going to be managed)

Some examples

Having a space reserved for notebook's evaluation.

It's important to say that DEBATE IN THE SCHOOL AND AT HOME is what distinguishes this tool from a normal survey o questionnaire

Stage 3: collection and analysis

Families should take time to discuss at home, but at the same time we must not extend too much the return of the notebooks. So ideally it should not go beyond a week. Again it is important to highlight the important role of teachers to encourage children to return the notebooks or if you prefer to be delivering "his duties" as well as centralizing the receipt of the notebooks.

When notebooks come back to our hands, it's time to analyse the inputs. Depending on the number of notebooks that we have received, and the type of information that we have demanded, the time required for analysis can significantly change. It's important to know this.

Stage 4: return results

Feed-back on the result of their work to all the participants is necessary, in this case children and families, as well as the teachers involved. Feedback methodologies and strategies can be very different. Starting from a letter to

each family, and continuing with outdoor activities, media, school activities, and so on. It's important to underline this feed-back is necessary. For example, in Figaro we organise a City council child Plenary. In this plenary, Childs give the family debate results to mayor

Figaro, some results

Delivered 35 notebooks, 27 proposals received (77%).

14 adults made a proposal after doing de notebook with their children.

207 people in the final voting (35% census). More than the people who voted the all opposition parties in the last local elections.

Most voted proposal (the construction of a new park) is contained in the family debate.

Conclusions, the family debate into debate:

Why is it useful for us?

Increasing participation: not only in the number of participants but also in diversity of these, especially to those who do not usually participate (families).

Child Participation: Encourage children's participation (usually forgotten in the political process). Facilitating children's participation, specifically in the case of a group normally excluded from participative processes. This tool is useful for children to have a major role in participative processes.

Diversity of information: Get a variety of suggestions / information to incorporate into the process. Increasing the diversity of information, which feeds the participative process. Diversifying the profiles of participants, new concerns emerge, priorities that would otherwise remain hidden.

Why IS IT NOT useful for us?

Participation of ALL: any methodological tool is intended to some participants and not others to facilitate participation of all communities, having already said that any methodological tool is targeting some participants and not others.

To promote collective deliberation: stays only in the family. It promotes discussion group, stays in the family, making it ideal to combine this tool with other collective moments of debate, where they can be found, for example, different families and / or other participants.

To closing processes: It's a better tool to make proposals than to select proposals that others have done. It's not a good instrument for closing processes.

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Bien-être au travail et qualité des services fournis aux usagers : une recherche-action à l'intérieur d'un centre hospitalier italien.

par **Gandolfa Cascio¹, Caterina Lo Presti² & Gaetano Venza³**,



Depuis le milieu des années 1970 en Europe, un grand nombre d'écrits scientifiques ont investigué la relation bien être-travail en se concentrant sur les rapports entre les facteurs-clés qui apparaissent déterminants pour la qualité de vie au travail: la réalisation et le développement professionnel, les relations sociales et professionnelles, l'environnement physique, le contenu et l'organisation du travail.

Ces facteurs jouent un rôle très important à l'intérieur des milieux socio-sanitaires : car ils ont un impact considérable sur la satisfaction des professionnels de santé et sur leurs niveaux de stress et d'épuisement, ils conditionnent la qualité de la relation avec le malade en influençant, par l'intermédiaire de la satisfaction du patient, le succès des traitements aussi bien que des actions de prévention et promotion de la santé.

Partant d'un cadre théorique qui privilégie, d'un côté, l'implication des acteurs sociaux dans les objectifs et les processus de changement, de l'autre, la construction du sens et l'accroissement, par les acteurs eux-mêmes, de la connaissance des processus dans lesquels ils sont pris, une intervention psychosociologique a été menée à l'intérieur d'un hôpital italien d'environ 460 lits qui enregistre, si l'on considère soit les hospitalisations de jour soit celles classiques, presque 20.000 séjours par an.

Une place de première plan a été réservée aux actions de formation conduites dans une perspective visant à favoriser la prise de conscience des rapports entre bien-être au travail, satisfaction des patients, qualité du service et promotion de la santé. En même temps, l'utilisation combinée des méthodes quantitatives et qualitatives a permis de dresser un tableau de la situation actuelle de l'hôpital qui a représenté le point de départ pour le lancement de projets d'amélioration et de promotion du bien-être de l'organisation.

Dans le détail, l'administration du questionnaire MOHQ⁴ (n = 782) a permis d'esquisser le profil de l'organisation en mettant en évidence les points de force et les points de faiblesse par rapport aux problématiques investiguées. Les scores moyens⁵ obtenus aux différentes sous-échelles du questionnaire (voir

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⁴ Le questionnaire MOHQ (Multidimensional Organizational Health Questionnaire) a été élaboré par les psychologues italiens Avallone et Paplomatas (2005) afin d'évaluer les dimensions fondamentales du bien-être dans l'organisation: Confort du poste de travail, Perception des dirigeants, Perception des collègues, Perception de l'efficacité organisationnelle, Perception de la justice organisationnelle, Perception du conflit, Perception du stress au travail, Sécurité, Prévention, Fatigue, Isolement, Innovation, Troubles psychosomatiques. Il est composé d'items de type Likert dont la réponse est exprimée sur une échelle à choix forcée comprenant quatre valeurs possibles.

⁵ Le profil du bien-être de l'organisation peut être évalué en considérant la moyenne des scores obtenus à chaque sous-échelle du MOHQ comme point de référence : les facteurs les plus problématiques du bien-être de l'organisation sont associés à des scores inférieurs à la moyenne tandis que des scores plus élevés correspondent aux dimensions moins critiques et aux points de force. Ainsi faisant, en effet, les résultats obtenus ne sont pas interprétés arbitrairement mais en se référant aux perceptions des professionnels et à leur propre expérience (Avallone & Bonaretti, 2003). Plus généralement, l'on pourrait même souligner que les scores moyens de chaque

Tableau 1) indiquent que la Perception du stress, la Fatigue, la Perception de la justice organisationnelle, la Sécurité, la Prévention et le Confort du poste de travail sont considérées par les acteurs impliqués les dimensions les plus critiques du bien-être de l'organisation. La Perception des collègues, les Troubles psychosomatiques et la Perception de l'efficacité organisationnelle, par contre, ne sont pas considérés comme des dimensions qui nécessitent une attention prioritaire: d'un côté, il semble que des bonnes relations interpersonnelles pouvant favoriser l'efficacité et la qualité du travail caractérisent les groupes à l'intérieur de l'organisation; de l'autre côté, les sujets qui ont rempli les questionnaires ont affirmé de souffrir rarement de troubles anxieux, de dépression, de troubles du sommeil, etc. Enfin, même si les dimensions restantes se sont révélées plutôt problématiques, la nécessité d'apporter des améliorations dans ces domaines n'est pas considérée aussi pressante que celle d'amorcer des changements significatifs dans les perceptions relatives au premier groupe de facteurs.

Dimensions du bien-être de l'organisation	Scores Moyens	Écart-type
Stress	1,75	0,56
Fatigue	1,90	0,49
Justice organisationnelle	2,07	0,59
Sécurité	2,20	0,53
Prévention	2,22	0,68
Confort	2,27	0,67
Isolement	2,40	0,53
Innovation	2,44	0,61
Conflit	2,45	0,69
Dirigeants	2,53	0,69
Efficacité organisationnelle	2,62	0,53
Troubles psychosomatiques	2,66	0,73
Collègues	3,05	0,55
<i>Moyenne des scores aux sous-échelles : 2,37</i>		

Tableau 1

sous-échelle peuvent être considérés comme des indices clairement positifs ou négatifs de bien-être de l'organisation lorsqu'ils sont, respectivement, supérieurs à 2,9 et inférieurs à 2,6 (Avallone & Paplomatas, 2005).

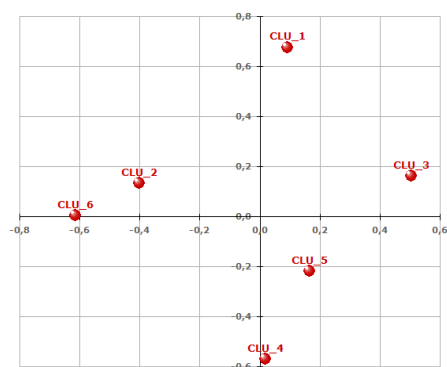


Figure 1

En se focalisant maintenant sur l'analyse des données qualitatives, l'on peut d'abord souligner qu'elles ont été recueillies à l'aide de 70 groupes de discussion composés de personnes aux fonctions et positions différentes à l'intérieur de l'organisation. Les séances ont été animées en suivant une trame qui se structurait autour des trois objectifs (esquisser le profil du bien-être de l'organisation en se référant à sa propre expérience, identifier les priorités d'intervention et rechercher des solutions pour les problèmes rencontrés) et leurs transcriptions ont été analysées à l'aide du logiciel T-Lab (Lancia, 2004), un logiciel constitué d'un ensemble d'outils statistiques et linguistiques qui ont permis d'identifier les trames principales présentes dans les textes et d'explorer leurs relations réciproques. La réflexion sur le bien-être de l'organisation a évoqué des thèmes très variés (la justice organisationnelle, la pénurie des ressources, l'incertitude liée à l'avenir professionnel, la qualité des relations avec les collègues et les patients, la fatigue physique et la fatigue mentale, la satisfaction au travail) et l'analyse thématique des contextes élémentaire, en particulier, a suggéré la possibilité d'identifier six clusters (Figure 1) qui fournissent, en même temps, une description synthétique des données recueillies et des indications à suivre afin d'élaborer des projets d'intervention calibrés sur les différents groupes de sujets et sur leurs différentes sources d'insatisfaction¹.

Pour ce qui concerne les étapes successives de la recherche-intervention, on est en train, d'un côté, d'élaborer un plan de changement organisationnel qui prévoit des interventions sur les rôles, la structure, la culture et les processus organisationnels et, de l'autre, d'administrer aux patients de l'hôpital un questionnaire sur la qualité perçue du service afin d'évaluer la corrélation entre les scores moyens aux échelles du MOHQ et ceux relatifs à la satisfaction des utilisateurs.

¹ Le cluster 1 se caractérise par des mots-clés qui décrivent une situation d'insatisfaction marquée par rapport à la dimension de la justice organisationnelle. Les mots-clés qui caractérisent le cluster 2, par contre, renvoient plutôt à la quotidienneté du travail et aux relations qui se déroulent au niveau du groupe de travail : il semble que, si les relations horizontales sont considérées positives et collaboratives, celles verticales soient souvent le théâtre de disputes. La dimension relationnelle est importante pour la compréhension des représentations véhiculées par le cluster 4 aussi. Dans ce cas, cependant, il semble que l'attention se focalise sur une représentation du bien-être de l'organisation dont le sens peut être retrouvé à l'intérieur des relations qui se déroulent entre les professionnels de santé, les patients et leurs familles. Le cluster 3 se caractérise par des mots-clés qui décrivent le ressentiment des professionnels qui, peut être parce qu'ils tirent leur motivation de facteurs extrinsèques ou bien parce qu'ils ont désinvesti leur activité, pensent que le bien-être et la stabilité économique coïncident. Le cluster 5 se caractérise par la comparaison de la situation actuelle de l'hôpital avec celle du passé et par beaucoup de références à la plus générale situation sociopolitique italienne : le regret du passé s'accompagne à l'insatisfaction relative aux endroits économiques des dernières années qui ont comporté la réduction des ressources humaines et matérielles. Pour conclure, le cluster 6 se caractérise par des mots-clés qui tracent une représentation du bien-être focalisée sur la satisfaction personnelle: son propre travail est considéré comme source de gratification même s'il implique une certaine fatigue.

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Le patient formateur auprès des étudiants en médecine

par Luigi Flora¹



La notion d'apprentissage des savoirs savants passant par les savoir profanes (J.-L. Le Grand) est largement relaté dans les publications scientifiques. Dans le cadre de la relation médecin patient, elle a été constatée par H. S Becker. Dans les années 1990 ce concept se développe et les expériences de terrain se multiplient. Aujourd'hui des programmes internationaux, comme celui de l'OMS, le programme « Bone and joint decade » 2000/2010 arrivent bientôt à terme, or en France cette forme d'enseignement reste encore le fait d'initiatives individuelles. Cette présentation a pour sujet : « Qu'est ce qu'un patient formateur ? Comment le patient formateur permet d'améliorer la relation médecin patient dans le cadre des maladies graves et chroniques ? comment améliorer l'accès à l'information, l'accompagnement thérapeutique et l'amélioration de la qualité de vie dans une communauté spécifique par l'utilisation de cette dynamique ?

Le patient formateur auprès des personnels soignants est devenu une réalité dans bien des pays. Cependant son développement est hétérogène selon les systèmes de santé.

Il a d'une part démontré son efficacité au point d'être intégré dans des programmes internationaux comme par exemple pour l'accompagnement des malades dans la polyarthrite rhumatoïde dans le cadre un programme international de l'OMS (« Bone and joint decade » 2000/2010). Un programme issu d'un programme développé par une université Américaine en 1992.

En 2009, dans le cadre de la recherche action EMILIA (programme 2005-2010), un module de formation « Usager témoin - patient formateur » a été élaboré en collaboration entre les chercheurs du laboratoire de recherche en santé mentale de Maison blanche, site désigné de la recherche action en France en association et la FNAPSY, une association d'usagers.

EMILIA est une recherche Financée par la Commission européenne qui se poursuit dans le cadre d'ENTER Mental Health réunissant 16 partenaires institutionnels dans 12 pays différents. Ce projet s'appuie sur les compétences des usagers – experts, acquises tout au long de leur parcours de soins, des caractéristiques qui facilitent la démarche d'insertion sociale et professionnelle. La spécificité de cette recherche réside dans le fait que les usagers sont associés comme co-chercheurs au projet et à la recherche-action sur les programmes de formation.

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En fait l'initiative de développer l'utilisation d'usagers-experts et patients formateurs, a été entreprise par les anglophones (Novack 1992). Ainsi, au début des années 90 on trouve des patients formateurs vivant avec des maladies chroniques impliqués dans diverses formations en soins infirmiers, paramédicales, puis dans les écoles de médecine, dans les universités de sciences sociales ou de droit.

Ce concept a été par la suite développé par le NHS qui organise aujourd'hui fréquemment des formations d'enseignements dans le cadre d'un programme sur le patient expert, de professionnels de santé dans le domaine de la santé mentale (Ikkos 2003). Ces dispositifs sont issus du premier programme d'éducation conduit par des patients à l'université de Stanford aux USA (K.Lorig.1985, 1999).

Ce programme était développé par des non professionnels de santé avec Kate Lorig, une infirmière, elle même atteinte de symptômes entre autre cardio-respiratoire issus d'une maladie génétique (La maladie du gaucher).

En France, les écoles d'infirmières ont également rapidement intégré ce mode d'enseignement. A partir de 1995, c'est par le biais de médecins généralistes enseignants que l'Université de Bichat commence à prévoir ce type d'intervention lors de sessions de formation continue. Ces enseignants praticiens sont alors démunis lorsque des toxicomanes passent la porte de leur cabinet. Devant le désarroi des médecins généralistes. L'idée leur vient de faire appel à des personnes connaissant de l'intérieur ce problème. Il sollicite alors les membres de l'association Narcotiques Anonymes. La pertinence de leurs interventions et l'intérêt qu'elles suscitent, incite les instigateurs de la formation à les intégrer en 1997 dans les cursus d'enseignements initiaux. Ils interviennent ses dernières années selon deux modes : l'un dans un système de témoignages suivis d'un débat, ou participant à un jury multi-disciplinaire ou devant des études de cas joués par les étudiants eux-mêmes.

Cette démarche se diversifie depuis la fin du siècle dernier comme le décline une enquête de terrain non exhaustive effectuée dont deux recherches ont été menées et qui s'étend. La première recherche menée en droit de la santé a permis de poser les jalons législatifs et les recommandations qui donnent une légitimité à ce type de démarche (Flora 2007).

La seconde en sciences de l'éducation tout au long de la vie a permis d'expliquer par une approche historique l'émergence de ses nouvelles figures et des nouvelles pratiques. Elle identifie les conditions d'émergence de patients formateurs par les qualités susceptibles d'être un apport substantiel dans la formation des soignants (Flora 2008).

Celles-ci sont décrites comme tel :

- Être engagé dans une dynamique d'acceptation. Un processus qui lui permette de vivre les différentes étapes qui le mène à gérer sa vie en tant que personne vivant avec. Une dynamique qui lui permet de se doter de savoirs être.
- Être capable de réflexivité ;
- Pouvoir se raconter ;

- Être en capacité d'écouter et d'entendre. Ce qui autorise la capacité à aller plus loin que sa propre expérience ;
- Savoir tisser des réseaux. Ce qui évite le conflit avec la sphère des professionnels de santé et favorise une collaboration avec eux ;
- Pouvoir apprendre des autres et communiquer des problématiques communes, sans qu'elle ne vive ou n'est pas ou n'est pas forcément vécue ces événements ;
- Être conscient que cette expérience peut en aider un autre, mais que cela n'est en aucun cas systématique, universel.

Un second volet consistait à identifier la manière de trouver les personnes vivant avec une expérience qui puissent avoir ou être en capacité de développer ses qualités.

Le milieu associatif est le terreau de ces patients formateurs. En fait par les échanges, l'entraide l'information et la formation que celui-ci apporte il est un terrain favorable.

Il développe un climat ou s'actionnent par les différentes actions les théories telles que:

- La co-formation et la formation par les pairs ;
- La théorie de l'apprentissage ;
- La théorie de l'action raisonnement ;
- La théorie de la diffusion ;
- La théorie de l'éducation participative ;

Ces dernières années en France, dans le prolongement des recommandations de l'OMS qui proposent de placer le patient, l'usager au centre du dispositif de soins, des voix se sont élevées parmi les institutionnels pour promouvoir dans cette idée. Lydia Valdès de la Direction Générale de la Santé expliquait en 2006 au Forum des associations de maladies rares :

« La Direction Générale de la Santé souhaite promouvoir, à l'instar d'initiatives prises pour certaines maladies chroniques, comme la polyarthrite chronique de l'adulte, la notion de "patient formateur". Ces patients formateurs sont des malades spécialement formés pour transmettre une formation aux étudiants en médecine. Ces initiatives sont très appréciées par les étudiants qui ont ainsi une autre vision que celle du seul professionnel de santé. Les associations de patients ont un rôle important à jouer à ce niveau » (Antonini, 2006).

Sur le plan législatif, une nouvelle loi donne un peu plus de poids à cette orientation. En effet, la loi n° 2009-879 de Juillet 2009 dans la loi portant réforme de l'Hôpital et relative aux Patients, à la Santé et aux Territoires (loi autrement intitulée HPST) à inscrit dans le marbre le développement d'actions d'éducation thérapeutique :

« L'éducation thérapeutique s'inscrit dans le parcours de soins du patient. Elle a pour objectif de rendre le patient plus autonome en facilitant son adhésion aux traitements prescrits et en améliorant sa qualité de vie. Elle n'est pas opposable au malade et ne peut conditionner le taux de remboursement de ses actes et des médicaments afférents à sa maladie ».

Par la formation des soignants, il est nécessaire de poursuivre les changements d'attitudes, de comportements et de types de connaissances de médecins que ce soit dans le cadre de cursus initiaux ou de formation professionnelle car pour pouvoir communiquer avec l'autre, il est nécessaire de pouvoir entrer dans « son monde », de faire connaissance avec leurs représentations. Or par le savoir expérientiel que délivrent ses patients formateurs, il est possible d'appréhender cette sphère facilitant ainsi les nouvelles approches du soin, particulièrement dans les maladies chroniques et les nouveaux maux de la société qui relève de la santé.

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L'Institut Wallon pour la Santé Mentale

par Marie Lambert¹ & Marie Viaene¹



L'IWSM est une association qui a pour objet de rassembler les acteurs du champ de la santé mentale en vue de soutenir une réflexion permanente sur les problématiques, les pratiques et les initiatives dans le champ de la santé mentale, de participer à la promotion de la santé mentale de la population, et de travailler les questions éthiques qui traversent le secteur.

Elle constitue un organe permanent de concertation (trans-sectorielle et trans-régionale) et de recherche (interdisciplinaire) autour des questions de santé mentale en Wallonie.

Les membres constitutifs de l'IWSM sont des fédérations, représentant les acteurs en santé mentale et leurs partenaires. Ils se répartissent en six catégories : les structures hospitalières, les structures intermédiaires (notamment les hôpitaux de jour), les plates-formes de concertation régionales, les structures psycho-médico-sociales et intervenants de première ligne (maisons médicales, centres de planning familial, ...), les usagers et familles et les structures ambulatoires.

Les missions de l'IWSM sont les suivantes : information/communication, appui, recherche, concertation, observatoire. Afin de développer ces missions l'IWSM dispose de différents outils, à savoir : un centre de documentation, un périodique, les travaux menés par les chercheurs, des groupes de travail, tables rondes, séminaires, colloques et conférences, une newsletter,...

Les permanents qui composent l'équipe se répartissent entre un pôle communication – information, un pôle recherche, le secrétariat et la direction.

Partenariats privilégiés

La richesse de l'IWSM tient notamment aux partenariats privilégiés qu'elle entretient avec les acteurs en santé mentale : les usagers, les professionnels et les autorités de tutelle.

Les usagers sont présents à l'IWSM via la fédération d'associations d'usagers qui les représente : Psytoyens. La participation des usagers fait l'objet de divers travaux au sein de l'Institut, qui par ailleurs veille à les impliquer au mieux à différents niveaux. Cette volonté s'est par exemple traduite dans le cadre de l'organisation des Etats Généraux de la santé mentale fin 2008.

Ces Etats Généraux se sont penchés sur le travail en réseau en santé mentale, en posant la question de la place des usagers dans les pratiques de réseau. Les usagers ont pris une part active dans la phase préparatoire du colloque, et lors de la journée en elle-même. L'IWSM a accompagné un groupe d'usagers dans un travail

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d'élaboration autour de la thématique du colloque, en vue d'une présentation dans le cadre d'un des ateliers. D'autre part, nous avons proposé que des « garants » usagers et familles se répartissent au sein des ateliers, afin de garantir que leur point de vue soit réellement pris en compte au sein des débats. Une usagère est également intervenue en séance plénière.

Concernant ses rapports avec les autorités de tutelle, l'IWSM interagit essentiellement avec la Région wallonne dont elle reçoit une subvention ; les autres niveaux de pouvoir en Belgique étant le fédéral et le communautaire. Des subsides peuvent également émaner de ces autres interlocuteurs ou de l'Europe, et permettent à l'IWSM de développer d'autres projets. L'IWSM est amené à présenter des recommandations issues des réflexions et travaux menés en son sein.

Enfin, l'IWSM travaille avec les professionnels, toutes catégories confondues et tous secteurs confondus (santé mentale et partenaires du réseau). Les professionnels sont impliqués dans les groupes de travail mis en place au sein de l'IWSM, dans les processus de recherche ; ils sont invités aux événements organisés par l'IWSM ; ils sont tenus informés de l'actualité du secteur ; ils alimentent la réflexion soutenue à l'IWSM.

Parmi ces professionnels, une catégorie occupe une place particulière, à savoir les services de santé mentale (SSM). Il s'agit de structures ambulatoires qui, par une approche pluridisciplinaire, répondent aux difficultés psychiques de la population du territoire qu'ils desservent. Ils développent des missions généralistes et, parfois, des missions spécifiques.

L'appui aux SSM

Dans le cadre d'une subvention facultative, la Région wallonne confie à l'IWSM une mission d'appui aux services de santé mentale (SSM). Le nouveau décret du 03 avril 2009 régissant les SSM prévoit quelques changements dans l'organisation et le fonctionnement des services. Ces derniers vont notamment devoir élaborer un projet de service de santé mentale (PSSM), qui constituera un des éléments sur lequel le pouvoir subsidiant s'appuiera pour leur accorder un agrément à durée indéterminée.

Le PSSM est un outil à partir duquel les services sont amenés à questionner et à préciser les finalités et les objectifs qu'ils poursuivent, et leurs modalités de fonctionnement. Il offrira également une meilleure visibilité aux services, en valorisant leurs spécificités.

Ce PSSM a été élaboré par la Région wallonne, en concertation avec l'IWSM et les acteurs de terrain. Des groupes de travail ont été mis en place à cette fin, et ont abouti à des recommandations. Des demandes d'appui adressées à l'IWSM ont également été exprimées, afin d'aider les services dans l'élaboration de leur projet.

Pour cette mission d'appui, l'IWSM se situe dans un aller-retour permanent entre le terrain et le politique.

