PSYCHOLOGICAL TRAUMA: NATURE, AND SECURITY IMPLICATIONS

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Abstract

This paper conceptualizes security as involving all activities that are put in place to check adverse forces that threaten the well-being of lives and property, or all activities involved ill ensuring that citizens feel happy, and safe from danger and worry. It explored psychological trauma, pointing out [he aetiological factors, the course and outcomes. Individual differences in people's reaction to traumatic events were explained using cognitive theory, personality traits and availability or otherwise of adequate social support, while the relationship between National security and psychological trauma was established using the social learning theory, the motivational theory, the locus of control orientation and attribution theory. The paper concludes that the current wave of crime and law breaking in Nigeria can be drastically curtailed if traumatized people are healed and traumatogenic activities are checked.

INTRODUCTION

The ultimate goal of psychology has been viewed as the discovery, prevention, and modification of behaviours that hamper proper functionality of people, inhibit proper social functioning, and may culminate in total breakdown of social relations, personality, and psychopathology of varying severity. In a sentence, psychology seeks to ensure that quality of life is always enhanced.

Research has confirmed the age long view by psychologists that adverse life experiences and sustained distress are the major causes of psychological break down, dysfunctional attitudes, perverted perceptions and deformed personality; and that these adverse or negative attributes predispose individuals to non normative behaviours, including delinquency, criminality and self harm Morah, 2003). It is the effects of the adverse forces here described as psychological trauma that this paper seeks to explore its relationship with security of the country in the hope that exploration of the stimulus response connections' will enable all stakeholders to key into appropriate levels of 'care' to enhance healing, so as to improve on the overall security of the nation. The paper approaches its mandate by examining the subject matter of psychological trauma, doing an overview on security and showing the connections between psychological trauma and National security, then making suggestions on the way forward.

PSYCHOLOGICAL TRAUMA

Trauma is any event in which a person witnesses or experiences a threat to his or her own life or physical safety, or that of others, and experiences fear, terror, or helplessness. Such an event may also cause dissociation (an unconscious defense mechanism in which there is partial or total disconnection between memories of the past, awareness of the identity, and immediate sensations and control of bodily movements), confusion, and a loss of a sense of safety. Traumatic events challenge individuals' views about the world as a just, safe and predictable place (Vandes Bos, 2007).

Before the nineties, the experience or psychological trauma was thought to be exclusively for men, especially as it was most often noted after catastrophic wars. Presently, widening know ledge has shown

that women and children also experience psychological traumas, consequent on both physical and psychological assault, including auto accidents, break up of a significant relationship, a humiliating or a deeply disappointing experience, the discovery of a life threatening illness or disabling condition, or similar conditions. Traumatizing events can take a serious emotional toll on those involved, even if no physical damage is evident (http://www.traumaresource.org/contact-us.htm).

> Every psychological trauma has the three major elements of: being an unexpected event happening when one is unprepared; and the event exceeds one's preventive or coping resources.

 Same event may produce differing levels of traumatization in different individuals. Indeed, it is not the event itself that determines the extent of traumatization, but the individual's experiences and perception of the event. It must be pointed out that it is not predictable how an individual may react to a particular event, after all, for someone who is used to being in control of emotions and events, it may be surprising to discover that something like an accident or job loss can be very debilitating. It must be noted here that traumas caused by human behaviours like rape, assault and deprivation commonly produce more severe psychological devastation than those occasioned by nature (e.g. earthquakes and flood disasters).

Three major parts of the brains are involved in the experience of psychological trauma.. First is the cerebral cortex; which is the outer layer of grey matter covering of the cerebrum largely responsible for sensory, motor, emotional and integrative functions - the seat of higher skills. Second is the limbic system which has been implicated in basic emotions, hunger, sex and memory, and the third part, the brain stem which controls basic survival functions. Through the brain scan technology, scientists have been able to observe the brain in action, and have discovered that trauma actually changes the structure and function of the brain at the point where the frontal cortex, the "emotional brain', and the 'survival brain' converge. A significant finding is that brain scans of people with relationship or developmental problems, learning problems and social problems related to emotional intelligence reveal similar structural and functional irregularities as in the case resulting from PTSD (http://www.traumaresources.org/contact.us.htm).

