Psychological Intervention To Break The Cycle Of Violence And Accelerate Public Safety, Security And Development (With Special Reference To Africa)

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Abstract
Pervasive and unrelenting violence threatens the safety and security of women and children, present day survival and collective future of the people in various communities and nations, across the globe. This tragic crisis has become one of the most serious issues compelling the increasing attention of governments, at all levels, scholars in traumatic stress studies, psychology, psychiatry, contemporary medicine, human development, military and police administrators. Countries and communities are being destroyed by violence. Images and accounts of violence pervade the media; it is on the streets, homes, schools, workplaces and institutions. It has become a universal scourge that tears at the fabric of society. In a world desperate to comprehend, address and arrest the seemingly ever-enlarging explosion of violence and its psychological aftermath, the Three-Dimensional Psychological Intervention Strategy (3-DPIS) Model has been developed to explain the underlying factors that perpetuate violence in society and the 3-DPIS Model to holistically address these factors and break the vicious circle (Igboegwu, 2016).

Key words: *Violence, post-traumatic stress, psychological intervention model.*

Introduction

Research study on prisoners suggests that there is a link between traumatic incident exposure and violence perpetration (Neller, Denney, Robert, Pietz& Thomlinson, 2006). Foa, Ehlers, Clark, Tolin and Orsillo (1999) explains that chronic and prolonged exposure to violence may develop into a dysfunctional routine creating a link between experiences of violence as victims and later experiences of violence as a perpetrator (Garbarino, 2002). While Muller (2015) revealed that police personnel with (vs. without) post-traumatic stress disorder (PTSD) are at great risk for police brutality. Research evidence further shows that individuals with (vs. without) PTSD have more violent marriages and are at a higher risk of violence towards and by their partners (Jordan, Marmar, Fairbank, Sclenger, Kulka, Hough & Weiss, 1992).

Despite a proliferation of research and a large and growing evidence base to effectively meet the needs of those

exposed to trauma, there are gaps in knowledge, policies, institutional capacities, due to neglect of the psychological dimension of social and criminal justice, public safety and development policy agenda (Igboegwu, 2006, 2013, 2018 & 2019). These gaps produce diverse categories of psychologically disoriented, destabilized and disillusioned populations and weak institutions within which violence and its psychological consequences thrive (Foa, Ehlers, Clark, Tolin & Orsillo, 1999).

This cycle of violence in society can have severe psychological consequences in the lives of children. Deficits in the socio-cultural environment can exacerbate traumatic memories of children with a history of child abuse, neglect and/or survival of armed conflict. The adverse mental health impact of childhood trauma can predispose them to violence perpetration later in life. Child abuse can lead to suicidal ideation and attempts, as well as the abuse of others and violent arrests (Lansford, Miller-Johnson, Berlin, Dodge, Bates & Pettit, 2007). Violent conflicts and wars not only adversely affect military and police personnel, but hold adverse implications for the psychological development of children in cities, towns, villages, and private spaces. It has adverse mental health impact on civilians in the armed conflict environment and creates vulnerabilities that can lead to the problem of intergenerational transmission of trauma and violence among military, police and civilian armed conflict survivors.

Attitudes and beliefs about violence also cause direct harm as well as determine the social and cultural use of violence and destruction to discharge the hopelessness, despair, and the frustration and shame of lacking education and employment (Igboegwu, 2013; Brandy, 2018). This can be observed in the rise in violent conflicts and crime, including widespread schoolyard bullying, shooting, militancy, terrorism and escalating gun murders.

Igboegwu (2009) explains that gaps in the knowledge, policies, institutional capacities and consequent deficits in the social and criminal justice administration; as well as internal security and development strategies of stakeholders at the local community, national, regional and international levels have produced diverse categories of psychologically destabilized, disoriented and disillusioned populations. These populations include prisoners, ex-prisoners, street children, militants, ex-militants, survivors of armed conflict trauma, childhood trauma, gender-based and domestic violence (GBDV), as well as criminal, terrorist, drugs, human and arms trafficking groups, as well as women, children, youths and elderly, at risk, world -wide. She further explains that it is within these highlighted gaps in the various sectors that violence thrives. Thus, police and military personnel are deployed to combat seemingly endless violence in the society.