Cet appui se concrétise par la mise à disposition d'outils sur le site internet de l'IWSM, les permanences téléphoniques, l'organisation de formations à la gestion de projet. Celles-ci ont fait émerger le souhait que soient mis sur pied des groupes de travail et d'échanges des pratiques, notamment par rapport à la question de la participation des usagers.

Afin de répondre au mieux aux besoins de la population du territoire qu'il dessert, chaque service est amené à réfléchir à son inscription dans son environnement, en s'appuyant sur des données socioéconomiques, des

données sanitaires, et en se positionnant par rapport aux différentes structures de soins de santé et de santé mentale existant dans sa région.

Cette réflexion sur le contexte environnant s'assortit d'une confrontation avec les données épidémiologiques propres au service.

Le décret met également l'accent sur la réflexion à mener à propos de la place réservée à l'utilisateur au sein des services, ce qui constitue une nouvelle donnée pour les services, ainsi que sur l'importance du travail en réseau et les conventions de partenariat à établir avec les intervenants du réseau.

Enfin il est demandé aux services de s'inscrire dans une dynamique réflexive. Ils vont être amenés à réaliser une auto-évaluation de leur projet.

Les questions qui se posent à l'IWSM dans sa mission d'appui

Les différents contacts pris avec les services font émerger une difficulté récurrente rencontrée par les équipes dans l'élaboration de leur projet : comment sélectionner les données contextuelles pertinentes, comment s'en saisir, de manière à ce qu'elles fassent sens pour chaque service ? L'IWSM a un rôle à jouer auprès des SSM à ce niveau : comment les soutenir dans leur inscription dans la cité, comment les aider par rapport à la lecture et l'exploitation de données statistiques ?

Ensuite, l'IWSM va être amené à aider les services par rapport à la question de la place réservée aux usagers en leur sein, en tenant compte du contexte spécifique du travail en SSM. La participation des usagers se pose d'une façon particulière dans ces services ambulatoires, dont les activités développées sont pour la plupart des consultations. Un des éléments du projet de service porte sur la perception qu'a le service des attentes et des besoins des usagers. Cet item suscite beaucoup d'interrogations dans les équipes, qui interpellent régulièrement l'IWSM à ce sujet. La question sera donc mise au travail à l'Institut.

Enfin, comment garantir au mieux notre position d'interface, dans le souhait de faire circuler les informations et d'accompagner les SSM, en bonne articulation avec l'autorité qui, elle, décide des orientations et procède à l'évaluation des projets de service ? En préalable, l'IWSM doit réaliser tout un travail de confiance et veiller à ce que soit précisés les rôles et prérogatives respectifs des diverses instances en présence. Cette position est à la fois délicate mais également potentiellement riche pour les différents partenaires. À la fois proche du terrain, tout en ayant un recul suffisant que pour pouvoir élaborer les questions qui se posent, l'IWSM est aussi un relais entre les services et le pouvoir subsidiant. Il s'agit de trouver une juste place, en soulignant les éventuelles difficultés, les problématiques rencontrées et les initiatives émanant de la pratique des services, dans la perspective de faire évoluer l'offre de soins dans le champ de la santé mentale, compte tenu de l'évolution des demandes, des contextes et des ressources.

Les « cafés de parents » dans l'éducation populaire : quels enjeux socio-politiques ?

par Gilles Monceau¹



Les psychologues cliniciens ont défini le processus de parentalisation comme étant celui par lequel des sujets deviennent parents. Aujourd'hui, le terme est plus fréquemment utilisé pour désigner des pratiques destinées à « fabriquer » des parents acceptables ou bien à les « réparer » (reparentalisation) selon des critères définissant implicitement le « bon parent ».

La première approche était donc descriptive et visait généralement à une plus grande réflexivité des sujets sur leurs pratiques éducatives, la seconde est souvent prescriptive et surdéterminée par l'idée qu'il existerait de « bonnes pratiques » parentales et de « bonnes pratiques » d'accompagnement des parents.

Après une première recherche consacrée à la coopération entre parents et enseignants dans l'institution scolaire menée pour la Fondation de France (KHERROUBI, 2008), une recherche socio-clinique institutionnelle (prenant la forme d'une recherche action) a été conduite avec un mouvement d'éducation populaire dont les militants interviennent dans des dispositifs d'appui à la parentalité (en particulier des « cafés de parents ») dans des centres sociaux, des établissements scolaires et des associations de parents d'élèves. Les opportunités offertes aux militants de l'éducation populaire d'agir dans et hors l'école, dans le cadre de commandes officielles, sont aussi porteuses de tensions pratiques et idéologiques. Celles-ci se manifestent concrètement sur le terrain et leur analyse permet d'en travailler les dimensions institutionnelles.

Cette communication reprend en partie les conclusions du rapport remis en décembre 2009 au terme de la recherche action : *Education populaire et parentalité. Comprendre et faire évoluer l'intervention des CEMEA sur les actions d'appui à la parentalité*. Ce travail a été mené avec l'association territoriale des CEMEA (Centres d'Entraînement Aux Méthodes d'Education Active) de Picardie et le soutien financier de l'association nationale.

Ce que c'est qu'être parent

C'est l'enfant qui fait le parent. L'arrivée de l'enfant produit le parent et sa scolarisation produit le parent d'élève. L'anthropologie et plus largement les sciences sociales nous ont montré que le fait d'être reconnu comme père ou mère d'un enfant ne dépendait pas nécessairement du fait de lui avoir donné naissance. Les géniteurs ne sont pas nécessairement reconnus comme parents. Inversement, d'autres adultes peuvent être considérés comme

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parents du fait de leur place dans les systèmes de parenté. Le statut de parent est un phénomène institutionnel plus que biologique.

Dans les établissements scolaires une différence apparaît couramment entre les « parents d'élèves » et « les autres parents ». Par « parents d'élèves », on désigne le plus souvent les parents élus par les « autres parents ». Cette catégorisation distingue donc selon la place que les parents prennent dans l'institution scolaire, c'est à dire selon la forme que prend leur implication scolaire.

Cette différence entre « parents d'élèves » et « autres parents » n'est pas seulement une différence lexicale, elle produit aussi des effets concrets sur les relations qu'ils entretiennent avec les enseignants et plus largement avec l'établissement scolaire. Certains parents non élus ne se sentent, par exemple, pas concernés lorsque les enseignants les invitent à une « réunion de parents d'élèves ». Les coulisses de ces rencontres donnent pourtant aux acteurs des opportunités relationnelles. C'est le cas lorsqu'à l'occasion d'un conseil d'école, une mère de famille pose à l'enseignant de son enfant des questions liées à sa scolarité. Ces échanges se produisent dans les marges des réunions officielles. Cette relation privilégiée a pour effet mécanique de rendre les « autres parents » moins visibles, moins perceptibles par les enseignants.

Devenir « parents d'élèves » c'est donc acquérir une place dans l'institution scolaire, une place légitime même si elle peut être contestée, disputée voire décredibilisée par d'autres parents ou par des enseignants.

Les CEMEA interviennent depuis quelques années dans un domaine désormais désigné sous le nom d'« appui à la parentalité ». Cette désignation a été diffusée par la création des Réseaux d'Ecoute, d'Appui et d'Accompagnement des Parents (REAAP). En répondant aux demandes qui leur sont adressées par des collègues, des centres d'action sociale et des associations de parents, les CEMEA animent des « cafés de parent » (prenant la forme de groupes de parole entre parents) mais aussi des « soirées jeux » ou « ateliers jeux » où parents et enfants viennent fabriquer et/ou jouer ensemble à des jeux de société dans l'enceinte de la structure (centre social ou collège). Ces actions peuvent aussi prendre la forme de réunions d'information suivies de discussions (à propos d'alimentation, de sommeil, d'addiction, d'internet mais aussi à propos de littérature enfantin).

La figure du « bon parent »

Les discours liés à la parentalité se développent en France depuis les années 2000. Ils véhiculent une représentation du « bon parent », celui qui interagit avec les institutions.

En se dotant de dispositifs destinés aux parents, les établissements tentent de les convaincre de leur propre utilité. Le « bon parent » (acceptable voire désirable) est celui qui interagit avec les professionnels, les établissements et plus largement les institutions. Le « très bon parent » est celui qui se reconnaît comme membre de l'institution, comme le font les « parents d'élèves » élus. Mais nous savons aussi que l'écart est faible, aux yeux des professionnels, entre le « très bon » et le « trop bon » parent.

Une autre caractéristique du « bon parent » est l'autonomie, notion que mentionnent les textes officiels (dont la Charte des REAAP) et à laquelle s'intéresse la littérature sociologique de manière croissante. L'autonomie du

parent est désormais requise comme condition à laquelle il pourra être aidé, soutenu, appuyé (ces termes n'ayant pas exactement le même sens). Les politiques dites d'assistance ont désormais mauvaise presse. Le parent, désormais considéré comme un partenaire autonome, peut alors être aidé dans sa démarche, dans son projet. Insensiblement, les professionnels passent de l'assistance au « coaching ». Ce renversement n'est pas anecdotique, il renvoie finalement le parent à sa propre responsabilité.

La troisième caractéristique du « bon parent », défini par les politiques éducatives et plus largement les politiques sociales, concerne sa responsabilité (sociale mais aussi juridique).

Au total, le parent doit donc être interactif, autonome et responsable. Il doit assumer les conséquences de ses actes mais aussi celles des actes de ses enfants. Le fait de ne pas parvenir à assumer un rapport d'autorité vis-à-vis de ses enfants est désormais une faute du point de vue de la réglementation mais aussi, dans certains cas, du point de vue de la loi. Si le parent est responsable, il doit être conseillé par des professionnels dont le rôle a changé (SELLENET, 2007) (FABLET, 2008). Sur ce plan, les dispositifs visent à lui délivrer des informations concernant ses droits et ses devoirs prennent une place de plus en plus importante.

Mais le parent, objet de cette politique, n'est pas aussi passif qu'il y paraît, il résiste de diverses manières (MONCEAU, 2009a.).

L'intervention de l'Education populaire

Répondre aux demandes des professionnels et des bénévoles « de terrain » pour impliquer les parents dans les institutions scolaire et d'action sociale permet aux militants CEMEA d'être en accord avec les orientations de l'Education populaire.

Ne pas vouloir agir sur les parents de manière prescriptive et ne pas vouloir effectuer de suivis individuels (ce que souhaitent pourtant certains établissements), c'est refuser que cette implication ne soit normalisée dans sa (bonne ?) forme. Favoriser au contraire la dimension collective de l'action et de la réflexion, c'est investir les dispositifs d'appui à la parentalité comme des espaces de « formation citoyenne »¹. Ce faisant, c'est à la fois s'inscrire dans une politique familiale qui met actuellement l'accent sur l'autonomisation et la responsabilisation individuelle (MONCEAU, 2009 b.) et la détourner en partie en y faisant intervenir des pratiques et des valeurs davantage tournées vers l'action collective. Les militants CEMEA engagent ainsi, dans les dispositifs étudiés, un ensemble de compétences et de valeurs constitué au fil d'années d'expériences dans divers autres situations et contextes.

Leurs expériences professionnelles (d'enseignants pour la plupart), extra-professionnelles (direction de centres de vacances, formation d'animateurs, formation d'enseignants, expertise en politique éducative locale...) leur ont permis de construire des compétences dans l'élaboration et l'animation de dispositifs collectifs de réflexion et d'action.

L'appel de professionnels à des militants de l'Education populaire n'est pas anodin. Comme cela a été dit lors des travaux de terrain, mais aussi lors des deux séances de restitution, ces militants sont perçus comme possédant des compétences que ne détiennent pas les professionnels « ordinaires ». La difficulté croissante à

¹ Ou « formation à la citoyenneté » selon les mots des militants CEMEA.

« toucher » les publics visés par les politiques publiques semble nécessiter un recours à des individus qui ne se définissent pas seulement par leurs implications professionnelles. Les expériences de ces derniers, en partie construites en dehors voire en opposition interne aux organismes étatiques, ont été progressivement élaborées de manière collective dans des mouvements (ici les CEMEA) eux-mêmes traversés par des conflits évolutifs. Ces expériences passées et présentes leur procurent une distance critique dans la conduite des dispositifs.

Au cours de la recherche-action nous avons constaté que les demandes adressées aux CEMEA par les responsables de collèges, de centres sociaux ou d'associations de parents étaient davantage structurées par une volonté de nouer ou de renouer des relations suivies avec les usagers (parents d'élèves ou parents du quartier) que par l'aide technique à la gestion des activités elles-mêmes. Si les commandes explicites concernent bien l'appui à la parentalité, les demandes plus implicites renvoient davantage à une médiation à effectuer pour atteindre un public insuffisamment présent, réactif et interactif.

Favoriser la scolarité de l'enfant ou soutenir la place du parent semble alors secondaire ou plutôt soumis au préalable d'un rapprochement des parents avec les institutions. Il s'agit donc d'agir sur les implications parentales dans des institutions qui sont aujourd'hui moins identifiables qu'hier à des organisations aux contours et aux structures clairement délimités.

Les phénomènes d'externalisation diminuent le poids des infrastructures organisationnelles et étendent les ramifications institutionnelles bien au-delà de l'organisation. Les organismes (comme ceux d'éducation populaire) auxquels est déléguée la mise en œuvre de certaines actions étatiques sont placés en situation d'« autonomie contrôlée »¹ par rapport au financeur. La résistance à la dissolution de l'Education populaire (comprise comme éducation « du peuple par le peuple ») dans une politique gouvernementale de responsabilisation des parents (qui suppose appui mais aussi sanction de ces derniers en cas de manquement) constitue alors un enjeu socio-politique d'importance.

Bien que limitée à quelques dispositifs, notre investigation socio-clinique montre que les parents qui participent aux actions sont d'abord perçus par les militants CEMEA comme étant des « citoyens » et secondairement comme étant des parents². Ces citoyens autonomes et responsables, que l'Education populaire vise traditionnellement à former par des démarches collectives, ne correspondent pas exactement à ces « bons parents » promus par les politiques familiales d'aujourd'hui.

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² Dans l'une des actions, certains participants ne sont d'ailleurs pas parents et cela ne pose pas de problème à l'intervenante CEMEA.

“Let’s fly” : A system directed not only to promote the wellbeing at school and in all the systems around it but also to reduce school dispersion and the potential negative psychological consequences of this

by **Antonio Restori¹, Romano Superchi², Barbara Balestra³, Gianandrea Borelli³, Gabriele Caselli³, Michela Dallaromanina³, Cristiana De Sensi³, Jennifer Faietti³, Francesca Giacobbi³, Valentina Nucera³ & Martina Benazzi⁴**



Many countries have to deal with problems which arise from educational-school backgrounds. What is the position of the psychologist in these contexts and therefore what background do they have ?

In 1975 the school psychologist stopped working inside the schools to enter the national health system as a clinical expert earning 30% more. Since then the school has felt deprived of an important educational-psychological competence in its inner system. During the following years the school has tried to keep in contact with the psychologists working in the public health system; unfortunately they had decided to only speak the language of the clinical psychologist so the communication has become more and more complicated.

The presence of an educational psychologist at school is widespread all over Europe.

Although the studies concerning the intervention of psychologists at school claim that Italy is the only country not to have this kind of resource at school, a small number of colleagues are called for help in situations that are similar to those of their European colleagues, such as: orientation, affectivity education, learning and behaviour problems, intercession between students/teachers; prevention against drug use; teacher and parent training and so on...

The only difference which is important to underline is that in some countries, like France, the 8000 psychologists working in schools are paid by government funds, while the 1500 Italian psychologists working in schools are paid by those virtuous schools which have been able to save some money from their inner resources.

I believe this critical state in Italy is due to the fact that psychologists are often “called” to work at school at random, without any coordination at a social and political level. In fact the feeling is that in Italy we not only don’t do enough for the schools but even the little we do is carried out badly.

At the same time, however I have the feeling that in some ways in all European countries the school psychologist’s activities are disconnected to the net of institutions around the schools.

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The trend is to consider the educational psychologist as “school property” instead of developing the idea of a community psychologist composed of different social roles: school-family-social health institutions - educational institutions -working world- formal or informal associations.

All linear interventions of empowerment are useful to acquire new teaching methods and to understand social changes and human growth better; yet if we do not want to continue in an unorganized way what is required is an overall view which would connect the expectations of the different social roles who take part in the development of a civil society.

I assume that these lenses could be worn by a psychologist who is not just a piece of a system but is located in a “mid” position; like a junction in the net which is able to see itself over the net.

I think there should be figures in the “system” who are able to interconnect the inner school competences and to develop effective and trustworthy styles of life for people who come into contact with the systems around it.

Inside the social health services there should be professional figures with the above competences, who are able to connect treatment and rehabilitation to the different people who come into them: the single person, the family, the friendship system, the job, the school and the social health services. Is it a privilege of the community psychology? I would say so.

Inside the Italian Health Service a new executive figure with high responsibility has been introduced with the task to coordinate the sanitary interventions and the social ones.

If this figure in the “system” is well interpreted it can interface with the most representative social institutions in the local area such as the working world, voluntary work, family associations, health and social services, and in particular the school.

In my local health authority in Parma there is this kind of figure and from the above coordination the project “let’s fly” started.

I would define “Let’s fly” as Bateson would say: the connecting structure”, not as if it was a glue but as a net to be knotted. The psychologists who have been working on this project for five years now, have worked together to resolve the problems, to draw the lens near and all this has been possible due to the fact that they are able to communicate with all the institutions involved.

I believe a community psychologist must be with the whole “community” and not just a piece of the community. At the most he could match the pieces and help them to communicate.

The psychologist of “Let’s fly” does not belong to the schools but supports them in order to help them to have different views from inside and outside.

There is a certain amount of unsuited “educational treatment” for the children of the primary and middle school which runs the risk of being changed into a “suffering to be cured” when they are teenagers and adults. It is referred to all the borderline situations of a normal and natural psycho-emotional and relational difficulty of growth on one hand, and on the other hand a real pathology of growth.

It is a situation where the teachers find it difficult to enter because they think of not having suitable instruments; so as do, partly correctly, the experts of the health services (children neuropsychiatry), since there are often

children with learning problems which can still be treated with psycho educational instrument; partly wrongly leaving this place when the school calls them for help; the same for the social educational service members.

If we look at the following system - social services - school – family - we can notice a lack of even minimum propensity to “the aesthetics of connection” and particular care for the shadow zone, special space for such work of interconnection.

The beating heart of the project is the meeting between children and adults (and their families) in a new story of the classroom group. The teaching team is the most responsible for the interpretation of the story and gives it its dignity back; they should be able to interpret the “noise” of the shadow zone and transform it into understandable “sounds”: at this stage it's the psychologists' turn; now the job is for us:

co-building new stories where the differences become good opportunities; where the learning problems, the behaviour problems and the subgroup “out of tune” acquires pertinence again; but also where the problematic teacher isolated by the team together with her/his problematic child (because the team often mimes family structures) can be helped to enter the team again and be trustworthy again.

The epistemological models underneath our way of proceeding are essentially three:

The Theory of human systems

for the concept of system and relationship(s), and the overcoming of the primary prevention concept through the promotion of the wellbeing and suitable styles of life.

The constructivism and the social constructionism

In this frame the reality is never definitely given but we build it step by step and the instructor task is also to understand which are the intentions, and how the mind, which creates a certain educational process, works.

Attention to the process and not to the models.

This allow us to observe and take notes of our way of watching the reality, including ourselves in the above observation.

Such a significant project works only when:

It is shared among operating protocols

It is integrated in the school –area system

It is monitored and redefined in the system.

It works when it helps to change the context

Once the context has changed, the project must be calibrated again.

The role of collective efficacy in adjustment and problem behavior among youth incommunity-based afterschool programs: developmental models of promotion and prevention

by Emilie P. Smith¹, Chakema Carmack¹, Katharine Hynes¹,
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Children's sense of agency, belonging, empowerment, and positive peer influence comprise potentially important aspects of not only positive youth development but also of human development (Bandura, 1982; Eccles & Gootman, 2002; Larson, 2000; Rappaport, 1981; Zimmerman, 1995). This study evaluates the reliability and validity of such a measure with children in elementary afterschool programs. The newly adapted collective efficacy scale was found to be highly reliable ($\alpha=.844$ with 20 items and $.859$ with 16 final items). Using path analyses across 2 waves of data, children's collective efficacy was found to be related to better adjustment (less anxiety and aggressive behavior) and reduced smoking initiation, though the modeled varied slightly by gender. Future research could explore ways to promote collective efficacy, positive youth development, and prevention of problem behavior in community-based afterschool programs.

Background and Introduction

Children's sense of belonging, engagement, and positive peer engagement are thought to be influential aspects of positive youth development (Eccles & Gootman, 2002; Larson, 2000; Smith, 2007; Vandell & Shumow, 1999; Villaruel, Perkins, Borden, & Keith, 2003). The degree to which human beings in general, possess sources of social support, feel a sense of community, and exert informal social control within their community are concepts embodied across the multiple disciplines of community psychology, criminology, human development, sociology and psychology (Chavis & Wandersman, 1990; Furstenberg, 1993; Rappaport, 1981; Sarason, 1976; Zimmerman, 1995).

Collective efficacy, a more recent concept that has emerged in the past decade or so, is defined as the degree to which a group of individuals feel close to each other, and confident in the willingness and ability of the group to act on behalf of its members. Research by Sampson, Raudenbush and Earls (1999) has demonstrated that collective efficacy in adults is an important moderator of crime and violence in poor, at-risk neighborhoods (Sampson et al., 1999). Research has also investigated the relationship of adult collective efficacy to parenting processes. In a longitudinal study of rural African American parents, increases in CE were related to more authoritative parenting, which includes clear parental guidelines coupled with warmth and support, as well as to less peer deviance and delinquency among the youth (Simons, Simons, Burt, Brody, & Cutrona, 2005). Goddard

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and colleagues (Goddard, 2001; Goddard, Hoy & Hoy, 2000) found that collective efficacy among public high school teachers was related to student's academic achievement. Unfortunately, however, teacher CE was lower in schools with more socioeconomic disadvantage. Thus the challenge becomes the ability to develop a sense of collective efficacy among those who are living in less advantaged neighborhoods.

To date, much of the research on collective efficacy has examined the impact of adult collective efficacy upon youth behavior with very little, if any focusing on youth perceptions of their own sense of belonging, community, and empowerment. In instances where children's perceptions of their social capital, i.e. neighborhood cohesion and informal social control have been included, these concepts have been found to be related to children's mental health (Drukker, Kaplan, Feron, van Os, 2003). Though research on deviant and delinquent peers abound, work focusing on positive peer influence is rare. Examining the meaning of collective efficacy for children of diverse racial-ethnic and social backgrounds might be particularly timely.

Opportunities to help promote a sense of belonging, engagement, leadership, and involvement among youth are deemed important aspects of youth serving settings (Eccles & Gootman, 2002; Larson, 2000; Smith, 2007; Vandell & Shumow, 1999; Villaruel, Perkins, Borden, & Keith, 2003). Further, the ways in which youth are engaged in out-of-school and recreational opportunities have been found to be related to both their positive development and decreased involvement in delinquency (Caldwell, 2005; Osgood, Anderson, & Shaffer, 2005; Osgood, Wilson, Bachman, O'Malley & Johnson, 1996). Out-of-school time and children's connectedness in settings that serve them afterschool might be particularly salient to positive youth development. This study will examine demographic predictors of children's collective efficacy and its relationship to youth adjustment and problem behavior for youth in community-based afterschool settings.

Methodology

Data was collected from children, grades second to sixth, in elementary afterschool programs. Half of the programs were located in a school district in Pennsylvania that was more urban and was comprised of 74 percent African American, 18 percent Latino, and 6 percent White children with 71 percent of the children in the district classified as economically disadvantaged (eligible for free/reduced lunch). The other half were in a more rural area comprised of 80 percent White children, 14 percent Latino, and 4 percent African American with 34 percent of the children in the school district being eligible for free/reduced lunch. Wave 1 was collected in the fall and Wave 2 in the spring. At Wave 1 185 children participated in the survey and 116 at Wave 2; a 63% retention rate indicative of the absences and attrition that occur in afterschool programs. In general, the sample was almost evenly distributed by gender, with a preponderance of children in third grade, and a mean age of 9.8 years old.

