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# Effective Ways to Rehabilitate Victims of Violence

**Kholida Ziyaeva**

PhD, National University of Uzbekistan named of Mirzo Ulugbek, Uzbekistan

**Abstract:**

Of all of the types of violence that create victims, domestic violence produces the greatest number. Survivors worldwide often suffer from many traumatic effects, including complex post-traumatic stress disorder (PTSD), sleep problems, trust issues, anger problems, anxiety, low self-esteem, depression, phobias, dissociation, emotional numbing, self-destructive behavior, drug or alcohol problems, and difficulty accessing assistance from agencies. If untreated in children and adolescents, these effects can lead to a higher possibility of becoming an abuser as an adult, suicidal thoughts or attempts, persistent mental health issues, and chronic physical conditions, as well as problems with anger/violence and self-control. Contrarily, for children who witness intimate partner violence but are not physically abused, there is still a considerable chance of developing PTSD and other problems. Traumatic effects on victims can also extend into relationships with family, friends, and the community. An analysis of the traumatic effects of domestic violence against women conducted in 2014 noted a lack of literature on the effects of domestic violence on men, and little explored effects on transgender victims and non-binary populations [1]. Despite the substantial number of domestic violence victims and the severe trauma that can result, there are delicate issues to be resolved and barriers to overcoming these problems. Almost all victims are at high risk of not being believed by friends, family, or authorities, which is crucial to avoiding secondary trauma from the lack of acknowledgment and support. Many victims are even discouraged from pursuing assistance from agencies both directly and indirectly, which leads to the need for education and training on the realities of domestic violence for visible authority figures who can assist victims. Access to safe and affordable housing is one of the most urgent needs of domestic violence victims, as nothing about the survivor or her life is other than victimization without a safe home. All other needs, including mental health treatment, are secondary to this fundamental need. There is a strong necessity to ameliorate current affordable housing programs and procedures to create true safety and desirable assistance for survivors. Another need is the potential for self-advocate trainings for service providers and authorities that focus on the realities of domestic violence as well as the potential questions and ways to approach someone suspected of being abused. A training network

would be beneficial for case studies of successful advocates in similar communities to be examined and learned from as part of the education [2].

**Keywords:** Violence remains, physical and psychological health of individuals, victimization, Rehabilitate Victims of Violence.

## Introduction

Violence remains a significant threat to the physical and psychological health of individuals and communities in our world. Its numerous manifestations are amply documented across a WHO fact sheet (2021). Victims of violence face adverse effects that extend beyond physical trauma. Often, severe psychological consequences lead to social dysfunction – withdrawal from or fear of people, work or schooling. Behaviors that regain efficacy or control over someone's life frequently involve substance misuse or retaliatory violence, further fuelling cycles of community-level violence. Victims also experience tangible social costs – increased burdens on health care systems and disruption of community support structures.

Effective rehabilitation of victims is challenging. The ideal supporting environment is often absent. Safety or resources may be elusive; fear of stigma prevents even the availability of assistance. Supportive strategies must thus actively involve engagement with victims. Acts and skills must be both observable in and show efficacy for violent circumstances of violence. Active engagement and experience become paramount to rehabilitation across cycles of victim violence. Drawing on the literature surrounding media effects of fan violence across fandom cycles, effective strategies and their elements can be found through collective considerations of ‘mass moral panic’ and ethical interactions with media.

## 2. Understanding the Impact of Violence on Victims

Violence can disrupt, wound, or destroy a victim's life and put its victims in a vulnerable state that can lead to the perpetuation of violence until the victim attempts to cope or seeks help. Understanding whom violence affects and how is crucial for developing adequate prevention measures and properly addressing the needs of the victims who survive [3]. Victims of violence include a wide range of individuals subjected to direct and indirect victims, one-time victims and multiple victims, personal and collective victims, as well as active and passive victims. While repeated victimization configurations can vary, they often involve similar contexts and dynamics in different social spheres, with gender and socioeconomic inequalities playing a central role. These underlying factors often bring collective contexts into the individual dimension, leading to the invisibility of violence and its risks on health, well-being, and life in general.

