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Gendering Peace and Liberation: A Participatory-Action Approach to Critical Consciousness Acquisition Among Women in a Marginalized Neighborhood

Violeta Luque-Ribelles, Manuel García-Ramírez, and Nelson Portillo

Many women from marginalized neighborhoods suffer injustices and structural violence due to patriarchal and macho-dominated culture as well as injustices stemming from precarious economic and social conditions (Christie, 2006). Their disadvantageous living conditions coupled with multiple levels of exclusion have a negative impact upon their well-being at the personal, relational, and community levels. In the field of community psychology, these areas of negative impact can be studied and addressed from different methodological and epistemological approaches. From the point of view of peace psychology and liberation psychology, conditions of inequality are understood primarily in terms of social injustice (Nelson & Prilleltensky, 2005; Rappaport & Seidman, 2000; Watts, Griffith, & Abdul-Adil, 1999). Yet community initiatives planned and executed with women from marginalized neighborhoods, informed by such perspectives, are scarce, especially in Europe. This chapter seeks to further the study of situations of social injustice experienced by oppressed groups and introduce a community approach model of conscientization or consciousness raising (Martín-Baró, 1989, 1994; Montero, 1994) that differs from mainstream analyses of the living conditions of such populations.

One of the objectives of this process was that all participating women, and the academic practitioners working with them, changed oppression-rooted perceptions held about themselves and identified actions to contest injustices based on their strengths and knowledge. This initiative employed a Participatory-Action Research (PAR) methodology as a strategy to develop a community–university partnership and to promote the well-being of women living under conditions of oppression by using community narratives (Balcázar, 2003; Nelson & Prilleltensky, 2005; Rappaport, 1995).

Historically, the Global South has shown a tendency to equate peace-building efforts with the active pursuit of social justice due in part to the predominant conditions of oppression and asymmetrical distribution of resources in those regions (Christie, 2006). Not surprisingly, community practice based on liberation psychology

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(Martín-Baró, 1994, 1998) emerged originally in Latin America where it has been actively developed (Montero, 2004a, 2004b); in contrast, research and intervention from this perspective has yet to prosper in Europe (Burton & Kagan, 2005; García-Ramírez, 2006). Hence, this initiative adopts the experience and knowledge generated in Latin America and introduces it to community and peace psychologists, who work on social injustice issues, especially in Europe.

First, this chapter examines the constructs of oppression, power and its uses, as well as the consequences associated with oppression and power inequity among women from marginalized neighborhoods. Second, it explains the role of conscientization and community narratives in the process of psychopolitical development and proposes a model that integrates the acquisition of critical consciousness in an iterative process. Third, it discusses the use of collaborative and participative research methods in the development of practices directed to promote processes and actions of liberation and community peacebuilding. Lastly, it presents a research-action community-based practice carried out with women from a marginalized neighborhood located in Seville, Spain, to illustrate the model in practice.

Oppression and Power Among Women from Marginalized Neighborhoods

Oppression has two dimensions, a political and a psychological, which coexists and determines each other dialectically. The first dimension is rooted in using violence, obstacles, and barriers (e.g., legal, economic, material) that prevent others from accessing privileges by means of force, restrictions, ethnocentrism, and by negating their right to question the authority while being blamed for their condition of oppression. The psychological result of sustained dominance and subjugation is that the person who is oppressed eventually internalizes a demeaning view of her or himself, as someone who is not worthy of resources and rights. Hence, the person becomes transformed into her or his own oppressor (Martín-Baró, 1989, 1994; Moane, 1999; Montero, 2003; Nelson & Prilleltensky, 2005).

Power is central to understanding oppression. Power permeates all human relationships. It is exerted at personal, relational, and community levels, and it is regulated by social and historical circumstances as well as by structural and personal factors. As a contextual process, power entails the opportunity and capacity to obtain and share collective welfare through the availability of material and psychological resources, and a system of social regulation (D'Adamo, García & Montero, 1995; Martín-Baró, 1989, 1994; Montero, 2003; Nelson & Prilleltensky, 2005; Prilleltensky, 2004).