Igboegwu (2019) also revealed a high prevalence of psychological consequences of trauma, such as post-traumatic stress disorder and depression, in active duty Nigeria police personnel. According to the study, Nigeria Police personnel aged 25-34 years had the highest occurrence of PTSD (49.2%) followed by Nigeria Police personnel aged 35-44 years (39.3%), while Nigeria Police personnel aged 45-54 years had the lowest occurrence of PTSD (31.2%). In addition, Nigeria Police personnel aged 35-44 years

had the highest occurrence of depression (33.7%) followed by Nigeria Police personnel aged 25-34 years (28.8%), while Nigeria Police personnel aged 45-54 years had the lowest occurrence of depression (12.5%). Comparatively, the highest PTSD occurrence was among Nigeria Police personnel aged 25-34 years, while the highest depression occurrence was among the police personnel aged 35-44 years. The least PTSD and depression occurrences were however, among the police personnel aged 45-54 years.

It is important to note that combat-related psychological disorders, such as PTSD and depression, among police personnel do not only affect the personnel, but their families, communities and the general public. Combat-related psychological disorders, such as PTSD and depression, can lead to poor decision-making, disciplinary problems, excessive use of sick leave, severe difficulty in regulating affect, which can impact negatively on the quality of life as well as the relationships of the security personnel. There are also attention difficulties that can undermine learning and employment and thus complicate the reintegration of the military and police returnee from combat duty deployment with his/her family and community. In addition, there can be negligent accidental bullet discharge, alcohol/drug dependence, explosive anger, interpersonal violence, including gender-based and domestic violence (GBDV), murder and suicide.

Thus, deficits in the social and criminal justice system, public safety, security and development sectors as well as adverse socio-cultural environment created by these sectors produce diverse categories of psychologically disoriented, destabilized, disillusioned civilian trauma survivors, who are unable to find the means to actualize their potential. They therefore become frustrated, resentful and vulnerable to violent conflicts and crime, militancy and terrorism, while the police and military personnel deployed to quell the unrelenting violence also sustain psychological injuries due to critical incident exposure associated with combat operations and missions (Igboegwu, 2013, 2019).

The adverse mental health impact of armed conflict, such as PTSD, and co-morbidities, such as depression, are predictive of violence, human rights violations, gender-based and domestic violence (GBDV), breeches of international humanitarian laws (IHL) and breeches of national and local laws and norms that constitute what is acceptable use of force by active duty military and police personnel as well as intervention forces.

Who, then, will build the city if the people are not first built? This is a common axiom that points to the undisputable fact that the builders of a city build in vain, if the people are not first built! It is upon this premise that the author of this article developed the Three-Dimensional Psychological Intervention Strategy (3-DPIS) Model for the bridging of gaps in knowledge, policies and institutional capacities, in order to mobilize the cooperation of stakeholders at the community level, national, regional and international levels for mainstreaming of the psychological dimension of social and criminal justice, public safety, health, security and development sectors, in order to transform and empower institutions and communities to break the cycle of violence in the society.

