PSYCHOLOGY IN TIMES OF CRISIS. PSYCHOLOGY AND HUMAN RIGHTS

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El artículo aborda tres grandes cuestiones: en primer lugar, el marco de interpretación actual con respecto al uso del miedo y la crisis con instrumentos para plantear recortes; en segundo lugar, la situación general de nuestro país con algunas cifras en materia de desigualdad y exclusión; y en tercer lugar, propuestas para la intervención social en situación de crisis reflejando intervenciones, por ejemplo en desahucios.

Palabras clave: Intervención social, Paro, Crisis, Exclusión, Derechos humanos.

This article addresses three major issues: firstly, the current framework of interpretation regarding the use of fear and the economic crisis with instruments for proposing cuts; secondly, the general situation of our country with a number of figures on inequality and exclusion; and thirdly, proposals for social intervention in crisis situations reflecting interventions, for example in evictions.

Key words: Social intervention, Unemployment, Crisis, Exclusion, Human rights.

A word that seeks to frame reality more than others nowadays is imposed and repeated ad nauseam in an attempt to define the times in which we live. It is a word that is accompanied by a set of measures, justifications and actions, including determining emotions or ones that aim to be determinants of everything that happens. We are referring to the term “crisis”. Although, by definition, it could be said that a crisis is a momentary thing for which a timely and temporary response effort is required, for years a framework of interpretation of reality has been maintained that speaks of a deep and permanent crisis that, therefore, forces us to always be taking exceptional and unique measures. An effort that we would not be asked to make in other circumstances. This is about suggesting that we live in a state of crisis, in a state of shock, in permanent trauma, which justifies cuts in social policies, in resources, in benefits and even in freedoms or major social attainments.

A crisis accompanied or spiced up by a primary emotion, as powerful as it is dangerous: a global fear that individualizes us and makes us more vulnerable. A global framework of interpretation that involves a change of society using fear and crisis as allies and dominant frameworks of interpretation. A paradigm of fear and crisis that is incentivized and empowered in a planned, structured and thought-out way with the aim of changing our society and our way of life, including our values.

It is about establishing a framework of interpretation that divides and individualizes us, that makes us think exclusively of our own interest, of saving what we can, of saving ourselves in a world at war, in a permanent struggle in which only the strongest survive, in which the competition is constant and fierce. This is reflected in texts such as Rosa (2008), Kleim (2007), Baum (2007), Galeano (1993), and Fouce et al (2015).

This fear and crisis lead to the search for identity shelters, to differentiate between “my people” and others, to set boundaries and barriers, to divide and break the collective response structures, the proliferation of excluding flags and symbols: the one that receives an economic benefit against the one who does not, the one who has a job versus the one who does not, the Spaniard versus the foreigner, and so on. Individualism and xenophobia, fear, flags and walls, in which simple culprits are constructed, scapegoats that we blame for our precarious situation and permanent crisis, and which are used to justify the necessary cuts.

The aim is to break down collective and community response structures, to establish a framework in which the main aim is to “save oneself” as much as possible, in fierce competition with the different other, with the others that are not my people. It is about establishing individualistic and self-blaming responses and explanations: we are the person responsible for what happens to us, we are the sick person. “We are living above our means” is perhaps the most famous phrase that summarizes this framework of interpretation. Thus we return, in addition, to charitable response systems based on beneficence and welfare, the old approaches of helping the poor so that they allow themselves to be helped, not out of justice but rather out of charity, not because it is a right but rather in a “kind” way.
Those who fall into disgrace are responsible for what happens to them and we must seek individual explanations for their situation. We must also help them to accept the situation and deal with it as best as possible. Each person is an entity in their own right and explains what happens to them.

What role do psychology and psychologists play in this situation? Do we contribute to reducing explanations to the individual by blaming the victims? Do we focus on making the circumstances more acceptable by cognitively reconstructing how to analyze them in order to make them tolerable? Do we contribute to acceptance, indifference and fatalism? Which is sick, the subject or the situation? What should we help to change in the subject in order for them to accept what is happening or for them to accept a sick context? (Martín Baró, 1987, 1989).