Marginalized neighborhoods are visible examples of structural violence that produces several processes of oppression. They reflect a socioeconomic order incapable of absorbing the majority of the people; a political order that obstructs, or at least discourages, the participation of certain social groups; and a domination of an economic and cultural front that excludes others. In such zones, inequalities involve most aspects of reality (e.g., urban design, division of labor), manifested primarily in asymmetric social relationships where privileged groups dominate others, control their access to resources, and restrict their capacity to respond. All together, these conditions produce several processes of oppression that impact people at various levels. At the personal-psychological level, people are likely to develop a fatalistic attitude toward life and experience feelings of anxiety, depression, and anger. At the relational level, people may become less responsive to the needs of others and favor conflict resolution through violence. Finally, at the community level, it is common to find litter, vandalized property, abandoned buildings, overcrowding, noise, organized crime, and the presence of gangs (Cruz & Portillo, 1998; Martín-Baró, 1987, 1989, 1994; Moane, 2003; Wandersman & Nation, 1998).

The conditions of oppression that characterize marginalized neighborhoods have specific consequences for the women who inhabit them. They are more vulnerable to different types of violence, more likely to internalize the oppression that makes them feel inferior to men, and more commonly overwhelmed by numerous house responsibilities (Christie, 1997; Galtung, 1969; Pilisuk, 1998). In addition, gender-based economic oppression confines them to precarious jobs (e.g., low wages, long shifts) (Campbell & Wasco, 2000; Grant, Lyons, Finkelstein, Conway & Reynolds, 2003). This in turn furthers their exclusion in spaces of community participation and limits their pursuit of happiness and personal fulfillment (Moane, 2003; Nelson & Prilleltensky, 2005).

Given the conditions of oppression faced by many women living in marginalized neighborhoods, community research and initiatives designed to overcome them are needed. On the basis of liberation and peace psychology (Christie, 2006; Martín-Baró, 1994) as well as psychopolitical development theory (Watts & Abdul-Adil, 1998), we propose a model to promote critical consciousness among women from a marginalized neighborhood; that is, consciousness about their situation of oppression, including the political, social, and cultural factors that make it possible as well as the necessity to take action and participate actively in them. This process of critical consciousness acquisition can also contribute to form a system of peacebuilding, "that is, the interplay between the nonviolent management of conflict and the movement toward socially just structures, an approach that yields an increase in cooperative and equitable relationships across levels, from interpersonal to intergroup levels" (Christie, 2006, p. 13).

Psychopolitical Development: Conscientization, Liberation, and Peacebuilding

Peace psychology proposes that conscientization of oppressed groups and their liberation must contemplate their capacity for nonviolent management of conflict (Christie, 2006; Montiel, 2006). Liberation psychology seeks to develop methods of social change and a praxis that promotes the psychopolitical capacity to resist and contest the oppressive conditions (Martín-Baró, 1994). One of its challenges is to articulate strategies that allow the conscientization of oppressed groups such as women from marginalized neighborhoods (Nelson & Prilleltensky, 2005; Watts et al., 1999; Watts, Williams & Jagers, 2003).

In this context, liberation means to develop the capacity to resist, procure, and enjoy political and psychological well-being (Prilleltensky, 2003; Prilleltensky & Nelson, 2002). The political dimension involves the processes and results from the emancipation of class exploitation, gender subjugation, and ethnic discrimination. The psychological dimension means to overcome any undignified view about oneself, the acquisition of the capacity of self-determination, and a new voice to propose actions as well as the necessary skills to make them happen.

The liberation of oppressed women is possible through psychopolitical development. One of its central tenets is known as conscientization; that is "the process of consciousness mobilization of liberatory character about situations, facts or relationships, causes and effects ignored or unnoticed until then, but that exert an influence in a way that the subjects of this process consider negative" (Montero, 2006, p. 262). According to Cerullo and Wiesenfeld (2001), the ultimate purpose of conscientization is to generate a new praxis, one that is politically significant. Conscientization needs to be understood as a dialectic process through which people change while their relationship with their context and others changes also (Martín-Baró, 1994).

At the psychological level, conscientization refers to the active process in which one makes new sense about the world. At the social level, it refers to the community as the subject of transformations, which makes consciousness development possible. When conscientization takes place, the forces, factors, mechanisms and structures that determine the organization of one's life are revealed and, as a result of such knowledge, a political commitment to social change is made (Martín-Baró, 1994; Montero, 1994). In particular, conscientization and liberation must be nonviolent processes focused on: (1) understanding social injustices (i.e., structural violence), (2) comprehending the impact of structural violence on life experiences (i.e., direct violence), and (3) recognizing oppression and resistance.

