

Resilience and mediation: mechanisms to resolve family conflicts in times of the SARS-CoV-2 pandemic

Resiliencia y mediación: mecanismos de resolución de conflictos familiares en tiempos de la pandemia de SARS-CoV-2

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SUMMARY

The article analyzes the importance of resilience and the usefulness of family mediation as an effective method of family conflict resolution in times of the SARS-CoV-2 pandemic. To meet the objective, an exploratory descriptive analysis was conducted comparing the official figures of complaints of domestic violence published by the National Police of Colombia during the years 2019 and 2020, in the period from January to February and those occurring after March 11, 2020, the date on which the World Health Organization (WHO), classified the epidemic outbreak of SARS-CoV-2 as a pandemic and in coherence with the mandatory preventive isolation in the country. The study was carried out based on the characteristics of the perpetrators, the type of weapons used, and the distinctive elements of the reports before and after the measure. The studies agree that the global health emergency is a completely new condition that will

be overcome, based on the contributions of different disciplines that emphasize the importance of the consequences on individual and family mental health, overcoming the intervention focused on prevention and treatment; to move towards an intervention oriented towards conflict resolution. From this perspective, family mediation is configured as a strategy that enhances positive personal and family development. The findings allow us to generate proposals that promote family mediation as an effective method for conflict resolution, prevention, and reduction of violence, with the benefits of resilience.

Keywords: Resilience, mediation, family conflicts, pandemic, SARS-CoV-2, and intrafamily violence.

RESUMEN

El artículo analiza la importancia de la resiliencia y la utilidad de la mediación familiar como método efectivo de resolución de conflictos familiares en tiempos de pandemia de SARS-CoV-2. Para cumplir con el objetivo, se realizó un análisis descriptivo exploratorio comparando las cifras oficiales de denuncias de violencia intrafamiliar publicadas por

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la Policía Nacional de Colombia durante los años 2019 y 2020, en el período de enero a febrero y las ocurridas después del 11 de marzo de 2020, fecha en la que la Organización Mundial de la Salud (OMS), clasificó el brote epidémico de SARS-CoV-2 como pandemia y en coherencia con el aislamiento preventivo obligatorio en el país. El estudio se realizó a partir de las características de los autores, el tipo de armas utilizadas y los elementos distintivos de los informes antes y después de la medida. Los estudios coinciden en que la emergencia sanitaria global es una condición completamente nueva que será superada, a partir de los aportes de diferentes disciplinas que enfatizan la importancia de las consecuencias en la salud mental individual y familiar, superando la intervención centrada en la prevención y el tratamiento; para pasar a una intervención orientada a la resolución de conflictos. Desde esta perspectiva, la mediación familiar se configura como una estrategia que potencia el desarrollo personal y familiar positivo. Los hallazgos permiten generar propuestas que promuevan la mediación familiar como un método eficaz para la resolución de conflictos, la prevención y la reducción de la violencia, con beneficios de resiliencia.

Palabras clave: *Resiliencia, mediación, conflictos familiares, pandemia, SARS-CoV-2 y violencia intrafamiliar.*

INTRODUCTION

In January 2020, the World Health Organization (WHO) notified that the outbreak of coronavirus disease 2019 (COVID-19) was an international public health emergency. After rigorous assessments, it defined it as a pandemic on March 11 of this year (1). In Colombia, by Presidential Decree, on March 22, mandatory preventive isolation was declared for the whole country (2).

In view of the sanitary emergency and the mandatory confinement, the Ministry of Health and Social Protection (2020) (3) announced the possible presence of altered emotional states that could occur in the Colombian population, such as the helplessness of not being able to offer protection to their loved ones, increased anxiety due to the uncertainty of confinement, reduced perception of security, irritability, among others, which could increase risk behaviors such as intolerance, family conflicts, and violence (4).

In addition to the above, Ramírez López et al. (5) refer that there is clear evidence of the

serious worldwide effects caused by the SARS-CoV-2 coronavirus pandemic on the capitalist system. This translates into an increase in the economic crisis and social inequality that had already been generated for several years, due to the slowdown in the growth and expansion of capital, where it is worth noting the subsidiary and residual role of the State and the low or null participation it has in the promotion of fair policies that promote the reduction of inequality, reflected during the health crisis in the suspension of the productive sector that has generated the maintenance of some jobs for certain workers, but without salary or with reduced fees. Other aspects to take into account are the effects on mortality and morbidity, the impact on economic and labor activity due to the mobility restrictions created by the closure of the productive sector at the private and governmental level, added to the extreme concern of the population in terms of obtaining the necessary income to support their families.

In this same sense, Marques et al. (2020) (6) makes special mention of the effects on interpersonal relationships that can be generated by the preventive measure of social distancing, mainly on the marital and parental subsystems, in which a considerable increase in the registration of cases of violence is observed; a situation that generates concern, since the home would become a synonym of fear and abuse within families.

This research proposes to answer the following research question: What are the mechanisms for the resolution of family conflicts and which benefit resilience in times of the SARS-CoV-2 pandemic? To evidence the existence of family conflicts, the official figures of complaints of domestic violence published by the National Police of Colombia during the period from January to February 2020 and those occurring after March 11, 2020, were analyzed, making a comparison with 2019.

Mental health, family and pandemic

The World Health Organization (2018) (7) defines mental health as a fundamental element to access integral health because its concept goes beyond the absence of disease or conditions, highlighting the optimal state of the

physical, psychological, and social components of individuals. Mental health allows the development of all human capabilities, including those required to cope with the stress of daily life, productive work, and contribute to society, generating individual and collective well-being.