Psycho-neuro-immunological and psycho-neuro-glandular research have also provided strong evidence that psychological states produce significant alteration in central nervous system chemistry (levels of neurotransmitters), alter lymphocyte ratios, and affect endocrine functioning.

In this connection, Nweze (1984) and Obi-Nwosu (2007) explain that incapacitating chronic somatic complaints could be relieved by psychotherapy because psychological factors affect somatic function through this same route.

It is important to note that trauma is not the same as simple distress. Indeed, it is hazardous stress; the effects of stress in the nervous system are usually of short duration, and its manifestations usually fade out as soon as the nervous system calms down. This means that trauma leaves a lot of residual effects. Psychological trauma produces long lasting upset and its source is usually intensely threatening.

- Psychologists have identified the following **as universal causes** of psychological trauma:
- Natural disasters such as fires, flood and earthquakes.
- Serious accidents such as automobile or other high impact scenarios.
- Physical assault such as torture, rape, molestation and domestic-abuse, Serious bodily harm of any origin.
- Experiencing or witnessing horrific injury, carnage or fatalities.

Potential sources often neglected include:

- Learning about violence to or sudden death of a loved one. Birth trauma.
- Falls and injuries for sports or occupational hazards.
- Surgery, particularly emergency, and especially in the first 3 years of life.
- Severe illness especially when accompanied by high fever.

In addition, traumatic stress in childhood that influences the brain is caused by poor or inadequate relationship with a primary caretaker. Sources of this include the following: forced separation very early in life from primary care giver; chronic mis-attunement of caregiver to child's attachment signals ("mal attachment"), or reasons such as physical or mental illness, depression or grief. (http://www.traumaresources.org/contact.us.htm).Itis pertinent to note that grief in adult life could be traumatic as well, especially when prolonged, when superimposed on externality orientation, or dependent on a deep sense of deprivation or dehumanization.

Everyone reacts to traumatic events; but within a given species, some individuals react more strongly or differently. One explanation is offered by the early exposure hypothesis, which states that experiences during development influences the way an individual reacts characteristically to events on attaining adulthood. Thus, childhood exposure to trauma creates vulnerability for experiencing psychological trauma in adult life.

Other reasons why individual differences have been observed in the experiencing of trauma include: the severity of the event; the individual's perception of the event in terms of source and extent of overall damage; or in relation to values; the amount of coping resources at one's disposal and the amount of available social support (family, friends, religious brotherhood or professional colleagues).

The cognitive theory provides theoretical explanation for the fore mentioned individual differences in the experience of psychological trauma. That is, if an individual's core philosophy and beliefs are absolutic, the threat becomes perceived as extremely undesirable and provocative, leading to 'irrational self-talks', and consequent germination of pathological behaviour.

Again certain personality traits have been found to predispose individuals to react more deeply to trauma. According to a study of 1007 young adults, reported by Breslau, Davis, Andreski, and Peterson (1991), risk factors for post traumatic psychological disorders (beside early separation from parents), include: neuroticism, pre-existing anxiety or depression, and a family history of anxiety. A review of studies on personality in the etiology and expression of PTSD by Miller (2003), concludes that high negative emotionality (NEM) is the primary personality risk factor for the development of PTSD, whereas low constraint/inhibition (CON) and low positive emotionality (PEM) serve as moderating factors that influence the form and expression of the disorder through their interaction with NEM. A pre-morbid personality characterized by high NEM combined with low PEM is thought to predispose the trauma exposed individual towards an internalizing form of post traumatic response characterized by marked social avoidance, anxiety, and depression. On the other hand, high NEM combined with low CON is hypothesized to predict an externalizing form of post traumatic reaction characterized by marked impulsiveness, aggression, and a propensity towards antisociality an; substance abuse. (Http://ezinearticles.comI?PTSA-Among-Military-Personel: Review&id=32570 1

Symptoms of psychological trauma can be separated into physical, emotional and cognitive. These symptoms may not become obvious soon after the traumatic event, so many a time it takes - professional or experienced person to link the symptoms to the events of yester-years'.

Physical symptoms include:

- Eating disturbances (anorexia or bulimia). Sleep disturbances.
- Sexual dysfunction.
- Lethargy.
- Chronic unexplained pain.