Watts and Abdul-Adil (1998) systematized the process of psychopolitical development to raise critical consciousness by using a model of five stages: (1) acritical stage, (2) adaptative stage, (3) precritical stage, (4) critical stage, and (5) liberation stage. Applying this model to the case of women living under oppressive conditions, it can be argued that at the first two stages, the women are not able to notice social injustices because they lack consciousness about their disadvantageous situation and/or because they have become habituated and consider it a logical consequence of their assumed inferior status. At the third stage, they understand and acquire consciousness about the processes that maintain oppression and social inequity; and, at the fourth stage, they develop the capacity of critical analysis and rebelliousness as well as the need to act for change and to speak out about the negative impact that particular sociopolitical forces have on their lives. Lastly, they take action against the oppressive factors and propose the means to promote positive change.

There are different models that explain the steps between lacking critical consciousness and carrying out actions of liberation (e.g., Kieffer, 1984; Stokols & Altman, 1987; Watts & Abdul-Adil, 1998; Watts et al., 1999, 2003), but usually these models do not elaborate on the acquisition of specific dimensions of critical consciousness; that is, the acknowledgment of social injustices, and the acquisition of skills to participate and respond to oppression. In the case of women who live in marginalized neighborhoods, the acquisition of these three dimensions would allow them to access more knowledge about what it is that oppresses them and how the social order perpetuates unjust structures of inequity. They would also learn analytical skills to know what to change and creativity to propose actions that could bring about social justice. Finally, they would develop emotional skills and the ability to identify and use their strengths and transform their weaknesses to participate in social change processes (Bartky, 1990; Martín-Baró, 1989; Moane, 1999; Montenegro, 2002; Prilleltensky, 1990, 2001, 2003; Watts & Serrano-García, 2003; Watts et al., 1999, 2003). These proposed dimensions take place in an iterative process where the three dimensions interplay in the development of critical consciousness in which conditions of oppression are identified, challenged, and targeted with specific actions.

Psychopolitical Development and Narratives as Strategies of Change

A challenge in the validation of a psychopolitical development model is the need to take into account cultural and gender-related variables such as community narratives when designing and testing strategies to raise critical consciousness (de la Rey & McKay, 2006; Jason et al., 2004; Nelson & Prilleltensky, 2005; Wessells & Montiero, 2006). To overcome possible shortcomings in community work, practitioners need to understand that minority groups share multiple realities; be aware of the influences of their own biases on their perceptions and relations with the community and its members; and stress the importance of focusing on community strengths and returning the voice and power to silenced groups that are essential to develop local-based practices (Suárez-Balcázar & Kinney, 2006). In turn, these practices allow women to learn about their specific contexts and to restore their silenced voices while accumulating evidence for future best practices (Chinman, Imm & Wandersman, 2004).

A methodological approach that allows practitioners to employ community narratives is participatory-action research (PAR) (Fals-Borda, 1959, 1987). This is a strategy that joins research, education, and social action with the objective of defining and confronting problems that the community, which becomes actively engaged in the research process, defined as socially relevant (Christie, 2006; Montero, 2006). Besides being appropriate to raise critical consciousness among community members and practitioners, it allows this second group to substitute their role of experts for that of a community ally, facilitator of skills, and catalyst of success through consensus and active participation of all members interested in weaving a common narrative (García-Ramírez, Balcázar & Suárez-Balcázar, 2003; Jason et al., 2004). The techniques used to work with community narratives are multiple and varied (Campbell & Ahrens, 1998; Lykes, Blanche & Hamber, 2003; Williams et al., 2003). The work carried out with marginalized women in this study employed in particular discussion groups, semistructured interviews, participant observation, and community meetings.

Community narratives are shared stories that communities tell about themselves that say who they are, have been, and could become (Rappaport, 1995). Dialogue, as a form of narrative, is a tool for personal as well as social creation and transformation. It builds shared knowledge about social problems and their possible solutions, and facilitates the role change of community psychology practitioners (Ibáñez & Íñiguez, 1997). With this objective, they start transforming their own narratives (i.e., give oppressed communities a chance to be heard) and reexamining their expert status by substituting the concept of objectivity with that of disciplined subjectivity and by socializing within the community (e.g., participation in community activities) to earn and enjoy the residents' trust and respect (Montero, 2006). Academic practitioners and community members initiate processes that lead them to discover their own stories of oppression, modify the existing ones, create new ones, and shape contexts for power sharing. This joint reflection and comprehension propels communities to take action as they strive to build a more just society based on communal values (Jason et al., 2004; Prilleltensky, 2003; Rappaport, 1995, 2000; Williams et al., 2003).