Considering the above, when considering the main effects on the mental health of the population due to the mandatory preventive isolation established as a preventive measure against the new coronavirus (COVID-19), the family is the main area of study in this research because isolation has generated changes associated with psychosocial aspects that alter the functionality of this system reflected in everyday life.

In this manner, Gracia Fuster and Musitu Ochoa (2000) (8) refer that the importance of the family lies in the fact that this system is the first responsible for the emotional stability of its members, especially in childhood and adulthood; in addition, they consider that it is a determining factor in the process of formation and consolidation of values. In this sense, the family is configured as an aggregate of leisure and consumption, it is the basis for the foundation of a property, the key scenario of social location, the fundamental basis for social relations, and the main enclosure of protection, of support in the face of crises and the vital source for caring for and protecting the health of its members.

COVID-19 has been characterized as a pandemic that has forced preventive confinement in several countries, including Colombia, as a strategy to reduce the transmission of the virus (9). According to previous studies, confinement in the population can generate negative effects on people, not only because of the contagion, the damage it causes to physical health, the difficulties to meet basic needs and services, but also the presence of fear and hopelessness that cause damage to mental health, as well as the resulting interpersonal conflicts, especially in the couple, parenting and family (10). However, it is necessary to keep in mind that there are specific vulnerable groups that may be more sensitive to changes, and it is necessary not to underestimate these problems to avoid generating a mental health crisis (9).

On the other hand, Ramírez-Ortiz et al. (2020) (11) indicate that the consequences of

confinement affect even more the professionals, administrative, support, and general services personnel of the health entities that face the first line of operation in the face of COVID-19 because they have a high workload, feelings of uncertainty and fear due to exposure to the virus. Likewise, the saturated hospital environment, added to the accentuated stigmatization due to their work activities, family commitments, and the demanding need for emotional attention from their families and patients, lead this group to be exposed to the virus (12). The stigmatization of this population group leads them to test their maximum resilience in the face of the current adversity.

Useche, Acero, and Martinez (2020) (13) explain in the preliminary reports of the Colombian College of Psychologists that the most relevant sequelae of confinement are anxiety and stress, affecting not only physical but also mental well-being since it generates greater vulnerability in people to get sick and become involved in interpersonal conflicts. Consequently, this experience may alter the family dynamics either by the situation of isolation or prolonged contact (67). In this regard, Cortella (2019) (14) refers that currently there are urgencies and turbulences around the family and some urgencies cannot be considered causal factors of the loss of homeostasis in the family system.

Between March and April 2020, approximately 37 publications on COVID-19 and its relationship to mental health emerged, reporting a psychological impact on anxiety, depression, and stress level (15,66). As stated by Socías, Brage, and Nevot-Caldentey (2020) (16) high levels of stress can provoke unhealthy coping strategies in people, generating an unsafe environment and a higher risk of negative effects on minors.

Likewise, Tian et al. (2020) (17) refer that feelings of indignation, decreased happiness, dissatisfaction, and behavioral changes are presented due to the rapid spread and absence of treatment. Regarding anxiety levels, the appearance of bodily sensations is interpreted as symptoms of some discomfort, as well as dysfunctional beliefs about health, disease, catastrophic interpretations, decreased capacity for rational decision-making and behavioral control, and so on (15). Therefore, it is relevant that people have elements both at the individual

and community level that led to appropriately managing emotions, thus facilitating the possession of optimal welfare that allows them to strengthen their overall health (18).

Because of the above, Asmundson and Taylor (2020) (19) expose the tendency of people to frequently go to health centers in search of a diagnosis. On the other hand, there is anxiety generated by the desire to buy utensils that protect against the virus, excessive hand washing, and speculations that occur due to possible shortages. Family needs are established in the specific disposition to cover the needs of each member or group, because their internal dynamics, motivations, and order are unique, which makes them change and it is not possible to temporize or prioritize their needs (20).

Concerning the levels of depression, preeminence was found in men, people with a low level of education, and people who reported previous physical discomfort (21). Likewise, an increase in sadness, anger, and resentment due to the death of family members by COVID-19 and the need for psychosocial care mainly to front-line professionals in the face of COVID-19 were also described (22). It should be noted that this situation leads to the fact that relationships, especially with the family, may be associated with a significant number of possible psychosocial alterations, which is why the importance of assessing some aspects that the individual perceives about his or her family system is highlighted (3).

In addition to the foregoing, Minuchin and Fisherman (2004) (23) state that each person belongs to a family system, and at the same time the family is composed of a group of people who fulfill specific functions that are coherent with the role they play; Therefore, they reveal that the family and its members have a reciprocal containment in the processes of communication and spontaneous and continuous interaction, a product of the distribution of family responsibilities which in turn is determined by the hierarchies and the distribution of tasks, but not in a determinant way, because the environment and the situations demand that people perform different roles; therefore, the fracture or expansion of the contexts may facilitate the emergence of new possibilities.

On the other hand, Qiu et al. (2020) (24) report that in lockdowns, stress has manifested itself mainly in women and that young people, the elderly, women, and migrant workers as the most vulnerable. In turn, Cao et al. (25) also reveal the high levels of stress that occur in university students, but they consider them to have protective factors such as living in an urban area, having economic stability, and healthy coexistence with their parents (68). In addition, it is important to mention the impact that this contingency measure has had on people with previous mental health diagnoses because it has shown an increase in impulsivity, anger, and suicidal ideation (26).