Exposure to violence has a negative impact on the lives of individuals, generating physical, emotional, and/or psychological effects that can alter the life of the victim [4]. In broad terms, violence leads to the violation of the basic and fundamental rights of individuals, which are the right to not be injured or killed, to have opportunities for development, and to live free from fear. Individuals exposed to violence often find themselves in a hostile environment that makes it difficult to recover, either because it becomes a daily risk or because their basic rights are not guaranteed. As a consequence, they can either experience feelings of injustice and impotence or become aggressors themselves as a way of coping. Common physical effects caused by violence include injuries or death, while common emotional and psychological effects often derive from fear, sadness, and humiliation. Emotional and psychological effects can lead to post-traumatic stress disorders and broader mental health problems. Overall, violence leads to other forms of violence and has a long-term impact on the affected individual.

### 3. Psychological Trauma and Recovery

The only visible features of victims in those situations were the healing of cut lips or plaster casts on broken arms or legs. Their soul, on the other hand, was always tormented by haunting memories of frightened faces, cries for help, and harrowing scenes of terrifying violence. In addition to pressures for reconciliation and efforts at justice, one of the important aspects of the ten-year post-crisis healing process is the psychological rehabilitation of violence victims. It was found that a deeper understanding of the memories embedded in the victims' subconscious can better assist their recovery [5].

Trauma Memories are the result of traumatic events that left deep scars on the victims' subconscious. These traumas are often blocked from the individual's recollection, but they still reside within, constantly distorting their life perspective. They tend to resurface when the victims come close to similar conditions as the event or when the subconscious judgment indicates that the victim is in a safe situation [6]. The awakened memories terribly disturb the mental processing, rendering the victim incapable of responding as they normally would. These memories paralyze mind and body. With regards to social life, they may sublimate themselves to a hermit, refuse assistance from anyone, angry at anyone's sign of sympathy, and unable to cultivate intimacy with others. This is the stage of troubled individual consciousness called post-traumatic stress disorder (PTSD).

### 4. Physical Rehabilitation and Care

Victims of violence require physical rehabilitation and care. This concern is significant in the context of adjustment, rehabilitation, and rebuilding lives interrupted by violence. The sentiments that make a person feel like they are a part of society, in the family, workplace, and their life space can all be stripped away with violence and inappropriate care [7]. The fallout is all too familiar. Individuals dealing with violence are medically treated and possibly placed in a private facility where professional caregivers prepare an appropriate environment for them to recover from the trauma. Finding pre-violence routines to establish an environment takes time, patience, care, and multimodal action. This elaborates on basic body care and extra services where available. Victims of violence need to be seen as a whole person—it is both a professional and human obligation. Multimodal care requires the best from caregivers, ranging from their own life management to education, finances, and dealing with the outside world. This dedication needs to lead to a life space for the patient, where they feel back home and safe [8].

Physical rehabilitation services to victims of violence can focus on the restoration of the health and functioning that have been lost as a result of the violence. It may include medical treatment, drugs, operations, therapy, limb-fitting, re-housing, caring, and follow-up care. Physical care denotes attention to the basic needs of the victim of violence, including dressing, eating, washing, sleeping, communication, and transportation. Victims of violence can be assisted through the rehabilitation process by partners, local or national NGOs who provide these services. Where these services are not available, victims of violence can be supported by ensuring that they have access to a rehabilitation center, services, and professionals such as doctors, therapists, nurses, social welfare officers, educationalists, and physiotherapists.

### 5. Social Support and Community Reintegration

Victims of violence often face multiple and complex hardships in the wake of their traumatic experiences of social injustice. But people are not just passive recipients of misfortunes. Relatively unnoticed, victims can build, out of their former tragedies, new capacities that may project into their lives a vivid aspiration for the positive. Support is needed, however, by and through which these capacities may flare up and grow. A capes approach to the rehabilitation of victims of violence considers not only victims' structural/social positions in relation to forces of violence but also the

ways in which, in view of misfortunes, capacities for self-satisfaction, self-exploration, and self-empowerment may burgeon by and through support [9]. Only victims who reconstruct the life conditions for the above-implied selves may overcome their traumatic past, so to become positive contributors to their social environment.

No action is achievable by victims on their own. Victims must be supported and assisted by other social agents, politicians, state agencies, or individuals. The capacity of social agents to positively support victims depends upon their own social position/hardships in relation to social forces of violence. Thus, attention must not only be put on victims' social standing but also on what happened to those who were behind the capacity-constructing and subsequently supportive actions. As communal traumatization was a widespread consequence of violence and social injustice, its aftermaths and legacies go far beyond the capacities and life paths of public victims. The victims' pasts as well as the supportive pasts of social actors should be traced towards progressive social agency with respect to sociopolitical restructuring.