Crisis and fear lead us to live from day to day, to survive, and to focus on the daily aspects: there is no future; remember, perhaps the most repeated motto in any of the movements responding to these current situations: “no home, no work, no pension ... and no fear”.

It is the power of nightmares, as accurately pointed out in (Curtis, BBC, 2004): “In the past politicians presented a better world, utopias to conquer, but that failed and we reached the best of the possible worlds, now they found an alternative: making us afraid, telling us that we are in crisis, and presenting themselves as the answer to this situation of fear and terror. The causes of fear and terror are then presented as the solution to the problem they pose.”

Fear (Regulllo, 2012; Fouce, et al., 2015) appears as a key element present and apparently stimulated with the aim of silencing a possible social response. Fear as an essential element of a global economic strategy, key in which is the collaboration of groups that suffer the effects of the unequal distribution of wealth, feeling fear and thus contributing to what is intended: accepting, accommodating, tolerating, feeling responsible, and feeling guilty.

The crisis as a discourse, as a permanent framework of interpretation, is used to reduce rights and freedoms, and also to cause a crisis in participation and the option to change things, politics, and institutions, so that we all think that we are in a permanent struggle of everyone for him or herself, in which the only important thing is to save one’s own skin and in which the collective response mechanisms, the networks of solidarity, and above all the critical response networks are destroyed. A certain discourse about the crisis, however, blamed the victims and placed all the responsibility on them, because it was they, despite them being the weakest link in the chain, who apparently lived beyond their means. Crisis and fear are two instruments for a change of values, for a change of society.

It is about blaming the victims by individualizing the analysis of what happens to them and limiting the responses to the individual. In a climate dominated by fear and insecurity, we find fertile ground for social fragmentation, for xenophobia, for excluding identities, for individualizing analyses and welfare responses.

As it says in one of Amnesty International’s (2017) campaigns: “Poverty is the worst human rights crisis: it demands dignity” and dignity is about changing the conditions that lead to poverty and not changing people to accept their unjust living conditions or context.

In the analysis, as well as crisis as a word, the measures taken to respond to the crisis can be added. These are presented as exceptional and the only way forward but in no case are they the only possibility. They are decisions that involve choosing from different options. For example, a choice could have been made between rescuing the banks, the financial system and the highways, or rescuing people. The crisis and fear are used as an excuse and a cover to make decisions and present them as exceptional and the only path to follow. They are used to break the social pact established in the past in which basic rights and needs were covered (education, healthcare, social services, and pensions) that have never before been reduced in our country with the virulence with which it was done during this crisis. The losses of those who caused the crisis are socialized and distributed so that the bill and consequences are paid for by all of us while cuts are made to public rights and investments, and austerity is spoken of as necessary but applied only to a part of the equation and the system. Therefore, subjective decisions faced with diverse alternatives, are masked as sole, objective, and painful but necessary responses. The only path to follow as shock therapy in an emergency situation.

European austerity programs have dismantled the mechanisms that reduce inequality and enable equitable growth. With the increase in inequality and poverty, Europe faces a decade of loss. If the austerity measures continue, in 2025 between 15 and 25 million more Europeans could be immersed in poverty (Intermon Oxfam, 2013, p.35).

Austerity contributes to the increase in inequalities that will make this situation of economic fragility last, exacerbating suffering unnecessarily... It increases the level of unemployment, decreases wages and creates more inequality... There is no example of a large economy that has grown again thanks to austerity (Stiglitz, 2013, p.3).

The crisis and its interpretation, as well as the response that is being provided to it, the measures that are being taken, based on austerity, aim, possibly, to shape a different society, a society in which we all feel that we are enemies of each other, that we are all in a kind of eternal war for survival. What are psychology and psychologists doing mostly in this situation? Are we serving as instruments to individualize the problems and their causes? To establish the measures to be taken?

It is not only the crisis, but also due to a new model of society based on structural poverty, constant risks of exclusion that affect broad sectors of the population, widespread precariousness, increased inequalities and fewer opportunities for social mobility, helplessness, and insecurity.

We live in a sick world. As thinkers such as Koselleck (2007)
point out, fear is the value par excellence. We live in a world in which the old social diseases are returning—lack of friendship, lack of communication, and persecution of the different.