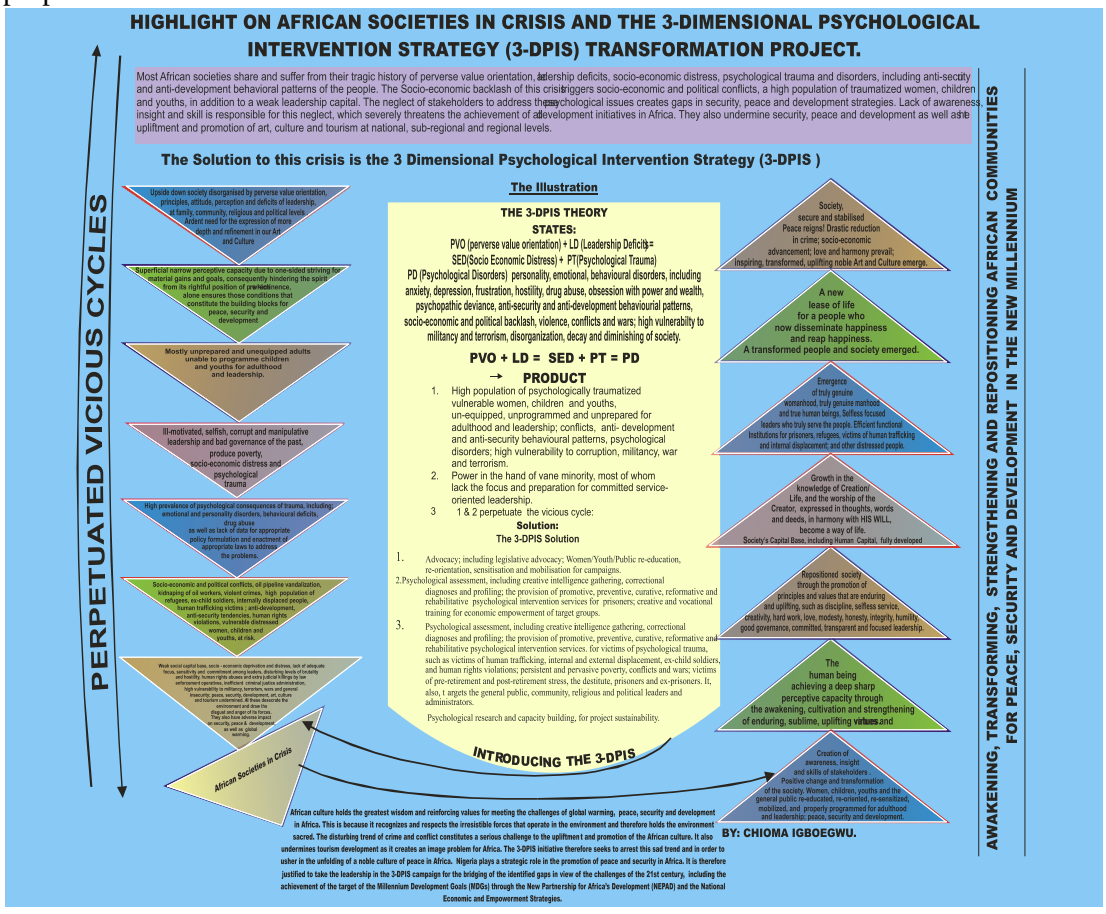
The Three-Dimensional Psychological Intervention Strategy (3-DPIS) Model:

In a world desperate to comprehend, address and arrest the seemingly ever-enlarging explosion of violence and its psychological aftermath, the Three-Dimensional Psychological Intervention Strategy (3-DPIS) Model has been developed to explain underlying factors that perpetuate violence in society and the 3-DPIS Model to address these factors and break the vicious circle (Igboegwu, 2016).

The diagram presented, below, illustrates fundamental gaps in the social and criminal justice system, public safety, security and development sectors that perpetuate violence.

DIAGRAM ILLUSTRATION OF GAPS IN SOCIAL AND CRIMINAL JUSTICE SYSTEM, SECURITY AND DEVELOPMENT SECTORS THAT PERPETUATE VIOLENCE IN AFRICA AND SIMILAR REGIONS, AND THE 3-DIMENSIONAL PSYCHOLOGICAL INTERVENTION STRATEGY TO BREAK THE VICIOUS CYCLE

PSYCHOLOGICAL INTERVENTION STRATEGY TO BREAK THE VICIOUS CYCLE



The 3-DPIS Theory was inspired and developed through 32 years of observing and working with prisoners in the Nigeria Prisons Service, pioneering psychological services for prisoners in Nigeria, research study on military and police populations, in addition to being a survivor of the Nigerian/Biafran bitter civil war as a child (Igboegwu, 2006; 2018, 2019).

The Equation.

The problem of violence in the society can be represented in an equation as follows:
PVO + LD →SED → PD →Violence and its psychological aftermath.

