

Opening Pandora's Box: Challenges to Collaborative Practices from Contexts of Suffering by Violence

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Abstract

This article reveals the systematization of the experience of psychosocial care to human system members of a civil society organization in Colombia (ASFAMIPAZ) who are active in the restitution of their rights as primary and secondary victims of political kidnapping. It clearly demonstrates the strategies of systematization, psychosocial accompaniment and evaluation by the clients (members of the public force and their families who were kidnapped and liberated by the FARC guerrillas), which were designed in the attention process. It gives a detailed description of the strategy ('model') resulting from an open-ended exploratory process characterized by the metaphor 'opening Pandora's box' that articulates both training and consulting strategies and therapeutic intervention in collective, inter-generational subsystem interventions. The accompanying proposal was based on previous experiences that are mentioned. The process involved the participation of a therapist and a social psychologist, and also the monitoring component. It indicates lessons learned in the psychosocial care process.

Key Words: *psychosocial attention, victims, armed conflicts, integral reparations, collaborative procedures/practices, action without damage*

Precedents and General Context

This act of writing 'from the point of view of practical knowledge' is a very special experience for me, since in my long career I have been mainly on the academic side. This experience, however, has been nuanced by the fact that in my research group we have privileged the Participative Action Research (IAP in Spanish) in processes of assistance to different populations affected by the internal armed conflict in Colombia, South America, where I live. Populations such as minor ex-combatants, women victims of intra-family and sexual violence, local contexts affected by armed confrontation, as well as young people affected by forced displacement have been part of the populations with which we have worked over the last fifteen years.

For the reader to get an idea of that context, "since May 2011 the Colombian government has registered more than 3.7 million people who have suffered internal displacement in the country¹. Agencies such as the United Nations High Commissioner for Refugees (UNHCR) considers that in Colombia since the mid-1980s, five million people have been displaced (UNHCR, 2013).

In Colombia, more than 51,000 people have "disappeared" in the last decades by different armed actors (including state forces). These figures are part of a recent report, published in Washington, that uses as a source the data of the Attorney General's Office and the National

Search Committee created in 2007 by the Congress of the Republic to clarify this problem (Haugaard & Nicholls, 2013).

On its own, the National Center for Historical Memory, in partnership with Cifras & Conceptos, created the most solid database on kidnapping in Colombia, which collects information for 40 years between 1970 and 2010 (CNMH, 2013). It is worth noting that the study compiles 1,302,337 data and documents 39,058 kidnapping victims in this terrifying panorama of kidnapping. It points to the FARC as alleged perpetrator in 33% of cases and confirmed perpetrator in 37% of them. Eighty-four percent of the cases were performed for extortive purposes; 59% of them were held in captivity between one and thirty days. Finally, 60% of the victims were released after payment; 20% were rescued; 8% died in captivity; 7% were released without payment; and, 2% escaped their captors.

Four years ago, a colleague and I created the Latin American Center for the Development of Collaborative Culture - QUIRA dedicating our energies to strengthen the post-conflict culture in Colombia². We expected to contribute to the achievement of a stable peace through the development of alternatives for mediation and the dissolution of conflicts both in institutional contexts and of urban families.

In the development of QUIRA as an organization, a new moment came from a contract for psychosocial support (attention and intervention with a participative meaning of members of the public force (police and soldiers) kidnapped by the FARC guerrillas, and released after even thirteen years of captivity. Such attention was addressed from a systemic perspective. It was oriented to families, even extended ones, because in many cases parents, whose children did not return, became the caregivers of orphaned grandchildren, or of the members of the armed forces who returned with deep traces of mistreatment as a result of captivity.

The previously mentioned contract was requested by ASFAMIPAZ³ a civil society organization dedicated to struggling for the release of family members (police and soldiers) kidnapped. At the time of the initiation of the contract all the associates in that organization had been released or, unfortunately, had died or had been executed in captivity. The relatives of those who came back alive from that experience had not received any form of psychosocial care, since the kidnapping of members of the armed forces has been considered mainly a consequence of their professional activity and Colombia does not have a solid veteran program yet. On the other hand, the attention of the members of the forces who had been liberated was varied, poorly documented, mainly approached psychiatrically, and centered in medicalization.

The fact that ASFAMIPAZ proposed, as an institutional priority, the support and emotional recovery of the members of the armed forces who were kidnapped and released, as well as the associated human systems, within a framework of comprehensive rights reparation is very interesting and remarkable.