Taking into account other aspects that may be affected, studies conducted Miranda-Nava (2018) (27) indicate the harmony of the relationship between wakefulness and sleep that should exist due to the imbalance that can be caused between the two can be considered as a crisis, circumstances that also give rise to disorders that reduce the psychosocial well-being of a person and can even cause public health problems. In relation to this, the affectations in the cognitive and emotional areas, when not treated in time, could unleash not only family, intrapersonal and interpersonal conflicts, but also problems at the public health level.

From the social sphere and after the appearance of the COVID-19 virus, which was cataloged as a global pandemic, the dynamics of human interaction in its different contexts have changed. The family has not been oblivious to this and from the daily experiences within the home, there has been an increase in the perception of stress, which has been analyzed from the transactional theory of Lazarus and Folkman (1986), cited by (28) (1986), is defined based on the relationship between people and their environment, and the subjective evaluation that the subjects make about the stressor is of great importance. In this case, the stressor could be defined as preventive isolation, mandatory in which coexistence is given for prolonged and continuous periods, added to the fear of contagion. Specifically, perceived stress is defined as the perception that people have of the levels of stress generated in their environment; in the case of most people in a health crisis, the most immediate context referred to is the family system.

In this sense, Cadenas (2015) (29) says that due to the current situation and the value of the family, its importance is legitimized. To reduce the effects of the measure, it is essential to give special attention to the family as a priority, in which its fundamental functions that have an impact on the development of individuals are rescued (30).

Conflict and family violence

People are defined as complex systems that contain intrapersonal components such as cognitive processes and emotions, interacting through groups that at the same time relate to each other, forming societies and in turn interrelate as states and nations that can constitute civilizations and regions that develop a world that links and forms a planetary system (31), which evidences the social component and the relational nature of man of which the conflict is a part.

In regard to the above, Silva García (2008) (32) indicates that societies throughout history in their different generations evidence conflict as an inherent, natural, determining phenomenon in the daily life of social changes that have been necessary in the dynamics of human life, although he specifies that not in an absolute manner; for humanity to reach the moment in which it is, man needed to face situations of conflict that have accompanied its history, that is why the author identifies it as something connatural to man.

A key definition is that the internal conflict is an inevitable personal experience, allowing us to understand that the conflict is inherent to the human being and that it is immersed in the interpersonal process that each one develops in the environment that surrounds him, as a form of expression between what he perceives as acceptable or not (33).

Likewise, Lederach (2007) (34) proposes from his point of view, the conflict transformation approach, to give a broader look at the situations that arise, getting to the background that produces the conflict to provide a more assertive and fair solution for all those involved in the situation, noting the importance of getting to the root of the real situation that has triggered the conflict, which is nothing more than being able to see but also to look beyond the situation itself, to

understand and respond to the non-conformity that causes the conflict to occur, highlighting those situations that are underlying the situation and that add up to the conflict, allowing a complete view of the event.

For Lederach (2009) (34) the center lies in being able to see and respond to social conflicts, creating changes that lead to a decrease in violence and an increase in justice, and responding to real-life problems produced in human relations, if the conflict can be understood as an opportunity for change for the good of society and even family dynamics, since this explanation applies in any social context and that is why, because of the current health crisis, it is necessary to take up these concepts again.

On the other hand, Calderon Concha (2009) (31) highlights Galtung's definition of conflict: "Attitudes + assumptions + behavior + contradiction" (p. 69). It specifies that attitudes refer to how the parties involved in a conflict feel and think, the perception they have of each other, and the view of their own goals and of the conflict itself. Behavior indicates how the parties to the conflict act, whether or not they seek common interests, their creative or constructive action, or whether they harm or cause pain to the other. Contradiction reveals the real issue(s) of the conflict and how it manifests itself.

In addition to the above, Calderon Concha (2009) (31) indicates that the parties involved in the conflict most of the time difference in their perception of the root of the conflict or contradiction. In many cases, such issues are complicated and hidden, as parties and conflict actors on both sides (including politicians and the media) prefer to focus on attitudes and behavior, both their own (which is generally self-perceived as positive) and that of the other (which is generally described as negative).

Along the same lines, the authors refer that economic poverty promotes the corruption of moral values, leading to the degradation of society and, in turn, to the presence of aberrant behaviors in all environments. This has significant repercussions in homes where there are conflicts among its members and also leads to numerous forms of aggression, a variable dimension, which is called "domestic violence", "family violence" or "intrafamily violence" (35).

For Goyeneche González et al. (2018) (36) violence is attached to the life of human beings, it is part of society and the interaction processes that can occur in the different contexts in which people live and develop, it seems that violence among family members includes the relationships between them that are conflictive, such as disagreements, unaccepted differences, power struggle (inverted roles, authoritarianism, among others), these facts can occur from, sharing the same interests, goods, benefits, and affection, in the same way, that is the power struggle, obtaining dominance and control of one or more people. Perhaps the inverted role due to the socio-economic conditions of the families may have an impact on the upbringing processes, where rules and limits are scarce (children who take care of younger siblings, or children who support their parents) authority is shifted to the grandparents or older children, when parents are absent and they are the ones who share more time with the children (37).

In this way, violence associates people, when there are strong links between those who experience aggression (those who exercise it, those who receive it or closely perceive it), as happens between the members of a family, it may be that as a result of this problem alliances or coalitions arise, whether positive or negative, situations of economic and affective dependence may also arise as a result of psychological abuse, In this way, the oppression of the other in the family (family violence) is interpreted as a form of coexistence under subjection and domination, unacceptable for many and society, but not precisely so for those who experience it (37).