DATA ON THE CURRENT SITUATION

The data are illustrative and show a different society from that which we previously knew, with very important repercussions on the ways of life and the psychological and social effects of these situations.

Unemployment, poverty, and inequality are increasing, while the huge profits of the most powerful and corruption in many areas of public life come to light, a context of injustice and a deep crisis of democratic values has been generated that should make us angry, move, commit, and mobilize us. We are at unacceptable and shameful levels of poverty, intolerable levels of inequality, and unacceptable cuts in rights.

There is a process of generalized impoverishment of our society. There is talk, for example, of a “lost” generation and decade due to the increase in poverty and inequality. The risk of social fracture is evident in a new social structure where the spiral of scarcity and vulnerability is growing, with chronic impoverishment and growing exclusion processes.

High levels of unemployment are combined with loss of purchasing power of the population with decreases in the minimum disposable income and weakening through massive cuts in social policies and in rights, particularly in health, education and social services.

The long-term social cost of the economic crisis has been underestimated. More and more people have been expelled from their homes. More people are trapped in debt, because the cost of living has increased and their income has decreased. Child poverty is increasing, and young people are deprived of the possibility of dreaming of a future. Public opinion increasingly stigmatizes vulnerable people, as if they were responsible for their situation and as if social protection were a luxury in a time of austerity (European Network Against Poverty, 2016, p. 15).

The future does not exist; we must survive and respond to our own situation of emergency and crisis that is becoming chronic and permanent.

What the crisis does is worsen the situation and increase the inequality with a loss of rights for groups at risk.

Let us look at some data and circumstances reflected in various studies (Fundación FOESSA [FOESSA Foundation], 2014; Asociación Estatal Directores y Gerentes de Servicios Sociales [State Association of Directors and Managers of Social Services], 2017; Intermon Oxfam, 2013; Red Europea de Lucha Contra la Pobreza [European Network for the Fight Against Poverty]: EAPN, 2016; UNICEF, 2014).

The structural nature of poverty, which is also transmitted from generation to generation, is becoming chronic. There is a broad subsidized social class, a culture marked by a lack of expectations, demotivation, and a loss of self-esteem. A living and sharing environment of asylum from the rest of society is created, with vast economic problems as well as problems of health and coexistence. A significant number of people are condemned to have no future. Sooner or later they will be described as parasitic; stigmatizing and demonizing them, they are excluded, dispensable, and unnecessary.

- 4.5 million people receive unemployment benefits or subsidies, plus 789,672 receive minimum income. These people are not even needed for exploitation.
- Poverty is increasing. 10.5 million citizens live below the poverty line. The poverty rate has gone from 19.7% to 21% of households. Almost 3 million people are in severe poverty (less than 30% of the average income), 2.97%, more than double the number at the beginning of the crisis. There are 700,000 households with no income at all (1.3 million people). 22.1% of all people have incomes of less than 60% of the average income.
- 1.8 million households struggle to reach the end of the month (13.7% of all households). For example, 2.6% of households cannot afford to eat chicken or fish at least every two days... There are between two and two and a half million households and no less than 6 million people with serious food deficits: food insolvency or hunger therefore in not less than two million people in the twenty-first century.
- Energy poverty in more than one in ten households, 10.7%, almost two million households with nearly five million people (4.92 million) forced to suffer excessive cold or heat. Supply cuts due to defaults.
- Inequality is increasing, not just poverty.
- We are the fourth most unequal country in Europe only behind Latvia, Bulgaria and Portugal, and just ahead of Greece: the richest 20% of the population has 7.5 times more wealth than the poorest 20%, when this ratio was 5.5 times in 2008 before the crisis.
- We are the country in Europe whose inequality figures are deteriorating most rapidly; from the 2015 data only Serbia, Romania, Lithuania and Bulgaria surpass us. We are far above the European average in inequality, and above countries such as Portugal, Greece, and Italy.
- An absence of social mobility which causes demotivation.
- Income per capita in Spain today is worse than 10 years ago, and income inequalities are growing. In 2015, 700,000 households had no income and 8 million employees did not reach 1,000 euros gross income per month. At the same time we have the largest increase in millionaires in Europe with 15,000 more people (8.4% more than in 2014).
- The role of employment is changing: it is increasingly precarious with low wages, temporary employment, and deregula-
Loneliness is increasing although it is presented as an invisible problem: 4 million people in Spain feel alone; 3.3 million families with children, where the effects are even more chronic. At the end of 2016, there were four million unemployed (more than two years of seeking employment): from 242,800 people at the beginning of 2008 to 1.8 million people in 2016, constituting 41.5% of unemployed people, and a figure that has multiplied by 10. Of the total unemployed, 1.1 million (24.7%) have been out of work for more than four years. One out of four unemployed people.

