PSYCHOSOCIAL MODELS FOR PREVENTION AND WELLBEING:
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Publication date:
2017

Document Version
Publisher's PDF, also known as Version of record

Link to publication from Aalborg University

Citation for published version (APA):

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PSYCHOSOCIAL MODELS FOR PREVENTION AND WELLBEING:
Addressing Authority-Based Violence in Urban Neighbourhoods

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Psychosocial models for prevention and wellbeing: Addressing authority-based violence in urban neighbourhoods

A praxis paper prepared in collaboration between Balay, CSVR, LAPS and DIGNITY for the Global Alliance

DIGNITY Publication Series on Torture and Organised Violence No. 15
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www.balayph.net

CSVR, The Centre for the Study of Violence and Reconciliation
www.csvr.org.za

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www.dignityinstitute.org

ISBN online: 9788790878894
# PSYCHOSOCIAL MODELS FOR PREVENTION AND WELLBEING

**ADDRESSING AUTHORITY-BASED VIOLENCE IN URBAN NEIGHBOURHOODS**

A praxis paper prepared in collaboration between Balay, CSVR, LAPS and DIGNITY for the Global Alliance

By Nomfundo Mogapi, Josephine Acuna Lascano, Ernesto A. Anasarias, Seidu Swaray, Themba Masuko and Steffen Jensen

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Foreword

Human rights work, and especially work to combat torture and its effects, is often characterized by unhelpful divisions between rehabilitation and prevention. Rehabilitation is the mainly the domain of doctors, psychologists and other highly specialized health professionals. Prevention, on the other hand, is dominated by social scientists and even more by lawyers, who tend to focus on institutional reform and legal frameworks. Much has been achieved over the years in both rehabilitation and prevention. However, this compartmentalization also has adverse effects, especially on the ground where the distinction makes much less sense. Here, state violence and its effects cannot easily be divided into prevention and rehabilitation. Often, state violence is chronic and repetitive. A clear chronology of before, during and after a traumatic event is hard to establish. Hence, there is a need to think out of these professionalized and disciplinary boxes – not to replace or put in doubt the contributions of legal and health interventions but to map out a field between them where much anti-torture work already happens. However, we need to find a better language – a new language – to discuss and reflect on this middle ground between rehabilitation and prevention. This paper is our contribution to this larger advocacy agenda.

The paper is the product of the collaboration between four like-minded organizations: BALAY Rehabilitation Centre in the Philippines, The Centre for the Study of Violence and Reconciliation in South Africa (CSVR), The Liberia Association of Psycho-social Services (LAPS) in Liberia and DIGNITY-Danish Institute Against Torture in Denmark. The collaboration has been formalised under the heading ‘The Global Alliance Against Authority-based Violence’, established in 2014. The basic premise of the Alliance is that around the world and across different contexts, groups of people are deemed ‘victimizable’ by the powers that be – either state or non-state – and hence legitimate targets of order-maintaining – or authority-based – violence. The risk groups might include young, indigent and criminalized men in slum areas, suspects of terrorism, migrants and refugees, sexual minorities or alleged carriers of disease. Their alleged transgressions might be based in a legal framework (like drug peddling) or in moral norms (like sexuality). However, all are likely victims of state or non-state violence. At the time of writing, the Philippine ‘War on Drugs’ provides a chilling example of the legitimacy of violence against such groups.

As a central element in the collaboration, we produce a number of cross-cutting analyses of a variety of different issues while employing different methodologies. All topics emerge from our common discussions on our different contexts, and include linking human rights, development and violence in the city; legal frameworks for policing poor urban neighbourhoods; social work models; community organizing strategies and partnership models.
Executive summary

This paper argues for the need to develop psychosocial approaches that focus on combining preventative and healing work through community-led interventions with risk groups, their families, their neighbours and wider communities, and finally the authorities that perpetrate violence to maintain order. While highly specialized (legal) prevention and (health-related) rehabilitation practices have contributed to addressing torture and ill-treatment, they also leave gaps, not least when we begin addressing violence employed to preserve local social, legal and moral orders in poor, urban neighbourhoods, what we term state and non-state authority-based violence. This violence is mundane and chronic rather than sudden traumatic eruptions of violence and has often been normalized, even by its victims. Interventions in such contexts demand that we reconsider some of our basic assumptions about how to go about working against torture and ill-treatment. This paper attempts to reconceptualise human rights work in ways that make sense for a focus on authority-based violence in poor, urban neighbourhoods. The paper does not produce a set of best practices and models to be implemented. Rather it sets out our reflections on how to understand the contexts of violence, identify the target groups of interventions and spell out the theories of change relevant in the different contexts.

