

Socioaffective Violence and Psychological Health

Code: 105820 ECTS Credits: 6

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Degree	Туре	Year
2500000 Sociocultural Gender Studies	ОТ	3

Contact

Name: Maria Jesus Tarragona Oriols Email: mariajesus.tarragona@uab.cat

Teachers

(External) Mª Jesús Tarragona Oriols

Teaching groups languages

You can view this information at the <u>end</u> of this document.

Prerequisites

None.

Objectives and Contextualisation

Contextualization

The socio-affective relations are those that are given in the coexistence with diverse people (society, family, friendship, couple, work,...). The social and cultural construction derived from the genre and the capacities that supposedly derive from it, is very present in the affective relationships. Stereotypes and gender roles determine the affective experience of men and women in different contexts and can make affective relationships not develop in a plan of equality and end up deriving in situations of gender violence. Violence in couples is a risk factor for Health, both physically and mentally. The chronic stress involved in mistreatment favours the appearance of different diseases and worsens existing ones. There are psychological and cultural barriers that make it difficult to talk about violence in the couple. The psychological consequences of the experience of gender violence at home, causes clinical pathologies in minors and being witnesses in their home can generate attitudes of their own use of violence (with the perception that it is allowed and that does not affect their behaviour in interpersonal relationships). In this subject apart from reviewing in depth all these aspects will also address the various existing psychosocial resources for tackling socio - affective violence; And in turn, will contemplate the characteristics of the Burnout syndrome in the and the professionals that work in socioaffective violences.

Training objectives of the subject

- 1. Know different types of abusive socio affective relationships and gender violence (partner, friends, family, community, etc.) generated by gender inequalities.
- 2. Know the main myths associated with gender violence.
- 3. Know the main potencial barriers in the detection of domesticviolence in thehealth field.
- 4. Know the consequences of gender violence on women's health.
- 5. Know the repercussions on the Health of the exposure of the minors to situations of violence in the couple.
- 6. Achieve fundamental knowledge about the intergenerational transmission of violence.
- 7. Achieve knowledge of existing psychosocial resources to address socio affective violence.
- 8. Achieve knowledge about burnout syndrome and self care guidelines for professionals working in socio affective violence (in the couple, family, etc.).

Competences

- Contribute to the prevention of gender biases in health centres and psychological care services from the sociocultural knowledge of gender issues.
- Emit judgments on relevant aspects related to gender as a function of significant data on the
 psychological configuration of the human being, as well as those come from the physical and social
 environment.
- Incorporate the non-androcentric perspective in the work carried out.
- Students can apply the knowledge to their own work or vocation in a professional manner and have the
 powers generally demonstrated by preparing and defending arguments and solving problems within
 their area of study.
- Students must be capable of collecting and interpreting relevant data (usually within their area of study) in order to make statements that reflect social, scientific or ethical relevant issues.
- Work cooperatively and energize multidisciplinary and diverse teams, assuming and respecting the role and diversity of those who make them up.

Learning Outcomes

- 1. Distinguish the effects of the sex and gender variables in the empirical analyzes.
- 2. Identify the consequences in the psychological health of the socio-affective violence in adult women and in minors of both sexes.
- 3. Identify the different expressions of gender violence and discomfort suffered by bodies and subjectivity, derived from the interaction between social inequalities and health and disease systems.
- 4. Identify, in the field of health, the importance of gender identity, roles and sociocultural beliefs.
- 5. Put into practice skills to work in a team: commitment to the team, habit of collaboration, ability to promote problem solving.
- 6. Students can apply the knowledge to their own work or vocation in a professional manner and have the powers generally demonstrated by preparing and defending arguments and solving problems within their area of study.
- 7. Students must be capable of collecting and interpreting relevant data (usually within their area of study) in order to make statements that reflect social, scientific or ethical relevant issues.

Content

- T1- Socio affective violence through the different current social models of gender.
- T2- Myths and realities. Perceived violence and technical violence.
- T3- Barriers in the perception of violence in the couple.
- T4- Tools for the detection of gender based violence in the area of the couple.