These pages will present the proposal for psychosocial care, developed and systematized by QUIRA, which is supported by the experience accumulated in different processes of attention to victims that we have carried out prior to the experience that is reported in these pages, between 2009 and 2014: a) sexual offense with a sentence of reparation by the Inter-American Court of Human Rights, b) recruitment of minors from illegal armed groups.⁴

Based on the above experience, this document presents the systematization of the QUIRA proposal for the care of victims of political and/or intra-family violence, recognizing that there are communicating vessels between these different types (Sluzki, 1994). In this text, we particularly focus on the attention to the victims of political kidnapping, since it is the most recent experience due to the greater number of people served, and the fact that it is a group of both primary and secondary victims⁵, which allowed us to consolidate a multilevel care model. Finally, also taking into consideration that a qualitative evaluation of the intervention was advanced in a systematic way in this case.

This article will focus on the journey that started with this contract with ASFAMIPAZ. It will try to account for the high, middle and low points of this journey as a way of explaining the process and of committing ourselves to the rigor of systematization. This has meant that the present text was re-written throughout the process taking into consideration: a) emerging questions; b) the need to share with the readers the conceptual information process given to such issues; and, c) the importance of providing a record pertaining the two previous points of the process, at some point in the itinerary.

In order to construct the materials of the cases with which to transform the advanced practice into communicable knowledge, my colleague and I decided to implement a differentiated strategy of taking notes: while she took notes on the contents of the conversations, I took notes on the process. I focused, particularly, on questions during collective and individual interventions. Based on these notes, we built private and collective documents for each case.

Since it is impossible to account for all the cases served, those who offered different perspectives were selected according to the role of the participant in relation to the released actor (mother, wife, partner, sister). This first selection emphasizes the content. Then we also highlighted the selection of both successful and unsuccessful cases.

Conversational-collaborative mechanism. Our collaborative strategy can be described as a complex mechanism; in fact, as an overlap in which the guidelines for collaboration, the standards of good practices in psychosocial care and the keys to the postmodern and narrative therapeutic proposals are woven.

Guidelines for collaboration. In the first place, it is worth to describe the different populations cared for by our different projects: in one of our projects we attended a couple and their extended family (25 people from three generations); in another, the institutionalized youths in nine Specialized Care Centers (CAES-Centro de Atención Especializada), each of which hosted a group of 20 children who lived in a 'home' for approximately two years. It is the first stage of the process of reintegration into society civil. We have 109 field journals from this last process that collect ethnography of several years in the nine CAES, and eight life histories (Estrada, Toro, Diazgranados & Tejada, 2010, Estrada, González, Diazgranados & Toro, 2006). Finally, there is the 'ASFAMIPAZ Family' that integrated 10 family subsystems and approximately 50 people from three generations.

All these projects were designed and implemented within the framework of collaborative principles that amplified the listening of the needs and demands of our clients, and generated spaces for the synergies of different kinds of knowledge, and among the members of the

professional teams that we organized (We articulated by subsystems theater, performance, relaxation, visualizations and meditation to the collective therapeutic practices.).

We followed London, St. George & Wulff (2009), which we interpret in the sense of creating favorable contexts for recognition and collective construction:

Collaboration is built on possibilities, creativity and innovation in conversation and relationship. Through collaboration, points of view can emerge subject to combination and coincidence. Family members, students and colleagues "who put their heads together" have reported to us that they created new ideas, ideas that would not have evolved if people had operated as individuals, and that such brainstorming generated innovative projects and learning communities that encouraged, in turn, transformative learning (p.1).

We resonate the principles of equity, cohort creation, establishment of personal and professional connections and intersections, hospitality and adjustment to feedback proposed by London et al (2009).

Our interventions have been characterized by an emphasis on providing for hospitality by paying special attention to our clients' well-being; that is, providing for: friendly and appropriate spaces for collective interventions; fresh, natural and healthy snacks and healthy lunches; a coffee and tea station; first aid conditions; an affectionate and close welcome; and, their special requirements, among other things

In the same sense, we decided to privilege the voice, the demand, the needs of the other, rather than following a standard protocol; but also, rather than the politically correct reading of the experience of our consultants.

Quality Standards

In QUIRA we have appropriated and recreated the principles related to harmless action that have been established with Colombia as an ethical framework of attention for the psychosocial care of victims of different forms of violence, in the context of the armed conflict, which can be formulated in the following terms:

- To have a general structure of the process although flexible and open to change and based on the needs indicated by the clients in the conversational process. It has been very important to have an initial itinerary.
- To have the preparation and training necessary for the active listening and the technical conduction of the interview.
- To have distinct approaches for different populations: women, men, boys, girls, young people, different ethnicities, and different educational levels, among others.
- To conduct intervention sessions with therapist and co-therapist in order to guarantee greater quality to the processes and to give recognition to our clients' rights.
- To have supervision processes, reflective teams and participatory evaluation of interventions that contribute to the ethical protection of clients and the attention of caregivers.
- To articulate actions in order to validate and/or promote the right of victims to truth, justice, reparation and guarantee of non-repetition.⁶
- To ethically corroborate the emotional and therapeutic closure of the processes in the conversations with the victims.