- 15.3% of working hours are part-time
- More than one in four jobs is temporary (26.5%)
- In the last five years the average remuneration has experienced a fall in purchasing power of 4.5% (912 euros less)
- Six million people (34.4% of salaried employees) earn less than the interprofessional minimum wage
- Unregulated labor market that no longer guarantees inclusion, almost 2 million people have been unemployed for over 2 years, 15% have part-time working hours and 6 million earn less than the interprofessional minimum wage.
- More than 8 million workers are below the poverty line and 400,000 people have stopped looking for work (demotivation); more than a million people are affected by hunger or poor diet. 6.4% of the population are officially poor.
- Precariousness in employment, we are in the leader in Europe in temporary employment and low salaries: 4.2 million people are on temporary contracts, 27% of wage earners. 14.6% work part-time workdays (2.7 million people). Seasonal and temporary work. Salaries well below what is required and do not cover basic needs. Together with Chile and Poland, Spain leads the OECD countries with the most temporary employment in 2015, with more than a quarter of employees being temporary 25.14% and figures worsening which is causing helplessness, instability, and poor quality of life. Contracts of short duration and few hours: they do not give stability or sufficient income.
- At the end of 2016, there were four million unemployed people in Spain (Labor Force Survey, EPA, 4th quarter of 2016). This represents almost one fifth of the Spanish active population, 18.6%.

- Evictions. The number of mortgage foreclosures has multiplied by 3.5, from 25,943 to 91,622, and minimum income earners have doubled in number.
- Loneliness is increasing although it is presented as an invisible problem: 4 million people in Spain feel alone; 3.3 million people over 18 live alone because they have no choice.
- Regarding childhood, in Spain the crisis is especially affecting families with children, where the effects are even more devastating. There are more children in poverty, and they are poorer.

- The poverty rate among the minor population in the period 2009-2010 went from 23.7% to 26.2%.
- The threshold for measuring the poverty rate has been reduced due to the general situation, so it can be said that poverty is also higher in this segment.
- Using the “very high” poverty threshold, in EU 27 Spain is only behind Romania and Bulgaria.
- The impact of the crisis has been greater on children than in the population as a whole.
- Precariousness, measured as the percentage of families without the capacity to face unforeseen expenses has gone from 28% to 37% in the period 2008-2010.
- Chronic poverty, from 2007 to 2010, has increased in minors by 6% (16.7%) and in the total population by 2% (11%).
- Children perceive, and sometimes suffer, the increased stress of adults.
- Many children feel guilty about the situation that has been created, which generates fear and insecurity.
- The change in adults’ roles creates disorientation.
- The level of tension in intrafamilial relationships increases.
- The expectations of the children themselves and of the parents are modified with respect to the future.

- Young people. More than 4 out of 10 young people looking for work are unemployed. Hundreds of thousands of young people have left Spain in search of work, almost always below their qualifications and expectations, and they remain unable to return due to the lack of opportunities in our country and, most cruelly, this situation is justified by speaking of foreign mobility or of the adventurous spirit.
- Youth unemployment figures 42.9% in 2016, double the European average. An authentic “lost generation.”

Some of the consequences that we could point out that accompany this description would be insecurity, fear, helplessness, despair, and a worse quality of life. Helplessness and hopelessness, as an absence of future, are moreover the worst possible circumstances to face as we know well from the classic psychology studies linked to helplessness. Situations of demotivation and exclusion are created. The future does not exist for the majority of the population; they can only survive and live from day to day.