- T5- Impact and development of socio affective violence on women's psychological health.
- T6- The abuse in sons and daughters of women who have suffered violence in the couple: victims and witnesses.
- T7- The intergenerational transmission of socio affective violence in the field of the relationship.
- T8- Map and typology of existing psychosocial resources for tackling socio affective violence.
- T9- Characteristics of the burnout syndrome in professionals who work in socio affective violence (in the couple, family, etc.).

It is intended that students learn about diferent forms of violence that can occur in socio - affective relationships, as well as the possible myths associated with the subject. Also the main potencial barriers in the detection of violence in the couple in professional and health contexts. Also, the main repercussions and consequences of gender based violence on health. In minors, in the short term we would talk about consequences in diferent areas at the social, school, behavioral or emotional level. However the long term consequences are related to the intergenerational transmission of violence. Finally it will be intended that students know the existing psychosocial resources for dealing with socio - affective violence. And emotional exhaustion or burnout syndrome, which can occur in professionals working in socio - affective violence.

Activities and Methodology

Title	Hours	ECTS	Learning Outcomes
Type: Directed			
Master Classes	20	0.8	
Practical classes based on seminars	30	1.2	
Type: Supervised			
Tutoring	10	0.4	
Type: Autonomous			
Case preparation assignments	86.5	3.46	

This subject includes guided activities, which are mainly expository theoretical classes with material suport on the virtual campus, and practical classes based on seminars with text presentation and case study and discussion.

The supervised activity consists of tutoring to carry out the work (report) based on the internship sessions, and which will be presented in small groups orally at the end of the internship.

In order to achieve the expected knowledge, students must carry out independent work consistint of reading texts proposed by teachers and finding appropriate material to properly perform the internship work.

Note: 15 minutes of a class will be reserved, within the schedule established by the school/degree, for the completion by students of the surveys of assessment of the performance of teachers and assessment of the subject.

Annotation: Within the schedule set by the centre or degree programme, 15 minutes of one class will be reserved for students to evaluate their lecturers and their courses or modules through questionnaires.

Assessment

Continous Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
Exam open type questions	30%	2	0.08	2, 6
Present a group report of a case worked on in practice	40%	0	0	2, 3, 5, 6
Test examination	30%	1.5	0.06	1, 2, 4, 7

Unique Assessment

- A multiple-choice exam on the contents of the course (EV1-30% of the overall grade).
- A reflective group work on readings and practical aspects of the contents of the course (EV2-40% of the overall grade of the course).
- Examination of open questions, to make judgements that include a reflection on different contents of the subject (EV3-30% of the overall mark).

The delivery of the work and the completion of both exams will be carried out on a single date indicated in the course syllabus, accessible from the virtual campus.

The Ev2 will be assessed with the group written report (3 or 4 people), where the achievement of the theoretical and applied knowledge of the cases presented and worked on in the practical sessions must be shown, as well as the knowledge acquired from the different readings selected in the work of this subject. The completion of this evidence is essential to pass the course.

The final grade for continuous assessment will be obtained from the weighted sum of the scores of the evidence (final grade = Ev1+Ev2+Ev3).

Students who have submitted evidence of learning with a weight equal to or greater than 40% may not be listed as "non - assessable".

To pass the subject with continuous assessment you must obtain a minimum score of 5 in the weighted final grade. You must have obtained a minimum grade of 4 points in the EV3 evidence to calculate the weighted final grade. You must have passed at least one of the EV1 or EV3 evidence in order to be able to do the weighting with the Ev2.

Procedure for reviewing grades

At the time of each assessment activity, the teacher will inform students of the procedure and the date of the review of grades.