Measures

Several measures were used to gather information from children on their own perceived adjustment and behavior (e.g. anxiety, aggression, etc.) and their collective efficacy (i.e. belonging and willingness to positively influence peers). The Strengths and Difficulties Questionnaire (SDQ) was used to assess children's adjustment and has been found to be reliable and valid for children as young as 7 years old (Goodman, 1997; Mellor, 2004). It is

composed of 25 questions grouped into five scales of 5 questions each, all rated on a 3-point Likert-type scale (Not True, Somewhat True, Certainly True). The subscales include: prosocial behavior, peer problems, hyperactivity, physical/emotional symptoms, and conduct problems (Goodman, Meltzer, & Bailey, 2003). The internal consistency (assessed by Cronbach's alpha) of the subscales ranged from .38 - .68 while the internal consistency of the total scale was .80. The Collective Teacher Efficacy Scale was adapted to measure children's collective efficacy (CTES; Goddard et al., 2000). Sample items include "If children in this program are misbehaving, other children remind them to do their best" and "In this program, when children are doing well, we let them know they're doing a good job." It is composed of 16 items, all rated on a 3-point Likert-type scale (Not True, Somewhat True, Very True). The internal consistency alpha for this measure was .84. A substance use measure created by Loeber and colleagues (Loeber, Stouthamer-Loeber, Van Kammen, & Farrington, 1989) and used in this study, assesses engagement in substances by young children. The 2 items directly assessing potential substance use initiation include whether youth express a desire to try smoking, and if they have already tried smoking.

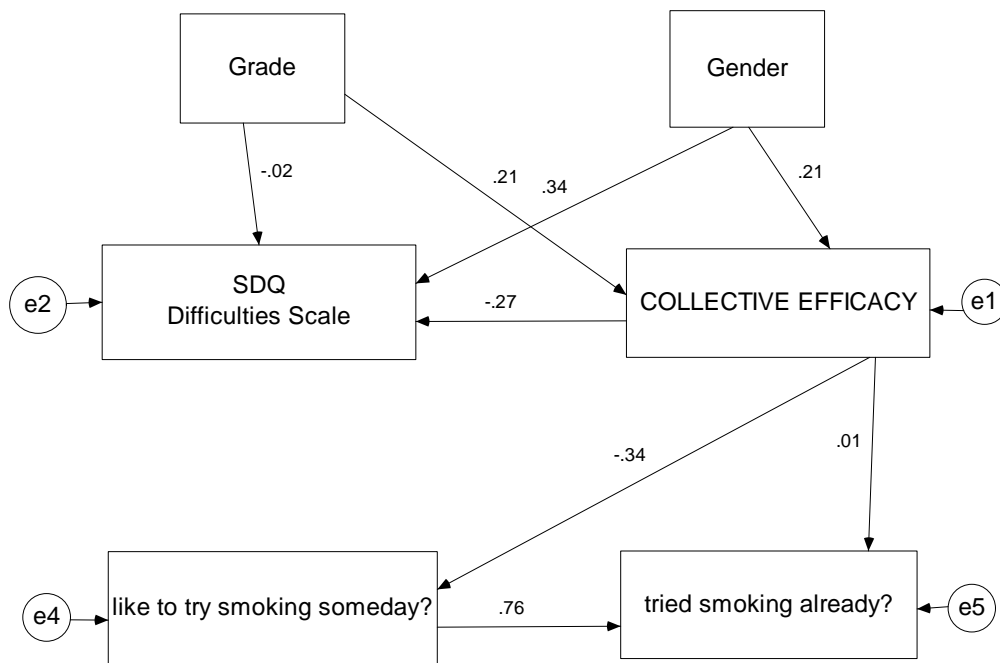
Analyses and Results

Initially, basic analyses of variance were used to examine the extent to which variations in collective efficacy and adjustment problems due to gender, grade, and ethnicity. Secondly, structural equations modeling was used to examine the degree to which collective efficacy, various aspects of adjustment, and smoking initiation are related processes. The models include only the 104 children who had data available at both Waves 1 and 2.

At both Waves 1 and 2, girls evidenced statistically significantly higher scores on collective efficacy. Differences in collective efficacy by race-ethnicity, or grade were not detected. When examining differences in adjustment problems by gender, grade, and race-ethnicity, some interesting finding emerged. At Wave 1, males report more adjustment problems (a finding that is statistically significant). At Wave 2, *females* report higher levels of adjustment problems (also statistically significant). Notable differences in adjustment by race-ethnicity were not detected.

Structural equations models were used to examine the interrelationships between our focal concepts of collective efficacy, adjustment, and smoking. In the longitudinal model Wave 1 demographic characteristics, collective efficacy (Wave 1) is regressed on youth adjustment problems (SDQ-Wave 2) and smoking attitudes and behavior (Wave 2). In this model gender is related positively to both adjustment problems and collective efficacy. Girls are more likely to report problems in adjustment but, they are also more likely to report that children influence each other positively in their afterschool programs. Further we find that children with higher levels of Collective Efficacy also report less positive attitudes towards experimenting with smoking, which in turn is related to actual experimentation with smoking. Given the temporal precedence of collective efficacy and smoking attitudes and behavior, this data supports a causal effect of collective efficacy on later attitudes toward smoking and initiation of smoking behavior. This model fit the data well demonstrated by the CFI and the RMSEA indicating fewer deviations of the hypothesized model from the actual data.

Thus, there is evidence that children who feel connected to the children in their afterschool program and feel that the group is empowered to positively influence each other are more likely to demonstrate positive adjustment, less likely to have positive smoking attitudes and indirectly to report less actual smoking behavior.



Fit Index	Collective Efficacy Model
χ^2	7.92(7), $p > .05$
CFI	.99
RMSEA	.027

Figure 1 – Longitudinal Empirical Model of Children’s Collective Efficacy (Wave 1), Adjustment (Wave 2), and Smoking Attitudes and Initiation (Wave 2)

Participatory visual methods: implications for practice

by Ryan Woolrych¹ & Judith Sixsmith¹



Participatory visual methods are considered a powerful tool for facilitating the active participation and empowerment of research participants (Mayer, 2000). It is suggested that the approach can facilitate the individual development of research participants, providing a stimulus for reflection, self-expression and confidence-building (Shaw and Robertson, 1998). From a research perspective, it reveals deeper insights into the social world of the research participants, where rich narrative accounts can be developed from the visual imagery collected (Banks, 2001). This paper provides reflections from a project which explored residents' experiences of living within an area of regeneration, using visual imagery as a fundamental aspect of the methodology (through six video/photographic diaries). Close working relationships were developed between the researcher and the local resident, which provided deep experiential understandings and insights of local residents lives. Furthermore, the visual imagery and accompanying resident narratives produced findings which were illuminating to the professional, resident and academic community; a method which prompted discussion, reflection and positive change in a process of action research. This paper provides the reflections from the researcher and local residents in the aftermath of the project.

Introduction

Visual methods have been an increasingly used research method within the social sciences, where visual imagery can be seen as an important vehicle for enhanced understanding and meaning making in the research process (Reavey and Johnson, 2008). In social representation theory visual imagery is seen as key to communicating new forms of meaning which reach beyond other linguistic forms (Moscovici, 1994, p.164). Visual methods can also be used participatively where they have been used as a tool for articulating experiences and interpreting meaning and context in the lives of individuals or groups of people. Visual data, such as photography or the collection of other visual material, can be used to facilitate an understanding of everyday life experiences amongst participants. Importantly, visual methodologies can be used as participatory tools for empowering individuals or groups who traditionally feel voiceless, disenfranchised or excluded from mainstream activity (Pink, 2001). Shaw and Robertson (1997) argue that visual methods can act as a tool for social action in which residents can cultivate their attitudes to their environment. As such, it can promote a sense of empowerment whereby previously silenced residents feel they have something valuable to contribute and debate and to find a way to express themselves through the powerful medium of the visual image.

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Findings

Purposeful and Engaging

Participating in the collection of visual methods was a positive experience for local residents. Visual methods represented a creative and enjoyable way for participants to engage in the research process:

"I've always hated to do research. I've always thought it's not really interested me. But after this it's, you know, it can be quite enjoyable, especially if you're... I think it always matters if you're interested in something. If you're interested in something you'll read around it, you'll read about it, you'll learn everything there is about it."

Visual methods also enabled participants to 'concretise' their experiences, which was empowering and gave them an increased sense of confidence. Here, providing participants with a tangible research product enabled a sense of achievement and also provided the means for further self-reflection:

"Well it's made me more confident that I have developed something to show people... it is something that I own and can use to demonstrate the things that we are going through on the estate... I e-mailed it to the city council the other day. It has been something I have used to empower myself."

Engaging in collecting and analysing visual data also provided some participants with a sense of purpose. Here, there was an identifiable process and personal journey for the participants, providing stimulation and engagement along the way:

"The project from start to finish was something that gave me something to do. I am more or less restricted my house these days. This occupied my mind... It got me thinking."

Traditional forms of research often necessitate the research establishing the agenda, facilitating the research and extracting information from the participant as a research subject; re-enforcing the 'gap' between the researcher and the researched. By placing the participants as creators of their own knowledge we can challenge these power relations and dynamics of accounting, where research participants are in a position to exercise control over the presentation of themselves through the research:

...it [visual methods] adds another dimension to things that we have been involved in. I think when you video its more engaging because it's not boring. Especially when you, when you show it to people as well. But, you know, with having the video coverage and a lot of visual information, it makes it a bit more involving for people, especially residents as well. For us residents we don't like to be talked at a lot, you know, or given pieces of paper to read. It was nice that we could finally produce something and show it to people."

Participatory visual methods thus represent a tool for empowering local residents to feel a sense of ownership of the research product rather than traditional research methods which can reinforce power imbalances between the researcher and the participants.

Interpretation and Authenticity

Research participants were also engaged in the analysis of the findings where the visual images were used as the stimulus for reflection amongst participants. Here, the meaning-making around the images was constructed by the participants themselves. Reflection was seen as important as it enabled the meanings associated with each image to be understood from the participants and not implied by the analytical impositions of the researcher. The visual methods employed within this study were not just about facilitating the collection of images, but a reflective process requiring the participant and the researcher to step outside out of the research and engage in reflection around the images provided. The need for interpretation is necessary as visual imagery otherwise

represents a series of abstract and meaningless images to the researcher, which may be meaningful and contextually important to the research participant. Visual imagery is not self-evident or self-explanatory but requires interpretation from the creators of the images themselves.

Through this form of interpretation, participants occupied the role of 'meaning-makers' in the research. In doing so, the participant is invited to 'speak in their own voice' to gain an understanding of 'who they are' within the places that they inhabit. I would not suggest that this results in a more authentic product, but rather it provided new means of narrative understanding, enabling deeper access into the lives of the participants themselves. In doing so, it has allowed participants to prioritise the collection of images and visual data from their own perspective, through the 'lens' and 'gaze' of their own lives as local residents.

Yet the process of interpretation also represents considerable challenges. The process takes a considerable amount of time to facilitate. The analysis of visual data within the context of participatory research requires analysing each frame of video work or photographic image and this can take significant amounts of time and effort. It also places demands upon the participants themselves especially given that the research cannot be expected to be a priority in their lives. Another challenge is the issues of researcher positionality during the analysis process. Here, the researcher finds themselves in a difficult position, where they are committed to prioritising the experiences of local residents whilst also ensuring that they meet the aims and objectives of the research. Here, the researcher must be prepared for unexpected findings, which may cause them to re-evaluate their aims and objectives and what they expected from the research. This is more complex when undertaking a funded research project, with fixed research boundaries.

Sustainable, Long-term Involvement

A complex within the application and development of participatory visual methods is the development and sustainability of long-term relationships between the researcher and participants. Engaging in these relationships is fundamental to the development of trust and reciprocity between the researcher and the participants. Yet there are implications in the development of these relationships.

The research process then became transformative for the researcher and the participant; the researcher feels illuminated by the experiences of the participant, whilst the research participant felt an increased sense of ownership and control of the research process. What results is a strong bond between the researcher, the research participant and the visual data. The research product becomes an embodiment of the research participant themselves. As a result, expectations increase as a research product is developed which has involved a large amount of emotional and psychological involvement on behalf of the researcher and participant. Moreover, there is increased responsibility as the participant sees the researcher as the facilitator of that sense making. It then becomes problematic when the research comes to end and there it becomes difficult to sustain the relationship.

Here, continuing to involve the participants and sustaining the relationship between the researcher and the participant is important, otherwise participants may see their involvement in the research as disingenuous and not

participatory. It is important to leave a legacy for the research, in terms of publicising the findings and involving participants in further research, to ensure that there is long-term purpose to their involvement.

Conclusion

Visual participatory methods are a powerful tool for destabilizing the hierarchical power relationships which exist within traditional research relationships by considering that people do not only *speak* but *experience* and *view* their world in different ways. Participatory visual methods provide the opportunity for participants to shape the content of their enquiry, enabling them to express themselves outside of traditional research boundaries. However, whilst such methods are potentially transformative in opening up new forms of visual narrative, tensions arise regarding research positionality within the research, requiring the researcher to critically consider and re-evaluate their position in the research. Whilst visual participatory methods offer the opportunity for true insight, reflection and change, there needs to be more critical consideration of the application and development of the method.

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6

**CHILDREN, YOUTH &
STUDENTS**

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**ENFANTS, JEUNES ET
ETUDIANTS**

Youth service – the social service’s role in the punishment of young lawbreakers

by Tomas Bons¹



Background

How to handle young criminals is a topic that is well discussed. In Sweden a new legislation for young lawbreakers were introduced in January 2007. It is now possible to sentence persons between 15-21 years of age to Youth Service. It is a punishment which consists of two parts:

1/ unpaid work between 20 and 150 hours depending on the nature of the crime, the penalty value. The unpaid work takes place mainly at NGO:s, in the municipal organization but also in private companies.

2/ participation in pedagogical program about crime in a range between 3-10 hours depending both on the crime but it also vary from municipality to municipality.

Youth Service was before 2007 something the court could sentence to but only for persons who were judged in need of care by the social services', but were not considered to be in need of closed institutional youth care. But after 2007 it is only persons with no need (or a minor need for treatment) who can be sentenced.

To be sentenced to Youth Service also require the persons' acceptance. You cannot be sentenced to if you don't agree to it yourself. If the person doesn't agree, the court can sentence to short time correctional care or fines.

If a person neglects his duties concerning Youth Service (not attending work or not showing up at the pedagogical program) the person responsible at the Social Service will report this to the prosecutor and a new trial may take place.

I think one can state that the main purpose with Youth Service was to decrease the sentences of fine in order for a program were the youngster in a sense pay something back, the unpaid work, and also attending a dialogue concerning crime which aim to alter criminal thoughts. You can look upon it as a pedagogical initiative as a way of trying to change a criminal lifestyle.

Furthermore one can discover an irregularity in the legislation concerning Youth Service. When a person accepts Youth Service the information of this person stays in the Criminal Records Registry for 10 years. But if a person does not accept Youth Service and instead is being sentenced to economical fines the information in the registry stays there only for 5 years. This has given parents with a better socioeconomic status the opportunity to, so to speak, pay off the sentence. There is some empirical evidence that this loophole has been used by more wealthy

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parents but it is difficult to say in what extent. But the legislation authorities are in the process of making a juridical change to this problem.

The double role of the Social Service

It is argued by some researchers that there is a discrepancy in the relationship between the Criminal Law and the Social Service Legislation. Where the Criminal Law should have the crime in focus it states that the Social Service Legislation should primary focus on the individual needs.

This creates a tension since the Social Service is obliged, according to the Social Service Legislation, to first look upon the needs on the individuals but in the case with Youth Service also have to administrate a punishment. The role of the Social Service is even more complicated since the Social Service also should write a statement about the persons need for care to the prosecutor, as a ground for the trial. The statement from the Social Service is very vital and the recommendation from the Social Service is followed by the prosecutor and the court at almost a 100 %.

Some criticism from the prosecutors' point of view have been presented according to the statements from the Social Service. The crucial point is how the Social Service judge the individuals need for care. The core of the problem I assume is that there is a lack of proper supporting measures in the municipal organization. This may lead to that the Social Service propose Youth Service, if the youth accept it, even if the Social Service have identified a greater need of care within the youth. Simply because there are no other measures available. This means that it is likely that some youths sentenced to Youth Service are in need of more extensive measures that the Youth Service program can provide.

Location and statistics

The empirical base of this presentation consists of data from 8 municipalities round about Stockholm. The total population of these municipalities is about half a million people. There are comparatively large differences between these municipalities. From rather small municipalities with a homogenous Swedish population to suburbs with a high amount of immigrant population. The municipalities also differ in a socioeconomic sense.

In order to give an overview of how many that is sentenced to Youth Service in the actual municipalities in relation to a national context I will present some statistics:

2008

2 907 person were convicted to Youth Service in Sweden according to *Brå – the Swedish National Council for Crime Prevention*.

In the present 8 municipalities 203 persons were convicted which is about 7 % of all convicted in Sweden.

The most common conviction was assault.

The majority is boys, approximately 85%.

The length of the penalty is dependent on type of crime; it varies from 20 -150 hours of unpaid work.

In the municipalities I have studied the penalty length is seen as follows:

Less than 50 hours; 61 %

Between 51-99 hours; 8 %

100-150 hours: 6 %

For 25 % information is missing.

In conclusion, even if you consider the missing information in the statistics, you can estimate that the majority of the convictions are in the low range of sanctions.

The punishment: a method for change

One can look upon the punishment as a way of method to change the individual's criminal behavior in two ways.

The first is the unpaid work who one can look upon as the actual "punishment". The length of the unpaid work stands in relation to the crime that is committed. But the unpaid works also have an educational aspect. Many of the convicted don't attend school and also have other social problems. Attending work also inflicts that you have to be on work at a certain time and you have to meet and socialize with adults, many of the convicted lacks grown up contacts. The tutor at the work place is to become a role model.

The second is the dialogue about crime. This is a dialogue that is led either by a social worker or by a psychologist. The programs in different municipalities vary in length, between 3-10 occasions. But all programs' have a *cognitive theory* as a base. The criminal behavior is seen as an effect of cognitive assumptions. People react to external influences by observing and then processing these influences through their cognitive structures. To alter a criminal behavior you must alter the way a person thinks.

The other part of the theoretical framework is based on *System oriented theory*. Were you see the person as a member of different systems which constitute a total system. In order to make a change, durable over time, it is not sufficient to influence the youth alone. You have deal with persons in the different systems, the person's social networks.

In the program the social worker, or the psychologist, try to involve the core family and the extended family in the process.

In some municipalities they also have study visits for example at a police station, a hospital where they come in contacts with different kinds of effects on crime and violence.

Something about the effects

It is difficult to say something of the effects' since research in this field is scarce. There are some empirical evidence that persons, who has been subject to interventions from the Social Service for a long period of time tends in a much higher degree to have relapses, they commit new crimes. Which is not so surprising.

What is more difficult to state is the actual effect of the Youth Service programme. How is the programmes' ability to prevent new crimes? Is the design of these programmes sufficient enough?

In a survey in one of the municipalities, where youngsters were invited to fill in a questionnaire concerning their experience of Youth Service, there are some aspects they point out as important.

Several persons have been positively surprised by the workplaces. The work became more interesting than they had expected.

They were accepted at the workplaces, which they hadn't really expected. One person states that: *I was accepted as a person and not looked upon as a person that had committed a crime.*

Some say that the pedagogical programs have given them information and insights. It has been a way for them to start think and reflect over their life and personal situation and, not least, their future. One person express this as: *I have learnt something new. That I must think and reflect before acting. I also started to think of my possibilities to get a job in the future.*

My key findings in this study is that Youth Service seems to be an accurate and well adjusted sanction for young people that are low to moderately criminally charged. Youth Service seems to be a good enough sanction for the convicted to rethink and not commit any new crimes.

But for young people with more complex problems and those who have already entered a more extensive criminal career, Youth Service is not sufficient. They need other, and more comprehensive initiatives.

Theory to practice: exploring how culture shapes graduate student practicum experiences in urban community-based setting

by Christina Campbell¹, Nkiru Nnawulezi¹ & Eyitayo Onifade²



Graduate students are required to apply community psychology concepts and theory to practicum/internship experiences. Translating such theories and applying in-class knowledge to these experiences provide students with the opportunity to integrate concepts such as insider/outsider phenomena, gaining entrée, and systems change to a given setting. The goal of this roundtable was to examine the experiences of 3 graduate students who had entered into urban communities to (1) bridge the gap between researcher and community and (2) practice applying the theories of community psychology. They used 1st, 2nd, and 3rd person inquiry to discuss their engagement within their respective communities and their implementation of participatory approaches among underserved marginalized urban populations in hopes to establishing some level of social transformation/social change. The roundtable discussion about these students' engagement of inquiry provided a better understanding of how insider/outsider process construct race, ethnicity, interpret social problems, construct knowledge, and joint goal setting.

Engaging in inquiry is an important process that allows graduate students to better understand the formation of thoughts/concepts, as well as, engage in dialogue concerning the construction and impact of those thoughts/concepts on communities (Serge et al.). It increases consciousness and sensitivity to reality construction and provides avenues for people to discuss and understand these realities. Through this process, students become more aware of their own values and biases that impact their community work/research. Chui (2006) argues that we cannot take for granted or assume that the knowledge gained and or ideas generated from community engagement automatically lead to larger social transformation. Instead, it is through processes of critical reflection that allow true social transformation to take place. This transformative learning approach provides a space for students to “unmask” assumptions that are made based on conclusions and interpretations about the who, how, and why (Chui, 2006). Chui (2006) suggests that reflexivity occurs after one has engaged in three stages of inquiry: first, second and third person. By building in a three-stage reflective process within graduate student practicum experiences, one can better understand the complexities of applying in class training and theory to community settings.

For many graduate students in the community psychology program, first person inquiry began during the first semester of graduate school in a mandatory practicum course. Since many of the students are new to the community/geographic area, this class requires graduate students to learn about the community they just entered

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by involving themselves within their population of interest. They are not required to make any commitments to any agency, organization, and/or community effort at this particular point in their training. What is unique about this 16 week course is that students are to make as many connections with individuals and agencies in the community as possible, while simultaneously generating reflections about his/her experiences. Students are required to consider this a period of reflection and to examine his/her personal beliefs, ideas, and assumptions. During this learning process, students are also assigned readings regarding values of community psychology. Some of the values discussed included but are not limited to the following: participatory processes; action research; engagement; empowerment; sustainability; system change; and ecological theory. This level of engagement and sharing provides each student to serve as support to their classmates and assist each other obstacles when they arise. Classmates challenged one another on how each other assigned meaning to their population of interests, their activities and experiences of engagement. Although this process for some students began prior to entry of the practicum course, many students use this period to conceptualize interests and identify what social problems they were most interested in pursuing and the angle in which they hope to engage in the social problem. During this phase of first-person inquiry, students are required to write a series of reflective pieces concerning their personal construction of knowledge of ideas as it related to their personal interests, past experiences, and their own construction of reality.

In second-person inquiry, students received feedback from classmates and from the community members. This opened up venues for additional critical first-person reflection because students were required to speak with various people holding diverse perspectives related to his/her social issue of interests. Once 1st person inquiry was established, students were allowed to choose and engage in a specific community agency or effort. One student interested in at-risk youth spoke with the court officials, community leaders, after school programs, school officials, and youth based programs. For another student, this process provided an avenue for understanding how her role as a Black woman may both hinder and/or enhance her influence on a Black-operated domestic violence shelter in an urban city.

Second person inquiry provided an opportunity for students to more deeply engage on a specific social issue of interests. One student was involved with a youth-based after school program which served at-risk youth from low-income families. Her social area of interest was to explore how to enhance and maximize services and programs to meet the needs of underserved at-risk youth. Another student became involved with a domestic violence shelter that primarily served Black women enhancing her passion for understanding violence against Black women. The last student brought community agencies together, school organizations and resources to support current efforts around Hurricane Katrina, a major recent natural disaster, and support disenfranchised, low-income families of color. It is was this stage where each student engaged in sharing, learning, and service to both the organization and relevant community initiatives as a means to build a strong relationship and gain entry into the community. By engaging in these first steps, all three students participated in creating a plan of action and solidified practicum goals.

Third person inquiry requires a greater level of inquiry, learning and engagement. The level of engagement goes beyond the local context to a broader context. For example, the third person inquiry and

reflection of these practicum experiences took place within this international forum of dialogue. Within this roundtable discussion, each student shared in detail their participation within each of their respective communities, the problems they encountered, and the successes they achieved. The students also used their experiences to prompt audience participation by asking audience members how they felt each student experience related their own personal work with the community. Members of the audience discussed similarities that arose in their work, along with unique issues that arose at their respective institutions. Common discussion points included how to overcome the obstacles such as time, balancing university course goals with the goals of the community, developing strategies for evaluating student experiences in the community, and distinguishing what makes a the role of the community psychologist unique to a community setting. Session participants also examined mechanics of the practicum class and the different approaches to implementing class within the university. Throughout the conversation, the exchange of shared information and reflection across people from around the world built upon existing third-person inquiry.