At the emotional sphere, pointers include:

- Depression, spontaneous crying, despair and hopelessness. Anxiety, Panic attacks and fearfulness.
- Compulsive and obsessive behaviours.
- Feeling out of control.
- Irritability, anger and resentment.
- Emotional numbness.
- Withdrawal from normal routines and relationships.

The cognitive symptoms are:

- Memory lapses especially about the trauma
- Difficulty in making decisions.
- Lack of, or lowered concentration threshold.
- Symptoms of attention deficit hyperactivity disorder.

Besides the foregoing, severe precipitating events like natural disasters, wars, rape, assault, violent: crime, major air, land or sea accident or child abuse can produce these additional symptoms:

A.   Re-experiencing the Trauma:

Intrusive thoughts, flashbacks or nightmares and sudden flood of emotions or images related to the traumatic event.

B.   Emotional Numbing and Avoidance: Amnesia, Avoidance of situations that resemble the initial event, detachment, depression, guilt feelings, grief reactions, an altered sense of time. increase arousal, hyper-vigilance, jumpiness, (and extreme sense of being on guard). overreactions (and unprovoked sudden anger), general anxiety, insomnia and obsession with death.

The common denominator in all these is that psychological trauma is a consequence of grievous events, and that deep grief is like the single most important factor in its development. Psychologically, grief could be engendered by deprivation, poverty, alienation or rejection, whether actual or perceived; and such grief can predispose to non-normative and antisocial behaviours. The explanation is offered by the motivational perspective, which holds that humans intrinsically act in ways that guarantee their survival in, and subsequent adaptation to their social environment and ecosystem. This is guided by needs, which definitely vary in accordance with individual aspirations, but are modified by cultural heritage and other peculiarities of the particular milieu. Indeed, the values that arc esteemed in a society, and the behaviours viewed as normative help to modify individual value orientations and needs. In this connection, Peters (1974) posits that human beings are a purposive rule following animals, and that their actions are not simply aimed at achieving an end, but carried towards conformity to social standards and conventions. Accordingly, it is plausible that militancy and other anti-security behaviours among Nigerians (and Africans) are predicated on the perpetrators' assessment of convention and objectives; therefore guided by normative-effective factors (Etzioni 1988). This implies that the frustration of needs and unavailability of conventional methods of seeking redress or overcoming the frustration and achieving needs culminate in the experience of grief and traumatization which engendered the option of violence and crime.

In cases where the motivational perspective seems 'weak', the social learning model of Bandura (1977) which holds that aggressive and violent behaviours are acquired as part of socialization (modeling and observation) takes over. People acquire non-normative (anti-security) behaviours by observing others who engage in such behaviours and the consequences of same. They are attracted to imitate the behaviours if the consequences are not negative or dissuasive enough, since the models have provided

the doableness factor. Accordingly, though anti-security behaviours like militancy and all forms of abuse and fraud are out-lawed, if within any context or social level they accrue any form of tangible rewards or approval, people get attracted to such behaviours because of the reinforcement. It is in this connection that Obi-Nwosu (2009) opined that the easy lifestyle and display of opulence by many oil workers and corrupt public officers in Nigeria readily predisposes the youth to magical thinking about wealth, instill the consumeristic orientation in them, and stimulates comparisons that engender a deep sense of deprivation, exploitation and loss, culminating in traumatization.

However, Bandura (1989), in his social cognitive theory emphasizes the element of appraisal of consequences of behaviour. He explained that humans are information processors who would not engage in any behaviour without evaluating the consequences to self. This implies that most people who engage in anti-security behaviours do so after assessing all perceptible consequences and juxtaposing their possible worst outcomes with their existing circumstances, and/or the possibility of not being nabbed at all. If the possibility of not being nabbed is high, and/or their current circumstances seem as bad as the worst possible outcome, they go ahead with their activities. This is exactly the case in Nigeria.

SECURITY IMPLICATIONS OF PSYCHOLOGICAL TRA.UMA.

A first line definition of national security is defense of a country, and the activity of defending a country from aggression. It involves the protection of the country and her citizens, institutions and interests against danger and threats, or against attacks. Imobighe (2001), opined that security connotes freedom from, or elimination of threat not only to the physical existence of something or somebody, but also its (or one's) ability for self-protection and development, and the enhancement of general well-being of all people. Security has two perspectives: the objective perspective in which it means how distant a vulnerable thing or person is from danger, and the amounts of insulation or protection from threats in the environment. The second perception, the subjective, explains security in terms of perception or belief that a person or valued structure has sufficient objective security. The subjective meaning of security as 'freedom from anxiety or fear' derives from the origins of the Latin word "se-cura", which literally means "without care", or care- free. (Obiora, 2009).