Recovery

A recovery test may be performed. In order to take the resittest, thenweighted final grade mustbecalculated at a minimum of 3.5 points and a maximum of 4.9 points. This test will include test -questionnaire type-. In addition, during the continuous assessment, students must have submitted evidence with a minimum weight of 2/3 (both exams). The grade obtained will be added to the weighted grade. The test will be scored between 0 and 2 points. It is necessary to pass this exam (obtain a minimum of 1 point) in order for its value to be added to the weighted final grade previously obtained in the subject. To pass the course you must obtain a minimum score of 5 in the weighted final grade. And there would be no activities excluded from recovery.

Non - evaluable activities will bereported at the beginning of the course, if applicable.

In the event that tests or exams cannot be taken onsite, they will be adapted to an online format made available through the UAB's virtual tools (the original weighing will be maintained). Homework, activities and class participation will be carried out through forums, wikis and/or discussion on Teams, etc. Instructors will ensure that students are able to access these virtual tools, or will offer them feasible alternatives.

In the event of a student committing any irregularity that may lead to a significant variation in the grade awarded to an assessment activity, the student will be given a zero for this activity, regardless of any disciplinary process that may take place. In the event of several irregularities in assessment activities, the student will receive a zero as the final grade for the class.

Bibliography

Bibliography and web links

- 1) Acinas, M. P. (2012). Burnout and empathy wear and tear in palliative care professionals. *Digital Journal of Psychosomatic Medicine and Psychotherapy*, 2 (4), 1-22.
- 2) Alcántara, M. V., López-Soler, C., Castro, M., and López, J. J. (2013). Psychological alterations in minors exposed to gender violence: prevalence and differences in gender and age. *Annals of Psychology*, 29 (3), 741-747.
- 3) Andrés-Pueyo, A., & Echeburúa, E. (2010). Violence risk assessment: available instruments and indications for application. *Psicothema*, 22 (3).
- 4) Barudy, J., & Dantagnan, M. (2012). *Violence: Zero Tolerance. Prevention and psychosocial support in children exposed to gender violence.* Barcelona: Obra Social La Caixa. Retrieved from https://bit.ly/2UQKiK5
- 5) Beltrán-Morillas, A.M., Sánchez-Hernández, M.D., Herrera, M.C., Villanueva-Moya, L., & Expósito, F. (2023). Self-Efficacy and Well-Being in Professionals Working in Intimate Partner Violence: Recovery Experiences and Burnout as Associated Variables. Psychological Reports. 1-27. https://doi.org/10.1177/00332941231183331
- 6) Benito, E; Arranz P; Cancio, H. (2010). Tools for the self-care of professionals who care for people who suffer. FMC (Continuing Medical Education) Primary Care. Barcelona: Elsevier.
- 7) Black, D.S, Sussman, S., & Unger, J.B. (2010). A further look at the intergenerational transmission of violence: Witnessing interparental violence in emerging adulthood. *Journal of Interpersonal Violence*, 25, 1022-1042.
- 8) Black, M.C. (2011). Intimate partner violence and adverse health consequences; Implications for clinicians. *Am J Lifestyle Med*, 5, 428-439.
- 9) Bosch, E., Ferrer, V. A., García, E., Ramis, M. C., Mas, M. C., Navarro, C., & Torrens, G. (2007). From the myth of romantic love to violence against women in the couple. Ministry of Equality, Women's Institute, University of the Balearic Islands, 175.
- 10) Bosch-Fiol, E., & Ferrer-Pérez, V. A. (2012). New map of the myths about gender violence in the 21st century [New map of the myths about gender violence in the 21st century]. *Psicothema*, 24 (4), 548-554.
- 11) Bosch, E. (2013). Violence against women: love as an alibi. Violence against women, 1-384.
- 12) Bosch-Fiol, E., & Ferrer-Pérez, V. A. (2019). The Pyramid Model: a feminist alternative for analyzing violence against women. *Journal of Feminist Studies*, 27.
- 13) Cantera, L. M., & Cantera, F. M. (2014). Active self-care and its importance for Community Psychology. *Psychoperspectives*, 13 (2), 88-97.