The 3-DPIS Theory states that in any environment, community, nation or region of the world, where there is perverse value orientation (PVO) and leadership deficits (LD), there will, certainly, be socio-economic distress (SED), a wide range of psychological disorder (PD), including emotional and personality disorders, as well as behavior deficits, anti-social, anti-security, anti-development behavior patterns (Igboegwu, 2006). The adverse socio-cultural environment created by this problem will lead to weak institutions and vulnerabilities that rekindle and exacerbate traumatic memories of trauma survivors, thereby leading to the insidious mental health crisis that perpetuates violence in society (Igboegwu, 2006; 2019). This is the root of violent conflicts and crime, proliferation of small arms and illicit weapons, prison over-population, proliferation of criminal, militant, terrorist networks, high populations of internally displaced people and refugees, vulnerable women, children and youths, at risk, diverse categories of disillusioned, disoriented and destabilized populations, including civilians, police and military populations. The diverse categories of psychologically disoriented, destabilized and disillusioned populations and weak constitute the weak social capital that perpetuates the vicious circle in such a society. These crises diminish society and make it vulnerable to disintegration.

The Problem: PVO + LD = SED + PD

- Perverse value orientation (PVO), distorted values, ignoring the things that matter to development and the values that promote the unfolding or development of the potentials of human beings; Leadership deficits, failure of leaders, at all levels, due to the one-sided striving for material gains and goals, earthly power and domination, in line with the principle of manipulation and exploitation of the weak by the strong, which has triggered social and economic distress (SED) and psychological disorder(PD) leading to the backlash effect of a global security and development crisis.
- Africa and other similar regions of the world have a tragic history of socio-economic distress, psychological trauma and the consequent emotional, personality and behavioural disorders, including anti-security and anti-development behaviour patterns of the people.
- The backlash effect of this problem triggers violent conflicts, violent crimes, militancy, extremism, terrorism and illegal hazardous migration. Millions of psychologically

traumatized women, children and youths, including refugees, the internally displaced, ex-child soldiers, victims of human trafficking, human rights abuses in various nations in Africa and other distressed regions, are stranded.

- Heavy casualties, decimation of huge populations, unacceptable waste of human and material resources being recorded constitute an emergency that calls for the bridging of gaps in the social and criminal justice, public safety, internal security and development strategies of the affected nations, including Nigeria and the entire Africa region.

The Backlash Effects

The backlash effect of the tragedy includes: socio-economic and political conflicts; Persistent migration of people from their homeland; Infiltration of criminals, including armed and terrorist groups across national and regional borders; prison over-population; Human, arms and drug trafficking; Drug addiction, violent crimes, kidnappings, political assassinations, etc; Illegal oil bunkering and oil pipe line vandalism; Destruction of national and foreign investments; General insecurity of foreigners and nationals, alike; arms proliferation; Youth militancy, terrorism, extremism and wars; and pandemics, including the COVID-19.

Governments of African nations , and other conflict-torn regions of the world are relentlessly making the effort to reinforce security, peace, and development through the enactment and enforcement of laws, as well as the establishment of structures, such as the following: The Sustainable Development Goals (SDGs); The New Partnership for Africa's Development (NEPAD); Reinforcement of Military and Paramilitary institutions; Prison Reforms, Security Sector Reform; Human Rights Laws; The mobilization of Military and Police Forces; Global Terrorism Strategy; and Disarmament, Demobilization and Rehabilitation Programs.

Important as the highlighted efforts are, by themselves, alone, the cycle of violence cannot be broken, unless, the underlying psychological issues that perpetuate violence in the communities, nations and regions of the world are addressed through the mainstreaming of a holistic psychological intervention strategy, as a priority agenda of governments, at all levels.

During and after COVID-19 pandemic, the adverse psychological consequences of neglect of the psychological dimension of social and criminal justice, public safety, internal security and development, including health, education, women, children and youth development, as a priority agenda, at the community level, national, regional and international levels, will be exacerbated in various families, communities and nations across the globe. COVID-19 pandemic will heighten the level of mental health crisis and violence being perpetuated across the globe as a result of this neglect of the psychological dimension of these critical sectors, at all levels, across the globe. Thus, the urgent the need for collective action through the mobilization of communities, national, regional and international cooperation for mainstreaming of the psychological

dimension, as a priority agenda, in the highlighted sectors through the Three-Dimensional Psychological Intervention Strategy (3-DPIS) Model.

Through this intervention, the vicious circle of violence will be broken, public safety, internal security and development, including health, education, women, children and youth development, will be accelerated at the family level, community, national, regional and international levels. The 3-DPIS is also crucial in dealing with the corona virus (COVID-19) pandemic prevention, recovery and restoration of health.