- To provide the victims with reliable information on the legal process of reparation in a way that it contributes effectively to the reduction of uncertainty and the clarification of the routes of attention of their processes.
- To establish adequate means for healing (collective and symbolic menders).
- To value the transformations reported by the victims.

Articulation of the Keys for Postmodern and Narrative Therapies

We appropriate a corpus of resources and presuppositions, both conceptual and technical, for the psychosocial care of psychological suffering, from the narrative as well as the postmodern perspective (White, 1997, 2006, Sluzki, 2002) and the network approach (Dabas, 1998, 1997) that:

- Engages people's resources and their social networks for the promotion of resilience (Cyrułnik, 2001, 2003, 2005; Barudy & Marquebreucq, 2006).
- Proposes for the Colombian case, for the attention of the victims in a post-conflict scenario, the adoption of brief solution-focused constructional therapies proved to be a very interesting alternative (Anderson & Gehart 2007; Gergen & Gergen, 2011) that motivates clients to focus on their resources, strengths and relational possibilities; to concentrate on the positive future rather than the negative past; and to place themselves in the present while connected to the networks of present relationships.
- Motivates the therapists to articulate collaborative practices with the traditional psychosocial accompaniment (Estrada, 2013).
- Itinerary of an action-research experience

Itinerary of an Action-Research Experience

The route was constructed during the process allowing us unknown possibilities and thus opening a Pandora Box.

Background and Problems that Originated the Demand for Accompaniment

We refer to the experience of psychosocial accompaniment to members of the Colombian Public Force, police officers and soldiers, who were kidnapped and released, and to their families who are associates in ASFAMIPAZ. This project was implemented between October 2012 and December 2013, with a period of inactivity in the first quarter of 2013⁷.

In cases of kidnapping for political purposes, due to the prolongation of the event over time, we find some negative effects difficult to anticipate:

Kidnapping is, by its nature, an event that causes a serious state of emotional crisis that generates uncontrolled feelings of impotence to people directly and indirectly affected by it. Both families and individuals are faced with managing an unusual situation that falls outside the range of customary experiences and, for this reason, they are forced to use new forms of managing, adapting and assimilating this situation. Constant fear, hope and hopelessness, guilt and anguish are typical emotional reactions that accompany the captive and his family permanently (Fundación País Libre, 2011).

Due to the nature of political kidnapping, families and their primary social networks are subject to great emotional pressure because they are used as the main mechanism of instrumentation and manipulation before the government and the authorities in order to obtain the political goals looked for. Undoubtedly, the so-called secondary victims⁸ of the process suffer not only an enormous emotional fatigue, but also the impact on their daily life and their life projects that are seriously affected.

Multiple political and varied kinds of pressures that the families of the kidnapped members of the public force have been subjected to have generated serious emotional consequences, since in this case the violent act is characterized by maintaining a high level of threat, by being a repetitive experience and by raising a high level of uncertainty from which they begin to recover gradually, while it is characterized by the fact that family members live their daily lives in the midst of a 'frozen mourning'⁹ (Boss, 2001).

The voice of Ingrid Betancourt (2016), who was kidnapped for seven years, after eight years of liberation, not only narrates the daily effects suffered in that dramatic change in her life, but also declares to be ready for reconciliation:

Perspectives and urgencies are different for each one. For a victim, for example, denial of the facts and lack of recognition are the worst situations of his/her status as a victim after suffering kidnapping. Likewise, the restoration of the truth is what makes reconciliation available to him/her because it brings back the two things that were taken from him/her: his/her voice and his/her identity (p.6).

Based on our experience with the ASFAMIPAZ project, we can affirm that with the release and the return of the relatives kidnapped, in many cases for more than thirteen years, and in addition to the emotional effects that families suffer by trying to emotionally and economically cope with the effects of the captivity of their family member and the political struggle in pursuit of their liberation, there is the critical emotional situation of the victim.

The police officer or the soldier who was kidnapped returns from captivity in very complex emotional conditions because in addition to having to face again a project of life in an institutional context not necessarily prepared to address the trauma suffered. This traumatic condition has not been adequately or sufficiently attended by the State or by human rights organizations that have traditionally considered armed actors not to be a priority for psychosocial care (Table 1 shows an assessment of the impact of kidnapping and liberation on the population served at ASFAMIPAZ).

All kidnapped members of the public force have suffered multiple traumas¹⁰ since most of them had to struggle against bloody guerrilla attacks, even for several days. Many of them suffered injuries of great consideration and were kidnapped in these conditions. Their recovery was uncertain and they depended mainly on their partners of misfortune. These incidents have been followed by torture and life with chains attached to their bodies. The abducted members of the public force were considered political prisoners by their captors but without any respect or recognition of their rights or due processes.