Overall, first, second, and third inquiry provides an opportunity for graduate students to become more conscious and sensitive to what knowledge is generated, how knowledge is generated, why knowledge is generated and ultimately, how it is interpreted. Given that there are dominant paradigms that shape our ideas and choices, it is essential to highlight how such paradigms shape the way we understand and participate in social change. In order for students to examine the ways that impacted communities, it is important to understand the processes that led to the success or failure of their participation. Regardless of the impact, this reflective process provides additional opportunities for students to examine ways that future work and or engagement could be improved. While each institution engages students in the community at different time points (i.e. first year versus last year), it is important that students have an opportunity to learn by way of the classroom, the community, and through reflection. This enhances how students conceptualize and interpret both their experiences and the experience of the communities they serve.

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L'apprentissage au féminin en région Nord - Pas de Calais

par **Véronique Cochard¹, Catherine Denève² & Nicole Gadrey³**



Depuis une dizaine d'années, le nombre d'apprentis dans la région Nord-Pas de Calais a considérablement augmenté. Dans la même période, le niveau de formation des apprentis a augmenté. Cependant, l'apprentissage ne se féminise pas, la part des filles ayant même légèrement diminué en 2008. Comment analyser la permanence de cette répartition ? Pour tenter de répondre à cette question, une étude a été menée par le Collectif Régional pour l'Information et la Formation des Femmes (CORIF, Lille) sur la demande du Centre Régional de Ressources Pédagogiques (Lille), lui-même mandaté par l'Etat et la Région Nord-Pas de Calais. Cette étude avait deux objectifs : 1) diagnostiquer la place des filles dans le dispositif apprentissage ; 2) contribuer à l'organisation du forum des apprenti-es qui s'est tenu à Lille en mars 2009.

Enquête quantitative : Les chiffres de l'apprentissage

Des données régionales chiffrées issues du Conseil régional, du Rectorat de Lille, de la DRTEFP/SEPES (Direction Régionale du Travail, de l'Emploi et de la Formation Professionnelle/Service des Études, Prospective, Évaluation et Statistiques), du CEREQ (Centre d'Etudes et de Recherche sur les Qualifications) permettent de faire un état des lieux sur l'apprentissage pour la période 2003-2008 et de faire émerger 5 constats quant à la place des filles dans ce dispositif.

Premièrement, malgré une augmentation du nombre d'apprentis (+28.8% pour les garçons ; +19.9% pour les filles), il faut noter une stagnation, voire une diminution, du pourcentage de filles en apprentissage. Les chiffres en témoignent : 31% en 2003 et 29,5% en 2008.

Deuxièmement, le niveau scolaire général des filles est plus élevé à l'entrée en apprentissage que celui des garçons. On constate que 49% des garçons viennent de l'enseignement secondaire ou supérieur tandis que ce chiffre est de 57% pour les filles. Plus précisément, lorsque l'on se concentre sur les différents niveaux de formation⁴, les filles montrent une réelle évolution sur les plus hauts niveaux. En effet, alors qu'elles sont 31,9% en 2003 sur le niveau III, elles sont 37,6% en 2008. Idem pour le niveau I : elles passent de 10,9% à 21,9% lors de cette même période.

Troisièmement, sur les 30 domaines de formation reconnus en apprentissage, les garçons sont majoritaires dans 22, les filles dans 8 à savoir la coiffure, la santé, l'habillement, le nettoyage, les services de proximité, la banque,

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le commerce, les services administratifs. De plus, dans 12 de ces domaines de formation, la présence des garçons s'élève à plus de 90% comme par exemple dans la sécurité, la mécanique, le bâtiment/travaux publics, l'électricité, la maintenance, les transports. Ces éléments ne sont pas sans caractériser une répartition sexuée par métier des filles et des garçons malgré une légère augmentation de la proportion de filles dans les domaines où les garçons sont très majoritaires entre 2003 et 2008.

Quatrièmement, en lien avec le constat précédent, les filles représentent une faible part dans les domaines industriels sauf sur les plus hauts niveaux (I et II). Parallèlement, dans les domaines tertiaires, la représentation des filles est forte et plus particulièrement aux niveaux les plus bas (IV et V).

Enfin, cinquièmement, à la sortie du dispositif apprentissage, on constate que les possibilités d'insertion professionnelle des filles s'amenuisent par rapport à celles des garçons et que la qualité des emplois occupés (accès aux CDI) se détériore davantage pour les filles que pour les garçons.

Enquête qualitative : Analyse des entretiens

Méthode

Des entretiens semi-directifs ont été menés auprès de 9 professionnels de l'orientation, 9 personnels de Centre de Formation d'Apprentis (directeur ; formateur), 39 apprenti-es (dont 9 garçons) âgés de 16 à 22 ans (M = 18,8 ans) et 7 professionnels recevant des apprenti-es dans leurs entreprises. Les participants provenaient de différents bassins d'emploi de la Région Nord-Pas de Calais et de différents domaines de formation (pharmacie, vente, bâtiment, horticulture, industrie, hôtellerie-restauration, alimentation, fleuristerie, transport).

Résultats

Les résultats de l'analyse de contenu ont permis de dégager 5 thèmes.

Premièrement, les filles semblent peu concernées par l'information sur l'apprentissage. Les entretiens révèlent que l'information sur cette filière existe mais elle semble être moins proposée aux collégiennes de par leur meilleur niveau scolaire que celui des garçons.

Deuxièmement, lorsque les filles décident d'entrer en apprentissage, elles décrivent des motivations tout à fait distinctes selon leur niveau d'études. Pour les niveaux infra IV, l'objectif est de « raccrocher » au système scolaire et de préparer un diplôme, quel qu'il soit. En revanche, pour les niveaux IV et supra IV, il s'agit davantage d'exercer un métier bien spécifique ou de mettre en place une réelle stratégie d'insertion professionnelle ou enfin d'être indépendante financièrement.

Troisièmement, il semble que le choix des domaines de formation soit fortement influencé par la représentation sexuée des métiers et ce, de la part de tous les acteurs interrogés. L'image simplifiée et stéréotypée des métiers joue autant sur le positionnement des filles que des garçons et cela sur l'ensemble des métiers proposés en apprentissage.

Quatrièmement, un consensus se dégage autour des effets positifs de la mixité en apprentissage. Les filles disent être fières de réussir dans un métier qu'elles qualifient de « masculin ». Les garçons disent bénéficier de

l'arrivée des filles dans certains métiers dont l'image est peu flatteuse (chauffeur routier). Enfin, les entreprises notent un changement manifeste et positif dans la dynamique relationnelle dans leurs équipes.

Cinquièmement, l'insertion professionnelle reste variable en fonction du sexe et des niveaux de formation. Ainsi, l'insertion des filles est meilleure que celle des garçons pour les niveaux I, II et III. C'est le contraire pour le niveau V qui concentre la moitié des apprentis de la région Nord-Pas de Calais. Les domaines professionnels sont également touchés par cette différence d'insertion. En effet, dans 4 domaines qui concentrent des effectifs d'apprentis importants (Agriculture, Alimentation, Hôtellerie/Restauration, Commerce), ce sont les garçons qui s'insèrent mieux professionnellement que les filles.

Préconisations en lien avec l'enquête et préparation du forum des Apprenti-es

De cette enquête, quelques préconisations permettant d'optimiser la place des filles dans le dispositif apprentissage sont dégagées.

D'abord préalablement à l'entrée en apprentissage, un travail sur les représentations de l'apprentissage permettrait de revaloriser cette filière auprès des enseignants et des parents. Parallèlement, un travail sur les représentations des métiers pourrait être intégré à la formation des personnels en charge de l'orientation. Par ailleurs, ouvrir de nouvelles filières dans des domaines où les filles sont très peu présentes favoriserait le développement d'une double compétence. Ainsi, des mentions complémentaires aux domaines actuels permettraient d'adjoindre d'une formation technique à une formation tertiaire (vendeuse technique).

Puis, pendant la formation, il s'agirait d'accompagner les entreprises pour favoriser l'intégration des filles qui se retrouvent seules dans des collectifs masculins, par exemple, en formant un tuteur au sein de l'entreprise.

Enfin, à l'issue de la formation, il serait utile d'accompagner les filles pour les aider à s'insérer durablement dans l'emploi.

Ces préconisations ont débouché, en mars 2009 à Lille, sur la mise en place d'un forum des apprenti-es. Cette manifestation a permis une rencontre entre les politiques de la région, les acteurs de l'orientation, les enseignants des filières générales et apprentissage, les entreprises et les apprenti-es. Cette rencontre multipartenaires, en partie médiatisée par le CORIF, a favorisé la conscientisation des difficultés rencontrées tant par les jeunes filles qui désirent entrer ou qui sont insérées dans la filière apprentissage que par les autres acteurs du dispositif. Ceux-ci ont pu expliquer qu'ils manquaient parfois d'informations, de moyens, de contacts pour orienter, accueillir en formation ou recevoir en entreprise des apprentis en générale, des jeunes filles en particulier. Dans cette même optique, une restitution des résultats de l'enquête s'étend actuellement sur le territoire du Nord-Pas de Calais.

The ecological engagement as a research and intervention method

by **Maria Angela Mattar Yunes¹, Narjara Mendes Garcia¹, Angela Torma Pietro¹ and Simone de Biazzi Ávila Batista Silveira¹.**



Introduction

The Ecological Engagement is a methodology that has as theoretical basis, the Bioecology of Human Development (Bronfenbrenner, 1979/1996; Bronfenbrenner, 1999; Cecconello & Koller, 2004; Prati, Couto, Moura, Poletto & Koller, 2008). It proposes the understanding of human development under the scope of four interrelated dimensions: Person, Process, Context and Time (Bronfenbrenner & Morris, 1998; Bronfenbrenner & Evans, 2000). Those dimensions should not be taken as a priori categories but they would serve to give limits to the focus of the data which are going to be collected as well as its posterior analysis. Therefore, the PPCT model offer directions to the researcher who should choose to “turn to look at” in a holistic and systemic way. In general, this search will concentrate in significant interactions among people, contexts and symbols which compose the proximal and distant studied environments.

It is an efficient versatile methodological resource that adjusts at each researched reality and allows comprehension and intervention in an ecological-systemic scope of the development of people and groups in their natural contexts. The procedures involves the researcher engagement in different contexts of development in order to observe and communicate - through informal contacts, conversations and interviews – especially with the persons who are part of the everyday life of the environments.

The investigations and interventions to be presented in this text have shown that the researchers “ecological look” on the PPCT dimensions should be led by the following theoretical criteria proposed in details by the bioecology of human development of Bronfenbrenner and Morris (see the full article published in 1998). Then, the researcher should turn to:

THE PERSON: refers to the biopsychological characteristics of the persons in the investigated contexts, both inherited and developed;

THE PROCESSES: are the enduring forms of proximal, reciprocal and regularly more complex forms of interactions between the persons and other participants, as well as those persons and the objects or symbols which are part of the immediate or distant environment;

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THE CONTEXTS: refers to the four levels of influence in individuals' development (Bronfenbrenner, 1979/1996) which are denominated as such: microsystem (the most proximal environment), mesosystem (the interaction among microsystems – forming the person social network), exosystem (the distant environments) and macrosystem (traditions, history, social values, ideological elements of all mentioned environments);

THE TIME: as the fundamental aspects of influence in human development. It refers to the changes along the life cycle; biological, ecological and social transitions related to cultural aspects.

Two examples of investigations in risk situations that resulted into protective interventions

Family education in the context of non industrial fishing families and the transgenerational processes of resilience

As described above, the methodology of Ecological Engagement can facilitate the study of family relationships or microsystems (Cecconello & Koller, 2003). Therefore, it was used as a strategy to investigate the meanings of family education along three generations of non industrial fishing families. The aspects of intergenerational transmission of educational practices and processes of family resilience were the main focus of this research. For such, two families were chosen at random in the fishing community located in the extreme south of Brazil. Initially it was necessary to build confidence between researchers and the members of the families to be able to get inside the houses and conduct the open interviews. After some initial resistance, the participants recognized the role of the researchers and collaborated with all steps of the investigation. The results showed that although fishing is a family work and crosses generations, it is being discussed as a way of living and not anymore encouraged by the educational practices for the young generation. Therefore the knowledge on fishing is under threat in that region. Many changes have occurred in parental practices along time - as seen by the qualitative analysis of the life histories of different generations. The youngest generations are more dialogical and affectionate in their parental practices in opposition of the authoritarian and punitive style of the old ones. Therefore it is possible for the youngsters to choose a profession that might not be fishing. These results were possible due to the cautious and gradual processes of researchers' insertion in the community. The consequent intervention of this investigation was a Dialogical Support Program on Educational Parental Practices in the community whose aim was to promote more thinking on pedagogical attitudes in the everyday life of the families and think over the fishing community and their needs.

The school environment as a context for disclosure of sexual abuse: intervention with teachers

Teachers and professionals of education should be prepared to identify and evaluate the signs of intra or extrafamilial violence. The school environment is a microsystem and might be a context where abused children and adolescents feel free to break the syndrome of silence and ask for help. The present proposal aimed to investigate the context of a public school located in Rio Grande/RS, Brazil, and to legitimate the protective role of the school context by empowering the teachers who face those conditions. The methodology followed two steps: the first consisted of the diagnostic of the school dynamics through the principles of Ecological Engagement

method (Cecconello & Koller, 2003). The researchers observed the proximal processes at school - mainly occurring at classrooms, reception hall and external areas for leisure times - during two consecutive months, three afternoons a week. Also, the seven participants, first school year teachers who applied for the project, filled in 40 incomplete sentences (De Antoni, Yunes, Habigzang & Koller, 2006) in a questionnaire whose purpose was to investigate their perceptions and interactions with the students' families. The second moment consisted of the application of the Intervention Program which was elaborated following an organization of subjects which emerged from the qualitative analyses of the diagnostic phase. The analysis was consonant with the principles of grounded-theory (Strauss & Corbin, 1990). Concerning the results of the diagnostic phase, most teachers showed a discourse that focused the negative characteristics of the students' families. Having little knowledge of the children's everyday life they usually maintain families far over the gates of school. Due to the situation of sexual abuse, the educators recognized their difficulties and limited knowledge to cope with the complexities of the situation. They reported immediate actions that sent the abused children and their families away from school. Also, it was emphasized the lack of support from the community network. The intervention program was presented for the teachers in six meetings containing different subjects, theories and concepts followed by discussion on real cases. It mainly focused on orientating the educators to build strategies for an attitude that would disclosure the abuse and protect the children.

There are many possibilities of association of the Ecological Engagement with other procedures such as focal groups, reflexive open interviews, natural observations and field diary, etc. All procedures may potencialize the quality of analysis of risk situations and allows the researcher to visualize and put into action protective mechanisms that may activate resilience processes. However it is relevant to use these research strategies at regular periods of time.

Conclusion

This work presented the Ecological Engagement as a methodology based in the theory of bioecological human development of Urie Bronfenbrenner. It was discussed that it can be applied to investigations and intervention proposals which are composed by different risk situations lived by: poor populations, sexual abused victims, street/sheltered children, adolescents and their families, among other conditions. As shown, the procedures involve mainly the researcher engagement in different contexts of development in order to observe and communicate with people through informal contacts, conversations and interviews. The researchers can also build up diaries and take notes of all important events and meetings that mediate the main interactions conceptualized in this case as proximal processes (Bronfenbrenner & Morris, 1998) that occur in each context along regular periods of time. It is proposed the association with qualitative forms of analysis of the collected data and it is concluded that the Ecological Engagement is an efficient methodological resource that is versatile and possible to be adjusted to each investigated reality.

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Youth 'risk' and 'resilience': contested values, beliefs and functions

by Cate Curtis¹



In this paper I argue that concerns about youth risk reflect competing social values and anxieties rather than issues of risk and resilience per se. Further, I will argue that the current plethora of policy initiatives focused on 'at risk' youth is the corollary of a moral panic about out of control children. The initial findings of research currently underway will be utilised to elucidate these arguments.

The area of youth risk and resilience has been a topic of increasing concern over recent years, in part as a corollary of concern over anti-social behaviour. There exists a substantial body of research on risk and its association with anti-social and criminal behaviour. However, significant problems with the risk factor approach remain, in particular in regards to the way conceptions of risk and resilience are socially constructed, and the analysis of risk and protective factors in the absence of their historical, social and cultural location (Armstrong, 2003).

In New Zealand significant public monies are invested in programmes and research into risk and the development of resilience. However, as discussed by Massey, Cameron, Ouellette & Fine (1998), studies of resilience and risk have tended to be value-laden both in terms of how adversity is defined and how resilience is measured, such that resilience equals conformity and risk equals nonconformity. That is, the outcomes used to assess performance in one context may represent only those characteristics that serve that context. For example, appropriate behaviour and compliance in a classroom setting may be construed as a lack of personal agency and independence in another setting.

Problems with the risk factor paradigm

Reductionism is implicit in the risk factor model. This operates on several levels. For example, at the biological level, one of the most well-known writers on the topic, Michael Rutter, speculates that androgen and serotonin levels are significant factors in male offending, while also acknowledging the lack of evidence to support this contention (Bessant, Hill, & Watts, 2003). At the psychological level, the individual is often reduced to sets of psychological traits and cognitive processes. At the social level, the meaning and context of rule-breaking is ignored, for example, the continued wearing of religious symbols is banned in some schools.

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The unproblematic presentation of youths as being 'at risk', often with no discussion of what is meant by this term, in itself alerts us to the depth with which the concept is embedded within value and belief systems – so deeply embedded that no explanation is considered necessary (Armstrong, 2004). Yet risk is indefinable without recourse to belief systems and moral codes (Lupton, 1999). Further, though the literature on resilience has identified a range of factors that correlate with healthy functioning in the face of adversity, its predictive power is low. We only know that resilient youth are characterised by qualities that we have come to associate with resilience: a tautology (Ungar, 2004).

'Risk' and poverty

Behaviour deemed to denote risk is often more visible in poor communities, but there are multiple constructions of why this is, such as:

Deliberate political focus/victim-blaming;

Moral panic/media construction;

Response/symptom of economic decline

Weakening of informal social control, replaced by punitive formal measures

Increasing social exclusion of marginalised groups

Punitiveness linked to socio-economic security

While risk certainly occurs in poor communities, the reasons underlying it are often obfuscated, particularly by those charged with dealing with it (Burney, 2005; Coleman & Hagell, 2007).

'Risk' and Crime

Armstrong (2004) argues that concerns about youth risk and crime reflect personal anxieties, competing social values and public policy rather than issues of risk and resilience per se. In the United Kingdom, offending by young people has declined significantly during the 1990s. However, the British public significantly overestimates the extent of youth crime. Armstrong further argues that the current plethora of policy initiatives focused on 'at risk' youth is the corollary of a moral panic about out of control children.

Crime reduction strategies focus on psychogenic risk factors in the immediate social environment of the young person rather than in the wider community or socio-political structures (Armstrong, 2004). The focus on risk factors offers a management system based on identifying/blaming 'dysfunctional families' while justifying surveillance and intervention.

"The apparently inexorable growth of welfare surveillance over the families of the working class has arisen from an alignment between the aspirations of the professionals, the political concerns of the authorities, and the social anxieties of the powerful" (Rose, 1999, p. 125).

The notion of risk is additionally problematic due to its basis on decontextualised criteria for normality (Armstrong, 2004). Varying and contested beliefs and values give meaning and relevance to constructions of normality, but

these are given little consideration during risk assessment. Yet, the language of risk has “replace[d] need as the core principle of social policy formation and welfare delivery” (Kemshall, 2002, p. 1).

Criminal justice

‘Risk behaviours’ are often re-conceptualised as anti-social/criminal behaviour; the context is overlooked resulting in a rise in exclusion, intolerance and excuses for inequality; behaviour is seen as typical of ‘that kind of person’, resulting in an increasingly punitive society. Criminal justice interventions tends to individualise; there is no mechanism to address collective and accumulating harm in a community, even though ‘risk behaviours’ are associated with a lack of social capital and community cohesion. Alongside this, crime prevention is prioritised over poverty prevention, leading to the ‘justice gap’. The ‘justice gap’ refers to the focus on criminal justice, rather than social justice, although the relationship between youth risk and criminal behaviour, and increased inequality and social exclusion is well known (Squires & Stephen, 2005).

Law and order is a key political platform in Western politics. A focus on youth risk and/or criminal behaviour serves several purposes. It allows the construction of an ‘other’ to exclude, allowing a contrasting perception of social inclusion to result; it allows politicians to be seen to address a community concern, and it shifts attention from underlying issues such as poverty and inequality (Burney, 2005; Coleman & Hagell, 2007).

It would appear that the impact (and possibly the intent) of interventions for ‘at risk’ youth is to constrain them and limit their choices/power. The literature is preoccupied with ‘chaotic’ families and communities (Chichetti, Toth, & Rogosch, 2000; Wyman, Sandler, Wolchik, & Nelson, 2000) with the implication that control is lacking, resulting in calls for ‘boot camps’ and harsher penalties for youth offenders. When powerlessness is discussed, it is in terms of individual psychological states such as reduced coping, self-esteem, anxiety and depression, with the corollary that the onus is on the individual to overcome these states; the socio-political realities that underpin these are often ignored.

New research: First findings

This project is the first phase of what is intended to be a long-term study. The over-arching aim of this phase is to review how policy in the youth development field is put into practice, through interviews with key informants and stakeholders, including service providers, funders, and people working with youth. Qualitative, semi-structured interviews are being undertaken with stakeholders. At this point, interviews with policy-makers have been completed.

A key new social policy has recently been launched, with much fanfare: ‘Fresh Start’, incorporating boot camps and parental education. The key finding from initial interviews is that conceptualisations of youth risk vary markedly, particularly in regard to this new policy. On the one hand, participants in justice-related positions respond to questions with rhetoric about the need for a ‘short, sharp shock’, and parents as drivers of crime, while

participants in youth-development related positions express concern about the agency of individuals and youth potential, alongside the recognition that forced parental education does not work and builds resentment. The overall sense is that policy is driven by crude 'tick-boxes' that meet political ideology and constituent demands rather than being informed by a sound evidence base.

Forthcoming Research

The next stage of this research, to be undertaken in New Zealand, the United Kingdom and France in 2010, aims to:

Develop a collective understanding of what it is to be 'at risk' and 'resilient', and how resilience is achieved

Review how notions of risk are negotiated in interventions and the implications of being labelled as 'at risk'

Explore avenues for the development of positive social agency, control and self-efficacy among young people.

"We need to know ... about the 'spirit', the 'quality', the 'emotional tone' of the delinquent [sic] action; about the circumstances, events and activities which provide the context preceding, accompanying and following [it]" (Cohen, 1955, p. 173).

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An Irish early childhood intervention: *the Preparing for life programme*

by Orla Doyle¹



Introduction

The intergenerational transmission of socioeconomic inequalities in children's health, and cognitive, behavioural and emotional development emerge early, and can persist through life (Najman et al., 2004; Shonoff & Philipps, 2000). Limited evidence, primarily from the US, suggests that targeted, early intervention programmes aimed at disadvantaged children and their families are an effective means of reducing these inequalities. Early childhood interventions are programmes that attempt to improve child health and development from conception to six years of age with the expectation that these improvements will have long-term benefits for child development and well-being (Wise et al., 2005). These studies find that the personal benefits (e.g., cognitive development, behaviour and social competence, educational attainment, earnings), social benefits (e.g., reduced delinquency and crime) and government savings (e.g., higher tax revenues, reduced social welfare spending), associated with intervening early in a child's life clearly outweigh the costs (Karoly et al., 2005). This paper discusses a new early childhood intervention that has been initiated in Ireland.

Development of the Preparing for Life Programme

Preparing for Life (PFL) is a five-year school readiness programme involving the recruitment of a cohort of 200 pregnant women residing in a disadvantaged area of North Dublin. The community is classified as disadvantaged as approximately 63% of its 6,439 inhabitants live in social housing (3.5 times the national average), while 14% of its adults are out of work (compared to the national average of 4.8%). Similarly, only 5% of adults in the community have a third level education, compared to a national average of 25%. In terms of ethnicity, the community is fairly homogenous, with only 7% of the population being born outside the country (Central Statistics Office, 2006).