The state and community are the two most important institutional actors who can assist victims of violence. Without state assistance, victims can be severely disadvantaged in their attempts to redevelop capacities to start up/reintegrate themselves in social life. Assistance by the community depends upon the community's own level of capacity to assure safety and reconstruct conditions for the satisfaction of basic wellbeing needs for all its members. This suggests that policy towards community reconstruction and stabilization should be implemented at the very beginning of post-violence reconstruction [10].

## 6. Counseling and Therapy Techniques

Counseling and therapy techniques are essential in rehabilitating the victims of violence. Techniques can be adopted by counselors and mental health professionals to support the victims of violence at various levels. With respect to the violence experienced by categories of people such as women, children, the elderly, substance abusers and mentally ill people along with evidence-based techniques of counseling and therapy, explanations will be provided. Through the years several counseling and therapy techniques have been derived based on research, inputs from professionals and personal experiences. These techniques have been effectively used to address the management and rehabilitation of the victims of violence (substance, domestic, community, etc). There are higher chances of the victims of violence addressing and healing from the psychological and emotional effect of violence once they go through these techniques. Victims should be aware of these techniques, processes and systems, counseling and therapy techniques in order help them take the right decision to assist them in overcoming their trauma. Among the various techniques, Cognitive behavioral therapy, Trauma focused therapy, Group therapy will be elaborated on in terms of methodology, duration and evidence (evidence from studies and literature of professionals working in this area). All the techniques are widely accepted having been successfully implemented and professionally accepted. Counseling and Therapy Techniques Cognitive-behavioral therapy (CBT) – is a common type of talk therapy (psychotherapy). It is based on the concept that our thoughts, feelings, and actions are interconnected. Negative thoughts and feelings can trap patients in a vicious circle. CBT helps people address these negative thoughts and change their behavior. CBT has been used to improve decision making, family and marital relationships, self-esteem, and depression or anxiety management. It is a short-term process that typically involves 5-20 sessions. Cognitive restructuring, self-monitoring and behavioral activation are the main processes in playing an instrumental role in preventing and ameliorating the different types of violence in the society. A source of income will be raised by rescuing the victims to take care of themselves and their family, which might bring a sense of responsibility for their decisions and act as a deterrent for them becoming violent. Cognitive behavioral therapy will tackle several mental disorder issues such as Post traumatic stress disorder- after experiencing domestic violence, mood disorders (depression,

anger, anxiety) will be addressed. Victims of domestic violence might also be suffering from frustration-aggression hypothesis (where frustration in any area ignites aggressiveness in a number of ways. For example, financial discontentment leads to domestic violence). CBT will help to eradicate this vicious cycle. Schizophrenia or altered mental conditions are also addressed by CBT, which is a positive point for this technique. Furthermore, economic dismay in an important factor of violence in the community, family, society, and country too. Therefore, in many ways, CBT might be productive in controlling the growth of violence. Trauma-focused cognitive-behavioral therapy (TF-CBT) is an evidence-based treatment for children and adolescents who are experiencing significant emotional and behavioral difficulties related to traumatic life events. TF-CBT is a short-term, outpatient therapy approach that includes individual and family therapy and psycho-education. Social learning theory is the basis for TF-CBT and is supported by a growing body of research documenting its efficacy. TF-CBT is delivered in 12-16 sessions. Sessions include a gradual exposure to the trauma and discussions of feelings with respect to the trauma (details of the trauma generating sadness, fear etc). After explaining the trauma, the therapist encourages victims to revisit it and narrate it in a different way (therapist encouraging victims to retell it while nurturing a character as a hero in it). The aims of adapting the story to promote cognitive re-evaluation of the event (cognitive appraisal) is a key element in the prevention of the emergence and maintenance of post traumatic stress disorder symptoms. A series of additional techniques may then be used to modify children's and parents' fear response and maladaptive coping strategies (e.g. self-advocacy self-control skills), relaxing techniques to empower family unity. Group therapy involves several clients meeting together with one or more therapists to discuss common interests or concerns. Group therapy is based on different principles of psychology different from individual therapy. It has been approved by professionals to be effective in addressing and managing trauma or behavioral issues. One of the main aims of group therapy is to empower the victims by educating and impacting wisdom, intelligence and confidence through example. Testimony method, role play, process, psychodrama, art play, and peer discussion are few of the methods used in group therapy. A group therapy meeting involves carefully designed procedures, facilitation by skillful professionals, and group confidentiality policy to ensure safety for the victims.