This has implied to keep on debating about the fact and the recognition of victimization of the members of the public force that have suffered kidnapping, effects that have been described as mere consequences of the service (Mejía, 2014).

In fact, we acknowledge that both the members of the public force who were released, the families of those who returned and of those who died in captivity were in need of receiving close, containing and reinforcing psychosocial support based on their own needs and resources. This support should be away from distinct institutional interests such as intelligence information or institutional image, a complex issue within the military institution.

Families, on the other hand, maintained their affiliation in ASFAMIPAZ, even after the liberation of their relatives or after obtaining evidence of their death and recovering their remains¹¹, fighting for the liberation of all kidnapped soldiers and police officers. Parents, wives, children, and other close relatives organized sit-ins and other peaceful demonstrations in different public places in Bogota and other cities. In fact, the first great achievement of ASFAMIPAZ legal representative and her substitute was to obtain permission, in 2000, to have access to the captive zone of confinement and to bring errands from their families.

In a process of rapprochement between our organization QUIRA and the Legal Representative of ASFAMIPAZ, we saw the opportunity to provide psychosocial care, an alternative the organization was looking for. From time to time the Legal Representative was constantly playing the role of confidant with both the liberated and with some of their families. In that process this person was often in the midst of dynamics of conflict and emotional escalation that, she understood, required less emotionally committed attention. But not any attention, a kind of assistance that was simultaneously powerful in the socio-political understanding of the problem, very innovative in technical resources of a psychosocial nature and characterized by a critical perspective that left behind any pathological conception of psychological suffering.

Table 1 below shows a detailed ethnographic characterization on the initial demand of the consultants; that is, of the needs and expectations expressed by the customers themselves. In fact, based on our theoretical-critical approach, we take as a starting point a 'non-knowing position' (Anderson & Goolishian, 1996), both in the psychosocial practice and in the assessment of the demand and the results. We hold that the expert is the client and we privilege his point of view both in the formulation of the demand and in the evaluation of the effectiveness of the intervention (Gergen & Gergen, 2011).

As can be seen in Table 1 clients were more likely to describe their experiences than to define what they expected from the intervention. In fact, our clients expressed both the effects of kidnapping (great emotional impact, intra-family violence, Post-Traumatic Stress Disorder (PTSD)) and the problems experienced at the beginning of the project (intra family conflicts, lack of support for education and upbringing their children, sexual and other couple difficulties, lack of adjustment to the armed service). On the other hand, some of them described the project with QUIRA as an opportunity to leave behind painful experiences and to allow themselves a new opportunity as a couple and/or as a family.

Key Players in the Process

We succeeded in generating, sustaining and strengthening a dynamic of care and empathy that was strongly protected against hierarchical power relationships and/or relationships mediated by particular interests. It can be said that in the scenario of anticipation and the meeting with QUIRA there was openness to emotional healing in which equitable relations of facilitation and mutual support were applied to us and to those who had been liberated, their partners, their parent as well

as the parents of the deceased ones, the legal representative of ASFAMIPAZ, a therapist and co-therapist, as well as other professionals related to ASFAMIPAZ.

Opening Pandora's Box or Defining Possible and Necessary Achievements

We maintained a position that allowed us to structure the intervention as more clarity emerged about the specific demands on the part of the consultants having a top number of possible sessions. It was necessary to take advantage of the priorities that were established with the members of different human systems. Among which we established: a) great emotional impact (*"My mom wants to handle life to everyone! With that I tell you everything!"*); b) intrafamily violence (*"All I want is to fit into the family I found" ...*); c) PTSD (*"...Find spaces to vent what he [the husband] feels ... This circle of families is our psychological support ..."*); d) lack of adjustment to the armed service (*"We entrust everything to God: health and life to get ahead ... Sometimes together, sometimes I just ... The police invited us to a spiritual retreat ... I confessed, I had a very heavy burden ... so many there" ...*). We started with the following strategic objectives:

- Generation of the criteria and the strategies for holding collective accompaniment meetings to facilitate the process of emotional recovery and wellbeing of the families of police officers and military victims of kidnapping.
- Proposal of differentiated psychosocial care courses according to the specific mapping of the problem: by family, by gender, by age group, by ethnicity.
- Development of differentiated psychosocial care courses according to the problem prioritized by the different consulting systems.

Table 1.