The *PFL* programme is a community-based initiative which was developed in a bottom-up approach involving 28 different community groups, local service providers and representatives from the local community. It was developed based on the recognition that children from this specific area were lagging behind their peers in terms of both cognitive and non-cognitive development. A representative survey assessing levels of school readiness of children aged 4-5 attending the local primary schools found that teachers rated children in the *PFL* community as displaying significantly lower levels of school readiness than a Canadian norm (Doyle et al., 2009), on the Short

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Early Development Instrument (Janus, Duku, & Stat, 2005). In particular, teacher reported ratings were lowest in the cognitive domains of language and cognitive development, and communication and general knowledge.

The primary focus of *PFL* is to improve these low levels of school readiness which has been associated with poor peer relationships, psychological well being, and academic achievement, and higher levels of unemployment, teenage pregnancy and criminal activity later in life (Brooks-Gunn, 2003). *PFL* operates under a holistic definition of school readiness composed of five dimensions: 1) physical health and well being; 2) socio-emotional development; 3) approaches to learning; 4) language development and emergent literacy; 5) and cognitive and general knowledge.

Programme Components

The inclusion criteria for the programme are based solely on geographical residence and pregnancy status, and therefore include both primiparous and non-primiparous women. In total, two-hundred women are being recruited from maternity hospitals at their first booking visit. On recruitment, the women are randomly assigned to either a high-supports treatment group or a low-supports treatment group (see Fig. 1). Families in both groups receive developmental toys annually and facilitated access to one-year of enhanced pre-school in the local childcare centres. In addition, both groups are encouraged to attend public health workshops focusing on stress control and nutrition. Finally, participants have access to a *PFL* support worker who can help them access additional services if needed.

The participants in the high treatment group receive two additional services. First, each family has a dedicated mentor who visits the home for between 30 minutes and 2 hours per week starting during pregnancy and continuing until the child is five-years old. The aim of these weekly home-visits is to support and help parents with key parenting issues using a set of *PFL* developed tip-sheets. The mentoring involves (i) building a good relationship with parents, (ii) providing them with high quality information, (iii) being responsive to issues that arise; and in these ways (iv) enable parents to make informed choices (where possible encouraging and supporting good practice) and (v) signpost them to other relevant services (*PFL* Manual, 2006). The mentors focus on five general areas (1) pre-birth, (2) nutrition, (3) rest and routine, (4) cognitive and social development, and (5) mother and her supports. The *PFL* programme is therefore similar to the Nurse-Family Partnership (Olds et al., 1999), however its duration extends to age 5 compared to the usual 2 years.

Second, participants in the high treatment group also participate in group parent training using the Triple P Positive Parenting programme (Sanders et al., 2003). Triple-P aims to improve positive parenting through the use of videos, vignettes, role play, and tip sheets in a group-based setting for four consecutive weeks (2 hrs per week), three times during the programme. The programme has been subject to multiple rigorous evaluations which have demonstrated positive effects for both parents and children (Sanders et al., 2000).

The high and low treatment groups are also compared to an additional 100 families from a matched comparison community that was selected using small area population statistics and cluster analysis to ensure a socio-demographically similar profile to the *PFL* community.

Evaluation Design

The effectiveness of the PFL programme is being evaluated using an experimental longitudinal design that collects data on the children's physical health and motor skills, social and emotional development, and behaviour, learning, literacy and language development, and the parent's pregnancy behaviours, physical and psychological health, cognitive ability, personality, and parenting skills from pregnancy onwards. Data are collected from all three groups at pre-intervention, 6 months, 12 months, 18 months, 24 months, 3 years, 4 years and 5 years. The mother is the primary informant, however information is also obtained from fathers, the child, siblings, and other independent data sources, such as hospital records.

Parallel to this, a process evaluation is being conducted using a multi-sequenced design integrating systematic self-reporting by programme staff, focus group methods (3 sessions throughout the course of programme), qualitative analytical techniques and semi-structured interviews with programme staff to assess programme implementation and fidelity. In addition, implementation data recorded by programme staff (using a web-based Database Management System) are also being tracked on an ongoing basis to measure programme participation and service provision.

Update & Conclusion

The programme began in January 2008 and will continue until 2013. Recruitment is on-going with 150 of the 200 participants in the treatment groups and 53 of the 100 participants in the comparison community being recruited to date. Currently, the pre-intervention, 6 month, and 12 month surveys are in the field. The first full wave of data collection will be completed in 2010. This experimental programme is the first of its kind in Ireland and aims to provide real time evidence on best practice in early intervention.

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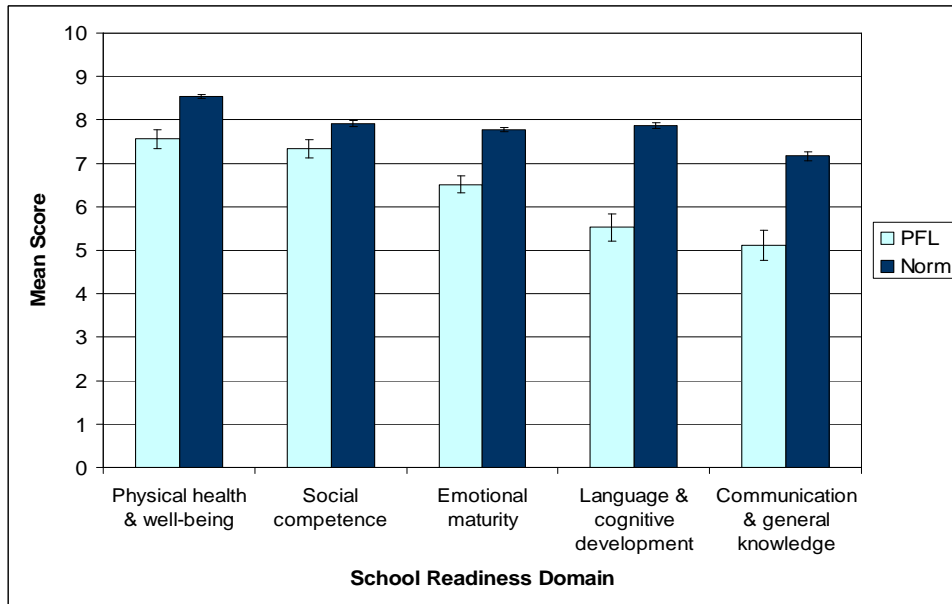


Figure 1: Mean Levels of School Readiness in the PFL Catchment Area Compared to a Normative Canadian Sample

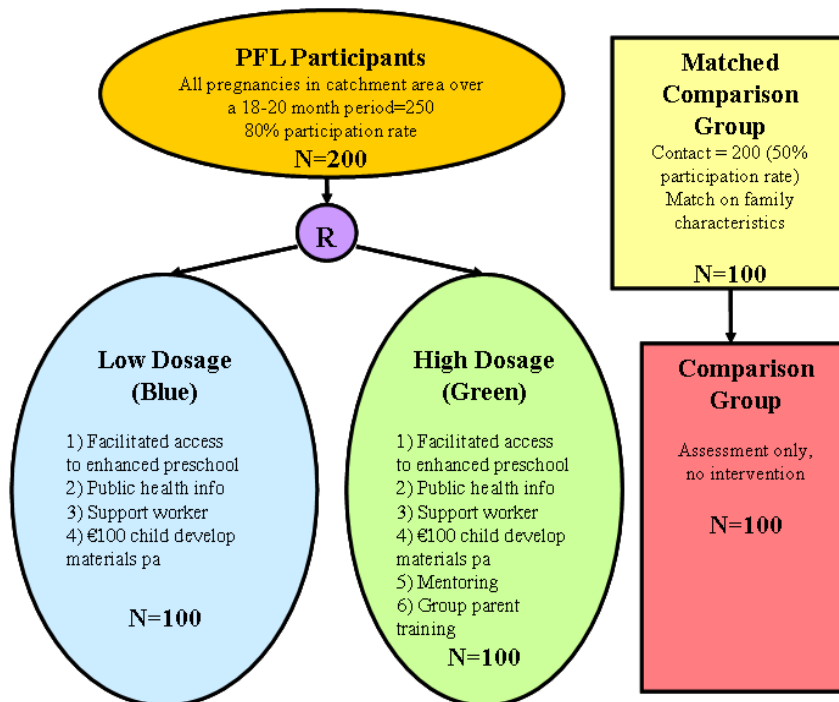


Figure 2: PFL Longitudinal Experimental Design

The university campus as community resource: ownership and educational expectations in a small Pacific community

by Heather Hamerton¹



New Zealand

The tropical South Pacific is a vast ocean sprinkled with tiny islands with a total population of 1.3 million. National populations vary from Tokelau with 1,600 people to Fiji with more than 800,000. Western colonisers have emphasised the disadvantages these countries face because of their size and remoteness (Hau'ofa, 2008) but Pacific peoples had advanced navigational skills and formed an exchange community across huge distances (Teasdale, 2005). Rather than separating them, the sea bound them together as a "sea of islands". In the Pacific, many are seeking ways to help and support one another, rather than depending on their larger neighbours on the Pacific rim (Luteru, 1991).

Education can be a powerful tool for emancipation; in order to be transformative it must reflect the aspirations of the people (Freire, 1970). Within Oceania, education follows colonial models emphasising Western theories of knowledge. In this paper I describe the role of education in colonisation, reflecting on my experience as Director of the Tokelau Campus of the University of the South Pacific (USP) and my efforts to ensure that tertiary education in Tokelau met community aspirations.

Colonisation

The history of Oceania is one of colonisation by Western nations (Crocombe, 2001; Teasdale, 2005). Colonisers' values and cultures were imposed on indigenous peoples, creating upheaval to their traditional ways of life. The colonisers assumed the peoples of Oceania were disadvantaged by isolation and remoteness and in need of "civilising" (Denoon, Mein-Smith & Wyndham, 2000). The major tools for this so-called "civilising" of Pacific peoples were Christianity and education (Crocombe, 2001).

Pacific writers have challenged a hegemonic and Eurocentric view of the small island states of Oceania as too small, too poorly endowed with resources and too isolated from centres of economic growth for their inhabitants to rise above their present dependence on Western nations. Instead they are making visible the complex and rich philosophies, theologies and epistemologies characteristic of Oceania's indigenous cultures (Hau'ofa, 2008; Huffer & Qalo, 2004). Many nations have regained independence from colonial rule, although the colonial legacy lingers on, particularly in education (Crocombe, 2001).

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Education

Education is vital for the development of Oceania; and can be a powerful tool for emancipation (Freire, 1970). Currently education is based on colonial models brought by well-intentioned Christian missionaries which have proven resistant to change (Teasdale, 2005). Much of the curriculum fails to provide an education that meets community aspirations (Crocombe, 2001).

Colonial assumptions need to be much more carefully and critically questioned (Teasdale & Puamau, 2005). Pacific educators at USP have researched Pacific philosophies to affirm Pacific ways of learning and epistemologies, to ensure these become part of educational curricula. Their work calls for the integration of Pacific values so students' experience is more relevant and conducive to harmonious societies in the future (Huffer & Qalo, 2004).

Little of this work focuses on tertiary education (Hau'ofa, 2008). Universities have remained for the most part "ivory towers" - gatekeepers of knowledge available only to a privileged few. Until this elitism is challenged, tertiary education remains beyond the reach of many, with curriculum grounded in Western priorities.

USP

The USP with more than 16000 students is the largest educational institution in Oceania with campuses in 11 Pacific member nations. Its goal is to be a centre of excellence in all things Pacific, including values, ethics and knowledge systems. Nevertheless, course content draws on Western rather than Pacific epistemologies (Crocombe, 2001; Huffer & Qalo, 2005; Teasdale, 2005).

The main campus is in Fiji; other campuses are linked via satellite. Lectures are either broadcast live or available online; many courses are offered online. Satellite technology provides high speed internet to all campuses, enabling staff and students to communicate. However, despite such innovative technologies, satellite campuses have fewer resources, less access to services and fewer trained staff than the main campus. Structures and processes continue to impose Western ways of organising and decision-making in ways that marginalise smaller states (Crocombe, 2001).

The smallest USP campus is in Tokelau, 1500 kilometres from Fiji. Even the relatively meagre resources available there provide significant educational opportunities. My goal as Director was to make campus resources widely available within the community, so that all Tokelau atolls benefitted.

Tokelau

Tokelau consists of 3 low-lying atolls 500km north of Samoa. Tokelau remains a New Zealand territory with a population of 1600. More Tokelauan people live in New Zealand and Australia than in Tokelau.

Tokelau seems very isolated, although there are strong links with neighbouring countries. To travel there, you first fly to Samoa, from where a boat travels to Tokelau twice a month. The trip takes 2-4 days, with 60 people sleeping on the deck. When it rains, passengers scramble to find cover, with flimsy tarpaulins providing shelter. There are no harbours or wharves in Tokelau; all passengers and freight are transported ashore in small boats through the surf.

Visually, Tokelau is stunning, with white coral beaches and azure lagoons fringed by palm trees. However, agriculture is non-existent and fish the only plentiful food resource. Residents rely heavily on imported goods along with scant local resources. Fishing is popular with the men; the catch is shared among the community according to a complex distribution system based on family size and need (Huntsman & Hooper, 1996). Increasingly there is concern about the sustainability of resources, particularly the fisheries.

Schools on each atoll provide education from pre-school to secondary. Students who complete school must continue their education elsewhere or through USP foundation courses before beginning tertiary study. In 2005, all teachers in Tokelau redesigned the school curriculum, incorporating traditional Tokelauan knowledge into several subject areas.

Western knowledge will continue to be valued in Tokelau, since it is important for students to gain skills to enable them to continue study elsewhere. However, curriculum redesign showed the importance of including Tokelauan knowledge and demonstrated the importance of teachers participating in decision-making. Collectively they were able to design a comprehensive and appropriate curriculum. This model is also inherently political, since it requires decisions about what knowledge is most important. Similar revision may in future be needed to ensure university curricula are relevant to indigenous development, and Pacific values included alongside Western knowledge.

USP Campus

In Tokelau, USP has a modest campus on one atoll. A large satellite dish and solar power enables vital equipment to function and connects the campus to high-speed internet through the main campus. Several things made the campus a significant community resource.

A comprehensive library of books about all aspects of Pacific life and a broad range of general topics was available to the community, and widely used by students. Two PCs were an important resource, used constantly by students and community. High speed internet meant they could communicate with family elsewhere via email and social networking sites. The printer was used for printing out photos, CVs and scholarship applications.

Solar power was a useful resource. During power cuts the campus freezer was full of food from people's freezers to avoid spoilage. The campus was used as a quiet study space; some also came to socialise. In a community with very few social services, my perceived expertise meant I was asked to give "expert" advice on many topics, from psychological advice, career planning and writing scholarship applications.

While the resources were modest when compared to a metropolitan university, in a small community with limited access to the outside world they were of considerable value. Being able to communicate with family living elsewhere had huge cultural significance. In many respects, the Tokelau USP campus operated as a "resource centre" utilised by the entire community.

Conclusion

USP remains a colonial institution, and is likely to remain the dominant tertiary education institution in the region. To ensure it meets the needs of local communities, it is important to actively promote, disseminate and value Pacific epistemologies rather than relying on Western theories and models.

Opening up the university to make resources more readily available is important in a small community like Tokelau. All resources, regardless of ownership and rules of access, need to be accessible. Exclusionary policies that make university resources available only to students simply do not make sense in a small community. The university campus needs to be fully integrated into the community with an open door policy. In Tokelau, this will ensure that people can achieve their educational aspirations.

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Inter-systemic agreement between family and school: a comparison between Italian and migrant adolescents

by Mara Manetti¹, Paola Cardinali¹ & Elena Zini¹



Adolescence is a critical developmental period during which individuals undergo several changes and encounter new experiences that may influence their psychological well-being. Immigrated people have to face developmental tasks of identity definition, but have additional difficulties of integration.

The quality of support influences the adolescent development process (Rigby, Slee & Martin, 2007): a high level of support facilitates the acquisition of basic social skills, enhances self-esteem and perception of well-being. A low level of support may be associated with inadequate academic performance and with a lower level of overall adjustment (Crosnoe & Elder, 2004).

During the migration process family and social networks are transformed, with the possibility that perceived emotional support decreases as a source of stress.

School has been identified as a key context in young people cognitive and social growth. That is where children spend most of their daytime during the week and encounter national values and knowledge. School provides adolescents with opportunities to select their friends according to their affinities and multiplies encounters with other cultures, with both positive and negative outcomes (Sabatier, 2008).

Supportive relationships with teachers and other school adults have been found to contribute to the social integration of immigrant youth and to their academic success (Suárez-Orozco, Suárez-Orozco & Todorova, 2007). School staff affect students' peer relationships, shaping norms of behaviour by setting cooperative goals, discouraging competition, and creating a feeling of mutual respect (Ryan & Patrick, 2001).

Students whose families are more supportive exhibit more positive attitudes toward school and more positive behaviours (Seitsinger, Felner, Brand & Burns, 2008). Moreover the parent-adolescent relationship is associated with the ability of adaptation to a new social context for migrant adolescents (Liebkind & Jasinskaja-Lahti, 2000).

A distance between adolescents and parents on cultural values is expected in immigrant families as part of the normal developmental process (Sam & Virta, 2003).

The aim of the present study is to analyze home-school system as perceived by a group of migrant adolescents and their teachers. This complex set of ties will be studied in relation with well-being, social support and teachers' self-efficacy.

Considering the importance of family and school (Bru, Murberg & Stephens, 2001) in influencing students' educational achievement, we expect a correlation between family, teachers and peer support and school success. Moreover, in agreement with the model of partnership (Christenson & Sheridan, 2001), it is assumed

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that higher levels of conflict between home and school levels reflect lower wellbeing (Arunkumar, Midgley & Urdan, 1999). Finally it is expected that the sense of efficacy perceived by teachers links with the perception of a positive relationship based on mutual trust between school and family.

Respondents of the study were: 175 Italian adolescents, 175 adolescents from East European countries and 80 adolescents from South America. The project involved also 262 Italian teachers.

Data were collected through a survey including: the Socio-Anagraphic Schedule, the Teacher and Classmate Support Scale (Torsheim, Wold & Samdal, 2000), the Perceived Social Support from Family Scale (Procidano & Heller, 1983), the Dissonance between the Home and School Scale (Midgley et al., 2000), the General Health Questionnaire (Goldberg & Williams, 1988), the Trust Scale From the Family-School Relationship Survey (Teacher Form) (Adams & Sandra, 2000) and the Teacher's Sense of Efficacy Scale (Tschannen-Moran & Woolfolk, 2001).

Participants' mean age was 13,96 years. They were equally divided by sex (47.81% males, 52.19% females) in the three ethnic groups (Italian, East European, South American).

For what concerns teachers women were 66%.

School results, reported from the adolescents, differ in significant way between the three ethnic groups ($F(2,430)=20,92, p<0,000$).

Participants' level of self-esteem was unrelated to their ethnic group; however perceived well-being is more high for the adolescents coming from East Europe ($M=36,05$; dev. std.=6,94), Italians ($M=34,19$; dev. std.=8,29) and South Americans ($M=33,57$; dev. std.=8,55) follow. These differences are statistically significant ($(2, 384)=3,36, p<0.05$).

Family support is correlated with all the other relational conditions ($R(\text{friends})=.40, p<.001$; $R(\text{teachers})=.15, p<.001$; $R(\text{classmates})=.10, p<.05$), however it does not appear in relation with students school outcomes. Academic success was associated to the other sources of support.

Regarding the dissonance between Home and School, East Europe adolescents perceive the greater level of agreement between the two agencies ($M=81,96$; dev. std.=11,02), Italians ($M=81,57$; dev.std.=10,31) and South Americans ($M=80,90$, dev. std.=9,64) follow. These differences are not statistically significant.

In order to verify the assumption for which higher levels of dissonance between family and school match to lower levels of well-being, we created two groups with "high" (one standard deviation above the mean) and "low" (one standard deviation below the mean) perceived dissonance. The comparison between the averages of these groups revealed differences in well-being in relation to the perceived level of dissonance ($t(111)=3,44, p<.001$). The test was repeated selecting the participants on the base of the ethnic belonging. The difference between groups with high and low dissonance was significant only for the group of adolescents coming from East Europe ($t(51)=3,67, p<.001$).

Comparison between teachers with low and high sense of self-efficacy about the relationship between family and school showed a significant difference in all the dimensions extracted from explorative factor analyses with Principal Component method: Recognition of parents competence ($\text{Alpha}=.89$; $t(261)=-2,08^{**}$), Parents Availability ($\text{Alpha}=.79$; $t(261)=2,43^{**}$), Mutual Respect ($\text{Alpha}=.43$; $t(261)=-3,05^{**}$).

Research confirms that family and school represent the most significant micro-systems for adolescents. In particular, higher levels of agreement between home and school reflect higher East Europe adolescents' wellbeing. Italian and South America boys refer that other relational dimensions as friends or teachers' support are more salient to define their general health.

Finally, the sense of efficacy perceived by teachers links with the perception of a positive relationship based on mutual trust between school and family.

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Les transferts d'enfants en milieu bambara : entre tradition et globalisation

par Paola Porcelli¹



Appréhender les transferts d'enfants en milieu bambara : discours éthiques ou émiques ?

Les transferts d'enfants sont jusqu'à présent très répandus dans les sociétés traditionnelles. Ces phénomènes ou institutions impliquent la mise à disposition temporaire et plus ou moins volontaire d'un enfant ou d'un jeune à un parent ou non, en vue de son éducation, mais parfois pour d'autres raisons. Il s'agit de réalités très difficiles à cerner aussi bien du point de vue scientifique qu'en termes de manifestations locales. Leur exploration demande une attitude créative, un décentrage constant. Cette posture permet de jongler constamment entre deux dimensions du discours parallèles et simultanées, à savoir la perspective éthique, concernant la connaissance rationnelle, et le point de vue émique, propre aux savoirs autochtones.

Dans ce texte seront abordés les niveaux multiples de ces situations de « parenté et filiation d'ailleurs » en prenant en considération certains nœuds de variation émergeant des approches éthiques et émiques. Si les sources de différenciation sont nombreuses, comme nous le verrons au cours de l'exposé, les liens se situent au niveau des transformations que ces coutumes connaissent en raison des impacts de la globalisation. Ces réflexions sont issues d'une recherche qualitative menée entre 2005 et 2007 au Sud-Ouest du Mali, en milieu bambara. Dans ce contexte les transferts d'enfants sont toujours pratiqués avec une fréquence importante mais leur mise en œuvre ne respecte pas toujours le sens prétendu par les représentations collectives en termes de solidarité intrafamiliale, d'entraide et de renforcement des liens. Le but de cette communication est donc d'explorer la complexité de ces phénomènes afin de pouvoir envisager des stratégies d'intervention et d'*empowerment* face aux risques qu'ils impliquent.

Variations sur thème 1 : le niveau éthique

Du point de vue éthique, des étiquettes multiples traduisent l'embarras théorique lié à la désignation de ces coutumes. Répandues dans beaucoup de régions de la planète et incluant une multitude de spécificités locales, elles sont indiquées différemment en fonction des disciplines. Ainsi, si la notion de *transfert* est liée au mouvement physique et semble assez transdisciplinaire, le concept d'*adoption* permet la comparaison avec les déplacements formalisés tels que nous les connaissons en Occident. En revanche, les mots *fostering* et *circulation des enfants* ont été privilégiés pas l'anthropologie alors que l'analogie avec le *don* a inspiré les ethnopsychanalystes. Quant à l'expression d'*adoption traditionnelle*, elle a été surtout employée dans le domaine juridique tandis que les catégories de *relocation*, *confiage* et *mobilité enfantine* semblent plus courantes auprès

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des démographes. Enfin, la référence aux dynamiques de parenté demeure une préoccupation des historiens et de certains anthropologues à travers les termes de *co-parenté*, *parenté sociale*, *parenté additionnelle*, *fictive* ou *pseudo-parenté*. Chacun des mots évoqués se réfère à des réalités complexes, semblables mais parfois étonnamment éloignées, ayant comme seul point commun la séparation entre un enfant et ses parents biologiques.

De plus, la définition de ces transferts est compliquée par l'existence d'autres formes de déplacements infantiles aboutissant souvent à des situations de maltraitance. Les frontières entre déplacements dus à des raisons traditionnelles et configurations produites par les dérives de la modernité sont de plus en plus subtiles. Parmi ces pratiques au statut ambigu, nous pouvons inclure certaines *migrations* suite auxquelles des jeunes partis en recherche de fortune se retrouvent dans des contextes de précarité, souvent loin de leurs proches. Les modes de désignation employés par les chercheurs reflètent le caractère d'urgence et la nécessité d'intervention qui s'imposent dans ces situations : *enfants trafiqués, de rue, abandonnés, séparés ou non accompagnés*. Toutefois, dans de nombreux cas on assiste à la création de catégories *ad hoc* d'enfants « maltraités d'office » avant même de comprendre les dynamiques des déplacements dont ces jeunes ont fait l'objet ou de vérifier leurs conditions de vie. Les représentations collectives changent sous le poids de la globalisation et imposent un modèle de famille occidentale où les transferts d'enfants se trouvent dépourvus de leur valeur originelle.