### 7. Empowerment and Self-Esteem Building

Empowerment and self-esteem building are crucial components of the process of rehabilitating victims of violence and other traumatic and highly stressful experiences. University trainers need to be equipped to help survivors regain a sense of control over their lives and the circumstances around them, and at the same time they may need to help rebuild self-esteem and overall esteem. A process of self-awareness and expression of feelings and thoughts needs to be contemplated, as well as rebuilding the confidence to advocate for oneself, become aware of one's own needs and desires, and to develop skills to appropriately communicate them.

Empowerment and self-esteem building are crucial components of the overall healing process and the well-being of survivors. Victims of domestic violence need to be empowered: to help them learn their rights as individuals and as victims, to regain power over their lives and choices, and to accompany them in the decision-making process. The focus is on achieving autonomy, control over one's own life, and the ability to take informed and responsible decisions. Self-esteem building also responds to the victims' needs to feel valued, deserving, and worthy of love and respect, to accept oneself, and to develop a positive self-image. Themes need to take the survivors' experiences of violence into account, so early discussion on rebuilding self-esteem should respond to their needs.

### 8. Legal and Advocacy Support

Legal and advocacy support plays a crucial role in the rehabilitation of victims of violence. Many victims often feel powerless, as if their voice has been silenced, or they fear speaking out due to the repercussions and challenges they may face, such as retaliation or further violence from the abuser.

Access to legal representation and advocacy not only gives victims a voice, but it is also vital in obtaining justice. This includes gathering evidence of abuse, taking measures to protect victims and their families from further violence, and ensuring perpetrators are prosecuted and sentenced [8]. Legal representation, on its own, does not address the broader issues experienced by victims after violence, nor guarantee a positive outcome in court. The role of advocates in the rehabilitation process extends far beyond the legal landscape. Advocates support victims through the entire investigative and court process [11]. This includes assisting with medical examinations and gathering evidence, preparing victim impact statements to present in court, and explaining what to expect in court to alleviate any anxiety or fear. During court proceedings, an advocate will be present to support the victim through every step. It is crucial that every victim has access to a safe and supportive advocate, as this brings a multitude of benefits.

Increasing access to support and education after violence can reduce vulnerability, creating a ripple effect within the community. When one individual is educated or empowered, they are likely to pass that knowledge on, creating an empowered community as a whole. Increasing access to support services and access to justice will mean that fewer crimes are committed, as perpetrators will think twice knowing that they will likely be prosecuted, thus rehabilitating the victim and the community. There are also numerous political and systemic steps governments need to implement to stop violence against women, such as creating laws that focus on rehabilitation rather than punishment and encouraging the community to advocate against violence.

## 9. Innovative Technologies in Rehabilitation

Technology can make an immediate difference to the physical health status of victims of violence. Use of auxiliary devices such as prosthetic limbs, mobility devices including wheelchairs, crutches, and special equipment used to remedy disability leads to swift physical improvements and restoration of independence. Technology that allows for word processors to be used instead of writing, or systems allowing for example a disabled workman to actually continue working, will help to elevate personal confidence and self-esteem. It can and will make an immediate difference. Technology that can ‘fix’ the physical economy of victims of violence thus is being generally regarded as extremely positive [4].

However, the personal practice of such technology may also yield unexpected results. For many victims of violence the pathology and abnormality of the body becomes their status. The use of physical devices brings upon them the unwanted condition of being ‘abnormal’ physically. This choice is brought about by the threat of becoming nothing: of being disabled, rendered useless, rejected by fellow human beings and losing the agency of their own bodies. From an anthropological point of view, technology thus is not something that is neutral and is simply applied to physical obstacles and healing. The ‘condition’ of victimhood will also shape technology and its usage. Technology becomes entangled in narratives surrounding violence, disability, social status and moral economy [12].

## Conclusion

In the context of politics favoring austerity, national adherence to neoliberal policies may contribute to neglect services that provide gender-sensitive care and ensure the rights and protection of women against violence after all forms of suffering. UN recommendation indicates that a range of gender-specific services should be available to assist women victims of violence, including safe havens, shelters, victim advocacy services, legal and counseling services qualifying personnel to provide integrated victim assistance services [8].

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