Assessment of Kidnapping and Release Temporal Impact on the Target Population

Event during which kidnapping happened	Number of hostages and length of time in years						Number of hostages and length of time in days		Number of years after liberation					Deceased in captivity
	14	9	8	4	3	2	4	ND*	14	13	7	2	ND*	
Guerilla taking	4	0	0		0	7	0	0	0	7		4	0	0

Puerto Rico														
Meta														
Guerilla taking Mitú Vaupés	0	1	1		0	0	0	0	0	0	1	0	0	1
Guerilla taking Curillo Caquetá	0	0	0	0	0	2	0	1	0	2	0	0	1	1
Guerilla taking Miraflores Guaviare	0	0	0	0	1	0	0	0	0	1	0	0	0	0
False check point Paujil Caquetá	0	0	0	1	0	0	0	0	0	0	0	0	0	1
Kidnapping and torture Bogotá	0	0	0	0	0	0	1	0	1	0	0	0	0	0
ND								2					2	
SUBTOTAL	4	1	1	1	1	9	1	3	1	10	1	4	3	3

*No Data

Collective interventions were a starting point that was supported by our reflective critique of the strengths and weaknesses of our own culture, already analyzed in depth in previous works (Estrada, Toro, Diazgranados & Tejada, 2010). Situations were created in which the consultants were able to express their suffering and reflexively recover unique cases of their own experience, as well as reflexive experiences of recognition of the other and the meaning and value of difference in the processes of reconciliation.

Such experiences opened a new path to the unsuspected and the unmentionable that challenged and tested what was planned: collective interventions were the key to open the Pandora's box of strong stories not narrated and even censored by social institutions.

Organization of Human, Strategic, Material and Financial Resources

In particular, for the design of intergenerational collective interventions in the case of the ASFAMIPAZ¹² project, complex strategies were designed. In some cases they included the simultaneous intervention of several therapists, so that same age groups could be attended in parallel and both their age conditions and psychosocial needs had the necessary priority. In other cases, we hired reading and personal development workshops for children with the Rafael Pombo Foundation that specializes in the promotion of reading and creativity with children. In all cases, the dynamics of the intervention articulated moments of differential intervention and moments of integration of the systems according to age. Integration was characterized by its ritual emphasis and recognition and emotional closure.

The Intervention Proposal Developed by QUIRA

We began the process of psychosocial accompaniment to the systems affected by political kidnapping and associates in ASFAMIPAZ by using as technical and methodological support the following sets of criteria and knowledge:

- The quality standards for harmless action proposed by the Inter-Institutional Committee on Psychosocial Assistance for Forced Disappearance (2011) and particularly the implementation of criteria to guarantee the enrichment of the professional-institutional response to victims (emphasizing dignity and humanity).
- A corpus of both conceptual and technical resources for the psychosocial care of psychological suffering from a new narrative perspective (White, 1997, 2006, Sluzki, 2002) and a network perspective (Dabas, 1998, Pakman, 1995, 1997) that appeal to the resources of individuals and their social networks for the promotion of resilience (Cyrulnik, 2001, 2003, 2005; Barudy & Marquebreucq, 2006).
- Presuppositions of Narrative and Postmodern Approaches of the psychological collaboration to face suffering. Due to the limited resources available for the implementation of public policies in this field, as well as the need to demonstrate results in the short term, the adoption of short solution focused therapies is an alternative (Anderson & Gehart 2007; Gergen & Gergen, 2011) that motivates clients to focus on: their resources, strengths and relational possibilities; the

positive future rather than the negative past; living in the present connected to existing relationships.

This approach motivates therapists: a) to integrate collaborative practices with psychosocial accompaniment (Estrada, 2013); b) to perform interventions with a therapist and a co-therapist; c) to abandon approaches focused on the deficit discourse (Gergen, 2007), including supervision as a technical and ethical element of the process that protects customers; d) to commit to Action-Research in order to systematize and account for the process and generating communicable knowledge; e) to articulate trans-disciplinary approaches to raise the quality of the technical response to suffering; and, f) to adopt the four elements of the integral approach to reparation (truth, justice, reparation and guarantee of non-repetition) (UN, 2012).

From a technical and therapeutic point of view, we sought to map the recurrent and problematic narratives in which people are trapped, to deconstruct the truths that immobilize them emotionally, to deconstruct the history of certain problematic truths and to generate new narratives which facilitated the reconstruction of acceptable life projects, transforming the context of the frozen mourning looking for the well-being experienced by the consultants (Sluzki, 2006; White, 2002).

Experience has shown us that the process of supporting the primary and the secondary victims of kidnapping, in this case, benefits from a periodic process that allows time for independent narrative transformation and structuring, and facilitates emotional recovery. In this sense, we find that the times granted for the execution of public policies can now be overly tight.

We recognized the need for a holistic approach in order to guarantee the organization of technical and spiritual resources to respond to different needs, expectations and paths of emotional recovery opened by the consultants.