Variations sur thème 2 : le niveau émique

En langue bambara, lorsqu'un enfant est élevé hors de sa famille biologique, on l'appelle *enfant à éduquer (lamòden)*. Toutefois, à côté de cette étiquette générique, sur le terrain j'ai pu observer de nombreuses situations de transfert d'enfants qui font l'objet de catégories spécifiques. En termes de représentations, il s'agit de distinguer avant tout entre *enfants de la famille (dudenw)* et *personnes de la famille (dukònòmògòw)*. Les *enfants de la famille* sont à considérer comme des membres de la concession à part entière et méritent leur appellation en raison des motivations – communautaires ou intrafamiliales – qui ont déterminé leur transfert. En revanche, les *personnes de la famille* sont des simples hôtes : assimilés à des étrangers, ils se déplacent hors des circuits coutumiers.

Une différenciation ultérieure concerne en effet les transferts mis en œuvre pour des raisons traditionnelles (décès des parents, stérilité des tuteurs, solidarité familiale, homonymie, rituels propitiatoires) qui s'opposent à ceux motivés par les nécessités de la vie moderne (scolarisation, formation religieuse ou professionnelle, migration des parents). Les premiers sont jusqu'à présent vus comme des formes nobles, répondant aux idéaux collectifs. L'un des exemples les plus marquants concerne les *orphelins (falatòw/fèèretanw)*, qui sont considérés comme des *lamòdenw* par excellence en raison de leur condition difficile. En revanche, les jeunes confiés pour des raisons modernes ont un statut généralement inférieur puisque leur transfert est considéré comme un déplacement temporaire.

Les enjeux de la globalisation compliquent le déroulement de ces transferts, qui acquièrent une valeur matérialiste et sont désormais associées à l'individualisme plutôt qu'à la solidarité. On parle alors tout simplement d'*écoliers (kalandenw)* ou d'*élèves coraniques (garibuw)*, de jeunes *apprentis ou travailleurs (baaradenw)*, parfois

émigrés en recherche de fortune (*tungadenw*) pour des raisons économiques (*warikó*) ou simplement pour « apprendre la vie » (*ka fèn caman dòn*). Parfois il s'agit d'enfants qu'on ne désigne pas pour ne pas avoir à évoquer les causes de leur présence ou les rapports avec leurs familles biologiques. Tel est le cas des *enfants illégitimes* (*nyèmògodenw*), simplement indiqués comme *enfants d'autrui* (*walidenw*). Toutefois, entre les jeunes « avec un statut » et ceux « sans statut » il existe une multitude de configurations intermédiaires échappant aux règles communautaires et souvent difficiles à identifier.

Quel sens pour ces pratiques aujourd'hui ?

En conclusion, le changement social et ses effets sont au cœur de cette synthèse des perspectives éthiques et émiques autour du transfert d'enfants. En effet, la multiplication des sources de variation dans les dynamiques locales a coïncidé avec l'intérêt des chercheurs pour ses pratiques, pendant et après la colonisation. En réalité, depuis que l'on a commencé à les décrire, ces phénomènes n'ont jamais été « stables ». Liés à la plasticité des structures familiales, ils peuvent être considérés à la fois comme des *situations s'inscrivant dans la fragilisation des systèmes de solidarité traditionnels*, comme des *stratégies d'adaptation collectives vis-à-vis des stressors* introduits par la globalisation (précarité, épidémies, croissance démographique) mais également comme des *mécanismes de protection communautaires* visant à préserver les valeurs autochtones les plus profondes (solidarité, entraide, soutien social).

Les défis auxquels les populations doivent faire face dans la mise en œuvre de ces transferts sont multiples. En particulier, les risques de la modernisation mis en évidence par la littérature se transforment en tristes réalités lorsque ces enfants confiés hors des circuits traditionnels se retrouvent « sans nourriture, sans habits et sans chaussures » (*dumuni tè, fini tè, samara tè*). Ces situations coexistent avec des transferts qui observent encore les règles prescrites par les anciens, comme le principe selon lequel on ne doit pas différencier les enfants d'autrui de ses propres rejetons. Pour ces raisons je propose de considérer ces phénomènes comme le résultat de stratégies individuelles et intrafamiliales qui nécessitent d'être évalués en tenant compte des dynamiques actuelles et de leurs impacts. En termes d'*empowerment* et de renforcement des ressources communautaires, il est donc indispensable d'intégrer cette complexité et de s'interroger sur les multiples facettes des transferts d'enfants afin de concevoir des stratégies de prévention ou de prise en charge des effets indésirables de ces coutumes.

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Does place attachment contribute to social well-being? An empirical study on first-year undergraduates

by Chiara Rollero¹ & Norma De Piccoli¹



Abstract

Well-being refers to satisfaction concerning interpersonal relations, family life, employment, health and finances. Considering that persons remain embedded in social communities and face innumerable social tasks and challenges, it is particularly important to take into account the individuals' appraisal of their social relationships, how others react to them and how they interact with social institutions and community. These last are the psychosocial dimensions considered by the concept of social well-being (Keyes, 1998). The present study aimed to investigate the direct relation between the dimensions that characterize social well-being and the affective link to a place. Participants were 443 first-year undergraduates attending the University of Turin, in Italy. Results showed that social well-being is globally connected to place attachment, but noteworthy distinctions have to be specified both in relation to the spatial range investigated and to the different dimensions of social well-being.

Introduction

Literature showed that the feeling of being at home in the neighbourhood is closely connected with a sense of well-being (Moser et al., 2002), whilst, on the contrary, the lack of environmental quality may be seen as an important threat to quality of life (Uzzell & Moser, 2006). Theoretical and empirical works tied place attachment to physical and psychological well-being (i.e. Brown & Perkins, 1992). Considering that persons remain embedded in social communities and face innumerable social challenges, it is particularly important to take into account the individuals' appraisal of their social relationships, how others react to them and how they interact with social institutions and community. For this reason Keyes (1998) proposed the concept of social well-being, characterised by five dimensions: social integration (individuals' appraisal of the quality of their own relation with society and community), social acceptance (trusting others and having favourable opinion of human nature), social contribution (the feeling of being a vital member of the society, with something of value to give to the world), social actualisation (the evaluation of the potentials of society) and social coherence (the perception of the quality and the organization of the social world).

The research

Although a voluminous literature on the connection between place and well-being yields some insights, to date the direct influence of place attachment on social well-being has not been explicitly investigated. Thus, the main

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purpose of this study is to explore whether place attachment directly affects the five dimensions of social well-being. Following Hidalgo and Hernández's (2001), we aimed to consider the influence on social well-being both of the attachment to a small-range place, i.e. the neighbourhood, and of the attachment to a larger place, i.e. the city.

Participants were 443 first-year undergraduates attending the University of Turin, a city of about one million inhabitants in the north west of Italy. The 37.7% of participants were male. Age ranged from 18 to 30 years (mean = 21.43, SD = 3.68). The 77.2 % of the sample came from different parts of Italy and the remaining 22.8% was going to University in the home-town. In the questionnaire the following scales were included: the Residential Attachment Scale (Bonaiuto et al., 2002) referred to Turin; the Residential Attachment Scale (Bonaiuto et al., 2002) referred to the neighbourhood of residence; and the Social well-being Scale (Keyes, 1998). All the scales and the subscales proved acceptable internal consistency.

Multiple regression analyses were performed in which every dimension of social well-being was regressed onto demographical variables (gender, age, and place of origin), city attachment and neighborhood attachment (Table 1).

City attachment accounted for a large proportion of variance in social integration ($\beta = .23$). The affective bond toward the neighborhood was also a significant predictor ($\beta = .16$), in addition to the place of origin ($\beta = -.16$). Participants studying in their hometown, in fact, showed a lower level of integration. Concerning social acceptance, the overall variance explained was lower and place attachment contributed less than before. In this case, neighborhood attachment had no influence, while city attachment was a significant predictor ($\beta = .20$). Moreover, coming from other parts of Italy increased acceptance ($\beta = -.12$), as well as the age ($\beta = .11$). Social contribution was instead predicted only by one variable: city attachment ($\beta = .17$). The link toward the neighborhood and demographical variables had no relevant influence. Gender, age and place of origin did not affect neither actualization, whereas both city and neighborhood attachment were significant predictors (respectively $\beta = .13$ and $\beta = .11$). Finally, social coherence was affected by age ($\beta = .10$), city attachment ($\beta = .12$) and neighborhood attachment ($\beta = -.10$). For the last variable, the β coefficient was negative: being attached to a local area engendered lower levels of coherence.

Social integration

Predictor	β	t	p
Gender (0 = male)	-.06	-1.26	n.s.
Age	.00	.04	n.s.
Place of origin: Turin	-.16	-3.50	.001
City attachment	.23	4.85	<.001
Neighborhood attachment	.16	3.47	.001

R² adj. = .09

F (5, 435) = 9.29 p<.001

Social acceptance

Predictor	β	t	p
Gender (0 = male)	-.05	-1.08	n.s.
Age	.11	2.24	.02
Place of origin: Turin	-.12	-2.47	.014
City attachment	.20	4.16	<.001
Neighborhood attachment	.06	1.37	n.s.

R² adj. = .05

F (5, 435) = 6.05 p<.001

Social contribution

Predictor	β	t	p
Gender (0 = male)	-.07	-1.41	n.s.
Age	.08	1.60	n.s.
Place of origin: Turin	-.07	-1.35	n.s.
City attachment	.17	3.60	<.001
Neighborhood attachment	.05	1.04	n.s.

R² adj. = .04

F (5, 435) = 4.22 p<.005

Social actualization

Predictor	β	t	p
Gender (0 = male)	-.02	-.38	n.s.
Age	.10	2.16	.031
Place of origin: Turin	-.05	-1.08	n.s.
City attachment	.12	2.45	.015
Neighborhood attachment	-.10	-2.08	.038

R² adj. = .03

F (5, 435) = 3.24 p<.01

Social coherence

Predictor	β	t	p
Gender (0 = male)	-.02	-.38	n.s.
Age	.10	2.16	.031
Place of origin: Turin	-.05	-1.08	n.s.
City attachment	.12	2.45	.015
Neighborhood attachment	-.10	-2.08	.038

R² adj. = .03

F (5, 435) = 3.24 p<.01

Table 1. Multiple regression analyses predicting the five dimensions of social well-being.

Discussion

To sum up, for what concerns demographical variables, gender had no effect, whereas age influenced acceptance and coherence. Having experienced relocation, i.e. coming from other parts of the country, strengthened integration and acceptance. The affective link to a place globally affected social well-being. In particular, city attachment increased all the dimensions of well-being, whereas neighborhood attachment furthered integration and actualization and decreased coherence. In other words, neighborhood attachment may foster a positive evaluation of the future society, but it doesn't imply a full comprehension of the world around. Rather, high attached subjects could be too dependent on their small range area and thus could find the society in its whole hard to be comprehended. This finding seems in line with recent literature, that is questioning the

unconditionally positive conception of the construct of place attachment (Lewicka, 2005; Tartaglia & Rollero, in press). The present results suggest also exercising some caution when choosing which spatial range take into consideration: if being linked to a bigger area enhances a global perception of social well-being, the affective bond toward a smaller territory has both a positive and a negative influence.

Despite all these considerations, the clear influence of place attachment on social well-being confirms that a place is not only a physical area. On the one hand, people ground representations of the place in their social experiences and thus attribute to the same place different values (Félonneau, 2004), on the other psychological phenomena, such as the perception of the quality of one's social life, can not be conceived but contextualised and embedded in specific environments.

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Follow-up Studies of Youth Aging Out of Foster Care in the United States and Poland

by Paul A. Toro¹, Malgorzata Szarzynska² & Malgorzata Gocman³



Aging Out in the United States

Each year, about 20,000 youth “age out” of foster care in the US, typically when they turn 18 and the system is no longer responsible for their care (Fowler & Toro, 2006). Most of these youth were abused or neglected and taken by the state from their natural parents’ custody. Studies of homeless adults find that very large numbers report having had foster care experience while growing up, with rates of 20-50% among the homeless as compared to 1-2% in the general population (Firdion, 2004; Toro, Dworsky, & Fowler, 2007). Exit from foster care placement, along with jail/prison release, represents one of the most obvious time points when we can predict that many people will soon become homeless. As such, aging out of foster care is an ideal time to consider the prevention of homelessness.

Our Research Group on Homelessness and Poverty in Detroit tracked 265 aged out foster youth from Southeast Michigan (the 3 counties including and surrounding Detroit). We had the active cooperation of the Michigan Department of Human Services (DHS), which operates the state’s foster care system. DHS provided us with record data and contact information on the population of 867 youth who had aged out of the foster care system in the tri-county area in 2002 and 2003. Our sample of 265 was selected from this population. The youth experienced a range of placement types while in foster care, though most come from either formal foster care (homes of foster parents with a small number of youth) or family foster care (homes of relatives of the youth). Youth were followed on average 3.6 years after leaving the system in order to determine their functioning in various domains.

Results suggested that many aged out youth struggle to establish stable living circumstances. Almost half (49.2%) of the youth reported some form of homelessness during the follow-up period. This included many (16.7%) who experienced literal homelessness (i.e., spending at least one night on the streets, in an abandoned building, in a car, or in a shelter for the homeless), which is 8 times the national 5-year prevalence of literal homelessness (Tompsett et al., 2006). In addition, many others (32.5%) were precariously housed (e.g., staying temporarily with friends or relatives other than their parents and considering themselves homeless). In the few years after leaving foster care, aged out youth experienced 2.5 times the national lifetime rate of precarious housing. Youths lived at an average of 4.3 different sites since leaving foster care (including episodes of

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homelessness), over the 3.6-year follow-up period. This indicates that these youth continued the nearly yearly change of residences that they experienced while in foster care (the average youth in our follow-up sample had experienced 5.8 different foster placements during their average stay of 4.3 years in foster care).

The educational attainment of these youth, followed at an average age of 21 years, was also less than ideal. The high school graduation rate of 41% represents half the national average. The employment circumstances reported by the youth were quite poor, with the average youth spending 48% of the 3.6-year follow-up period unemployed (when working, the average monthly income was only \$598). Almost half received some form of public assistance at some point since leaving foster care. The youth also reported a number of mental health problems. On a self-report measure, the youth reported nearly two times the psychiatric symptoms as compared to normative rates. Two-fifths of the youth engaged in three or more behaviors of conduct disorder, and many of the youth (27%) had spent some time in jail during the follow-up period. Over two-fifths reported two or more symptoms of substance abuse or dependence, indicating that many former foster youth may struggle with emerging substance abuse problems. Also, nearly all (91%) of the youth were sexually active. Three quarters of the youth stated that they had as many as seven partners since leaving foster care, with the remaining 25% of respondents having eight or more partners in that time frame. Practicing safe sex was inconsistent. 41% of the respondents indicated that they used birth control less than 75% of the times that they engaged in sexual activity. Nearly half (48%) reported that they or their partner had become pregnant since they left foster care, and many (15%) reported contracting a sexually transmitted disease in that time.

Based on this study, we have estimated the costs to society of the kinds of problems experienced by youth after aging out (Fowler & Toro, 2007). We attached costs to a number of these problems (including homeless and substance abuse services, incarceration, mental health care, public assistance, and unemployment costs) and found that the average annual cost to society per youth was \$8,595. Such figures warrant some intervention to reduce the costs. We believe that our proposed intervention can prevent many of these costly problems.

Based on these data, we identified youth with different outcome trajectories during the follow-up period (Fowler, Toro, & Miles, 2009). We have found several different subgroups in the overall aged-out sample based solely on housing trajectories and found housing instability to be related to emotional and behavioral problems, physical and sexual victimization, criminal conviction, and high school dropout. Most recently, we have applied multivariate approaches that divide the sample based on the combination of outcomes in three domains during the follow-up period. Growth Mixture Modeling empirically identified 3 latent trajectory classes. Stable-Engaged youth (41% of the sample) experienced secure housing and increasing connections to education and employment over time. Stable-Disengaged youth (30%) maintained stable housing but reported decreasing rates of education and low and largely flat levels of employment. The Unstable-Disengaged group (29%) experienced chronic housing instability (including much homelessness), declining connection to education, and failed to attain employment. The Unstable-Disengaged youth reported significantly worse mental health as compared to the other two groups. We have learned a great deal from this study about the needs of youth aging out of foster care. We have discovered that many of these youth are ill-prepared to make a successful transition to adulthood at age 18. They often have behavioral and emotional problems stemming from the abuse they experienced from their parents and

from their chaotic life in the foster care system. They typically have very limited resources from their often estranged families and the service system largely abandons them at age 18. So, it's not surprising that they should be at such high risk for homelessness and other poor outcomes after aging out. We are now completing a second follow-up (re-interviewing the 265 youth, over 6 years since aging out) that will give an even better understanding of their long-term needs and of the intervention approaches that might divert them from homelessness and other poor outcome trajectories.

Aging Out in Poland

In Poland, 18,887 children under age 18 live in orphanages and 48,432 children live in foster families (CSO, 2005). Many of the orphanages in Poland are quite large, often housing as many as 30 to 80 children. In order to better understand their outcomes, we interviewed 152 such children years after leaving state care. The methods used in our study were patterned after those used in the similar study conducted in the USA by Toro.

Participants were chosen from lists of orphaned youth that left family and institutional care in the last five years in the Opole and Wroclaw regions of southern Poland. The lists were provided by directors of the orphanages and Family Support Centers (CPRs) in the region. About half of the participants came from orphanages and the other half from foster families (unlike in the US, "formal foster care" hardly exists in Poland). The average time since leaving state care was 2 years (vs. 3.6 years in the US study).

23% of the participants spent some time literally homeless during the two-year follow-up period (vs. 17% in the US study). The youth from orphanages showed especially high rates of homelessness (30% vs. 17% for those from family foster care). Many others complained about a lack of satisfactory and affordable housing during this period. As in the US study, these Polish youth also showed high levels of psychopathology based on Brief Symptom Inventory.

Intervention Ideas in Both Nations

In both the US and Poland, we are currently developing comprehensive pilot interventions. Such interventions draw on treatment models proven to be effective among populations with similar problems. In particular, we propose to use methods of Intensive Case Management, including wrap-around services, originally designed for multi-need populations such as the severely mentally ill and homeless adolescents and adults (e.g., Cauce et al., 1994; Toro et al., 1997; Tsemberis, 1999). Also, the intervention model includes components of Multisystemic Therapy, originally targeted to delinquent adolescents (Henggeler, Schoenwald, & Pickrel, 1995) and, more recently, adapted for many other groups of at-risk youth (such as those with substance abuse and emotional disorders and with chronic medical conditions; see Henggeler, 2006).

Without such services, youth aging out of the foster care system will continue to suffer, and given the extent of problems in young adulthood, it is likely that many of these youth will become more marginalized in adulthood. The human and financial costs to society will continue to grow more substantial. Given the current economic crisis in both nations, these youth can be expected to face even more formidable barriers to successful entry into the job force and housing market.

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Parents' expectations and looking glass self in a group of adolescents and young adults

by Anna Zunino¹, Mara Manetti¹, Elena Zini¹ & Chiara Cifatte¹



Social exclusion actions refer to economic, participatory, cultural and symbolic processes. Expelling forms can concern interpersonal relationships, contacts with institutions and acquisition of knowledge. Ways of marginalization are held by gatekeepers placed at different levels of system ecology (Hobfoll, 1993). In particular, in reference to gender differences, the following levels seem to be significant: conventions, social and cultural habits, laws which support and maintain discriminatory forms; subjects who manage powers in contexts; expectations by significant others toward the subject; personal beliefs (sense of identity, values of reference, locus of control, self-efficacy, motivation and competences perceived) (Tajfel, 1974; Palmonari, 1997; Berzonsky 2003).

The concept of looking-glass self suggested by Cooley (1902) affirms that the image and identity structure that a person builds depend on the perception of others, especially significant others. Parent figures, in primis, seem to have decisive effects on the process of self construction, because they return to their children the image of themselves in a regular and enduring manner, suggesting normative criteria and expectations that children could feel constrained to grant. Analyzing how rules orientations transfer from generation to generation, Kerpelman and Schvaneveldt (1999) point out how a significant number of young adults refer that, in family field, housework are carried out adjusted to traditional rules. From some studies emerge how parents tend to assign to girls duties related to caretaking of home more than what they do with boys, especially in families with children of both sexes (Crouter, Head, Bumpus & Mc Hale, 2001). Family can actually have a specific function and it is particularly important as gatekeeper: making gender family can open opportunities and construct networks and filters to which it's particularly difficult to avoid. Bond form can be particularly coercive and evident or, in other cases, finely subtle, if connected to control forms expressed affectionately and with tenderness.

Method

Study objectives

The aim of this contribution is to study how young people perceive expectations and influence of reference figures on construction of their identity, on limits they put in the present and on estimation of the future. Furthermore the research wants to compare the different perception that boys and girls have regarding to these themes.

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Hypotheses

According to literature, we expect that Italian family foreshadow itself as a traditional family unit and expect from girls relational and affective competencies (Hofstede, 2001). Furthermore, the hypotheses are that there will be a prevalence of mothers' expectation in every field of children's life and the marginalization of father's influence (Manganelli Rattazzi & Capozza, 1993). Finally, we forecast women's tendency to do not self-depict positions of social relevance (Kerpelman e Schvaneveldt, 1999).

Participants

The sample consists of 270 women and 115 men. Young people are all students attending high school or University and the mean age is 21, 67.

Instruments

Data were collected through a survey including: socio-personal data; a scale to measure father and mother's expectations and influence; a scale concerning values of young people; a measure of limits that interviewees put in front of the assumption of possible rules of leadership; a scale related to the division of housework in family. Results were processed through the software package SPSS (Software Package for Social Sciences), version 11.0.

Results

Parents' expectations

The process of development of adult identity of young people can't be considered as an individual experiences, but it represent the product of a familiar elaboration. Mother substantially orients children's projects.

Mothers' expectations appear more diversified, compared to fathers' ones, in the case they are referred to boys or girls. Finally, in interviewees' opinions there would be expectations properly maternal or paternal: for example mothers wish in greater measure than fathers that their girls/boys have in future a child. Mother appears as the socialization agent the most important in familiar formative process and orient more than father children's projects, especially for daughters ($t=8,09^{**}$). Boys perceive paternal influence more salient than girls do ($F=8,69^{**}$).

Values

In girl's perception, family and affections are negatively correlated with success ($r = -.34^{**}$; $r = -.18^{**}$). Family appears correlated with job, but not with career and money. Girls actually think that work integration is compatible with the construction of a family, but not with an important career promotion or a solid remuneration. In boys' opinion family ($r = -.38^{**}$) and affections ($r = -.41^{**}$) are negatively correlated with work which is positively correlated with success ($r = -.37^{**}$) and career ($r = -.47^{**}$).

Leadership

Young people foreshadow a future job that leaves space to independence and they are less interested, compared with others, to the creation of a personal family unit. Contrary, those who dream the creation of a family would renounce gladly to hold a position of leadership for stress condition connected to it.

Division of housework

Boys and girls agree that housework are distributed in balanced manner but strongly divided by gender between their parents.

Foreshadowing their own future family, on the other hand, they don't detect housework that they will perform in an exclusive way: they affirm that duties shared by both or which exclusively will be charged to the other partner will be more numerous.

Conclusions

Data emerged confirm the substantial influence of mothers on transmission of cultural models and rules strongly differentiated by gender: the figure of father reinforces those models which seem to be familiar models shared.

Italian family, according to Hofstede (2001) confirms itself as a traditional unit which expect from girls relational and affective competences. Girls don't attribute to their job an important function to develop their identity. Public honours, satisfaction for performing a job meaningful for community and the value assigned to economical aspects appear completely marginal. From boys, on the other hand, family expect school success, fulfilment of social honour connected with political interests. Majority of young people, especially girls, tend to have a vision in which family represents the meaningful element of life, which seems to hurt with professional involvement and career. Both male and female can accept leadership, on condition that this doesn't influence other fields of their lives. Regarding division of housework in future life, young people expect that partner will sign up specific activities, but they don't intend to assume any in first person.

From the research emerges an unchanging vision of rules in family and difficulties, from young people, in imaging future balances different from those of present and past.