Family violence includes “violence against partners and other family members, who are considered to be perpetrators of abuse; grandparents, parents, children, in-laws, brothers and sisters-in-law, grandchildren, nephews, nieces, daughters-in-law, among others; parents, step-parents, siblings and children are also frequent aggressors” (36).

This type of violence occurs most frequently between spouses, where the male sex predominates as the abuser; therefore, it is the woman who tends to be abused, followed by children and the elderly, in cases where the victim is a minor, the mother is usually the abuser, followed by the father, stepfather or stepmother (37,38). Considering

that this type of violence occurs within the family system, with children, without children, in de facto marital union or free union, in extended, nuclear, or constitutive families, it can be deduced that this problem not only affects the victim but the system as a whole (36).

In families where there is family violence, there is a great problem with communication; it can be deduced that there is aggressive communication, with shouts and verbal threats accompanied by blows or physical punishment. In addition to poor communication with the children, there is abandonment as another type of violence against the child, in this sense, the parents or caregivers are disinterested in the cleanliness and feeding of these and omit the controls or visits to the doctor, also, they generate guilt in children and intimidate them increasing their fear (38).

It has been proven that when family violence occurs, it will have negative effects on those who receive it; this type of physical and mental abuse can lead them to consume alcohol, drugs, and tobacco; in the least favorable conditions it can be a risk factor for suicide; abused children have low academic performance, On the other hand, family violence can be transmitted from generation to generation, giving rise to repetitive cycles of violence among family members, taking into account that children tend to imitate their parents and adopt the same behaviors, customs, and beliefs (38).

Violence has repercussions for children in their future. Family violence could be one of the causes of social crimes, impacting people and generating social problems, this would arise from how the formation of values within the home is given, and how the family dynamics occur. Family violence can likely cause disruptive behavior in adolescents and young people (36).

Undoubtedly, the family is the most important system and for this reason, it is called the primordial nucleus of society (39). Therefore, if it did not exist, there would be a social detriment. However, it is important to emphasize that structural changes in the family have spoiled it; modernism, globalization, and the increase of poverty worldwide have favored the increase of urban and rural violence; and consequently, the growth of insecurity within and outside the family (35).

Since March 2020 when SARS-CoV-2 was declared a global pandemic, studies have been conducted demonstrating the psychological effect, anger, and post-traumatic stress symptoms due to confinement, which impacts family relationships. Vera-Villaroel (2020) (40) explains that in relation to the specific effect of confinement given by SARS-CoV-2, anger and post-traumatic stress symptoms have been reported as psychological effects (41). In addition, there is an increase in reports of family violence. The limitation of the movement of people and animals has revealed an increase in aggression. Therefore, individuals are restricted in their freedom to move around in cities as is already being reported in the rates of violence in different countries. However, abuse, domestic violence, and gender-based violence are naturalized situations in society, they are pre-existing to the SARS-CoV-2 situation. Consequently, lockdown measures can become a death trap for a number of people because of the impossibility of movement (42).

Along the same lines, several authors (43,44) say that during lockdowns in Latin America, the cases of domestic violence have increased; evidencing through the results of this study that the couples satisfied before this time conserved or increased their levels of satisfaction; however, the couples with a predisposition to violence increased the risk. On the other hand, these authors explain that couples have a higher level of dissatisfaction with the structural and boundary elements, compared to the emotional, sexual, and interactional aspects, and that the risk of violence is not related to the condition of the dwelling and is not an exclusive problem that is present in one of the sexes, since both shows to be vulnerable to aggression from their partner; however, there is a higher risk for women (44).

In some cases it is evident that in the face of this adverse situation, “internal skills” of self-control and emotional regulation emerge, which function as resources that promote alternative solutions, in the same way, the family support network and assertive parenting styles also act as protective factors (36,45). Therefore, families in conflict are concerned about improving communication between their members (parents and children) to have a good coexistence among them (38).

Resilience and family mediation in times of COVID-19

Currently, the population worldwide is facing the threat of COVID-19, caused by a virus belonging to the coronavirus family, first recognized in China in December 2019, reaching an exponential rate of contagion and transmission that has come to collapse healthcare systems in high-income countries (46). Despite the importance of mental health problems that have been generated during pandemics, little information is available in the context of COVID-19 (15).

Hence, Vera-Villaroel (2020) (40) says that cognitions, emotions, and behaviors are fundamental in the specific health-disease processes of COVID-19. In this sense, the author states that currently there is initial evidence on emotions and COVID-19 reported as fear and uncertainty. In addition, reactions of anguish, anger, and extreme fear in the face of the contagion of the disease in addition to anxiety and depression disorders, increased consumption of food and psychoactive substances, which from Psychology are considered coping strategies against extreme and continuous stress as has been this pandemic in different countries. Likewise, there has been an increase in domestic violence due to anger and aggression (44).

Gallegos et al. (2020) (42) explain that the absence or decrease of interpersonal communication increases the risk of presenting or increasing depressive and anxious disorders, although some people try to channel their fears and worries through different behaviors and it is also likely that irrational behaviors are manifested as a response to the perceived demands in the environment, which are inadequate psychological responses to face the healthcare crisis since psychosocial coping strategies and prosocial behavior should be implemented.

Likewise, fear is a response generated naturally in situations of uncertainty and confusion such as the situation of lockdown, and also has an adaptive advantage because it allows people to be alert and guide decision-making, benefiting more responsible intra- and interpersonal behaviors, resulting in important to provide an adequate

treatment to fear and uncertainty so that they do not become disorganizing and paralyzing (41).