According to Wilkinson and Pickett (2009), the percentage of mental illness in unequal countries is much higher; anxiety disorders, impulse control and other pathologies are highly related to inequality. The rate of mental illness in the population as a whole is five times higher in the most unequal countries than in the least unequal countries. People are five times more likely to go to jail, six times more likely to be obese and they are also more likely to be involved in a homicide.

The psychological effect of being poor despite getting up early every day to go to work can be even more devastating than that of long-term unemployment. The person in the latter situation has, at least, the hope of finding a job. The poor worker, on the
other hand, already has a paycheck and does not see what else he or she can do to escape poverty.

A large part of society lives in a precarious situation. Precariousness generates insecurity. These people live poorly or simply survive in a situation where unexpected expenses or a loss of employment or worsening of working conditions would lead them to lose everything: these are vulnerable economies, vulnerable lives. There is a clear inability to face unforeseen expenses. Four out of ten people are in this situation.

Changes in the role of work also have an important impact, as noted, for example, by Neimeyer (2007) “work determines a large part of our past, our present and our future and its loss causes the foundations of our identity and our life plans to tremble” (p.35).

The loss of housing has consequences of great significance given the sociocultural value associated with it; security, social integration, space for family development, identity and self-definition, social relations and support network, and so on and so on. Security is affected, life projects are shattered, self-esteem deteriorates, as does trust in one’s own resources. Life loses its structure and organization, which includes, in many cases, the separation from the social environment. An eviction is like an emotional roller coaster (Ramís Pujol & Cortés, 2013). An eviction [desahucio in Spanish] is etymologically the loss of “aucio”, hope, living in hopelessness; therefore, it is one of the situations of greatest possible vulnerability.

One of the most striking and serious manifestations of this combined situation of long-term crisis and massive cuts in rights is undoubtedly the evictions, a situation on which we can and must intervene from the psychological and social point of view.

From our experience we can share that it is frequent that, when people are faced with problematic evolutions or critical situations, very intense emotional experiences appear that can often be maladaptive. Guilt, shame, anger, frustration, sadness, impotence, etc., are emotions that are experienced intensely and without the appropriate channeling they cause blocks, and lead to social isolation, existential loneliness and, above all, they generate in the person experiencing them an extremely negative perception of him or herself, and of his or her level of competence.

PROPOSALS FOR INTERVENTION: PSYCHOLOGY WITHOUT BORDERS, PSYCHOLOGY IN TIMES OF CRISIS

We professionals of psychology are workers of social welfare. We are also citizens, and psychology, as a science that is committed to people, has or should have much to say and do in this situation. We must be aware of the need and responsibility we have to practice our profession always—and more so in these difficult times—with a level of demand, professionalism, rigor and commitment to people and to solving their problems that goes beyond reducing the analysis and interventions to the individual.

Psychological strategies based on fear are being used with frequency to paralyze populations that are subjected to a kind of shock therapy which aims to leave them indifferent or anesthetized while their rights are being curtailed. Individualizing visions are being used to decontextualize problems and their analysis.

With certain frequency, as has been denounced in the past (Martín Baró, 1989), psychology fulfills the function in this conjuncture of making the intolerable tolerable, of making the unacceptable acceptable, of labeling the subjects as sick when the system and the environment are what is sick. There is another psychology that is possible and necessary, communitarian, solidary, denouncing, critical, empowering, encouraging resilience and resilient people, opting for a complete analysis of the problems, and incorporating the environment in the conception of the problems and in the proposals for intervention.

It is about bringing the people back together, the community intervention, collective responses, to incorporate in our analyses and proposals the group intervention, in the context, and in the environment.

We must recover the consideration of structural, social, collective, or global aspects as fundamental in the explanation of inequalities, without prejudice to the interventions that may be developed on an individual level.

We must, at the same time, be convinced that people and their welfare should be at the center and should frame all our decisions; people and their suffering, people and their rights, people over and above the economy, over and above money, and over and above growth as the only driver and empty of content.

Psychology has an immense conceptual and intervention arsenal to generate and empower free, independent and supportive citizens, people capable of creating and joining social networks that generate collective responses and mutual social support, people who organize themselves in order to respond together.

There are alternatives; there must be; there have to be. We must build them between us all.