- 14) Connel, R.W and Messerschmidt, James, W (2021). Traducción de Barbero, Matías de Stéfano y Morcillo, Santiago. Hegemonic masculinity. Rethinking the concept. *Journal of the Iberoamerican Laboratory for the Sociohistorical Study of Sexualities*, 6, pp pp. https://doi.org/10.46661/relies.6364.
- 15) Coordination Service of the Comprehensive System against Gender Violence, Intervention Guide for Minor Victims of Gender Violence. Tenerife, Canary Institute of Equality. Government of the Canary Islands, 2012, 135p. https://www.observatoriodelainfancia.es/ficherosoia/documentos/3974_d_GuiaViolenciaMen ores.pdf
- 16) D'Andrea, W., & Graham-Berman, S. (2017). Social context and violence exposure as predictors of internalizing symptoms in mothers and children exposed to intimate partner violence. *Journal of family violence*, 32 (2), 145-155.
- 17) De Salud, S. M. (2010). *Clinical practice guide. Mental health action in women abused by their partner.* Murcian Health Service.
- 18) Escudero Nafs, A., Polo Usaola, C., López Gironés, M., & Aguilar Redo, L. (2005). Coercive persuasion, an explanatory model for keeping women in a situation of gender violence: I: Strategies for violence. *Journal of the Spanish Association of Neuropsychiatry*, (95), 85-117.
- 19) Escudero Nafs, A., Polo Usaola, C., López Gironés, M., & Aguilar Redo, L. (2005). Coercive persuasion, an explanatory model for keeping women in a situation of gender violence: II: The emotions and strategies of violence. *Journal of the Spanish Association of Neuropsychiatry*, (96), 59-91.
- 20) Ferrer, V. A., Bosch, E., & Navarro, C. (2010). Romantic myths in Spain. Psychology Bulletin, 99, 7-31.
- 21) Fogarty, A., Wood, C. E., Yellow, R., Kaufman, J., & Hansen, M. (2019). Factors promoting emotional -behavioral resilience and adjustment in children exposed to intimate partner violence: A systematic review. *Australian journal of psychology*, 71 (4), 375-389.
- 22) Fong, V. C., Hawes, D., & Allen, J. L. (2019). A systematic review of risk and protective factors for externalizing problems in children exposed to intimate partner violence. *Trauma, Violence, & Abuse*, 20 (2), 149-167.
- 23) García-Carpintero, M. Á., Rodríguez-Santero, J., & Porcel-Gálvez, A. M. (2018). Design and validation of the scale for the detection of violence in dating in young people at the University of Seville. *Gaceta Sanitaria*, 32, 121-128.
- 24) Gentry, J. E., Baggerly, J. & Baranowsky, A. (2004). Training-as-treatment: effectiveness of the certified compassion fatigue specialist training. *International Journal of Emergency Mental Health*, 6 (3), 147-158
- 25) Herman, Judith. (2004). *Trauma and Recovery. How to overcome the consequences of violence*. Pozuelo de Alarcón (Madrid): Espasa Calpe.
- 26) Holmes, M. R. (2013). Aggressive behavior of children exposed to intimate partner violence: An examination of maternal mental health, maternal warmth and child maltreatment. *Child abuse & neglect*, 37 (8), 520-530.
- 27) Juster, R. P., Pruessner, J. C., Desrochers, A. B., Bourdon, O., Durand, N., Wan, N., ... & Lupien, S. J. (2016). Sex and gender roles in relation to mental health and allostatic load. *Psychosomatic medicine*, 78 (7), 788-804.
- 28) Kaufman-Parks, A. M., Demaris, A., Giordano, P. C., Manning, W. D., & Longmore, M. A. (2018). Familial effects on intimate partner Violence perpetration across adolescence and young adulthood. *Journal of Family Issues*, 39 (7), 1933-1961.
- 29) Lünnemann, M. K. M., Van der Horst, F. C. P., Prinzie, P., Luijk, M. P. C. M., & Steketee, M. (2019). The intergenerational impact of trauma and family violence on parents and their children. *Child abuse & neglect*, 96, 104134.