In addition to the above, it is recommended to act prudently and not to create unnecessary alarms that magnify the risk, or underestimate the danger to avoid fear; furthermore, it is necessary to adequately manage official information to deactivate non-existent alarms, reduce anxiety and promote more adaptive behavior (47).

Likewise, recognize the feelings and provide adequate care, understanding that the SARS-CoV-2 pandemic is a transitory condition and that in time life will return to normal and everything will help to develop resilience as a capacity to cope with adverse situations (48). However, each individual has to identify the actions and strategies that best fit or help them to cope with the circumstances and overcome the symptoms or manifestations associated with the confinement (42).

Therefore, it is pertinent to consider resilience as an interdisciplinary concept that facilitates investigating alternative approaches in the processes of assistance in social intervention and although it is a common word in everyday life, there is no consensus on the definition; this concept and resiliency have emerged as holistic concepts that explore individual and interpersonal capabilities and internal forces that can be developed to grow and learn in adverse situations (49,50).

The American Psychological Association (2020) (51) defines resilience as the process that facilitates good adaptation to situations of adversity, trauma, tragedy, threats or sources of stress, as well as relational and family problems, serious illness or work and financial stressors; resilience not only involves recovery from difficult experiences but can also involve profound personal growth.

Similarly, Rosenberg (2020) (52) states that it is transcendental to rescue the abilities, capacities, and skills that allowed facing similar situations in the past, taking into account that as a process, people possess the capacity for resilience because it is inherent, it can be increased and used in favor to facilitate adaptation and overcome the COVID-19 pandemic; starting by understanding what resilience is and what

it is not, for its promotion among workers and healthcare organizations.

Castañeda Rosas (2020) (53) states that resilience is conceived as a process but sometimes also as a series of columns that reflect a capacity; It is not intrinsic to the person, since it comes from an adverse or traumatic event, and resilience is based on a balance of forces between the internal strengths of the person and his or her social relationship with other people. Therefore, the resilience caused by the confinement of SARS-CoV-2 is considered by this author as a potential to take time to work on the formation of resilient mechanisms that have helped to move forward in times of adversity and strengthen communication.

Finally, family resilience because it enables collaboration among family members, allowing the establishment of renewed or new competencies, mutual support, and the confidence that together they will be able to withstand moments of adversity. From this approach, each member should be empowered, strengthening the belief that if they act together, family members can overcome obstacles that are apparently insurmountable and also experience that success is largely the result of their efforts, resources, and skills, increasing the family's confidence and effectiveness, allowing them to face subsequent adjustments more effectively (49). This author, citing Walsh (1998) (49), emphasizes that from this point of view, resilience provides a positive pragmatic framework, which directs interventions aimed at strengthening the family through the resolution of its current problems, which is indispensable at this time of health crisis.

In the same sense, Gallegos et al. (2020) (42) state that during preventive isolation people need to feel that they live in a controlled and safe context, since the uncertainty and insecurity caused by the health crisis and associated with the lack of certainty about the current phenomenon, facilitate the origin of anxiety that can lead to selfish and individualistic behaviors in the search for solutions to problems that are collective, in addition to the condition of confinement that reduces the timely provision of psychosocial intervention services and routine psychotherapeutic counseling.

Therefore, it is necessary to use preventive measures, accompaniment, monitoring, and

emotional and psychosocial assistance to respond to the demands of each situation, promoting conflict resolution effectively, which is why it is essential to refer to mediation, which is defined as a method of conflict resolution, in which the parties involved in a family discussion voluntarily decide that a neutral, impartial person, without decision-making capacity, will intervene so that the members of the family in conflict can reach an agreement through a process of communication (54).

In addition to the above, Siller Hernandez (2016) (55) says that in the family system, it is usual for conflicts to originate because it is the first and most significant socializing entity. However, if there is no adequate conflict management, they can escalate and end up in court, being necessary to receive help from a partial and neutral third party to reach a solution, opening a broad context for the application of mediation. Likewise, Vásquez Gutiérrez (2011) (56) mentions that society is facing the benefit and broad study of conflict and its peaceful solution, so it is necessary to make available to the community the positive perception and apply tools of change from mediation that allows dealing with these situations in a rational, objective way and reaching the best agreements for the parties. This becomes a great opportunity in the current health crisis to strengthen the family through mediation as an effective method of conflict resolution.

Conflict in itself is not necessarily destructive, because it can produce positive changes and growth, a family crisis at a time when instability interacts intensely with those of stability generates unique opportunities for change and growth that takes advantage of mediation not as a process of counseling or psychotherapy, but as a joint work aimed at a middle point that, in certain problems, allows the parties to listen to each other perhaps for the first time (57).

METHODOLOGY

This study was conducted under the quantitative paradigm, with data provided by the National Police Officer of the Department of Norte de Santander, in relation to the complaints of domestic violence, formulated by the victims

during the years 2019 and 2020, from January to May; study with exploratory-explanatory scope, being the purpose the understanding and familiarization of the phenomenon of domestic violence in Norte de Santander, the study is conducted under a descriptive scope since it uses variables to locate the phenomenon and thus be able to describe a situation and is a work developed under the non-experimental transactional-descriptive design (58).

The cross-sectional period in which the study data is located is between January 1 to May 15, 2020, considering that on March 11, 2020, the World Health Organization (WHO) classified the SARS-CoV-2 epidemic outbreak as a pandemic and Colombia declared mandatory preventive isolation according to Decree 457 of March 22, 2020.