It is the entire community that becomes sick through the maintenance, and the increase, of unfair situations that protect the most powerful social sectors while increasing the pressure on the most disadvantaged sectors, blaming and stigmatizing them.

We are in a critical situation, a crisis that is not only economic but also of values, which is profoundly affecting the trust and credibility in political, economic and social institutions, a situation that cannot leave anyone indifferent, including the professionals of psychology.

Neutrality does not exist, especially in cases of injustice; to be neutral is to side with the powerful and we have already chosen to be together with those who suffer, together with our own. We believe that we must be with those who suffer, with the evicted, with the unemployed, with the excluded; we must take a stand for them and with them. Indifference is impossible. Not intervening does not mean being neutral, but standing next to those with power. Or as noted with a certain humor:
If I disregard the human society of which I am a part (and today it seems to me that it is no longer the size of my neighborhood, or of my city, or of my nation, but covers the entire world), I am being as prudent as someone who goes in an airplane directed by a completely drunk pilot, under the threat of a crazy kidnapper armed with a bomb, watching how one of the engines fails, etc. (You can add if you want some other terrifying circumstance). Instead of joining with the other sober and sane passengers to try to save him or herself, he or she whistles, looking out the window or asks the flight attendant for the lunch tray (Savater, 19912. p. 7)

Recovering the community intervention, the acceptance of the different people with whom we work, recovering the concept of accompaniment are some of the central themes that we believe necessary to recover in our interventions. We must facilitate the creation of social networks of mutual support as a way of intervening, validating the expression of emotions and sharing them.

We must work face to face with the victims of the crisis, accompanying them, recognizing them and vindicating a fair deal with them. Dignity and its recovery means avoiding reifying, stigmatizing, or reducing the people we treat to mere labels. The person we have before us is much more than a criminal or a poor person or a drug addict for example. We must defend that any person, no matter what their situation, is above all a person and deserves to be treated as such.

We fight with other entities the obsession for diagnosing, for stigmatizing, for identifying mental problems, for example, as criminal problems, as in the recent reform of the penal code. The sick are people first and foremost rather than sick, and they must make decisions and understand what is happening to them. They are the center of our intervention and we have to strengthen their capacity for action and decision.

We act based on the empathic commitment, non-stigmatizing, transcultural, and flexible principles that incorporate the context and the environment into their analysis and intervention approaches.

We need changes in people in order to change societies; flexibility and creativity in the face of blockages, hope in the face of helplessness. We need to be able to understand that power relations are not immutable.

For us to claim and demand that things improve and difficulties and inequalities be overcome is only one side of the coin, while we act by responding to the people that are suffering, providing them with care.

We believe in deinstitutionalization but we also believe that it should be accompanied with sufficient resources so as not to overload families or create higher risk situations.

Some responses that are being given today to the appearance of psychological problems in living are based fundamentally on poor care, pharmacological care, and only in primary care.

Access to health, from a human rights perspective, including mental health should be a right that must be asserted at the same time that we develop actions that make universal access to this right to health possible. Cuts should never be made in health, nor in mental health. Health is a treasure and our main asset; to care for it is a right and a duty.

There are also situations of social precariousness or exclusion that hinder access to currently existing services and before which we must develop efforts to adapt the care we can provide. This is something that we believe we are willing to develop, as mediators and guides in the process.

The crisis has also paralyzed the development of health services linked to the psychological, just when they are most needed.

Consequently, at present, not all those who need to receive psychological treatment receive it and those who receive it do not always come to consultations periodically. In the best case, when the person has economic resources, they can go to a private center, where the care received will be the one demonstrated in the scientific studies, the most efficient, efficacious, and effective.

We believe in a preventive psychology, which gives simple information to the population, avoiding irrelevant technicalities that only serve to make it incomprehensible for citizens.

We do not believe in the medical model in which the therapist is the agent and the other the patient, in which people are stigmatized only as mere diagnoses or labels loaded with stigmas. Frequently in our societies, influenced by lobbies such as the pharmaceutical lobby, life or psychological problems are being transformed into diseases. These problems are being treated based on biologist reductionism, the responses are medicalized and reduced to mere neurochemical imbalances. Psychology teaches us how rich and complex human beings are and how actions, explanations and interventions should be carried out from various levels: biological, psychological or individual, and social.