In its broad sense, security involves all activities that are put in place to check adverse forces that threaten the well-being of lives and property, or all activities involved in ensuring that citizens (law abiding citizens) reel happy, and safe from danger or worry. It is from this broad perspective that a comprehensive view of national security is possible, because this view widens the horizon and brings to lime light all the factors that may generate tension and institutional break down outside nsurgence, war, or organized crime. It is in this regard that food security, social security, and freedom of association and speech, psychological health, and choice of domiciliary become very critical security matters.

Nigeria has been experiencing serious security problems in the form of conflicts and violent eruptions, which have been traced to political, ethnic and religious interests (Obi-Nwosu, 2006). Recently another unanticipated violent religio-ethnic conflict erupted in J os at a time that government was deliberating on measures to ensure lasting peaceful co-existence of the inhabitants. This occurrence juxtaposed with the 'Boko Haram' crisis in 2009 points to high level of 'psychological aberration' among the people. Again, the Niger Delta militancy and vandalism which exposed the level of porosity in the security apparatus of the country, as well as rampant cases of kidnapping, killings and armed robbery leave no one in doubt that there are some fundamental issues that must be addressed to ensure that citizens at all levels feel free from danger and worry. Obviously, an outstanding issue in this regard is psychological trauma.

In this context, criminal behaviours are those behaviours that arc punishable under the Nigerian criminal justice system while anti-security behaviours are all behaviours which undermine the physiological, psychological and physical well-being of a person or group of people, whether they are presented in the

criminal justice system (criminal code) or they are culturally determined and milieu specific. Some anti-security behaviours and situations are: youth drop out of school, idleness, substance use/abuse, and poverty.

Psychological trauma among other negative effects, engenders: irritability and fits of anger, emotional numbness, withdrawal from routines and relationships, compulsive and obsessive behaviours, despair and hopelessness, and increased arousal. These psychological and physiological states trigger aggression, which in externally oriented persons would lead to 'fight' against all perceived enemies and institutions as the only way to retaliate perceived wrongs, or as a means of remaining relevant and feeling a sense of worth. Among internals, the situation may lead to depression, alienation, psychotic breakdown, and suicide. However, Uzoka (2000) after a careful study posits that the externality orientation and other attribution are culturally bound in Africa. In effect, traumatized persons in Africa are more likely to 'fight' others rather than 'fight' themselves. This is why it is a truism that psychological trauma in Africa is a major security problem.

In specific terms, fighting perceived 'enemies' follows the internalization of the Machiavellian philosophy through self talks, then consequent acting out in such actions as stealing, burglary, robbery, assaults, human and drug trafficking and abuse, vandalism, kidnapping (for ransom or rituals), neighbourhood and family conflicts, road rage and attendant accidents, and all forms of indiscipline. As for internals, they are more likely to succumb to psychosomatic illness, mental health problems, lack of drive and self-blame, which culminate in loss of interest or inability to engage in productive ventures, and homicide and suicide ideations. All these reduce the quality of life of both the traumatized and the people around him, her or them as the case may be, and certainly are the anti-theses of happiness, joy and safety.

CONCLUSION

Psychological trauma could result from both natural disasters and human inflicted devastating events. However, trauma, which originates from human actions have been shown to engender deeper and longer lasting physiological and behavioral reactions, as well as predispose the traumatized to 'fight' against perceived perpetrators of inhumanity against him/her. This 'fight-back' tendency is theoretically supported by the motivational and social learning theories, while the attributional theory and locus of control orientation explain why in Nigeria, as in the rest of African traumatized people engage in crime and law breaking. They are therefore threats to security in the country and must be addressed especially if it is considered that majority of Nigerian youths are currently feeling deprived, distressed, cheated and uncared for by the state.