The instrument for data processing was organized into 8 variables, which are presented below: sociodemographic data of the aggressor; gender, marital status, age, grouped by childhood, adolescence, young adulthood, and older adults; occupation, profession, and country of origin of the aggressor. Aspects that characterize the acts of violence were also analyzed, such as frequency by year, month, hour, frequency by the municipality, modality of the act, and weapon used.

RESULTS

According to Table 1, it was found that between 2019 and 2020 from January to May 2793 cases of domestic violence were presented in Norte de Santander (100 %), of which 1 455 cases (52 %) were presented in 2019 and 1 338 cases (48 %) in 2020, this allows concluding that, in 2020 there were 117 cases less than in the previous year. However, it is important to take into account that the measure of mandatory preventive isolation limited the movement and mobility of people, which may have influenced the number of reports made during this period.

Table 2 shows that, when comparing the number of cases of domestic violence in 2019 and 2020, in January and February of the last year, an increase of 234 cases was found compared to the previous year, contrary to what happened in March, April and May, in which 351 cases were

Table 1

Frequency and percentage of cases of domestic violence by year in the months from January to May

Year	Frequency	Percentage
2019	1 455,	52
2020	1 338	48
Total	2 793	100

Source: Prepared by the authors with data from reports of domestic violence in the National Police of Colombia, Department of Norte de Santander.

found less than in 2019. However, the caveat is that the country is in confinement since March 25, 2020, and the family remains together for a long time, which possibly prevents the victim from filing complaints, as they are generally made without the presence and prior knowledge of the perpetrator.

In this regard, the United Nations High Commissioner for Human Rights notes that domestic violence has increased in many countries

due to the measure of mandatory confinement. While, on the one hand, quarantine contains the outbreak, on the other hand, it forces many women to remain at home with their perpetrators, a situation aggravated when there is no police presence and access to justice is limited because the courts are closed or have restricted opening hours (59). In relation to the episodes of domestic violence, generally, the severity is ascending, starting with offenses and threats, reaching injuries, and may reach homicide or femicide.

Table 2

Frequency and percentage of cases of domestic violence by month

Month	Frequency (2019)	Percentage (2019)	Frequency (2020)	Frequency (2020)
January	227	16	390	29
February	274	19	345	26
March	354	24	226	17
April	268	18	161	12
May	332	23	216	16
Total	1 455	100	1 338	100

Source: Prepared by the authors with data from reports of domestic violence in the National Police of Colombia, Department of Norte de Santander.

When analyzing Table 3, it was identified that Cucuta is the municipality with the highest number of reported cases of domestic violence (2 314) in 2019 and 2020, followed by the municipality of Villa del Rosario (242) and Los Patios (173 cases). Likewise, it was evidenced that in the

municipalities of Cucuta and Zulia, the number of cases reported in 2019 was higher, compared to 2020, the opposite case was identified in the municipalities of Los Patios and Villa del Rosario where there was an increase in 2020.

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Table 3

Frequency and percentage of cases of domestic violence by the municipality in 2019 and 2020, from January to May

Municipality	Frequency (2019)	Percentage (2019)	Frequency (2020)	Frequency (2020)
Cúcuta (CT)	1 229	84	1 085	81
Zulia	39	3	15	1
Los Patios	70	5	103	8
Puerto Santander	2	0	4	0
San Cayetano	2	0	2	0
Villa del Rosario	113	8	129	10
Total	1 455	100	1 338	100

Source: Prepared by the authors with data from reports of domestic violence in the National Police of Colombia, Department of Norte de Santander.

Based on the data in Table 3, the rate of complaints per 1 000 inhabitants was constructed, observing that in 2019 in the municipalities of Cucuta, El Zulia and Villa del Rosario per 1 000 households filed 5.6; 4.7, and 3.6 complaints of domestic violence respectively.

In 2020 in Cucuta, Villa del Rosario, and Los Patios, 4.7, 3.9, and 3.6 complaints were filed per 1 000 households, respectively.

The municipalities where complaints increased in 2020 with respect to 2019 were Los Patios (3.2 %), Puerto Santander (2.1 %), and Villa del Rosario (1.4 %).

Table 4

Rate of reported domestic violence per 1,000 inhabitants

	Total number of complaints (2019)	Total projected population (2019)	N° of households (2019) (total population/average number of persons per household)	Complaint rate per 1 000 households (2019)	Total number of complaints (2020)	Total projected population (2020)	N° of households (2020) (total population/average number of persons per household)	Complaint rate per 1 000 households (2020)
Cucuta	1 229	749 197	220 352	5.6	1 085	777 106	228 561	4.7
Zulia	39	28 240	8 306	4.7	15	29 392	8 645	1.7
Los Patios	70	93 754	27 575	2.5	103	97 220	28 594	3.6
Puerto Santander	2	8 938	2 629	0.8	4	9 262	2 724	1.5
San Cayetano	2	7 442	2 189	0.9	2	7 790	2 291	0.9
Villa del Rosario	113	107 288	31 555	3.6	129	111 254	32 722	3.9

The rate of reported domestic violence is equal to:

$$\text{TDVI} = \frac{\text{No. of domestic violence reports}}{\text{Total households in each municipality}} * 1000$$

To calculate the number of households, the average number of persons per household was considered to be 3.4 according to DANE (2019).

According to the data in Table 5, more than 80 % of family violence incidents occurred on public roads in both years. This indicates that most of the episodes occur outside the home.