- 30) Law 4/2015, of April 27, on the Statute of the victim of the crime. Official State Gazette, 11, April 28, 2015. Retrieved from: https://bit.ly/38aVMOT
- 31) Organic Law 8/2015, of July 22, amending the system of protection for children and adolescents. *Official State Gazette*, 175, July 23, 2015. Retrieved from: https://bit.ly/3bEVQXB
- 32) Law 26/2015, of July 28, amending the system of protection for children and adolescents. *Official State Gazette*, 180, July 29, 2015. Retrieved from: https://bit.ly/2R3147l
- 33) Law 17/2020, of December 22, amending Law 5/2008, on the right of women to eradicate sexist violence. https://cido.diba.cat/legislacio/11081196/llei-172020-del22-de-desembre-de-modificacio-de-la-llei-52008-del-dret-laviolencia-masclista-departament-de-la-presidencia.
- 34) Martínez, M. L., Estévez, E., Jiménez, T. I. and Velilla, C. (2015). Filio-parental violence: main characteristics, risk factors and keys to the intervention. *Papers of the Psychologist*, 36, pp. 216-223.
- 35) Maslach, C. (1982). Burn-out: the cost of caring. Englewood cliffs, NJ: Prentice Hall.
- 36) Maslach Burn-out Inventory (3rd ed.). Palo Alto. CA. Consulting Psychologists Press.
- 37) Mitchell, C., (Ed). *Intimate partner violence: A health-based perspective*. New York: Oxford University Press, 2009.
- 38) Moreno, B, Morante E. Rodríguez, A et al. *Secondary traumatic stress. Evaluation, prevention and intervention*. Retrieved October 12, 2010 from: http://redalyc.uaemex.mx/pdf/785/78522108.pdf
- 39) Moreno, B, Morante E. Rodríguez, A et al. *Secondary traumatic stress, the cost of caring for trauma*. Retrieved October 12, 2010 from: http://www.uam.es/gruposinv/esalud/Articulos/Salud%20Laboral/2004elcoste-cuidar-el-traumapsconductual.pdf
- 40) Olarte Ramos, C. A. and Keijzer Fokker, B. (2018). Men are requested: The male experience in workshops on affectivity. *Psychology Notebooks*, 20 (1), 7-22.
- 41) Ordóñez, M., and González, P. (2012). The invisible victims of gender violence. Clinical *Journal of Family Medicine*, 5 (1), 30-36.
- 42) Ortega, L. R., Pérez, I. R., Castaño, J. P., López-Abisab, S. B., Lozano, D. R., de Vinuesa, L. G., ... & Hidalgo, M. A. (2004). Intimate partner violence as a factor associated with health problems. *Primary Care*, 34, 117-124.
- 43) Plazaola-Castaño, J.; Ruiz-Pérez, I.; Hernández-Torres, E. (2008). Validation of the short version of the Woman Abuse Screening Tool for use in primary care in Spain. *Gac Sanit.*, 22: 415-420.
- 44) Peled, E. and Dekel, R. (2010). Excusable deficiency: Staff perceptions of mothering at shelters for abused women. *Violence Against Women*, 16 (11), 1224-1241.
- 45) Pico-Alfonso, M. A., Garcia-Linares, M. I., Celda-Navarro, N., Blasco-Ros, C., Echeburúa, E., & Martinez, M. (2006). The impact of physical, psychological, and sexual intimate male partner violence on women's mental health: depressive symptoms, posttraumatic stress disorder, state anxiety, and suicide. *Journal of women's health*, 15 (5), 599-611.
- 46) Pico-Alfonso, M. A., Echeburúa, E., & Martinez, M. (2008). Personality disorder symptoms in women as a result of chronic intimate male partner violence. *Journal of Family Violence*, 23 (7), 577-588.
- 47) Provechoa, A. B. A., Alésb, R. J., & de la Torre Quiraltec, M. L. (2023). Minors gender violence victims: are they correctly attended in healthcare settings?. Rev Pediatr, 25, 31-40.

