

Trajectory of Psychotherapy In Africa

(A key note speech presented at the Forth Conference of the World Council for Psychotherapy African Chapter, at School of Psychotherapy and Health Sciences, Okija, Anambra State, Nigeria, 2019)

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Abstract

This paper examines trajectory of psychotherapy in Africa. It touches on the meaning of psychotherapy, types, as well as goals and relevance of psychotherapy. The key factors is with greater emphasis in psychotherapy where in Africa certain set-backs and challenges have been heavily represented with terrorism leading to posttraumatic stress disorders (PTSD) from kidnapping down to Boko-Harram and Fulani herdsmen violence that undermine security and national development. Sequel to this, economic recession and anxiety of the mass is another cancerous triggered to corruption which clinicians identify today as a major set-back in African socioeconomic and political development. Other issues facing the clinicians and students of psychotherapy with the service users are lack of keeping clinical records for data purposes, problems of referrals, poor accessibility to clinical resources and team relationships. The objective of this paper is to discuss in-depths these African issues and a way of advancing psychotherapy in Africa to a lofty heights. Proffering solutions could be identify through extensive training, entrepreneurship model, and also using continuation of professional development (CPD) to generate learning from the existing challenges in Africa through conferences, seminars and workshops. Unfortunately some clinicians in the society lack the zeal of pursuing CPD model of knowledge and experience as they find it difficult not only to engage with others but to come together and work as a team. Training is always a major reflection in working relationship in group practice to make relevance the dynamism required of psychotherapy. Importantly, using working groups formula (WDEP) that is focused in African way on client centred approach will serve as another panacea aimed at understanding clients (patients) in the group processes, while taken cognisance people's real life situations, to guard against some risks that may jeopardize group in psychotherapy. It is therefore recommended that those practising psychotherapy in African setting should bear in mind the relevance of clinical practice as evidence based and good quality of care in the art of psychotherapy.

Key words: Psychotherapy, Africa

Introduction

Permit to say that this World Council for Psychotherapy conference contains a wide range of discussions touching on the meaning of psychotherapy, types of psychotherapy, goals and relevance of

psychotherapy in Africa setting. This Conference is a unique one because it gathered all and sundry together to remind us who we are. The knowledge and experience generated in the area of Psychotherapy today will shape our thinking

and belief on how to advance psychotherapy both in our clinics, hospitals and communities at large. This annual conference is important in Africa today when we look at so many violent issues around us such as terrorism (Boko Haram, Fulani herdsmen), Kidnapping and Political insecurity in all geo-political zones re-awakening national security crisis and anxiety. In addition, crisis and trauma in Nigeria today have enabled me to come up with the above title and to come to terms with the meaning of psychotherapy in Africa. Let's look at the following psychological issues;

1. When people remain unaware of their true motivation and fears, they can be restored to healthy functioning only by becoming conscious of what has been repressed.
2. When people can understand what is motivating their actions, the focus is on changing behaviour...in this way, psychotherapy seeks to determine the ways of our human behaviour and mental processes involved and create knowledge base that can contribute to human welfare.

The two statements above and its etymology brings the Ancient Greek word of Psychotherapy to reveal the meaning '**psyche**' depicting breath, spirit (peuma) or soul and **therapeia meaning 'healing or treatment'** in other words the treatment of disorders of the mind or personality by psychological methods.

The **American Psychological Association** (APA) adopted a resolution on the effectiveness of psychotherapy in (2012) based on a definition developed by **John C. Newcross**: 'Psychotherapy is the informed and intentional application of clinical methods and interpersonal stances derived

from established psychological principles for the purpose of assisting people to modify their behaviours, cognitions, emotions, and/or other personal characteristics in directions that the participants deem desirable'. Influential editions of a work by **Psychiatrist Jerome Frank** defined 'psychotherapy as a healing relationship using socially authorized methods in a series of contacts primarily involving words, acts and rituals regarded as forms of persuasion and rhetoric'.

Some definitions of counseling overlap with psychotherapy particularly **non-directive client-centered** by **Carl Rogers** referring counseling as a guidance for everyday problems in specific areas, typically for shorter durations with a less medical focus.

Psychotherapy as we know is the use of psychological methods, particularly when based on regular personal interaction, to help a person change and overcome problems in desired ways. By this, psychotherapy aims to improve an individual's well being and mental health, to resolve or mitigate troublesome behaviours, beliefs, compulsions, thoughts, or emotions, and to improve relationships and social skills. Certain psychotherapies are considered evidence-based for treating some diagnosed mental disorders.

There are over a thousand different psychotherapy techniques, some being minor variations, while others are based on very different conceptions of psychology, ethics (how to live) or techniques. Most involve one-to-one sessions, between client and therapist, but some are conducted with groups including families. According to Krech et al (1962), groups are usually divided into two categories – psychological groups and social organizations. But for the purpose of our discussion here, it is most appropriate to concentrate on psychological

groups. Schein (1980) views a psychological group as any number of people who;

- Interact with one another
- Are psychologically aware of one another, and
- Perceive themselves to be a group

In a very strict sense a group is a collection of people interacting together in an orderly way (reflecting norms or standard behaviours) on the basis of shared expectation about each other's behavior. Based on such an interaction, group members feel belonging, distinct from non-members, and expect certain behaviours from one another. Such behaviours are governed by certain rules and expectations.

Psychotherapy varies when looking at the **types** such as psychoanalytic psychodynamics (Sigmund Freud), systemic psychotherapy family and couple, etc. However many other types of psychotherapy emphasized their contributions to particular aspects of development which the end point is achieving changes in behavior. Psychotherapists may be mental health professionals such as psychiatrists, psychologists, clinical social workers, marriage and family therapists or professional counselors.