RECOMMENDATIONS

In the first part of this paper, events that usually lead to psychological trauma were highlighted. Some of the events are not preventable, but the few that could be prevented must be prevented by all stake holders in National development especially the Government and her agencies. More importantly, relevant agencies must be prepared to admit people who happen to pass through any of those events for prompt assessment as well as physical and psychological support. Prompt assistance to victims reassures them and drastically reduces the possibility of breakdown. However, to ensure almost complete prevention of break down, social support from the community and family must be strengthened.

The second level, the period when break down has occurred, is characterized by the symptoms and patterns of behaviour enumerated earlier. This period requires treatment and rehabilitation. It must be

made clear that when symptoms are not very obvious, interview of both the victim and significant people around should be able to reveal remote traumatizing events. Psychologists, preferably clinical psychologists must be made to join hands with other trained personnel (like social workers and occupational therapists) to ensure speedy recovery. Psychological tests may have to be administered to victims to improve therapists' understanding of the depth of psychological breakdown as well as guide the remedial regime

In the light of the foregoing, the following recommendations are made:

(a)   Local governments should be directed to establish functional psychological services centres (PSC) with a minimum of three psychologists, to be headed by a clinical psychologist. The local governments should also employ community psychologists, at least one first degree graduate of psychology for each town that make up the Local Government Area. The Local government PSC should provide services to the magistrate courts.

(b)   Every state government should be made to establish a comprehensive psychological services centre which although could be assessed by the public, should primarily serve the emergency management authority and the social development ministry. Such an outfit shall have at least one specialist in clinical, social, industrial, sports and counseling psychology, but must be headed by a clinical psychologist. The state PSC should also provided services to the high courts.

(c)   The Federal Government should ensure that the psychological services centres in all federal universities are upgraded and made capable to serve as referral centres. The National Emergency Management Agency should establish a department of psychology, just as every military division or brigade, and the military and police headquarter. Prison psychological services department must be strengthened by employing more qualified clinical psychologists, and by sending already trained warders to acquire degrees in psychology. All the other centres must be properly linked to PSCs in the universities for research purposes. The federal government should also direct the judicial services commission to employ at least one clinical, counseling, social or forensic psychologists (holders of the Msc degree in these fields) to serve in every high court in the federation.

REFFERENCES

Bandura, A. (1977). Social Learning theory. Englewood Cliffs. NJ Prentice Hall.

Bandura,A. (1989). Social cognitive theory. Annals of Child Development, 6,3-58.

Breslau, Davis, Andreski, and Petcrson, (1991). Cited in htt://ezinarticles.com/?PTSD-Among-Military-Personnel: Review&id = 325071 (Retrieved 1400 hrs on 7/12/09

Etzioni, A. (1988). The moral dimension: Towards a new economics. New York: The Free Press.

Imobighe, T.A. (2001). An overview of the theoretical issues ill African security. In Akindele, R.A & Ate, B. (eds) Beyond conflict resolution: managing African security in the 21 century. lbadan: Vantage Press.

Morah, E. (2003). Social Factors in the development of Psychopathology. Departmental seminar paper presented At The Department of Psychology, Nnamdi Azikiwe University, Awka (2- February).

Nweze, A. (1984). Current developments in stress and illness research: A selective review of medicine and psychology. British Journal of Clinical Psychology, Vol. 3. Nos 1 & 2, 1-7.

Obi-Nwosu, (2007). Effects of rational emotive therapy and Systematic Desensitization on anxiety among Caesarean section patients. Nigerian Clinical Psychologist, 2: 18-26.

Obi-Nwosu, H. (2009). Value orientation and poverty ill Nigeria. Paper presented at the National Scientific Conference of the Nigeria

Association of Clinical Psychologists held in the Federal Neuropsychiatric Hospital, Enugu (18th - 23fd September).

Obiora, C.A. (2009). Problems and prospects of security management in the Local Government Areas.

Paper presented at a training workshop for security operatives in the Local Government System at Modotel, Enugu, (15th December).

Peters, R.S. (1974). The concept of motivation London: Ran hedge and Kegan Paul.

Uzoka, A.F. (2000). Choice, responsibility and freedom: Essentials of management effectiveness. Journal of sociology, 1. 2. 1-9.

VandesBos, G.R. (2007). APA dictionary of Psychology. Washington DC: American Psychological Association. http://www.traumaresources.org/contact.us.htm. Retrieved on 24i12 09 at 22.00hrs.