Proposals for a Research-Action Community-Based Practice

This study introduces a model of conscientization to enable the women who live in a marginalized neighborhood to develop critical awareness and become the protagonists of their own process of liberation. To achieve this, narratives are used as a strategy of social and personal change through a PAR process in a community-based practice. This procedure is considered by Fals-Borda (1959, 1987) as one of the basic principles of PAR and community work. He called it the *principle of priorities*. A PAR practice was favored because, in addition to being characterized by getting to know in depth the specific contexts where knowledge is acquired as well as yielding positive results, it restores the voice to traditionally silenced groups (Chinman et al., 2004). The practice is based on a three-step model that seeks to: (1) mobilize the community and identify the conditions of social injustice, (2) respond to oppression by prioritizing problems and defining actions, and (3) develop action capacity by identifying barriers to participation and determining how to address them. Prior to examining each phase, the context of the experience, the instruments used, and the procedure for information analysis are described.

Community Context

The study was carried out in a marginalized neighborhood in the outskirts of Seville, Spain[1]. The neighborhood is located in a limited expansion urban area, isolated from other residential areas and asymmetrically related to them. Divided in three areas by a sewer canal and a highway, it has industrial areas and a low construction density. About 2.2% of the surface is covered with green areas and parks. There are 19,935 habitants of whom 40% live in the most socially at-risk area (i.e., higher birthrate among adolescents, higher levels of drug consumption) and where the number of young people facing problems of social integration is higher. The index of dependency is three points above the rest of the city, and it has 2.3% more households with children not attending school. In addition, more than half of all households show disadvantages in education, work (i.e., unemployment is 35% higher than the average rate), housing (i.e., crowding is 27% higher than the average rate), and health care (see *Plan general de ordenación urbana* and the *Boletín Demográfico* of the City of Seville[2]).

Although this area is subject to governmental interventions to improve the social conditions of its inhabitants (Consejería de Igualdad y Bienestar Social, 2005), most of these programs are of ameliorative nature or promote dependency. These programs intend to satisfy needs by promoting health care and welfare-to-work initiatives, reducing school absenteeism, and encouraging the creation of community associations. These interventions, however, foster clientelism, are unstable, overpopulate the roles of their members, and are carried out using models that are applied indiscriminately to all socially disadvantaged neighborhoods without the active participation of the community and without taking into account the particularities of the context. These interventions cover very specific needs to help people and do not transform the structures that maintain the status quo nor do they provide the people with the capacities and knowledge necessary for self-determination (Dalton, Elias & Wandersman, 2006; Montero, 2004a). In addition, the neighborhood has community organizations that try to cover other necessities that the local government institutions do not address, the most influential being the parents' associations and the neighbors' associations.

Instruments

To obtain information about the oppressive conditions in the neighborhood, a guidebook was developed following the model of Wandersman and Nation (1998). A process of social adaptation (*centering*) was carried out, with professionals having at least two years working experience in the area, to obtain valid and sensible information about the social characteristics of the neighborhood. Among other things, this process considered: (1) dialogic or written narratives of the women and professionals, (2) cultural values and customs, (3) geographic situation, (4) community context, and (5) impact of social class on the women (Jason et al., 2004; Rappaport, 1995; Skaff et al., 2002).

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[1] To locate the neighborhood, go to http://www.pueblos-sevilla/espana.org/andalucia/torreblanca + de + los + canos

[2] Further documentation can be found at http://www.sevilla.org/impe/sevilla/portada

Information Analysis

An interview guide was applied through self-administered surveys, semistructured interviews, and discussion groups. These data gathered were introduced in a matrix and organized according to categorized issues based on a series of variables identified by Wandersman and Nation (1998). In the first column, participants, associations, etc., were represented. In the rows, the conditions of the neighborhood were recorded. Finally, the answers were written in the cells. This matrix made it easy to visualize the cluster of answers and to examine them consistently through a content analysis that emphasized the variables related to oppression based on gender and within the community while revealing the most relevant problems and strengths of the community (Miles & Huberman, 1994; Sonn & Fisher, 2003).

Applying the Model to Community Practice

Community Mobilization and Identification of Social Injustices

In the first step, a community partnership between women and academic practitioners was established to identify situations of social injustice. To do so, it was necessary for the women to acquire a minimum of critical consciousness; that is, to evolve from the stage of internalized feelings of inferiority and powerlessness to begin to doubt and question their adaptation to oppressive conditions (Watts, 1994). For the academic practitioners, it was necessary to become familiar with the neighborhood and to engage in its social dynamics (Kieffer, 1984). This last aspect is known as *familiarity*; that is "the process that introduces the external agents to the community's knowledge, making habitual and understandable the aspects of each community" (Montero, 2006, p. 78).

