

Cultural Considerations

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Cultural Considerations of Violence

Children from Nigeria may experience many psychological effects of violence. While reactions from each child will be due in part to their personal experience, age, and ability to cope with such violence, it will be necessary to assess the psychological effects exhibited by each child in a manner that will allow the child to get help. The first important factor to consider is the relationship that the trauma has with their children's overall development. Since these children were impoverished and lived in poor conditions while in Nigeria, it is likely that their initial psychological development has been hindered. As refugees, however, these individuals will receive some additional support, but they will still be impoverished. They now live in a large city and have support services provided to them; however, they will likely live in the more affordable areas of town; this poverty is linked to poor academic achievement and school adaptation. Therefore, it may be necessary to put interventions in place to facilitate Nigerian refugee children's adaptation to a new culture and society.

For all refugee children, their early exposure to violence can contribute to "disturbances in cognitive functioning, emotional difficulties such as depression and anxiety, and behavior and peer problems" (Medina et al., 2015). Many of these children are at risk for exhibiting the same violent actions to which they were exposed. The importance of this, however, is contingent upon the child's particular developmental level. For example, children from infancy to one and a half years old are said to experience the Erickson's trust vs. mistrust psychosocial stage. Individuals who are exposed to violence as young children are, therefore, more likely to form a mistrust of others and carry this suspicious approach throughout their lives, preventing proper development of trusting relationships ever occurring. School age children from ages 5–12 are experiencing the industry vs. inferiority stage, and children who are exposed to violence will most likely feel inferior. Young adults, in addition to older adults, are least likely to be affected by the violence, if they have been

guided through proper development as children (McLeod, 2013). Furthermore, male and female children will exhibit their ability to cope with violence differently, allowing the boys to be more symptomatic of the violence, while girls are more likely to suffer internally.

Therefore, it is helpful to target young children through intervention, helping them cope with the consequence of violence so that physiological health could be enhanced.

The best intervention program to address the kids' exposure to violence is group therapy. Since all the children were exposed to the same atrocities, group therapy would help them form a support system that will allow them to recognize how they feel about this experience and how they could console one another about painful memories. The hope is that this group will establish relationships outside of therapy. This will allow refugee children to continue developing techniques to cope with this tragedy. Group therapy can occur in the family or community level, depending on the participants' specific needs. For some, group therapy could be supplemented with individual therapy, which will be required especially for those who are unable to establish trust in a group. However, once these issues are resolved in individual therapy, children will benefit from group participation.

It is important to understand the debate between "cultural universality" and "cultural specificity" with regards to Standard 2: Competence. Each of these principles should be applied in particular situations. There is some context of cultural universality in this situation because the refugees are acting in a manner that is consistent with other refugee groups that have experienced trauma, and the individuals within this group are experiencing many of the same symptoms. However, it is also important to consider that this group has its own unique culture that should be addressed during group therapy. Therefore, while group therapy is recommended as a consequence of their traumatic situation, concepts of cultural specificity should be applied within therapy to ensure that children are able to benefit the most from the therapy being delivered. As a consequence, the therapist should attempt to understand certain

aspects of refugee children's culture, such as their religion, social hierarchy, etc. before beginning therapy, so that he or she can best understand the context of the responses they provide.

It is important to consider cultural traditions when designing an intervention program. Ultimately, the relevance of the intervention program to the target population is what will make the program effective. As a consequence, it is important to understand the characteristics of the Nigerian culture. This will help the group participants understand how to cope with their traumatic experiences and build a community with the other survivors. Since many of the group members may not speak English, it is important to have a counselor present who understands Nigerian, in a manner that allows him or her to interpret statements that are specifically relevant to the culture. For example, in English, there are many sayings and phrases with no literal meaning that foreign language speakers often do not understand. These expressions exist in all languages; therefore, it is important that the therapist understands the nuances of the language, whether Nigerian phrases are spoken in English or Nigerian so that the meaning of the words spoken by the refugees can be clearly understood. Furthermore, it is important to note that the Nigerian society is highly patriarchal; therefore, it is important to consider this factor when designing therapy sessions. This will mean showing respect to this cultural feature but also allowing women to speak, to ensure that they will be subject to the healing process as well.

Two ethical considerations should be made when intervening with children as victims of violence. They are rights to privacy and providing them with all necessary services. It is important that the rights of the children are protected, so that they feel comfortable in the therapy situation, in addition to being protected from anyone who would be able to gain access to this information. Furthermore, it is the therapist's ethical requirement to ensure that clients get the help they need, using a determined method and frequency. If someone attempts

to prevent patients from exercising this right, it becomes the therapist's responsibility to report and address this issue. Second, regarding cultural issues, therapists are required to maintain an understanding of cultural competence and provide a scientific basis for judgments. The best way to ensure that this is done properly is by keeping up with peer-reviewed research, subscribing to professional journals, and asking for the professional advice of workers who are considered experts in this area of knowledge (American Psychological Association, 2010).

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