- 48) Research Support Unit. Andalusian School of Public Health. Catalog of instruments for screening and frequency of physical, psychological and sexual abuse. Women's Health Observatory. Ministry of Health and Consumer Affairs. https://www.mscbs.gob.es/organizacion/sns/planCalidadSNS/pdf/equidad/genero_vg_01.pdf
- 49) Romero, I. Intervention in Gender Violence: Considerations Around Treatment. *Psychosocial Intervention* [online]. 2010, vol.19, n.2, pp.191-199.
- 50) Rosser-Limiñana, A., Suriá-Martínez, R., & Mateo Pérez, M. Á. (2020). Children exposed to intimate partner violence: associationamong battered mothers 'parenting competencies and children's behavior. *International journal of environmental research and public health*, 17 (4), 1134.
- 51) Sans-Corrales, M., Sellarès-Sallas, J. (2010). Detection of gender violence in primary care. *Spanish Journal of Forensic Medicine*. *organ of the National Association of Forensic Physicians*, Vol. 36 Núm. 3 Pág. 104-109.
- 52) Subdirectorate General for Awareness, Prevention and Studies of Gender Violence (Government Delegation against Gender Violence) (2020). Macro-Survey on Violence against Women 2019: Ministry of Equality. https://violenciagenero.igualdad.gob.es/violenciaEnCifras/macroencuesta2015/Macroencu esta2019 / home.htm
- 53) Thackeray, J. D., Hibbard, R., Dowd, M. D., Committee on Child Abuse and Neglect, & Committee on Injury, Violence, and Poison Prevention. (2010). Intimate partner violence: the role of the pediatrician. *Pediatrics*, 125 (5), 1094-1100.
- 54) Torralba-Borrego, A.; Garrido-Hernansaiz, H. (2021). Development of a scale and study of micromachismos in the adult and university population, in *Journal of Feminist Research*, 12 (2), 425-438.
- 55) Torres, A., Navarro, P., García-Esteve, L., Tarragona, M. J., Ascaso, C., Herreras, Z., ... & Martín-Santos, R. (2010). Detecting domestic violence: Spanish external validation of the index of spouse abuse. *Journal of Family Violence*, 25 (3), 275-286.
- 56) Tourné García, M.; Herrero Velázquez, S. and Garriga Puerto, A. (2024). Health consequences of intimate partner violence against women, *Primary Care*, 56(6): 1-9. https://doi.org/10.1016/j.aprim.2024.102903
- 57) Van der Kolk, Bessel (2015). *The body keeps track. Brain, mind and body in overcoming trauma.* Barcelona: Eleftheria.
- 58) Vázquez, C. and Pérez-Sales, P. (2003) Positive emotions, trauma and resistance. *Anxiety and stress*, 2-3, 231-254.
- 59) Vu, N. L., Jouriles, E. N., McDonald, R., & Rosenfield, D. (2016). Children's exposure to intimate partner violence: A meta-analysis of longitudinal associations with child adjustment problems. *Clinical psychology review*, 46, 25-33.
- 60) Yule, K., Houston, J., & Grych, J. (2019). Resilience in children exposed to violence: a meta-analysis of protective factors across ecological contexts. *Clinical child and family psychology review*, 22 (3), 406-431.

Web links:

Centre for Health and Gender Equity (CHANGE): http://www.genderhealth.org

Organización Mundial de la Salud (OMS): http://www.who.int/topics/womens health/es

World Health Organization Genere: http://www.who.int/mediacentre/factsheets/fs403/es

Software

MOODLE

Word processing (with the possibility of conversion to Word and pdfs).

Pdf reader

Power point or similar.

TEAMS

Free software is welcome, as long as the documents can be delivered in the required format.

Language list

Name	Group	Language	Semester	Turn
(PAUL) Classroom practices	1	Catalan/Spanish	second semester	morning-mixed
(TE) Theory	1	Catalan/Spanish	second semester	morning-mixed