To contact and involve women and professionals, a networking strategy was employed. Women already taking part in ongoing social programs or workshops were contacted to gain access to other women living under conditions of oppression and to create a web in which the first contacted members served as mentors. Throughout the process, women and practitioners worked on dialogic and written narratives in: (1) three discussion groups with the participation of 77 women (informed consent to tape their contributions and to take photos was solicited); (2) 15 semistructured interviews; and (3) 22 self-administered questionnaires. Once all information was gathered, it was disseminated among the sources so that they could indicate any changes if necessary.

The evaluation of the process gave a chance to make further modifications, according to the proposals of the community and the academic practitioners, while a series of group meetings held in the neighborhood allowed all parties to examine it in more depth. In addition, all academic practitioners gathered periodically and interacted with the neighborhood women to overcome barriers due to age, education level, etc. In an attempt to earn the trust of the community and to know more about the events of the neighborhood, they participated in various community activities (e.g., local parties and social initiatives).

During a period of six months, different alliances were created to build a sustainable partnership. Members of the local government participated as well as seven academic practitioners, several professionals from 10 institutions, 14 community organizations, and 100 women between the ages of 30 and 75. A group of eight leaders was created between those who participated consistently and those who were trained in community work strategies.

In this process, shared knowledge about the social reality of the neighborhood was created whereas the narratives of the different social groups modified each other dialectically. Academic practitioners voiced their own narratives; some of oppression for working in a marginalized neighborhood that made them feel fearful about their safety, emotionally exhausted, and apprehensive; and others of oppressive character for relegating the neighborhood to an inferior status, blaming it for its own situation. The narratives of the academic practitioners evolved from using information based on a third party and stereotypes to form opinions based on direct experience. One researcher, for example, went from talking about the neighborhood as a unity ("*the population of the neighborhood shows a lower economic and socio-cultural level*") to differentiating it in areas according to their conditions of oppression ("*the population of areas A and C enjoy a better socio-economic level than the one residing in area B*").

Simultaneously, the women departed from an uncritical stage (Watts & Abdul-Adil, 1998). They spoke about being tired of having multiple jobs, but did not acknowledge situations of gender violence and neighborhood deficits. An example of these deficits was voiced by a member of one of the parents' association who said: "*Tussam (the bus service) works every day. We don't have any problems with public transportation; we've got a bus.*" However, she failed to acknowledge that the transportation service was limited to the day hours and connected them to only one area in the city, making it very difficult to travel in and out of the city and to return to the community after work.

Later, they started building narratives in which they identified unjust situations, considered stable otherwise, thus reaching a higher level of adaptation (Watts & Abdul-Adil, 1998). They acknowledged that domestic chores were a responsibility of all family members and identified cases of domestic violence (Table 1). In the process of identifying injustices, a different member of the parents' association said: "*The public transportation service is bad; many people have to use it… [They] can't get out of the neighbourhood.* She also mentioned that "… *there [were] very few containers for glass and paper [recyclable] waste.*"

The issue of pregnancy and motherhood among adolescents exemplified how different groups had their own understanding of the situation. A number of external health professionals mentioned, among other things, the ignorance and irresponsibility of the youth, blaming the victims for their situation. One of them said:

> The problem of the adolescent pregnancies is educational and generational; it starts with the early incorporation of the young people to the workforce and they use it (the pregnancy) to become independent and to live with their partner… [It is also] lack of parental responsibility

Table 1 Outcomes of the work carried out by the women in the different phases of the process of critical consciousness acquisition