To maintain the standard related to psychotherapy in Africa, **Continuation of Professional Development (CPD)** should be an ideal to target. Annual conference of this nature will capture its essence to foster education in psychology to generate knowledge and share experience through which clinicians, counselors, psychologist, psychiatrists learn more on how to establish a good working relationship with their clients/patients etc. The Western world has undergone series of metamorphosis in psychotherapy in order to sustain their practice in psychotherapy. Such dynamics promotes creativity, innovation, in research

and career development. It provides evidence based practice and acquisition of therapeutic model of skills from varieties of other psychological backgrounds. Sequel to this, we still have challenges in our psychological practice such as lack of clinical records and resources to support and maintain demographic data and therapeutic alliance. Our clinicians and students need to understand and develop this level of awareness in order to advance collaboration and healthy relationship in our working environment.

Institute of School of Psychotherapy and Health Sciences Okija should replicate the aforementioned Western model of knowledge and serve as training ground using Continuation of Professional Development for Internship service as ongoing formation. I admire this environment of School of Psychotherapy Institution as God's gift to Nigeria and to us psychologists, counselors and students as a citadel of learning in Counseling and Psychotherapy. However it's very painful to see numerous State and Federal Universities around us not recognizing this gift of the Institution except few Universities that send their students for Internship and advanced psychological studies. As a clinician, lecturer and researcher our postgraduate students presently here can testify their benefit in this School of Psychotherapy as psychological model of techniques leaves a touch of influence upon them.

Permit me to express my gratitude to Prof. SN Madu who studied from Sigmund Freud University Vienna Austria and rest of other professors that support him with their western psychotherapy studies to allow this School of Psychotherapy exist in this part of the African continent. What this School of Psychotherapy has achieved and stands for us is that we should advance it to a lofty height. For example, African originated

forms of Psychotherapy: Meseron therapy, Harmony Restoration therapy by Prof. Ebigbo and “Ubuntu” therapy by Prof. Sylvester Madu are all practicing here and point towards African values in psychotherapy.

Goal of Psychotherapy in Africa

Today’s world African Conference provides us with another reflection to rethink about the goals of psychotherapy; making psychotherapy relevant in Africa. We can only achieve this through Continuation of Professional Development as adjustment of Psychotherapy in African culture. It behooves the western culture to show us the knowledge in developing models, techniques of interventions on how to modify behavior while engaging with our clients/patients as well as engaging with the unengaged thereby making Psychotherapy fit on community and human development and sustainability.

Relevance of Psychotherapy in Africa

My vision and optimism after graduating in the field of psychotherapy in UK I developed a formula known as **WDEP working groups especially Black Minority Ethnic groups (BME)**. As a PhD student I generated this formula from various conferences, seminars and workshops I attended which keeps me going in crisis and trauma intervention practice. It is targeted as agent of change in behaviour as well as achieving goals. I re-designed the formula when I came back to Nigeria in 2015 to be suitable working with Alcohol and drug addicts as well as family and couples. The formula stands as following;

W stands for what you do really **Want**

D stands for how do you go about **Doing** what you want

E stands for **Evaluation**, adjust to achieve what you want

P stands for **Plan** that requires tasks, focus and responsibility in planning what you really want and going about implementing or doing it.

Group members are proved to make Psychotherapy visible, interactive and assertive. The assertiveness is rehearsed over and again to help members of the group to grow and learn how to change their challenging behaviour of particular importance are assignments carried out by the members between sessions. Often they role play within the group is to enable groups improve on their assertion in past or anticipated situations.

Using **WDEP formula** creates a greater awareness on group dynamics that attempts to help a person express more easily thoughts, wishes, beliefs and legitimate feelings of resentment or approval for example individual in a group is thought how to challenge their pessimistic thought (irrational) thought such as condemnation and lack of forgivingness “I am a bad mother because I committed abortion and I don’t deserve to be a good person in the role play another person in group will say: “You are not a bad mother but a good person and deserve to be happy”

Finally, trajectory of Psychotherapy in Africa will be of help using western ideologies in psychotherapy to re-shape our practice by making Psychotherapy relevant to African. By this, clinicians as well as students of psychotherapy need to utilize all the necessary psychodynamic methods, models, techniques that can help communicate effectively with groups, while sharing our knowledge as well as learning together through conferences such as this.

Another significant way psychotherapy can be relevant in Africa is as

an indicator of unsustainable development. Health is the epi-center of sustainable development and a society is unsustainable if its economic, political and social systems as well as institutions are compromising psychological (mental) and physical health disorders.

A decrease in health and wellbeing, such as rising rates of poverty and unemployment, economic recession and anxiety of the masses in Africa are associated with Posttraumatic stress Disorder (PTSD) and all pointing to high rate of depression, suicide and even death as part of unhealthy and unsustainable aspects of the environment.

A senior policy adviser at the White House spoke about how psychotherapy is being applied to improve development strategies around the world, and how her team at the White House is using psychotherapy to streamline government policy making and improving efficiency of implementation. This is a call to recognize the value of psychotherapy, not just as a means to heal the individual, but also to help build sustainable societies and a sustainable future.

Conclusion

Psychotherapy with myriads of social network service is an effective and efficient intervention models in group processes. It has been proven to be useful and it is still useful in high standard of therapeutic

fitness. Sequel to this, progress in the field is better understood in the treatment mechanisms, patient preferences, factors influencing treatment engagement as well as retention prediction of differential treatment responses. The integration of psychotherapeutic services in African setting will greatly be a source of help in the sections of personnel adjustment in real life situations. The World Council of Psychotherapy, therefore, should structure all of her programmes in such a manner that must seek to promote, coordinate, safeguard and protect African views of psychotherapy. Sequel to this, as clinicians working in African environment, we must rediscover our potentials by recognizing who we are in our African world-view.

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