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The role of community service mental health clinics in promoting healthy schools in Gauteng, South Africa

by Jace Pillay¹ and Lindsay Lamont²



Community psychology is a field that encompasses the community as the focus of intervention to transcend individualistic perceptions of psychological intervention. It emphasises the need for social change within dynamic societies such as South Africa. Community interventions endeavour to alleviate social problems and create collaborative networks of professional individuals and community members that partake in the intervention process and its sustainability. Bearing this in mind this study focused on the development of healthy schools and the role of community service mental health clinics in this respect. A healthy school can be defined as a place where all members of the learning centre community work together to provide learners with integrated and positive experiences and structures which promote and protect their well-being. In the South African context mental health clinics provide a broad range of health resources through local clinics. Legislation in South Africa already provides the opportunity for the Departments of Education and Health to collaborate in providing holistic health care services to communities through the local clinics. The shift in education includes a move towards inclusive, ecosystemic and whole school developmental perspectives and in health to more community-based and universal strategies. However, we observed that the actual role of mental health clinics as a stakeholder in school communities, and in promoting healthy school environments, was clearly not known. Hence, the main aim of this study was to determine the role that mental health clinics play in promoting healthy schools.

A qualitative research design was adopted to develop an understanding of the current and future role community mental health clinics can play, as well as to explore recommendations to improve the status quo. Data was collected from 4 primary schools, 4 education districts and 4 clinics. The methods used included individual interviews with principals, nurses and psychologists and focus group interviews with school based support teams, school management teams and teachers. The data gathered was then analysed using content analysis techniques.

Firstly, the findings indicate that the clinics are based on a traditional medical model and need to shift to an ecosystemic approach supporting whole school development and inclusion. For this to happen staff at the clinics need to be trained to assume diverse roles to serve the community in broader ways. For example, they should be trained to work with learners who consume drugs, alcohol and indulge in sexual activities. They should be trained

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in counselling, group therapy, emotional intelligence and mental well-being to be of assistance to learners. With regard to parents they should form partnerships in supporting them to get the best out of their children. Staff should also be equipped to train teachers in identifying difficulties and supporting learners. They should provide counselling services and support for teachers as well.

Secondly, clinic staff should have more access to school premises. This would probably result in more learners being supported than waiting for learners to go to the clinics. Thirdly, an integrated referral network process should be developed. This would most likely lead to improved communication between clinics and schools and speed up service delivery. Each clinic should have a referral list based on needs and contexts of the community. Finally, the collaborative network and resources at clinics need to be restructured. There should be better collaboration between education districts, schools and clinics. Intersectoral collaboration between the departments of Education and Health was lacking and needs to be developed. Also, there has to be improved collaboration amongst professionals as part of a multidisciplinary team.

Based on the above findings we suggest the following: community mental health services should shift from a medical model to an ecosystemic approach; mental health services should be based on school premises; mental health professionals should assume a training and development approach with learners, teachers and parents to develop healthy schools; and collaborative networks, referral processes and resources should all be improved. In conclusion we argue that from a community psychology perspective policy should be initiated to facilitate the process for clinics to play a more meaningful role in developing healthy schools. This means that all stakeholders should collaboratively work on this policy. The scope of practice of clinics has to be revisited and programmes should be tailored for the specific needs of specific communities. Since community psychology focuses on the well-being of individuals within communities we argue that mental health clinics would be the most appropriate place to begin with in terms of healthy schools.

Transition to adulthood: a study in France

by Marie Plagès¹ and Didier Drieu²



There's little known about leaving care in France, youth can be under care from 0 to 21 maximum. A first study run on the institutional files of 2 cohorts of youth who have been in care has shown that most of them leave care at age 18. But we don't know where they are after 18. Most of the studies which focuss on this topic are based on retrospective data collected among people who have left care for several years. Besides some memory and reconstruction biases, this kind of approach tends to leave out the most and the less integrated people.

The INED (Institut National des Etudes Démographiques) studies this period, we are currently working on the feasibility survey. It consists in a specific study about transition to adulthood. The objective of ELAP project is to overcome these limits following up a representative sample of youth from care settings to autonomy. In order to evaluate the feasibility of this quite challenging project, we are currently implementing a feasibility survey.

A come back on the context shows that several elements indicate a high risk of social exclusion. In fact, qualitative studies shed light on difficult years following leaving care : a quantitative survey among young users of emergency services & housing for the rehabilitation of homeless shows that 1/3 of them have been in care. So, it exist, a strong social demand to know more about this issue. From the government: Appointment of a high commissioner for active solidarity against poverty (in 2007) and for young people (in 2009) ; from the professionals: children juges, social workers, educative team ; from the youth in care themselves!

The ELAP project is a longitudinal prospective survey, based on a representative random sample of 1000 youth drawn from the Child Welfare database.

There are 3 waves of data collection:(From age 17, when youth are still in care to age 23, when the most critical period is over, with several contacts in between). Focusing on youth's leaving care, conditions of living, transition to autonomy (Access to residential autonomy and employment, family and social networks, access to health services...). At the end of 2010, we hope begin the longitudinal study.

In France we try to think about the links between institutions, we notice a lack of link around these youths. I think the reason can be the institution's history.

- In Medico social institutions, the foundations have a history of social hygienism: and we observe an absence of mediating links between family, institutions and youths.
- In Psychiatric institutions, there was a lack of speciality services for teenagers before 2005. Psychiatry was isolated from the medico social institutions.

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In part for these reasons, there's no coherence implies many breaks within therapeutic and foster care.

At the moment, we have new institutions which are called « adolescent's houses » and we try to work together with all partners. It gives the institutions the opportunity to prepare the transition to adulthood.

In 2005, foundations of speciality services have been created (1 by department) which offer: mediating links with teenagers' environment (foster care services, family, social workers); mediating groups in order to help the teenagers to find again a better self, a co-reference between social and psychiatric workers.

We can work with net working. It's easier for us to prepare the youths.

7

HEALTH

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SANTE

Enjeux actuels des centres d'écoute téléphonique: Comparaison entre la Belgique et le Québec.

par Vinciane Beaulen¹ & Marie-Christine Jacques¹



Les centres d'écoute téléphonique

Initiés dans les années 50, les centres d'aide par téléphone se sont développés autour d'une démarche unissant générosité, anonymat et humanité. Cela partait du constat que ce dont une personne pensant au suicide a besoin, c'est d'une écoute immédiate : elle cherche à pouvoir parler, à quelqu'un de disponible, de ce qu'elle vit, éprouve, traverse de douloureux qui l'amène à envisager cette seule issue : se donner la mort. Ce qui caractérise ces centres, c'est que l'écoute y est assurée bénévolement par des équipes de volontaires. Cette action repose donc sur la solidarité humaine : des personnes acceptent de mettre du temps et des compétences au service d'autres sans rémunération, et même plus, elles acceptent d'être bousculées dans leur façon de voir la vie, de se remettre en question dans leur manière d'écouter l'autre pour le rencontrer au plus juste et permettre que cet échange téléphonique apporte un soulagement psychique. Cette aide par téléphone occupe une place particulière dans le paysage de l'aide psychologique: accessibilité et bénévolat la caractérisent. De par ce cadre spécifique, les centres d'écoute généralistes appartiennent au premier niveau de soins en santé mentale tel qu'il est présenté par Michel Marie-Cardine² dans une classification des psychothérapies. Cet auteur identifie un premier niveau de psychothérapie : l'aide psychologique spontanée ou commune. En effet, on peut constater les bienfaits que l'on peut retirer d'une écoute bienveillante auprès d'un ami, d'un collègue. La prise en charge de ces soins primaires peut être réalisée par des personnes bénévoles formées et encadrées par des psychologues. Les aptitudes à l'écoute sont nécessaires chez les candidats écoutants à Télé-Accueil mais ne sont pas suffisantes. En effet, certaines attitudes vont favoriser l'expression chez l'appelant alors que d'autres peuvent l'entraver, engendrer une dépendance vis-à-vis du service. L'écoutant doit pouvoir entendre ce qui n'est pas dit explicitement, utiliser ses capacités d'empathie sans se laisser envahir par l'émotion de l'autre, accepter les limites de l'aide qu'il peut apporter. Les psychologues font partie de l'équipe d'encadrement et interviennent dans le recrutement et la sélection des écoutants volontaires : repérer les aptitudes à l'écoute du candidat mais aussi sa capacité à se remettre en question, à accueillir sans jugement ou a priori la parole de l'appelant, son authenticité et sa capacité à partager avec l'équipe les appels reçus et les vécus suscités par ceux-ci. Ils assurent également la formation à l'écoute préalable à l'entrée dans le service et la formation continue (supervision) de l'équipe d'écoutants. Les effets contre-transférentiels sont abordés en supervision : partager le ressenti de

¹ Télé-Accueil-Liège, centre d'écoute téléphonique, Belgique

² Widlöcher, D., Marie-Cardine, M., Braconnier, A., & Hanin, B. (2006). Choisir sa psychothérapie. Les écoles, les méthodes, les traitements. Evreux, France : Odile Jacob.

l'écouter pendant l'appel permet de réfléchir à comment il pourrait écouter mieux ou autrement et peut aider les collègues à être plus à l'aise dans d'autres appels de ce genre. Le groupe de supervision peut être aussi le lieu de dépôt des émotions et souffrances des écoutants, ce qui permet l'évacuation des déchets psychiques de l'écoute et la réélaboration des produits psychiques qu'on y traite. Enfin, le groupe permet la restitution à l'institution des pseudo secrets reçus lors des appels ce qui refonde la bonne distance et permet de sortir de l'emprise imaginaire d'une rencontre à deux. L'écoute n'appartient pas à l'écouter mais à l'institution.

Les psychologues réalisent également le suivi des appels reçus et peuvent amener une réflexion à partir d'un point de vue qui dépasse l'appel unique et le replacent dans le déroulement d'une chaîne d'appels pendant une prestation (par exemple, une nuit) ou dans une certaine chronicité quand il s'agit de réappellants.

Le rôle et la place des psychologues de Télé-Accueil les rapprochent du psychologue communautaire. Dans le réseau d'aide psycho-sociale, on constate un certain isolement de Télé-Accueil : dans quel secteur peut-il s'intégrer sans perdre ses spécificités (aide immédiate, anonyme et bénévole) ? Les apports de la psychologie communautaire peuvent aider à la construction d'une identité qui viendrait valider le travail des psychologues dans les postes de Télé-Accueil.

Enjeux actuels des centres d'écoute téléphonique

En mai 2009, nous avons rencontrés au Québec une dizaine de centres d'écoute fonctionnant à partir des mêmes principes que Télé-Accueil. Ce projet nous a permis de partager nos pratiques respectives et d'élaborer une réflexion commune autour des enjeux actuels auxquels les centres d'écoute téléphonique sont confrontés. Des deux côtés de l'océan, nous remarquons une évolution tant au niveau des appelants et des appels reçus qu'au niveau des bénévoles écoutants.

Au niveau des appels, ceux-ci se complexifient. De plus en plus d'appelants se trouvent très isolés et disposent de peu d'autres ressources autour d'eux. Ces personnes sont souvent malades psychiquement (1/3) et elles ont tendance à appeler régulièrement le service. Ces personnes n'ont pas nécessairement de demande de changement. Elles trouvent un accrochage au sein de ce type de service par téléphone où leur demande de non-changement est supportée. Cela pose la question de l'écoute et du suivi de ces appelants: comment rester à leur écoute en tenant compte de leur spécificité et quelles limites leur mettre en terme de fréquence, notamment afin de ne pas encourager une dépendance au service. Cela amène aussi la nécessité du renforcement du soutien à apporter aux bénévoles pour entendre ces situations et pour les aider à re-penser les psychismes auxquels ils sont confrontés. Au niveau des écoutants, du point de vue de *la motivation*, on constate la présence de motivations différentes. Auparavant, les bénévoles étaient plutôt des retraités ou des femmes au foyer qui disposaient d'un certain temps libre et qui souhaitaient le donner aux autres par solidarité. Aujourd'hui, on retrouve ce profil et ces valeurs chez les bénévoles mais on compte également, parmi les volontaires, des personnes qui cherchent une expérience de travail (jeunes diplômés dans le domaine social) ou une expérience de vie qui leur apporterait un contact humain qu'ils ne trouvent pas dans leur emploi, par exemple. Du point de vue de *l'engagement*, cela évolue également. Les personnes s'engagent plus volontiers mais parfois pour des périodes plus courtes. Parmi les raisons, on trouve la flexibilité actuelle (changement plus fréquent d'occupations,

de travail...) qui implique un certain turn over ou la fatigue suite au poids des appels. Nous constatons donc une ouverture du recrutement (auparavant plus interne) qui devient dès lors plus ostensible. Par exemple, nous sommes présents dans différents salons tels que le salon du volontariat à Liège. Cela pose la question de la sélection et des exigences que l'on peut avoir envers les écoutants. Ces exigences peuvent-elles rester les mêmes qu'avant ou doivent-elles être plus importantes? Les appels sont de plus en plus difficiles à écouter mais en même temps, cela reste un travail bénévole et l'on ne peut exiger des volontaires un recul et une formation identiques à ceux qu'on exigerait de travailleurs sociaux rémunérés...quoique.

Lors de la rencontre avec les centres d'écoute québécois, nous nous sommes rendus compte que le Québec était déjà confronté depuis quelques années à tous ces changements. Certains centres d'écoute ont déjà mis en place différentes pistes pour faire face à cette évolution. Nous en avons repris certaines afin d'affiner notre pratique. Au niveau du recrutement, ils ont mis au point des questionnaires écrits et oraux standardisés qui nous permettent de préparer nos entretiens avec les candidats et de mieux les situer par rapport à l'adéquation au bénévolat. Nous avons aussi discuté de la formation à donner aux écoutants. Tout comme nous, ils préconisent d'amener des éléments théoriques relatifs à la santé mentale dans la formation aux écoutants pour leur permettre de mieux entendre ces personnes. Cela peut les aider à comprendre et à mieux supporter le type de relation particulière que certains appelants mettent en place avec eux. Cet échange nous a aussi renforcés dans l'importance du soutien à apporter quotidiennement aux bénévoles de façon formelle (groupes de partage) ou informelle (discussions de couloir).

Là, nous avons pu apporter à nos collègues québécois notre expérience de pratiques de groupes d'échanges, ceux-ci n'étant pas encore mis en place chez eux.

Pour conclure, cette comparaison des pratiques québécoises et belges nous conforte dans l'utilité de cette écoute de 1ère ligne procurée par des bénévoles. En effet, selon l'OMS, les sociétés actuelles sont plus dures; on y trouve la présence de maladies mentales stables mais aussi celle de maladies mentales liées à la vie moderne (suite au harcèlement au travail, ...). En même temps, l'on constate que nous avons de moins en moins le temps d'écouter et que nous nous retrouvons de plus en plus enfermés dans des bulles virtuelles.

L'écoute à Télé-Accueil ramène donc du lien et de la solidarité entre individus. Elle répond à ce besoin vital de l'être humain d'être en relation avec quelqu'un. Aujourd'hui, malgré l'apologie des télé-communications et communications virtuelles, on voit que beaucoup de personnes ne peuvent combler facilement ce besoin. Or, on connaît l'importance du niveau préventif dans le domaine de la santé mentale; se sentir simplement entendu dans les difficultés de l'existence que l'on traverse afin de les supporter. Le fait que cette écoute soit offerte par des bénévoles permet aussi de garantir une certaine disponibilité de l'écoutant. En effet, avec l'expérience, on se rend compte qu'écouter ce public 8h/jour, 5j/7 ne serait pas possible pour un professionnel. La notion d'équipe derrière (environ 60 écoutants par poste d'écoute) est également importante et constitue un tiers important pour la dyade écoutant-appelant. Elle amène un recul nécessaire. Celui-ci serait peut être réduit dans le cas d'une écoute par des professionnels. Enfin, en formant les bénévoles écoutants à recevoir ces appels, en les aidant à se rapprocher des appelants pour les comprendre au mieux tout en gardant une juste distance, on agit également au niveau de la promotion des capacités psychosociales de la société en général.

Les prises de risques sexuels liés au VIH/Sida chez des homosexuels masculins : *Les motifs psychologiques du bareback*

par Pierre Bonny¹



Contexte de la recherche

Depuis 2000, L'Agence Nationale de Recherche sur le Sida et l'Institut de Veille Sanitaire observent une recrudescence des contaminations par le VIH/Sida chez les homosexuels masculins. Elle est la conséquence sur la même période d'une augmentation des rapports sexuels non protégés entre partenaires pour lesquels le risque de transmission du VIH est élevé (cas où l'un ou les deux partenaires sont séropositifs, ou cas où au moins l'un des deux partenaires ne connaît pas sa sérologie). Hormis quelques cas isolés, cette population « choisit » de ne pas mettre de préservatif malgré l'information dont elle dispose sur les risques de contamination encourus.

La question se pose de savoir pourquoi cette population ne se protège pas, alors qu'elle a connaissance des risques ?

Selon nos hypothèses, l'acte de non protection de l'individu est produit par une volonté divisée, de type : « Je sais que je devrais préserver ma santé, mais je ne le fais pas ». Il ne s'agit pas d'un choix strictement conscient, mais d'une logique de l'acte située au-delà d'une pensée utilitaire ou rationnelle. Dans un cadre de psychologie clinique, le paradigme explicatif proposé suppose donc l'inconscient, où ce qui divise l'individu et le conduit à ne pas vouloir pour lui son propre bien est le symptôme.

Le symptôme possède trois caractéristiques. Tout d'abord, il se présente sous forme d'une question problématique que se pose l'individu à lui-même (par exemple : « Pourquoi je ne me protège pas alors que je sais devoir le faire ? »). Il apparaît en ce sens que le symptôme est dicible : son repérage se fait à partir de la confiance que fait l'individu au chercheur sur ce qui le divise, sur ce qui lui pose question. Enfin, l'expression du symptôme est liée à la culture – il est façonné par le contexte social dans lequel vit l'individu.

Le premier objectif de la recherche consiste à spécifier, s'ils existent, les symptômes pouvant expliquer, au moins partiellement, les pratiques sexuelles non protégées pour cette population, que ces pratiques soient ponctuelles

¹ Recherche soutenue financièrement par Sidaction.
Laboratoire *Recherches en psychopathologie : nouveaux symptômes et lien social*,
EA 4050 – Université Rennes 2.

(cas dit du *relapse*) ou qu'elles relèvent d'un « choix » au long terme (cas dit du *bareback*). Le second objectif vise à comprendre la logique de ces symptômes, à savoir leurs origines psychiques et culturelles, et leurs modalités d'expression. A long terme, la recherche se propose d'améliorer le paradigme actuel de la prévention du sida pour les gays en France, en construisant des outils qui ne soient pas que d'ordre informatif et publicitaire.

Methodologie de la recherche

Selon le paradigme de cette recherche, tout individu est divisé et présente des symptômes. Il ne s'agit donc pas de « qualités » propres aux homosexuels. En outre, les symptômes repérés ne sont pas intrinsèques à l'homosexualité. Par ailleurs, il n'existe pas de rapport de cause à effet *direct* entre le symptôme et l'acte de non protection : ce n'est qu'après-coup, selon ce qu'en reconstitue l'individu dans sa parole, qu'un symptôme peut apparaître comme étant lié à un acte. De ce point de vue, repérer un symptôme ne permet pas de prédire un comportement. Il convient enfin de ne pas oublier que la population de répondants n'est pas strictement représentative des homosexuels en situation de prises de risques.

Les données de la recherche ont été obtenues auprès de 30 répondants, contactés à partir d'un site internet de rencontres *bareback* dévolues aux homosexuels masculins. Les entretiens ont été renouvelés avec chaque répondant. Ils ont été passés individuellement, anonymement, et se sont déroulés à AIDES Paris.

La méthode d'entretiens et d'analyse des résultats est orientée par le paradigme psychanalytique. La non directivité offre la possibilité aux répondants de passer d'explications rationnelles, strictement conscientes et non divisées à des explications plus profondes, ouvrant ainsi éventuellement sur un accès à l'inconscient, à la division subjective, et aux symptômes.

Sans qu'ils aient été présélectionnés sur ce critère, tous les répondants témoignent d'une division quant à leur « choix » du *bareback* : leurs prises de risques sont voulues, mais elles constituent pour eux un problème et leur apparaissent au moins en partie explicables par des symptômes. Le *bareback* est donc ici analysé au titre de prises de risques répétées relevant d'une *volonté divisée*.

Resultats de la recherche

Les motifs de cette pratique, d'ordre psychologique, ne sont donc pas strictement rationnels. Ils donnent lieu à six niveaux d'éclaircissement de la part des répondants – du plus « superficiel » au plus « profond », tous en interaction. Ces six niveaux sont :

1) Les répondants repèrent que leurs prises de risques interviennent lorsque leurs repères de vie disparaissent (ex: rupture amoureuse, perte d'un emploi, etc): le rapport sexuel permet de se détresser, évite de déprimer, et permet de « gérer » ses symptômes.

2) Le rapport sexuel à risque est vécu comme un suicide différé : l'individu a le sentiment de ne plus compter pour personne, et « joue » du danger pour se faire disparaître (c'est-à-dire manquer à l'autre).

3) Dans le contact physique, le corps est recherché pour son hyper virilité car elle produit un sentiment vivifiant, qu'empêche le port du préservatif (lequel entraîne de ce fait une perte de l'érection, reconfrontant le répondant à ses symptômes).

4) Ces symptômes (angoisse, dépression, sentiment de mortification) sont présentés par les répondants comme issus de leur vie infantile, et ont donc été expérimentés très précocément.

5) L'homosexualité est un facteur de fragilité supplémentaire : l'individu a intégré qu'étant homosexuel, il n'aura ni vie conjugale stable, ni filiation. La prise de risque permet de s'autodétruire pour éviter de finir seul, et la contamination est une façon de s'inscrire dans une lignée humaine, dans le circuit des échanges symboliques sociaux. En effet, dans le don et la réception du virus, une force de transmission symbolique est mise en jeu.

6) Enfin, la séro-positivité est vécue comme une identité valorisée, même si la perspective d'être malade est angoissante : le sida est un stigmat, mais il est sublimé et associé à l'esthétique des beaux corps véhiculée par l'imagerie gay, et le VIH est vécu comme un attribut viril (dans le prolongement du corps du partenaire). Le virus devient de ce fait un symbole de puissance et un objet paradoxalement rassurant. Ainsi, contracter le VIH devient une façon de localiser (et donc de traiter) ses symptômes, et la possibilité de contaminer donne un sentiment de force qui revalorise le statut de malade et masque la perspective de la déchéance physique.

Ainsi, en situation de fragilité psychique, des pratiques sexuelles ordaliques non protégées, pouvant conduire à la contraction du VIH, ont pour fonction de tempérer l'angoisse chez certains homosexuels masculins. Il apparaît en effet que des symptômes issus de la vie infantile, exacerbés par un contexte social stigmatisant (homophobe et « séropophobe ») et par des aléas de vie aggravant (ruptures amoureuses, etc.), conduisent à des prises de risques répétées. Le rapport (homo)sexuel non protégé met alors en jeux la désirabilité paradoxale du VIH dans un système de don / contre don

Valorisation de la recherche

Le repérage de cette logique vise à promouvoir de nouvelles stratégies de prévention qui prennent en compte le facteur inconscient et son expression culturelle. Il s'agira de proposer un nouvel outil de prévention, consistant à promouvoir la pratique des entretiens orientés par la psychologie clinique pour cette communauté, notamment sur des lieux stratégiques (associations, centres de dépistages, services hospitaliers des maladies sexuellement transmissibles).

L'outil consistera à proposer les types de postures dans l'entretien pouvant être adoptées, afin de discerner l'éventuelle présence de difficultés psychiques pour les personnes ayant des pratiques à risques. Seront également présentés les types d'efficacité thérapeutique correspondant aux symptômes relevés et qui peuvent être mis en œuvre dans les entretiens.

Ce travail de thèse montre l'utilité de faire de la pratique en psychologie une éthique du lien social, tant au niveau de la recherche fondamentale que de ses applications pour le domaine de la santé communautaire.

L'advocacy, une approche de la santé mentale et des pratiques de participation et d'empowerment des usagers

par **Martine Dutoît**¹



Advocacy France est une association d'usagers en Santé Mentale, constituée très largement d'usagers ayant une expérience directe en psychiatrie, de familles et de personnes engagées à divers titres à leur côté, créée en 1996. Notre devise « le jour où ceux qui ont perdu l'habitude de parler seront entendus par ceux qui ont coutume de ne pas écouter de grandes choses pourront arriver ! »

Nos instances sont constituées par une majorité d'usagers de la psychiatrie et des familles. La question de la santé mentale ouvre pour nous sur les questions de prévention, de droits et d'accès à la citoyenneté bien au-delà du champ médical. La santé mentale, vain mot tant elle se confond encore avec la psychiatrie, demande d'autres pratiques, d'autres projets où le travail de co-élaboration entre les professionnels, du social autant que du sanitaire, et les usagers - citoyens, est à inventer !