Identification of situations of social injustice
(1) Pregnancies among adolescents (teenage mothers, HIV, broken families, contraceptive methods); (2) Isolation and neighborhood stigmatization (neighborhood isolation from other urban centers, lack of public transportation, deteriorated access to the neighborhood, mass media stereotyping); (3) Deterioration of the neighborhood and common spaces (dirt, lack of street lamps, traffic chaos, empty lots, lack of sociocultural equipment); (4) Drug problems (high level of drug trafficking, drug addiction among youngsters, drug consumption in public); (5) Green areas and parks (lack of green areas and parks, park bonfires); (6) Women's role overload and domestic violence (work outside and inside the house, caregivers of dependent persons, grandchildren, domestic violence victims)
Necessary areas to work and prioritized actions
Needs: (1) Trainings and workshops for parents; (2) Contraception and prevention campaigns; (3) Sexual orientation as a school course
Prioritized: (1) Conduct trainings for parents in schools and academic centers to facilitate spaces to talk about sex, conversations with parents and children about families' roles; (2) Conduct contraception and prevention methods campaigns at the local health care center; (3) Make sex orientation another school class; (4) Conduct talks in local places for youths where pregnant young women can share their experiences; (5) Campaign to distribute condoms in the community
Participation difficulties and proposals to overcome them
Difficulties identified by the women: (1) Do not know how to conduct campaigns (prevention, sensitization, and dissemination); (2) Do not know how to increase the motivation and union of the population to improve the neighborhood; (3) Do not know how and whom to contact to solve problems; 4) Uncertainty about the community's reaction to new initiatives; (5) Do not know how to improve the training of the population; (6) Do not know how to change the neighborhood's negative image; (7) Do not know what the neighborhood's resources are; (8) Do not know how to decrease women's roles overload; (9) Do not know what to do with drug addicts; (10) Do not know how to design effective programs; (11) Do not know how to decrease drug addition; (12) Have little information about domestic violence
Proposals made by the women: (1) Find out how to obtain institutional, organizational, and professional support; (2) Learn how to receive information, how to raise awareness, train and inform the neighborhood; (3) Learn to navigate the bureaucracy and make protocols of performance; (4) Learn how to make a list of resources; (5) Learn how to reach out to mass media; 6) Obtain information about how to conduct prevention and sensitization campaigns; (7) Learn how to organize games and sport activities; (8) Learn how to denounce issues; (9) Organize babysitting groups and psychological support; (10) Share domestic chores; (11) Learn how to use the Internet
Difficulties identified by the professionals: (1) Targeting the youngest women; (2) Targeting all women, not just the same group; (3) Covering just the basic necessities; (4) Lack of training; (5) Lack of specialized and qualified professionals in the area of participation due to the complexity of the issue; (6) Private space is assigned to women, therefore their participation in the neighborhood is limited; (7) Women who do not participate think that their contribution is not important.
Proposal made by the professionals: (1) Study all levels of participation; (2) Foster and facilitate that all women who participate become agents of change and mediators in their neighborhood; (3) Support the initiatives that emerge from the associations; (4) Offer institutional support; (5) Promote social and communication skills

Source: Key informants and stakeholders.

> when educating their children; they do not want to take any responsibility because they don't want to confront [the situation]… so the problem repeats itself and becomes a habit.

The women themselves revealed their narratives in the discussion group when they shared their thoughts about adolescent pregnancies, a phenomenon that they denied initially. One of the parents' association members, in fact, mentioned that pregnancies among adolescents had become less common.

After modifying their narratives and acquiring critical awareness of the social injustice, the women acknowledged that they themselves were adolescent mothers or were the mothers of pregnant adolescents. Among the reasons behind adolescent pregnancies, a participant mentioned that "*pregnancies are used to leave [the parents'] home and find a husband*" while another highlighted that "*scheduling a date with the family planning service usually takes a long time.*"

In addition, they reflected on economic and emotional responsibilities of adolescent mothers, future opportunities, and familiar repercussions (e.g., caretaking grandmothers, crowding). These new narratives made them more conscious of the damage caused by being deprived of their rights, which led to questioning the value of adaptation (Watts & Abdul-Adil, 1998).

In summary, this first step showed that establishing relationships of trust and collaboration, getting to know the neighborhood, and promoting the conscientization of women to identify situations of social injustice are interdependent processes that enrich each other. Through these processes, the neighborhood established new relationships while academic practitioners also became part of the community. Furthermore, women moved from being unable to name social injustices or considering them as habitual, to fully identifying them and redefining them as surmountable. In this way, they learned new roles and abilities, which facilitated their individual and relational empowerment and started to break the dynamic of oppression.

Responding to Oppression: Prioritizing Problems and Defining Actions

The objective of the second stage was for women to realize that to overcome oppression it is necessary to take action against social injustice. To achieve this, the women prioritized situations of social injustice and defined actions intended to overcome them.

The community leaders acquired new abilities to participate and had to confront a series challenges when planning and taking part in a meeting organized around the injustices identified in the previous stage. In this meeting, the original group of women leaders was joined by 34 other women, who formed six work groups. They were instructed on how to work with eight common mentors and community leaders from other neighborhoods (Osuna & Luque-Ribelles, 2003), and learned the problems and goals identified. Each group proposed a list of actions to resolve the problems of the neighborhood (Table 1). At the end, they presented their conclusions and established timelines for future actions. Critical debate, reflection, and participation were actively promoted, in addition to offering services to make attending the meeting a much easier task (e.g., transportation). The academic practitioners and professionals acted as facilitators, making sure that every woman had the opportunity to present her own ideas and conclusions.