In 2019 9 % and 2020 15 % of the events occurred at the victim's home.

Table 5 shows that episodes of violence against a family member, in addition to occurring in the home, can occur in different spaces, with the highest incidence occurring in the home, followed by inside the home and in public spaces. According to several studies, the abuser not only commits violence in the home, but also frequently

commits aggression in the street or on public roads, and impulsivity has been found in those who commit family violence (60-62). Although family violence occurs outside the home, as in the case of public spaces, it is related to domestic violence since impulsive people are unable to inhibit their behavioral responses, showing that if the aggressor exercises violence in front of third parties, it is very likely that he does it at home alone with his victims.

Table 5
Frequency and percentage of cases of family violence according to the site of the event

Site	Frequency (2019)	Percentage (2019)	Frequency (2020)	Percentage (2020)
Apartment	0	0	2	0
House in gated community	0	0	2	0
Residential houses	75	5	163	12
Shopping mall	2	0	0	0
Inside the house	60	4	35	3
Building	0	0	4	0
Public / state entity	0	0	1	0
Commercial establishment	9	1	6	0
Public establishment	9	1	0	0
Farms and similar	0	0	2	0
In front of residences -public road	8	1	9	1
Hotels, residences, and similar.	4	0	0	0
Judicial facilities	0	0	2	0
Commercial Premises	2	0	5	0
Another	4	0	2	0
Cab vehicle	0	0	2	0
Public roads	1 282	88	1 103	82
Total	1 455	100	1 338	100

In relation to Table 6, it was identified that during 2019 and 2020, single people are the ones who report the most cases of family violence, followed by people in free unions. When comparing the cases reported during these years, it was found that single persons presented an increase of 14 cases in 2020, while, in free union, there was a decrease of 97 cases, as well as in married persons with a decrease of 32 cases.

Proportions reflect that this is not gender-based violence against women. Source: Prepared by the authors with data from reports of domestic violence in the National Police of Colombia, Department of Norte de Santander.

According to Table 7, based on the gender reported, it can be observed that both men and women have filed complaints in similar

Table 8, presents the cases of domestic violence according to age group, it was concentrated in people between 18 and 59 years old, 81 % in 2019 and 78 % in 2020; existing a higher incidence of violence and therefore complaints in the group of young adults (18-26 years old).

Table 9 allowed identifying the frequency of the modality with which the act of violence was carried out in 2019 and 2020, this information was not reported, however, in the cases in which it was reported, it was found that fights are the

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Table 6

Frequency and percentage of cases of domestic violence according to marital status

Marital status	Frequency (2019)	Percentage (2019)	Frequency (2020)	Frequency (2020)
Married	83	6	51	4
Divorced	2	0	0	0
Not reported	1	0	5	0
Separated	12	1	18	1
Single	1 066	73	1 080	81
Free union	280	19	183	14
Widower	11	1	1	0
Total	1 455	100	1338	100

Table 7

Frequency and percentage of cases of domestic violence according to gender

Gender	Frequency (2019)	Percentage (2019)	Frequency (2020)	Frequency (2020)
Female	739	51	681	51
Male	715	49	652	49
Not reported	1	0	5	0
Total	1 455	100	1 338	100

Source: Prepared by the authors with data from reports of domestic violence in the National Police of Colombia, Department of Norte de Santander.

Table 8

Frequency and percentage of cases of domestic violence according to age group

Age	Frequency (2019)	Percentage (2019)	Frequency (2020)	Frequency (2020)
Not reported	97	7	158	12
0 -5 years (early childhood)	9	1	6	0
6 -11 years (infancy)	27	2	22	2
12 -17 years (adolescence)	60	4	51	4
18 -26 years (young adult)	409	28	341	25
27 -59 years (average adult)	776	53	706	53
60 or older (senior citizen)	77	5	54	4
Total	1 455	100	1 338	100

Source: Prepared by the authors with data from reports of domestic violence in the National Police of Colombia, Department of Norte de Santander.

main modalities of violence reported with an increase of 283 cases, compared to 2019.

In Table 10, it is observed that in both years the type of weapon reported with which the

acts of violence were exercised were blunt objects, which means that the arguments have surpassed verbal to physical harm. Likewise, it was observed that the percentages of violence

Table 9

Frequency and percentage of cases of domestic violence according to the modality of the event

Modality	Frequency (2019)	Percentage (2019)	Frequency (2020)	Frequency (2020)
Not reported	957	66	338	25
Quarrel between permanent partners	143	10	502	38
Spousal quarrel	67	5	43	3
Sibling quarrel	34	2	60	4
Son-father quarrel	32	2	37	3
Son-mother quarrel	45	3	57	4
Quarrels	177	12	301	22
Total	1 455	100	1 338	100

Source: Prepared by the authors with data from reports of domestic violence in the National Police of Colombia, Department of Norte de Santander.

without the use of weapons have been very low 3 % in 2019 (although the percentage of cases not reported is high) and 22 % in 2020 (the cases where it is not reported decreased). In addition, the non-resolution of conflicts by peaceful means is evident, taking into account that in most cases there is ignorance of alternative methods of conflict resolution or the

non-use of these within the justice system, it is common that in most cases people and justice choose to use traditional judicial procedures, through penalties, punishments or sanctions (63). Omitting the possibility of addressing conflicts from their origins and linking all actors (victims and perpetrators) in the judicial process to new alternatives for conflict resolution.