The importance of articulating a technical response that integrates rehabilitation, training for productivity and entrepreneurship, health care and legal advice based on the needs of the victims was made clear, thus bringing us closer to the proposal of the promotion of health (PAHO, 2013)¹³.

As it is a complex process, the support of the victims was thought as a procedure with varying levels of complexity regarding psychosocial intervention. This process ranged from memory and recognition activities to specialized interventions oriented towards the transformation for well-being, according to the demands and needs expressed by the consultants.

We recognized the urgency for establishing reciprocal ethical agreements between ASFAMIPAZ and QUIRA to accompany the processes of psychosocial accompaniment until their adequate closure. We also decided not to open processes that could not be accompanied adequately, always within the framework of voluntary participation on the part of the consultants.

We considered it a priority to be open to the complete revision or adjustment of the initial plan of intervention based on the information, needs and expectations, and emerging possibilities of the consultants throughout the process. In other words, experience shows us that psychosocial support processes must be assumed with open ends generating dialectical construction dynamics between the collective and particular human systems as the conversations and interventions proceed. Thus, walking a step behind the consultants and reading their needs and emerging information, we developed 'QUIRA's complex strategy for psychosocial accompaniment' (Figure 1) for the population and family systems at different moments in the process by combining five accompanying components, which operate synergistically in a spiral process:

Collective interventions: In a permanent process of consulting the needs of the population, we were designing and implementing collective intervention strategies that, for the purposes of the consultant, we called workshops. With these workshops we sought not only to reach broad coverage in terms of families cared for, and a range of alternatives for emotional and spiritual recovery, but we also searched for the development of communicational, emotional and spiritual resources. This strategy proved to be powerful in facilitating the change of narratives saturated with problems in favor of better informed narratives; that is, more satisfying. This process included bodywork, performances, community activity (e.g. on food), visualizations and meditation.¹⁴

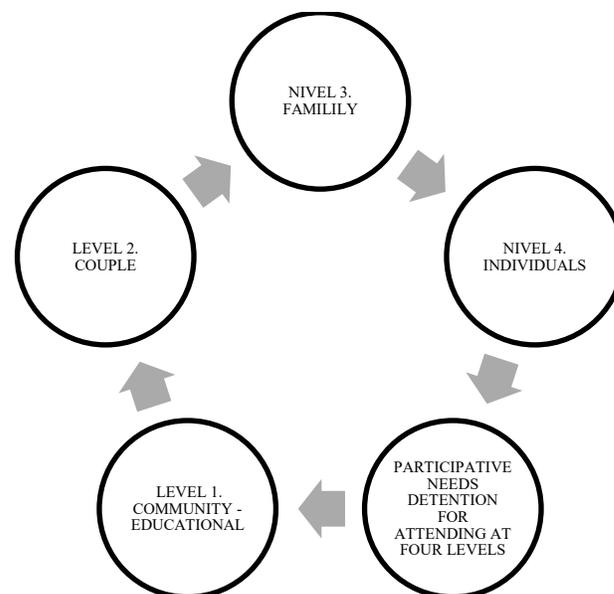
Counseling: The individual care layout offered orientation and support in order to strengthen and develop life projects, to find the required training strategies and to develop plans and links to productive networks, etc.

Therapeutic conversations (individual interventions): We used a constructivist-narrative approach with a brief solution-oriented therapy format and applied it to the family, the couple and other persons.

Imaginative narrative strategies of support, collective or by systems, to the inter-sessional processes. The process was supported and strengthened with highly effective inter-session interventions to maintain the continuity and the rapport of interventions (by telephone, by letters, etc.).

Finally, we recognize the importance of performing dignifying rituals (Imber-Black , Roberts, & Whiting, 2006), which we used mainly in closures, by levels and in different workshops (light ceremonies, diplomas, etc.). Table 2 shows the population served by the different interventions in the case of ASFAMIPAZ.

Figure 1. Quira's multilevel model for the psychosocial accompaniment of victims of political kidnapping and forced disappearance



Results and Significance

As an ethnographic criterion (Hammersley & Atkinson, 1994), theoretical significance guides the processes of sampling and search for validity, among others, in post-positivist designs. Indeed, theoretical significance attempts to ensure maximum variation between cases (within our strategy, the inclusion of all cases involved an approach of all genders and three generations).