At the same time, the academic practitioners started to deconstruct their narratives and expectations because they risked becoming oppressive themselves and, therefore, limiting the opportunities to take action. By molding these in terms of the proposals of the women, they became more in tune with the context and the necessities of the community in which academic practitioners were willing to get involved. This is what Fals-Borda (1959) called the *principle of social catalysis*.

The women modified their narratives too, redefining the social injustices in positive terms to be able to tackle the problems that they wanted to solve. Women raised issues related specifically to drug use and trafficking in high schools, information about resources and activities available in the city, and utilities in households. They proposed actions to confront their problems, promote social change, and acquire awareness of the social asymmetries and the power required to overcome them. They took charge of their future and found a new vision of themselves (Table 1) (Watts & Abdul-Adil, 1998). Some of the actions proposed were to "*increase the unity in the neighborhood, surveillance around the schools, and more efficient police*" and "*have the radio say good things about the neighborhood*."

For their part, external professionals identified problems in the community work carried out with the women and proposed ways to address them. One of them mentioned that "*the women who participate are usually the same*" while another proposed to "*address the issue of participation among women as an integral part of the planning*."

The group assigned particularly to the issue of "adolescent pregnancies" exemplifies how women, upon proposing actions, confronted social injustices with the goal of overcoming them and becoming ready to assume the cost of affirming their rights. On the one hand, they made the commitment to practice safer sex and involve their partners in talks about contraceptive methods, to hold sessions on how to resolve communication problems, and to promote information about safer sex. On the other hand, they created new narratives in which they evaluated the role of each member of their relation and proposed ideas for the neighborhood's young women, so they could meet their needs in their relationships and feel fulfilled as individuals (Table 1).

Ability to Take Action: Participation Barriers and Strategies to Overcome Them

The objective of the third phase was to make women aware that in order to achieve their well-being they must lead the actions proposed. With this aim, the women identified the barriers that prevent them from becoming involved in the actions and the strategies necessary to overcome such barriers.

Women completed a list of obstacles to participating in the actions and another list of the strategies to overcome them (Table 1). They met in a community gathering where they created working groups once again and presented their results. To improve the quality and continuity of their achievements, their work was evaluated following the procedures described by Chinman et al. (2004). Two questionnaires were distributed and respondents were asked for their satisfaction with the work accomplished in the community meetings (28 completed questionnaires) and their opinion about the working process (completed by the community leaders).

They were aware that they could lead liberation actions in their neighborhood after identifying the barriers that kept them passive. Among the barriers identified by the women were: lack of union, knowledge about the dissemination of neighborhood initiatives, how to reach out to local institutions, and how to access resources that could increase their chances of success.

In addition, they saw themselves contributing to the improvement of their community together with other women, after identifying what knowledge and abilities they needed to overcome their community participation difficulties. In this way, they took a step toward achieving the liberation stage and toward social change (Watts & Abdul-Adil, 1998). Some of the proposals included obtaining orientation to know the steps to carry out their own initiatives, learning to use the Internet to diversify their resources, and acquiring skills to determine what could be done with them.

The academic practitioners went through a series of difficulties to coordinate the working groups and had a hard time identifying which were the barriers to participation. The academic practitioners shared their understandings and established that they had similar problems with increasing women participation and exposed common objectives, all of which helped increase the chances of taking action (Table 1).

Regarding the work accomplished at the community meetings, all of the women indicated they wanted to see more women participate in similar initiatives, obtain information about how to implement the proposed actions, and keep their motivation high. The community leaders emphasized the strengths of the participative process, the interest of the academic practitioners, as well as their own interest to acquire new abilities and to improve their neighborhood. Among the weaknesses, they identified were the necessity of more information as well as adapting mechanisms to assure the sustainability of the project and the dissemination of its results.

Discussion

On the basis of liberation and peace psychology principles, this chapter introduced a consciousness raising model through which oppressed women from a marginalized neighborhood in Spain began their psychopolitical development process to acquire critical awareness and to work toward their well-being and liberation. The literature indicates that practices designed to achieve psychopolitical development do not spell out what they understand by critical awareness acquisition or even the process of acquisition itself (Moane, 1999; Watts & Abdul-Adil, 1998). This work contributes to fill this gap by proposing that critical awareness has three dimensions that can be acquired in an iterative process: the acknowledgment of social injustices, the necessity to take action to overcome them, and the necessity to participate in those actions.