Three Pillars of 3-DPIS

The 3-Dimensional Psychological Intervention Strategy (3-DPIS) Model to break the cycle of violence in the society is comprised of the following three Pillars:

1. Advocacy, including legislative advocacy; women/children/youths/public re-education, reorientation, sensitization and mobilization campaign for peace, security and development, including the mobilization and sensitization of women and girls, especially, since women and children are most vulnerable when their communities are torn apart by violence; and integrating the use of psychological science, art and culture, in facilitation of the 3-DPIS implementation.

2i. Psychological assessment and intervention services for psychologically traumatized populations, including military, police personnel and veterans and their families, civilian counterparts; civilian armed conflict survivors and COVID-19 pandemic survivors, including women, children, youths, elderly, at risk, health/rescue workers and journalists and paramilitary personnel; preventive, promotive, curative, reformative and rehabilitative psychological intervention services, including creative/vocational skill development and post amnesty psychological rehabilitation.

2ii. Psychological assessment, correctional diagnoses, promotive, preventive, curative, reformative and rehabilitative psychological services for offender reformation, rehabilitation and mental health of prisoners, including creative/vocational skill development and economic empowerment in order to integrate them into the development and democratic agenda of their communities.

2iii. Psychological assessment and promotive, preventive, curative, reformative and rehabilitative psychological services, including creative/vocational skill development and economic empowerment/skill development for psychologically traumatized women, children and youths, including displaced people, ex-street children, ex-child soldiers, ex-combatants and victims of human trafficking.

3. Institutional capacity building, psychological research and partnership to ensure project sustainability

A special component of the 3-DPIS Model is the women sensitization, mobilization campaign. Women and children are most vulnerable when their families and communities are torn apart by violence. There is prevalent, pervasive violence against women and girls, including gender-based and domestic violence, the killing of women by members of their families; abductions, forced marriages and torture of women and girls in conflict and humanitarian crises in various nations in Europe, Asia and Africa; United States, Canada and others nations across the globe. In spite of increasing deployment of military and police personnel to combat violence and dismantle human trafficking/ drug/arms/ terrorist/militant/criminal networks and infrastructure, violence persists in various countries across the globe. Gross human rights abuses and breeches of International Humanitarian Laws (IHL) by security and intervention forces, including violation of national and local laws and norms that regulate what is acceptable use of force, are also being recorded by national and international human rights monitoring groups (Igboegwu, 2019; Muller, 2015). Research evidence also shows that individuals with (vs. without) PTSD have more violent marriages and are at a higher risk of violence towards and by their partners (Jordan, Marmar, Fairbank, Sclenger, Kulka, Hough & Weiss, 1992).

These highlighted issues expose the vulnerability of women in times of conflict and humanitarian crises. Women's safety, emotions, bodily health and bodily integrity are threatened and jeopardized by the violent treatment they receive around the world and during times of conflict. In or out of war, women are handicapped in society and subjected to sexual assault at a larger rate than men partially due to their lack of autonomy in society and power within their families. Much of women's rights in society depends on the place they are given within the family as they are the basis for society's structure. The power a woman holds in society affects everything from the family's social class to whether the children are sent to school or pressured into work. The immense potentials that lie in woman have not yet been fully recognized, developed and utilized in the development and general upliftment of society, just as the immense powers that lie in the environment have not been fully appreciated and utilized in development of the world.

Violence against women and girls is perpetuated by gaps in knowledge, policies, institutional capacities and consequent neglect of the psychological dimension of social and criminal justice, public safety, security and development, including education, health, women, children and youth development sectors, in the policy agenda, at all levels. An important component of the 3-DPIS Model is therefore the "Women Go On!" mobilization campaign. It is aimed to inspire and sensitize women and girls to recognize their fundamental mission in society, as guardians of the flame of longing and enthusiasm in the hearts of their people for uplifting, enduring values that serve as building blocks of peace and nation building. It is aimed to empower women and girls through psychological

science, art and culture to know their role and enhance their skills in politics, leadership and general upliftment of the society, in order to facilitate the 3-DPIS transformation project to break the cycle of violence in the society.