Achievements and Needs Perceived by the Population Served

As already mentioned, following the principle of not knowing and recognizing that the client is the expert, we accept that they have an authoritative and necessary voice to evaluate the effectiveness of our interventions¹⁵ (Duncan, 2012). We recognize the danger of humanitarian bias pointed out by Orozco (2012) that gags or silences the voice of the therapist that is also indispensable. Therefore, we

Table 2. General Description of the Interventions and the Population Cared for

Collective Interventions				Individual Interventions			
Zone 1*	N**	Zone 2***	N**	Zone 1	NS****	Zone 2	NS****
Personal resources to approach our history	32	Finding dignity Workshop	31	Subsystem 1	5	Subsystem 1	5
Planting positive feelings in	31	Families that care for themselves: establishing	23	Subsystem 2	4	Subsystem 2	6

the families		the limits of love					
Discovering resources to find family harmony and happiness	25	Discovering family resources for communication	23	Subsystem 3	4	Subsystem 3	3
	NA**** *	How to continue as a great partner, father and friend	18	Subsystem 4	4	Subsystem 4	4
	NA**** *	Appreciating the value of femininity	7	Subsystem 5	4	Subsystem 5	3

*Zone 1: Bogotá, Ibagué, Pasto **N: Population cared for ***Zone 2: Villavicencio**** NS: Single or double sessions per Family Subsystem

***** NA: These Interventions summoned participants from the two zones

use the following open-ended questions in order to advance the evaluation of effectiveness, understanding the effect that the requested conversations and the place of the enunciation have on the participants' responses: What do you think are some of the achievements accomplished with the assistance of the psychology process? What are some of your family members requirements that still need accompaniment? They were included in an impact interview conducted.

The following is a summary of the responses obtained from our clients. A translation to our categories was done. For reasons of space it was not possible to include in a robust way the textual voices of the clients:

Lessons Learned for everyday life:

Development of resources for appreciative and positive intra-family communication: "... *They taught us to talk.*" [Intervenors].

Appropriation of the ethical sense of parenting practices as parents and educating families.

Progress in the definition of personal life projects:

a) Achievements regarding the therapeutic relationship:

Construction of an empathetic and trusting relationship between therapists and the population cared for.

Relationships built on principles of quality, ethics and respect for the process of the participants.

Abandonment of self-complacency in search of a criterion of achievement for the intervention.

High degree of compliance with the promises of the intervention that contributed to maintaining and improving empathy and trust. These are assets in case the consolidation of a next stage is achieved.

b) Achievements regarding the institutional development of ASFAMIPAZ as organization:

The clients, soldiers and police officers, emphasize the importance of their leader in the construction of a narrative of 'a great family' that has become stronger as part of the identity mark.

They recognize that the psychosocial care project as a priority, accepted by the organization, for this moment of the process.

They share the relevance of the psychosocial care project, as well as the recognition of the usefulness and benefit that has been obtained from it.

c) Achievements regarding the inter-institutional collaborative relationship QUIRA-ASFAMIPAZ:

The clients, soldiers and police officers, emphasize the importance of their leader in the construction of a narrative of 'a great family' that has become stronger as part of the identity mark.

They recognize that the psychosocial care project as a priority, accepted by the organization, for this moment of the process.

They share the relevance of the psychosocial care project, as well as the recognition of the usefulness and benefit that has been obtained from it.

They hope for the continuation of both ASFAMIPAZ and the psychosocial care project through which they are getting rid of the invisible chains of kidnapping suffered by all members of the nuclear and extensive families. This suffering is expressed very forcefully in the deterioration of cultural resources for an assertive and positive life for the family and the couple, as well as for the reconstruction and re-signification of personal life projects.

It is possible to anticipate that ASFAMIPAZ will enter into a process of reconstruction of its organizational mission, in which case the process of psychosocial strengthening appears as a path of support and well-being that facilitates walking along the route of collaborative and appreciative relationships rather than the harmful trauma, resentment and bitterness.

This is, undoubtedly, one of the good examples that must be considered, by victim organizations and their advocates, in the peace process that we are beginning to travel.

An inescapable recommendation. In order to support the necessary reconciliation in a peace process, such as the one we are going through, as well as the stabilization of the different emotional and psychosocial achievements reached, it is important for victims' organizations to update their discourse for the interlocution with the State and the organizations of cooperation, so that they do not make these victims invisible in the acts of memory and truth that they carry out permanently.

Potential sustainability of our proposal

In our view, sustainability and replication (possibility of application by another operator to address similar problems) of the intervention advanced by QUIRA with ASFAMIPAZ members depend fundamentally on the following factors: i) Mastery of the epistemological, theoretical, ethical, political and technical components of the constructionist, narrative, postmodern approach, as well as the sensitivity required; ii) coherent, creative and parsimonious application of the previous components and approaches in order to respond to clients' needs and expectations; iii) access to human resources with a sufficient level of training that will allow the proposal of intervention to be applied in a professional, ethical and contextualized way; and, iv) the availability of resources, even though not specialized, necessary to duplicate and guarantee the quality of intervention.

Lessons and recommendations derived from experience

We consider the following factors to be very important for the success of the process:

Maintaining the trust and credibility of the clients in the therapists and the intervention proposal.