Applying a PAR methodology to the proposed model and working in a collaborative partnership, marginalized women identified the social injustices that affect them, responded to oppression by prioritizing problems and defining actions, and developed action capacity by identifying barriers to participation. During all the work stages, women and academic practitioners deconstructed and transformed their narratives of oppression into narratives of liberation. This allowed women to generate a new shared knowledge about their reality while their behaviors shifted from passiveness and habituation to movement and assertiveness directed to social transformation. At the same time, the work in a community partnership allowed academic practitioners to learn to listen to the multiple voices of the community and develop a new understanding anchored in the lives of the marginalized women (de la Rey & McKay, 2006; Martín-Baró, 1994; Moane, 1999; Montiel, 2006; Nelson & Prilleltensky, 2005).

This work revealed also the oppressive character of well intentioned interventions from official institutions and how their effects can last beyond the initial established limits. The original sponsoring institution of the initiative presented here, the local municipality, tried to carry out a peacemaking process to influence women's participation to satisfy external demands and move them away from any attempt that would bring deeper changes. They did so, partially, because members of the municipality and the academic team could not fully agree on a shared agenda that reflected the level of commitment acquired by the women participating in the project. This was very evident when the local municipality stopped supporting it. Nevertheless, the alliances that the PAR process made between women and academic practitioners became stronger and together proposed alternative community initiatives.

On the basis of the extension of the work carried out, some lessons for future collaborative community work can be drawn. The proposed model and the experience that illustrates it represent an effective local-based practice oriented to a specific population and context, which may limit its replicability in other contexts with dissimilar conditions. In the future, it is recommended that community practitioners develop initiatives that incorporate best practice criteria based on evidence so that they can determine whether the research findings are trustworthy and sustainable (Chinman et al., 2004). As asserted by Prilleltensky (2004, p. 29), to achieve psychopolitical validity, "research and intervention projects need to adopt specific criteria that indicate the extent to which they incorporate lessons about psychological and political power."

Originally, this was an experience that focused on working groups' established cooperative relationships with existing institutions. This constrained the possibilities that parallel alliances and action networks would emerge to channel their interests and achieve their goals. Academic practitioners should strive, whenever possible, to promote sustainability among the working groups and act independently to achieve their goals and interests. Therefore, it is necessary to develop strategies that assure the continuation of the consciousness raising process and the deconstruction of narratives and practices of oppressions among those who provide the resources. Another valuable lesson has to do with situations in which official organizations threaten to withdraw their financial support or disrupt ongoing initiatives. Community practitioners should be prepared to align themselves with the community to defend the rights of its members to access resources and have their views and initiatives respected as well.

This work acknowledges the necessity and the importance of developing action-oriented knowledge, useful and socially relevant to provide responses to the needs of oppressed communities living under structural violence conditions. In this way, academic practitioners can contribute to advance social progress and build a more just world where community values inform the relationships between individuals and groups (Prilleltensky, 2001).

The core theoretical models of this work, based on oppression theory and liberation psychology, emerged originally in Latin America, where they have a long and consolidated tradition (Martín-Baró, 1994, 1998; Montero, 1992, 2003, 2004b, 2006; Montero & Fernández-Chritlieb, 2003; Watts & Serrano-García, 2003). Yet in first-world contexts, especially in Europe, these models, as far as we know, are just being developed and applied, meeting many of the difficulties already addressed in Latin America (Burton & Kagan, 2005). In this way, the evolution of this work is similar to that described by Maritza Montero (2004a; see also Montero, 1994) concerning the circumstances and barriers that prevented the development of community movements within the communities in Venezuela. For these models to be successful in developed countries, it is necessary to work simultaneously in two directions. On the one hand, it is necessary to work closely with the oppressed populations so that they become protagonists of their own psychopolitical development by deconstructing their own narratives of oppression. On the other hand, it is necessary to work with those who have the power and who define agendas to instil the abilities and strategies to ease their reservations about true participation and collaboration and to facilitate peacebuilding and psychopolitical development processes within oppressed communities, especially among women.

Acknowledgments The authors express their sincere thanks to the women, service professionals and the Office of Equal Rights of Seville (Victoria Martínez Ocón, Rosa Hermoso, María Osuna, Amparo Abellán and María del Mar Jiménez) for their participation, collaboration, and contributions during their community work. We also thank Trina Portillo for her insights and thorough review of previous versions of this chapter.

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