Women and girls are most vulnerable when their families and communities are torn apart by violence. Thus, the Women Go On! campaign component of the 3-DPIS is aimed to inspire, sensitize and mobilize women and girls, world-wide, as the bedrock of their communities and nations, and instruments for social change, to facilitate mainstreaming of the psychological dimension of the highlighted sectors, as a priority agenda, in order to transform and empower their communities and institutions to break the cycle of violence and lay a firm foundation for the reign of peace in our hitherto troubled world.

Conclusion

Countries and communities are destroyed by violence. Images and accounts of violence pervade the media; it is on the streets, homes, schools, workplaces and institutions. It has become a universal scourge that tears at the fabric of society, threatening the lives of women and children, present day survival and collective future of the people, world-wide.

The 3-DPIS theory shows how violence is perpetuated in society. It also explains how gaps in knowledge, policies and institutional capacities of stakeholders, due to neglect of the psychological dimension of social and criminal justice, internal security, public safety and development, including health, education, women, children and youth development, as a priority agenda, produce weak institutions and diverse categories of psychologically disoriented, destabilized and disillusioned populations that perpetuate violence in society. The 3-DPIS aims to mobilize national, regional and international cooperation to bridge the highlighted gaps, transform and empower communities and institutions at all levels, to break the cycle of violence and accelerate public safety, security and development in the society. This intervention has become a most compelling need, in view of COVID-19 pandemic, which is bound to exacerbate the mental health crisis and cycle of violence being perpetuated by the highlighted neglect. In facilitation of the agenda to break this vicious circle, women and girls are to play a key role in inspiring and uplifting their land and people, recognizing their fundamental, natural role and inherent abilities as the guardians of the flame of longing and enthusiasm for the values that serve as building blocks of peace and nation building.

Women and children are most vulnerable, when their families and communities are torn apart by violence. How the mother hen weaves her protective, loving wings over her chicks to protect them from the evil eye of predatory hawks, is how a truly conscious, genuine woman envelops and shields her children, community and nation through her inspiring, protective, caring, loving thoughts, words and actions, so that they survive the harsh, evil, challenging, visible and invisible influences of the world and actualize their potential. Thus, the woman creates a bridge to the life-giving, sustaining power of God in creation, thus,

laying the hitherto neglected firm foundation for a sustainable, global civilization. When peaceful, safe, secure communities and nations are created through the bridging of gaps in knowledge, policies and institutional capacities of stakeholders, mainstreaming of the psychological dimension as a priority agenda in the social and criminal justice, public safety, security and development, including health, education, women, children and youth development, communities and institutions, at all levels, will be transformed and empowered to break the cycle of violence. Women, children, youths, the elderly, all categories of the people in all their diversities will, then, be able to live, work, flourish and actualize their potentials in peaceful, safe, secure, developed communities and nations.

The 3-DPIS Model will guide the mainstreaming of the psychological dimension, as a priority agenda, in the social and criminal justice, public safety, internal security and development sectors in Nigeria, other nations in Africa and world-wide. It should be integrated into the agenda for conflict prevention, management and post conflict reconstruction, as well as COVID-19 pandemic prevention, recovery and restoration of health. It will address the vulnerabilities that perpetuate violence, as well as restore, heal and rehabilitate psychological consequences of trauma, including the adverse mental health impact of armed conflict and COVID-19 pandemic Africa and other regions of the world. The 3-DPIS, also, provides the guiding light for teachers, in researchers, clinicians in the traumatic stress field and, indeed, all stakeholders to make more effective and sustainable impact through their services in the society for the enthronement of peace in our hitherto troubled world.

The 3-DPIS Model integrates psychological science, art and culture in psychotherapy and provides a holistic intervention to address the mental health crisis of PTSD and co-morbidities, such as depression, which perpetuate violence in the society. It will facilitate pro-social engagement with all diverse categories of the population, mobilizing their cooperation at the community level, national, regional and international levels, including the dissemination of evidence-based data, to bridge the gaps in knowledge, policies and institutional capacities in the highlighted sectors within which violence thrives. It will transform and empower communities and institutions, at all levels, to mainstream the psychological dimension of social and criminal justice, public safety, security and development sectors, including health, education, women, children and youth development, as a priority agenda, in order to break the cycle of violence, accelerate public safety, security, and development for the reign of peace in our hitherto troubled world.

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