C'est notre engagement quotidien notamment dans les Espaces Conviviaux Citoyens et les interventions de la SADER (soutien, aide au recours advocacy).

L'advocacy est, dans le champ de la santé mentale, un concept et des pratiques de soutien de la parole, d'aide à l'expression – des besoins, du point de vue – par l'introduction d'un tiers, advocate, des personnes stigmatisées du fait de leur appartenance à une catégorie spécifique d'usagers, de patients et/ou de personnes en souffrance psychique ou en situation de handicap.

Il s'agit d'investir la dénomination d'usagers dans une dimension collective où s'éprouve la prise ou reprise de pouvoir sur sa vie, l'*empowerment* et de donner un contenu et une réalité à cet acteur collectif qui devient co-acteur de santé mentale.

Cet acteur collectif, des usagers de la santé mentale, quel est-il ? En effet, si j'ose dire, on ne naît pas usager on le devient, mieux on le revendique et on se forme à tenir ce rôle dans une société qui méconnaît les effets destructeurs de son mode d'organisation sociale : précarité, stress, compétition, isolement, culte de la performance, de la beauté, injonction d'être autonome, méfiance dans l'engagement mutuel, individu libre, responsable et consommateur, autant d'injonctions paradoxales redoublant celles plus classiques des familles ! Nous sommes à la fois consommateur et citoyen². Le consommateur réagit passivement à une offre de biens ou de service en fonction d'un choix individuel, c'est au citoyen qu'il revient de réagir activement pour définir, en concertation avec d'autres citoyens, les finalités de la société qu'il souhaite voir advenir et les effets néfastes qu'il veut contrôler dans une société productrice de biens et de services. Démocratie participative, appelée de nos

¹ Directrice d'Advocacy France

² Marc JACQUEMIN *La raison névrotique* – ED LABOR/espace de libertés Belgique 2004

vœux ! C'est une chose que de s'exprimer comme consommateur, une autre chose que d'être citoyen en élaborant des finalités. Cette dimension collective se « travaille » dans les Espaces Conviviaux Citoyens et nous permet de revisiter le couple autonomie/dépendance en revendiquant un compagnonnage, une entraide, un étayage à géométrie variable, où s'invente l'interdépendance. « L'individu autonome n'est pas celui qui ne dépend de personne (cela c'est typiquement l'exclu) mais celui qui peut jouer sur la multitude des dépendances pour construire son propre espace de liberté personnelle ». L'individu autonome : « celui qui multiplie et diversifie ses liens de façon à dépendre de tous sans dépendre crucialement d'aucun »¹.

Pourtant le collectif est toujours menacé de sclérose et en passe d'être rattrapé par le dispositif qui est la manière dont se gère le social dans la société actuelle. Ainsi créée en 2000, les Espaces Conviviaux Citoyens était agréés Groupe d'Entraide Mutuelle en 2005. Nous étions ravis d'avoir servi de modèle à cette innovation de l'usager dans la cité. Mais dès 2006, dans une démarche d'autoévaluation des Espaces Conviviaux Citoyens existants, nous redoutions la main mise institutionnelle (via les associations gestionnaires et services), créant de toute pièce des GEM avant même que se constitue un groupe d'usagers. De plus, ces espaces pouvaient vite se refermer en nouveau ghettos dans la ville. C'est pourquoi s'est imposée peu à peu la nécessité de faire alliance avec des partenaires œuvrant pour la citoyenneté que ce soit des personnes mobilisées autour d'autres problématiques d'exclusion (sans domicile, violences faites aux femmes, handicap, misère, migrations etc.) dans des approches d'économie solidaire, de genre, de santé communautaire. Des principes sont ainsi peu à peu affirmés comme essentiels à tous projets coopératifs : le principe maïeutique favorisant l'auto-production des savoirs de l'expérience, la valorisation des stratégies gagnantes pour lutter contre la discrimination, l'exclusion. Le principe de coopération produisant une intelligence collective de transformation sociale. Les pratiques inspirées par ses principes sont alors des pratiques de démocratie participative vivantes à travers une réunion hebdomadaire où se prennent toutes les décisions concernant le collectif, allant du vivre-ensemble aux activités les plus quotidiennes et des pratiques d'ouverture aux événements pouvant donner un contenu concret à une mobilisation coopérative : semaine de l'égalité, de la solidarité, manifestations inter-associatives etc.

A Paris par exemple, ADVOCACY s'est développé à partir d'une collaboration avec l'association ZIRA (Institut International de Recherche-Action) et un collectif d'associations Urbanités pour déconstruire les étiquettes et lutter contre la discrimination avec l'objectif de construire des outils de participation citoyenne. C'est ainsi que l'Espace Convivial Citoyen a transformé son projet en Lieu de Ressources en Inventions Sociales et Citoyennes (RISC).

L'ESPACE CONVIVIAL CITOYEN ADVOCACY est un lieu de Ressources en Invention Sociales et Citoyennes (RISC). Les personnes sont invitées à rejoindre le ou les groupes pour lesquels elles se sentent en capacité d'offrir un savoir être ou un savoir faire ou tout simplement un désir de participer à la réflexion et aux activités du groupe. Se sont constitués 4 groupes projets : la banque du RISC qui gère le Bar Associatif et la vie du lieu ; le groupe Culture et Loisirs qui recherche les loisirs et manifestations culturelles gratuites dans la ville et/ou propose des sorties, un ciné club, des animations dans le lieu (jeux ...) ; le groupe Expressions créatives et citoyennes qui

¹ idem p 84

recherche et expérimente des méthodes d'animation favorisant l'expression libre et démocratique – discussion philosophique, théâtre - forum, happening, théâtre de rue ; le groupe Bien être propose des moments de relaxation, d'antigymnastique, d'expression corporelle (Initiation au Yoga, massage...). La semaine s'organise tous les lundis soir à 17 heures. Chacun s'engage à participer en respectant les règles de la convivialité et de la participation citoyenne. L'adhésion se réalise par un engagement écrit. Les deux événements majeurs dans l'année sont ouverts sur la ville et interassociatifs : *Toi et Moi en Fêtes* (28/29 décembre) Mairie du XIX ARRDT et *L'insolite de la Place des Fêtes* (1 mois en Mai/ Juin sur la place publique).

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Socio-psychological analysis of the trips abroad to help to restore the health of Belarusian children in the period of post Chernobyl

by **Halina Hatal'skaya**¹



The Chernobyl disaster led to a change in the psychological state of most of the people of Belarus who have suffered the accident. The main factors contributing to this change are insufficient knowledge of radiation effects, contradictory information on the situation of environmental radioactivity and its consequences, the persistence of fear for their health, welfare and well-being of their relatives, the sudden change in life stereotypes (forcible transfer, lost of the habits, the change of the location and of the type of work), the need to observe constantly safety measures and the need for regular monitoring.

Numerous researches confirm that among the population who have suffered the accident there is reduction of the level of psychical adaptation, diffidence, unstable self-esteem and pessimistic estimation of the future. Almost two thirds of the examined population feel the lost of personal safety, which is the evidence of the development of socio-radioecological stress. Its effects have cumulative nature, and its range is always widening. In 1987 the 48% of examined people suffered from socio-radioecological stress, in 1991 - 54%, in 1995 - y 74%.

All the factors mentioned above influence children, resident on the contaminated area, which in its turn makes the problem of the trips abroad for the improvement of health conditions actual. Many European countries were willing to help to organize them. Since 90s annually about 50 thousand children, resident in the area which was affected by Chernobyl, have been to 26 countries for the improvement of health conditions. The majority went to: Italy (more than 30 thousand), Germany (10, 9 thousands), Spain (3,4 thousands), Great Britain (2,7 thousands), Irland (2,7 thousands), Belgium (2,6 thousands), the USA (1,3 thousand.), Austria (1 thousand.) and to other countries.

In the existing situation it is important to understand the significance of the trips and the improvement of health conditions in the clean ecological Belarusian areas, in the foreign countries. In the post Chernobyl period socio-economical situation of Belarus changed in such a way that trips abroad for 12-14 years were possible only due to various foreign volunteer organizations. In our turn we can assume that trips abroad themselves (very often these children hadn't been even outside their village) to another socio-economical and socio-cultural environment can have different impact on the psyche, the consciousness, the development of a child's personality. For example, on one hand, they can have positive influence on the child's cultural development, the widening of child's horizons, positive family experience, material assistance of the host family, the development of tolerance ecc. On the other hand – the development of parasitical position, non realistic point of view about a better life

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“there”, outside one’s country, which can affect the formation of patriotic feelings and character traits. In this connection the aim of our research is socio-psychological analysis of the experience of health recovery abroad, its retrospective estimation. The urgency of this problem is increasingly growing since there are no research in the matter.

The following methods of research were used: survey method; the method of expert evaluation; the analysis of work with a focus-group; the statistical methods of the elaboration of data; interpretation methods.

The sample research encompassed boys and girls who went abroad for the recovery of health conditions in their childhood and adolescence one or more times. 47% of the respondents went abroad for the improvement of their health conditions 1-2 times (a quarter of them – only 1 time); 3-4 times – 41%; five and more times – 34%.

The research was conducted on a sample of 258 young people. 77% actually are university students, 23% are students of vocational schools, colleges, 27 % are village young people, 73 % are from big cities. 13% of the sample are attendants. The dominating age of the sample is 19 years.

In the opinion of 94% of the respondents, Chernobyl worsened life conditions and led to various health problems. A quarter of the respondents have serious health problems connected with Chernobyl, 41% mark that their parents suffer from serious health problems, 33% - their relatives suffer, 21% - friends. 51% of young people say that they personally know people who were taken ill after Chernobyl disaster. 71% of the respondents think that foodstuff in one or another way is contaminated by radioactive nuclides.

More than a half of the respondents (61%) are sure that the state does its better to minimize the consequences of Chernobyl disaster and to protect the health of the population, but 39% believe that the measures taken are non enough.

94% of the respondents evaluate their health recovery experience as positive. Analysing it at present they mark that this experience was «a window» to another culture: it contributed to the emergence of interest to another culture, mentality of another nation; reinforcement of national identification due to understanding the differences in the mentality; widening of points of view about interaction among children, between children and adults; emergence of new ideas about family; widening of language opportunities; defining of a higher living standard, aspiration for intensive self-development. Young people consider very important a higher level of the presence of necessary life facilities which they were able to discover due to the trips, it favored the emergence of personal programme of the improvement of life conditions.

The majority of the respondents list among the positive effects of sanitary trips the improvement of health conditions due to full-value nutrition, active way of life, trips to the seaside and mountains, hearty welcome of the host family. Describing the relations between children in families, camps, schools, the majority highlights friendliness, openness, ease in making friends with foreign children. On the second day of the sojourn in another country, the respondent felt that they were accepted and people were friendly to them. It was very pleasant that nobody emphasized the differences between cultures, languages, ages.

The respondents noticed that there were more liberal relationships between adults and children («minor distance», «more permits in comparison with prohibition»). Young people remember that they were considered family members or equal members of children’s group. Sometimes they noticed that in the host family there was

more care toward them, than to proper children. Some respondents believe that family relations in the host family were better and more positive than in their own families (here we speak about young people from adverse families). According to their estimation, they found some guiding lines in the formation of a proper family on the base of mutual understanding, assistance, care.

Only 6% of the respondents highlight that their experience in one way or another was negative because of:

- exaggerated surveillance of the host family;
- coldness and haughtiness toward Belarusian and Russian people (Poland);
- perception of «Chernobyl children» during the first years of sanitary trips as people from another dangerous dimension» (Germany);
- jealousy of the children in the host family, in particular when they were younger or of the same age (Italy, Belgium);
- different attitude toward proper children and invited children, the feeling that “we have stayed too long and have to go” (Germany).

68% of the students who went abroad numerous times assume that these trips contributed to the development of their patriotic feelings. They are sure that more times one goes outside the country (each of them has been abroad more than 4 times), more possibilities one has to understand the advantages and disadvantages of living there, difficulties, that people face, and to evaluate objectively the advantages of living in the native land. «These trips made us think that we don't pay much attention and don't appreciate the beauty of our nature and other things we have»,- say young people. 16% highlight that their patriotic feelings didn't change, 16% of the respondents still want to go abroad to study and to work. Many respondents would like to study or participate in some professional training for 3 months or more.

Analyzing the factors contributing to the desire of working and living in the native land, the respondents draw attention to:

- A great value of close relationship in the family, unwillingness to lose them;
- A great value of friendly relationship, which has a higher level of intimacy;
- Well-being of proper family, which leads to high life quality in the native land;
- understanding of perspectives of self realization in the native land, the possibility of earning in a worthy manner;
- belief in positive perspectives of the native land;
- the understanding of the difference between mentalities;
- the attitude towards emigrants, as to people of the second sort;
- the danger of becoming a slave there (abroad).

A lot of respondent remember that during their sanitary trips they were impressed by respectful attitude toward them, attention in English host families, emotional and hearty welcome in Italy, France and Czech Republic. Many respondent who have been to Italy highlight the friendly close relationship with the host family which has led to friendship between Italian and Belarusian families. Some respondents assume that it was their host family to make them think about university education.

In the opinion of the respondents, who want to go abroad to work and live, they are attracted by: the desire to make an attempt of self realization in another country, conviction that a confident person can realize himself in any country; the opportunity to improve economical conditions; the improvement of ecological conditions and ecc. Socio-psychological analysis of the influence of sanitary trips abroad in the period of post Chernobyl permits to make the following conclusions.

Sanitary trips abroad organized since 90s by volunteer organizations from various countries, got high retrospective evaluation, a range of factors contribute to it (a good organization, collaboration between Belarusian and host parties, high-quality preparedness of host party, attendants, friendliness and hospitality of the host party, positive psychological climate). These data are confirmed by the expert evaluation, which testifies to high reliability of the research results.

The experience contributed in the opinion of young people:

- the improvement of health conditions due to climate, nutrition, relationships;
- self development due to learning a new culture, widening of the horizons, assumption of important decisions;
- national identification. The majority of young people (56%), due to analyzing their experience connected with sanitary trips, begin to realize better the advantages of living in the native land, emphasizing emotional life aspects.

The importance of such a positive experience among young people at present increases in the connection with intensification of migration process, development of political, economic, scientific relations between countries, which leads to cultural and educational exchange, and to organization of conjoint , организацию совместных enterprises. Such a positive experience contributes to optimal adaptation in the conditions of another culture, and determines effective cultural interaction.

Psycho-physical risk and rasch model application

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Floriana Romano⁴ & **Valentina Vaccaro²**



Background

PRAI (Physical Risk Assessment Inventory) is a questionnaire used to measure the psychophysical risk perception; it was developed by "Danger Assessment Questionnaire", and it's composed of 27 items with 7-point Likert (0 = "no physical risk", 6 = "extreme physical risk"). It's composed by two scales: "Health Risk" and "Sport Risk". The questionnaire has been administered to a sample of 551 adolescents attending the first and fifth year of high school of Palermo. A factor analysis has been conducted to investigate latent structure of PRAI, in order to identify responses' latent dimensions. Factor analysis has been conducted separately for males and females and it produced two scales ("Health Risk" and "Sport Risk"), formed respectively by 11 and 15-item, with a quite similar composition. It's possible to consider two disjoint dimensions of risk perception, regardless of gender. To achieve our goals we used the Rasch model, depending on the category of multiple-choice questions (seven points) in the questionnaire. The RM can be drawn as an indication of the perceived risk by the subjects and the risk associated with a particular activity and it permits to place two measures on a common quantitative scale obtaining two sets of estimates: one of subjects PLP and one other of ILP items.

Factor analysis revealed the multidimensionality of the risk perception by the presence of two subscales: Health and Sport Risk. The main objective of this study was to achieve one-dimensional measure of the individual subscales.

Aims

To verify the one-dimensionality of the scales M and F.

To verify if male and female are different about risk perception: as suggested by the literature, women have levels of perceived risk higher than men, while those with higher levels of education and higher incomes tend to minimize the risk activities.

To verify if any person factor (PF) affects risk perception (DIF).

Data analysis and Results

To achieve our objectives several levels of analysis have been used:

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Individual item fit – Item-trait interaction test of fit (test X^2): to verify the one-dimensionality of the items. Through an iterative procedure it was possible to remove all the items that showed a poor fit to the model. The results show that the Item Trait Interaction Test is not significant as a measure of the uni-dimensionality of the scale, both in the subscale Sport Risk and Health Risk. The PSI (Person Separation Index), as a measure of the scale's reliability, shows rather high values (0,78 FH, 0,77 MH; 0,82 FS; 0,79 MS) in the subscale Health Risk. The PLP (Person Location Parameter), as a measure of the perceived risk, shows higher values in the females, getting even higher levels of perceived risk (1.342 FH, 0.660 MH; 0.161 FS, 0.004 MS). So in relation to the first objective we get a different composition of the scale for the group of males and the female.

Individual person fit – Differential item functioning (DIF) allows to inquire if the response at each item is influenced by the subjects' variables (type of institution and level of education). DIF analysis showed a significant difference in perceived risk about some items (tab.1).

	Tipology	Class
FH	p15*, p16*	P2**, p13**
FS	p1**, p6**	p14*
MH		P2***, p9**, p10*, p26***
MS	P1**, p6*, p14*, p21**	P6**, p17**

* 0,05, ** 0,01, *** 0,001

Tab.1 - Differential item functioning analysis.

So the probability of the individual response to a particular item varies depending on the values of the individuals' characteristics (Person factor).

We found high levels of correlation (Tab.2) between the HR and SR subscales; this result shows that the activities depend on the risk associated with, in a similar way by males and females.

Conclusions

Overall, we can draw the following conclusions:

Males and females, in the scale's one-dimensional form, have a different way to "perceive the risk." PLP. MR suggests that PRAI is composed by two scales about gender.

For some activities, the type of institution and level of education affect the risk (Person factor).

Correlation between subscales shows that the process of risk perception/attribution is similar in both sexes, with a different intensity.

		Item	ILP
		↓ H .965	↓ S .914
PLP	M	→ .313	
Subjects	F	→ .041	

Tab.2 : Correlations

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The biopsychosocial impact of surgical reconstruction and social support on breast cancer operated woman

by **Stefano Tartaglia¹ & Omar Fassio¹**



Breast cancer is responsible of about 16% of mortality for tumor in women and it is the third commonest cause of death in females in all of the European Union countries: the leading cause of death in females under 65 years. Considering these data, mastectomy is the most frequently used treatment for breast cancer, and it is effective although invasive and could have an important impact on psychological wellbeing (Burke & Kissane, 1998). In order to lower negative psychological effects related to mastectomy, more attention has been turned to patients: first the real necessity of mastectomy has been investigated in favour of breast conservation (Moyer, 1997), then patients have been actively involved in the decision of a future (Ananian, et al., 2004) rather than prompt breast reconstruction (Elder, et al., 2005). In the last years breast reconstruction have been associated to psychological and social support to patients (Roth, et al., 2005).

Community and health psychology maintain the importance of social support to cope with traumatic events like serious illness (Coughlin, 2008). Considering this point researches agree that factors involved in wellbeing promotion are family support (Kudel, et al., 2008), personal aspects such as self-efficacy, coping strategies, resilience, every day experience subjective quality of life (Folkman & Greer, 2000), social support, and community integration (Clayton et al., 2005) and relation aspects in the interaction with physicians and health operators (Arora, 2003).

Objectives

Present study aimed to compare the effects of breast reconstruction and perceived social support on psychological wellbeing of women that underwent a surgical intervention to remove breast cancer. We operationalized wellbeing in terms of Depression and Satisfaction with life. We decided to make this comparison in two different time period after the cancer removal, the short and long-term, that means in a high life risk period and when the emergency due to serious illness decreases.

We hypothesized that:

both breast reconstruction and perceived social support exercise a negative effect on Depression in short and long term;

both breast reconstruction and perceived social support exercise a positive effect on Satisfaction with life in short and long term;

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the effect of breast reconstruction and perceived social support on Depression and Satisfaction with life decrease in the long-term.

Method

The study was carried out on a sample of 120 breast cancer operated women (aged 32-60 years) recruited in a public ambulatory of Sassari (Italy) and among patients of Plastic Surgery Clinic of University of Sassari.

The average age of participants was 47.9 years ($SD = 6.8$). Of the participants, 20.8% were college graduates, 38.3% high-school graduates, and 40.8% had a lower educational level. Time from cancer removal ranged from less than 1 to 12 years (Mean = 4.2; S.D. = 3.1). 57 women (47.5%) underwent to plastic breast reconstruction whereas 63 (52.5%) did not. The time from plastic reconstruction ranged from less than 1 to 10 years (Mean = 2.8 ; S.D. = 2.5).

Data were gathered by means of a questionnaire including:

Beck Depression Inventory short form (BDI-sf; Beck & Steer, 1993) composed by 13 forced choice items (Cronbach's $\alpha = .88$);

Satisfaction with Life Scale (Diener, et al., 1985) composed by 5 items rated on a 7-point Likert-type scale ($\alpha = .91$);

Multidimensional Scale of Perceived Social Support (MSPSS; Zimet, et al., 1988) composed by three subscales each one composed by 4 items rated on a 7-point Likert-type scale; the first one measures perceived support from Family ($\alpha = .96$) the second from Friends ($\alpha = .94$) and the third one from a Significant Other ($\alpha = .98$).

To test the Hypothesis we set two linear regression models, one predicting Depression and the other predicting Satisfaction with life. We tested the two models on two different groups. The *short-term* group composed by women that suffered cancer in the last 3 years ($N = 58$) and the *long-term* group composed by women for which the illness experience is older that 3 years ($N = 62$).

Results

Depression score was regressed onto Plastic reconstruction (No = 0; Yes = 1) and MSPSS scores. This model was tested separately on the *short-term* group and the *long-term* group. Both model predicted a significant amount of variance of Depression score but the R^2 of the *long-term* group model was lower. In *short-term* group only perceived support from Special Other ($\beta = -.65$) exercised a significant influence. In the *long-term* group perceived support from Special Other resulted once more a significant predictor of Depression ($\beta = -.37$) but also perceived support from Friend influenced negatively Depression ($\beta = -.36$).

Similar models were tested on the two groups to predict Satisfaction with life. Also in this case the amount of variance explained was significant and was smaller in the *long-term* group. In *short-term* group almost all the predictors exercised a significant influence on Satisfaction with life. The stronger influence was that of perceived support from Family ($\beta = .41$) followed by perceived support from Special Other ($\beta = .36$) and Plastic reconstruction ($\beta = .31$). Perceived support from Friends did not exercised influence. In the *long-term* group results were similar to the ones of the prediction model of Depression. Perceived support from Special Other exercised a significant

influence ($\beta=.32$) and also perceived support from Friend did it ($\beta=.30$). Other predictors did not exercised any influence. Table 1 presents the summary of the four regression models.

Model	Significant predictors	β
Dependent variable: Depression <i>Short-term</i> group R^2 adj. = .52 $p < .001$	Perceived support from Special Other	-.65**
Dependent variable: Depression <i>Long-term</i> group R^2 adj. = .39 $p < .001$	Perceived support from Friends Perceived support from Special Other	-.36* -.37*
Dependent variable: Satisfaction with life <i>Short-term</i> group R^2 adj. = .45 $p < .001$	Plastic Reconstruction Perceived support from Family Perceived support from Special Other	.31** .41** .36**
Dependent variable: Satisfaction with life <i>Long-term</i> group R^2 adj. = .36 $p < .001$	Perceived support from Friends Perceived support from Special Other	.30* .32*

Note : ** $p < .01$ * $p < .05$

Table 1. Multiple regression analysis: summary of the models.

Conclusions

Breast surgical reconstruction has positive effects on Satisfaction with life of women that suffered cancer in the last 3 years whereas does not have any effect on women for which the illness experience is older than 3 years. In the short-term the reconstruction makes up for the mutilation lowering the psychological negative effects of the changes in body image. In the long-term we hypothesize that a cognitive reorganization and the habit to the new body image make irrelevant the reconstruction. Social support appears to be important for psychological wellbeing of breast cancer patients both in the first period after the illness and in the long period. Close relations (support from Special Other) are particularly important having positive effects on both Depression and Satisfaction with life in the short and long-term period. Friends' support does not influence psychological wellbeing when the acute phase of the illness (and the emergency) is recent whereas acquires importance in time.

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