Psychology has been revealed in recent years as a science that is capable of deepening our knowledge of aspects that other sciences have no access to, the thoughts and feelings of people.

From the psychological point of view one of the phenomena that occur is what we call problems in living: the great securities are lost and one wonders why did this happen to me? What did I do to deserve it? Is the world fair? We have some maxims that serve as self-deception in part in order to continue functioning: what we do in the world, what we decide, has influence and determines what happens to us, that is, if something negative happens to us and we want to maintain the illusion of contingency to stay motivated, we will think that we did something to deserve it. These problems in living are addressed with time and with counselling. But this time is sometimes not available due to the pressure of the moments of crisis.
We believe in a social action that is based on the potential of the subject and not on their shortcomings, that does not wait for problems but goes to them. We start from considering that all behavior is adaptive in the environment in which it develops.

We believe in developing and implementing preventive strategies because we firmly believe that happiness and the ability to deal adequately with things is something that can be trained and taught.

From the social point of view, one of the repercussions that also has a very negative impact is social support. You feel shame, guilt, you feel that you are solely responsible for what happened to you and you break with others, entering a spiral of extremely dangerous isolation to which we must respond immediately.

We start from the consideration that it is not about adapting people to their contexts, but rather it is about giving them back the power to change these sick contexts.

Do we want to be creators of indolence, of acceptance of the circumstances through cognitive reconstructions of the perception of the facts, and of resignation or do we want to be dynamic agents of personal and collective change, uniting the personal with the context which is, often, what is truly pathological?

We are making a psychology that combines working with people with working with contexts. Half response and half claim for a healthy framework and a more just environment. We empathize, we commit ourselves, we accompany, we give support, we fight helplessness and resignation, and we assume the role of animators and facilitators of resources, never of substitute elements for the resources of the people and their contexts. We work based on unconditional acceptance, on a positive vision, on resilience and empowerment, and on subjects of social change.

We show ourselves to be intolerant with intolerance, and we attempt to transform indignation and anger, protests into proposals, actions and critical interventions.

Among the challenges that we must face and that psychology and psychologists must confront, we could identify the following:

☑️ What is the minimum level of income in order to have a dignified life and what is the psychological and social consequences of not having that minimum income or that dignified life?

☑️ What are the consequences of not guaranteeing the absolute minimum social protection to people?

☑️ What alternatives do we develop in the face of the loss of the role of work as a guarantor of a dignified life and of social insertion, which we carry out when facing the rupture of an orderly and structured life around work that now becomes full vulnerability and helplessness in the face of employment precariousness and temporality?

☑️ How can we count on the people that we treat, so as not to end up treating people but not being able to count on them or their participation or decision?

☑️ Changing the negative vision for the positive one, building models that commit to the positive and to happiness as a framework of interpretation without implying the establishment of the “dictatorship” of happiness: “we must be happy, and avoid pain and suffering.” A framework that commits to resilience and its development. Starting from positive frames of interpretation and creating change and transformation based on the positive, vindicating joy and happiness is much more effective than working only on pain or pathologies. This is not because we want an individualizing or individualistic positive psychology; we believe that true happiness is achieved through cooperation and the collective, as well as through crises and problems.

We believe that putting ourselves in the place of those affected or of the people we are going to treat will help us to understand their situation and, thus, to start from the encounter between people as a key mechanism for intervention. We also start with unconditional acceptance, although this does not mean justifying the unjustifiable or eliminating individual responsibilities.

We start from the firm belief that differences of any kind are not problematic elements in themselves, but also provide opportunities to learn from new realities and situations.

We believe that psychology should not tolerate intolerable situations. It should not help people accept the unacceptable, it should point out the context elements that are sick and help people to transform them together with other people.

Guaranteeing psychological care in situations such as evictions, long-term unemployment, occupational disease, work accidents, and those affected by the preferentes’ are some of the areas in which we are working intensely.

CONFLICT OF INTERESTS
There is no conflict of interest.

REFERENCES


1 Translator’s note: Preferentes are fraudulent shares sold in Spain during the last thirty years, affecting approximately 700,000 people nationwide.