Table 10

Frequency and percentage of cases of domestic violence according to weapons and/or means

Weapons -Media	Frequency (2019)	Percentage (2019)	Frequency (2020)	Frequency (2020)
Bladed weapon / Sharp	61	4	56	4
Firearm	15	1	11	1
Blunt weapon	376	26	636	48
Not reported	957	66	338	25
Without the use of weapons	46	3	297	22
Total	1 455	100	1 338	100

Source: Prepared by the authors with data from reports of domestic violence in the National Police of Colombia, Department of Norte de Santander.

In Table 11, it is evident that in 2019, the hours with the highest frequency of domestic violence cases were from 18:00 to 21:00 hours, midnight between 21:00 and 24:00 hours, and early morning from 00:00 to 3:00 hours.

While in 2020 the highest frequencies are at midnight at 00:00 to 3:00 hours, with the same number of cases, followed by night from 18:00

to 21:00 hours and morning from 9:00 to 12:00 hours.

In the cases in which the aggression is exercised towards the children, it is recorded that the hours in which the maltreatment occurs are during the day, while with the other members of the family (the partner or the elderly) it occurs with a greater incidence at

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night or in the early morning hours (64). In addition, there is evidence of increased alcohol consumption during lockdowns, more frequently on weekends (Saturday and Sunday) at the end of the afternoon, at night, and in the early hours of the morning (65). Thus, a coincidence is identified between the times at which the cases of violence and alcohol consumption were

reported, as well as the relationship between alcohol consumption by the aggressor and the risk of domestic violence (66). Consequently, there is evidence of an increase in cases of domestic violence at night and in the early morning hours, which coincides with the condition of lockdowns in which they share more time in their homes, a situation that could be associated with alcohol consumption.

Table 11

Frequency of cases of domestic violence according to the time of occurrence by year

Year	Time								Total
	00:00 -03:00	03:01 -06:00	06:01 -09:00	09:01 -12:00	12:01 -15:00	15:01 -18:00	18:01 -21:00	21:01 -24:00	
2019	276	62	160	152	124	166	301	214	1 455
	276	42	147	204	120	195	212	142	1 338
Total	552	104	307	356	244	361	513	356	2 793

Source: Prepared by the authors with data from reports of domestic violence in the National Police of Colombia, Department of Norte de Santander.

Finally, Table 12 shows that the highest frequencies of cases of domestic violence according to the hours in which the event occurred by month in 2020, are in January from 18:00 to 21:00 hours, in the early morning from 0:00 to

3:00 am, and in the morning from 9:00 to 12:00 hours. In February from 18:00 to 21:00 hours, from 15:00 to 18:00, and from 9:00 to 12:00 are more frequent in the first two months of 2020 than in 2019.

Table 12

Frequencies of domestic violence cases according to the time of occurrence by month.

Year	Time								Total
	00:00 -03:00	03:01 -06:00	06:01 -09:00	09:01 -12:00	12:01 -15:00	15:01 -18:00	18:01 -21:00	21:01 -24:00	
January (2019)	54	14	19	26	17	27	40	30	227
January (2020)	63	24	53	63	39	39	69	40	390
February (2019)	39	14	38	31	16	43	63	30	274
February (2020)	53	8	34	57	22	59	62	50	345
March (2019)	66	21	38	28	21	41	72	67	354
March (2020)	46	4	22	48	28	29	25	24	226
April (2019)	54	3	29	44	28	18	51	41	268
April (2020)	55	4	21	21	11	28	12	9	161
May (2019)	63	10	36	23	42	37	75	46	332
May (2020)	59	2	17	15	20	40	44	19	216
Total	552	104	307	356	244	361	513	356	2 793

Source: Prepared by the authors with data from reports of domestic violence in the National Police of Colombia, Department of Norte de Santander.

In March, April, and May they have occurred more in 2019, in March the most frequent from 18:00 to 21:00 hours, followed by midnight from

21:00 to 24:00 hours and early morning from 0:00 to 3:00 hours. In April the highest frequency is from 18:00 to 21:00 hours, from 0:00 to 3:00

hours, and from 9:00 to 12:00 hours. In May the highest frequency was from 18:00 to 21:00 hours, from 0:00 to 3:00 hours, and from 21:00 to 24:00 hours. It is important to note that in March, April and May the cases were higher in 2019, while in 2020 January and February were higher.

CONCLUSIONS

The results of the study show that various forms of aggression are present in the family, in contrast to the concept of family as a place of protection characterized by the union of its members (67). Intrafamily violence is a recurrent factor that originates different social problems, demonstrated in a significant number of reported complaints, which has made this phenomenon an object of research due to the need to delve in-depth into the elements that configure it and propose intervention strategies with effective methods that allow the solution of family conflicts and consequently, contribute to the prevention of violence.

Likewise, it is evident that during the mandatory preventive lockdowns due to the SARS-CoV-2 pandemic, domestic violence has occurred, with a decrease in reported complaints (117 cases) compared to the same period of the previous year, inferring that these figures may be affected by the same conditions of mandatory isolation, taking into account that the victims are forced to share 24 hours a day with their aggressor and, in the worst conditions, they lack space and means to file complaints or seek help (68). It should be noted that during lockdowns there is a reported increase in several psychosocial risk factors for domestic violence, such as increased alcohol consumption, increased workload, loss of employment, or decrease in income.

For this reason, family mediation becomes a strategy that positively enhances personal and family development. Consequently, based on the results found, it is suggested to generate proposals that contain family mediation as an effective method for the solution of family conflicts, the prevention, and reduction of violence, and the promotion of resilience.

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