Guaranteeing the relevance of the intervention to the extent that it remains open to transformation based on the new information and expectations that will be emerging and will be co-constructing in the process with clients. In this process we construct the metaphor 'opening Pandora's box'.

Including the ethical policy negotiation of the intervention in the execution contract to ensure its presence in the process.

Ensuring a systematic call by the operators of the intervention in the local area (so that the impact reaches the largest number of the affected population in a timely manner).

Establishing alliances in order to allow the extension of the holistic approach of the intervention.

Using the therapist/co-therapist model to facilitate the production of communicable knowledge from the intervention process, as well as the ethical care of the psychological integrity of the clients.

Encouraging the imagination to create new interactions with state and technical cooperation entities (potential sources of support and resources, especially those involving clients) from places that protect the achievements obtained and that do not require a discursive-emotional setback as part of the production of a politically correct speech.

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Endnotes

¹ We refer to violent acts by which, in the midst of conflict and as a strategy, civilians (individuals and families), through threats, coercion and/or violence, have been forced to leave their homes, their properties, their bond and support networks, as well as part of their memory represented in their social identity and subsistence practices, among others.

² Between February 2012 and November 2016 a process of talks and systematic dialogue took place between members of the Colombian government and that of the FARC guerrillas, which gave birth to the 'Final Agreement for the Ending of Conflict and the Construction of a Stable and Durable Peace' (Board of Dialogues, 2016) signed between the parties and that is currently in the process of implementation. The negotiation process, considered an international model, is being studied in the world by countries that are in transition processes from internal conflicts to more consolidated democracies, and was considered in Colombia as the last opportunity to achieve peace in the following decades: <http://www.youtube.com/watch?v=498R8qRRKNc>

³ Asociación Colombiana de Familiares de Miembros de la Fuerza Pública Retenidos y Liberados por Grupos Guerrilleros. Official page: <https://www.facebook.com/pages/ASFAMIPAZ/163585793711792> and the profile of its leader: <http://www.educweb.org/webnews/ColNews-Avr06/Spanish/Articles/MarlenyOrjuelaHeroinadelo.html>

⁴ The populations attended to were the primary and secondary victims of serious human rights violations located in the following Colombian cities and municipalities: Abejorral, Bogotá, Ibagué, Medellín, Montería, Pasto, Villavicencio.

⁵ Since these psychological interventions take place in legal contexts and because of their symbolic value in the framework of integral reparation, we use the notion of victim belonging to the terminology of transitional justice and the theory of integral reparation (De Greiff, 2008; Carrillo, 2008), exacerbating its paradoxical meaning (Estrada, Rodríguez & Ripoll, 2010). Moreover, as we have pointed out elsewhere, our use of the notion of victim is neither

naive nor based on identification based on deficit; on the contrary, it is used in contexts of generation of narrative conditions for its deconstruction and transformation (Estrada, 2016).

⁶ The latter is the most difficult to accomplish, mainly in contexts such as the Colombian in which the processes of psychosocial care in the framework of reparation; e.g. post-conflict, take place simultaneously with the dynamics of war proper to the continuation of internal conflict or of negotiation in the midst of war.

⁷ This case was funded with resources from Swedish cooperation. Resources from IDRC Canada were used in the case of the sexual crime reparation sentence. In the case of the victim of a massacre, the case has been treated pro bono.

⁸ In another place we have discussed the paradoxes and synergies proper to the legal and psychosocial uses of the notion of victim. For reasons of space, we omit this debate and refer the reader to Estrada, Rodríguez & Ripoll, K. (2010).

⁹ This allows us to understand that kidnapping and forced disappearance psychologically configure processes of suffering very similar, since they differ only in that in the first case kidnapping is used to achieve a goal, while in the second, disappearance is in itself the goal sought (USAID-UN, 2009). The above allows to affirm that the proposal of intervention developed by Quira and exposed in these pages is adequate at least to address these two types of psychological suffering.

¹⁰ Although there is a strong suspicion about the presence of cruel and inhuman treatment during the captivity of members of the armed forces at the hands of the FARC, there seems to be a pact of institutional silence that certainly plays against emotional recovery.

¹¹ Such is the case of Mrs. Emperatriz de Guevara and her son who died in captivity, Colonel Julián Guevara

¹⁴ Funded by the Swedish Government technical cooperation resources

¹⁵ The operationalization of this broader proposal would require a second phase of an adequately funded intervention

¹⁶ Such interventions correspond to complex deep strategies during at least 6 hours, in which conceptual supports for transformation are combined with practical activities of appropriation and change.

¹⁷ Champs Elysees Group. Web Seminar in Collaborative Practices. Professor Sylvia London. Mexico City, 2014.

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