The patterns of violence must be understood thoroughly. Authority-based violence in context takes many forms but it must arguably conform to certain underlying criteria in order for it to be legitimate: it needs to be construed as self-defence and it must be proportionate to the threat that it purports to counter. This form of violence does not exist in isolation and the paper outlines the relation between different forms of violence including youth violence, intimate violence, communal violence, state violence and revolutionary violence. This analysis of violence enables a reconsideration of target and risk groups. In much anti-torture work, torture is considered to be an extraordinary event. Focusing on the mundane nature of torture and ill-treatment, new risk groups emerge like young men or children in conflict with the law and the community they inhabit; sexual minorities, refugees and migrants or, as has been the case in both South Africa and Liberia, survivors or victims of diseases (HIV or Ebola). These groups, and others like them, are seen as affronts to public morality, sometimes because of their actions and sometimes because of what danger they are seen to represent (crime, drugs, terror, moral decay, threats to livelihoods, economic burdens etc.) and they are vulnerable to attacks from state officials, communities and even their own families who consider them in need of disciplining.
While focusing on legal rights of children, women, migrants and the rights not to be tortured or killed as important benchmarks, legal and health related approaches are not sufficiently responsive to these. Our work demonstrates the importance of relations as both protective and perpetrative. This suggests theories of change which focus on relations between risk groups, their families, the communities in which they live and the local public officials. Importantly, families, communities and public officials might constitute the most important protective networks that risk groups have. However, they might also perpetrate violence or allow it to take place. If families are not willing to protect their children, for instance because of drug abuse, those children are much more at risk of being harmed by community members and by the state. This entails working with the young people themselves – to deal with the violence perpetrated against them, and often the violence they perpetrate on others, as well as to attend to the relations they have with families, peers, communities and public officials. This might include the following elements:

- Improved self-esteem, ability to deal with trauma, healing, awareness of the psychosocial impact of torture among risk groups in general and among victims in particular;
- Improved understanding among victims and risk groups of the issues that put them at risk and the ability to deal with the risk constructively;
- Improved skills to engage in meaningful social activities in relation to the labour market, education and other social arenas; and
- Victims and risk groups that are mobilized and organized for prevention and for engaging in meaningful relationships with authorities, communities and families.

Work with risk groups must be complemented with interventions in relation to families, communities and public officials. In the Global Alliance, not all organizations work equally with all levels. For example, while it is true that LAPS and CSVR target all levels, DIGNITY works more with public officials, community members and volunteers whereas BALAY works more with families and young people. Depending on the context and the organization, the following elements may be relevant:

**The families:**

- Improved family cohesion and functioning to establish rehabilitative and healthy relations, including with risk groups and target groups;
- Improved social protection and prevention of violence by supporting families in their relationships with neighbours and state authorities; and
- Families mobilized to engage in advocacy for non-violent and healthy relationships with state authorities, and in advocacy for state authorities to assume their role as duty bearers.

**The community:**

- The community, mapped through stakeholder analysis and treated as potential partners, should be part of an alliance to prevent violence against risk groups based on a solid analysis of violence;
- Overall community efficacy improves where there are fewer incidents of violence and conflicts, and where conflicts may be addressed in constructive ways; and
- Improved ability to identify possible areas of collaboration and create inclusive communal projects (especially those that promote pro-social behaviours), and to seek support for them both inside and outside the community.

**The state and public officials:**

- State authorities could be mapped through stakeholder analysis, and potential partners inside the state could be mobilized based on an analysis of the patterns of violence;
- Important state officials need to reflect attitudes towards risk groups that are based on sound understanding of the problems of the risk groups;
- State authorities need to assume their responsibilities as duty bearers towards risk groups, families and communities; and
- State authorities could engage in welfare activities and programmes in partnerships with families and communities that enable them to participate in society as full citizens.
Introduction

Across the world in poor, urban neighbourhoods, both state and non-state authorities use violence against those they consider to be in opposition to them. This form of violence is often exercised by youth, sexual minorities, or those who transgress moral boundaries. Sometimes violence is carried out by the state; sometimes it is carried out by vigilante groups, neighbourhoods, or different violent networks and groups that are ill-defined. They have also been credited with being effective in situations where their impact might be limited. This paper aims to reverse some of these shortcomings by creating a psychosocial model, and sketching the main national, regional and global advocacy agendas.

The issue of definitions is complicated. We use the terms authority-based violence here to stress the need to define violence against those we consider to be in opposition to us. For instance, we address the need for psychosocial intervention in situations where the object of the discipline depends on which authorities are in control locally. While such differentiation, we argue, is important, it is not always straightforward. In many cases, the forms of violence are similar, even in situations where the object of discipline may be different. For example, in rural areas, violence may be state-based, while in urban areas it may be non-state-based. However, in both cases, the violence is often exercised by youth, sexual minorities, or those who transgress moral boundaries.

The targeted groups are usually at risk because of their socio-economic status, their identity (e.g. sexual minorities, look (sexual minorities), or where they are (strangers, migrants). But more than anything they are at risk because no one is willing to protect them, as they are seen to transgress moral boundaries.

Community-led approaches to violence prevention have often been heralded as a panacea for social exclusion and violence. The assumption is that only through a democratic process can we prevent violence and engage people in a participatory process of change. While we are sympathetic to these arguments, community-led interventions have been marred by a number of shortcomings: lack of clarity of goals and targets; targeting the wrong people; and where their impact might be limited. This paper aims to reverse some of these shortcomings by creating a psychosocial model, and sketching the main national, regional and global advocacy agendas.

The purpose of this paper is to engage in a broad range of theoretical and methodological discussions. We do not describe in detail what the different interventions in the four contexts do. Rather, we discuss principles and reflect on effective even in situations where the object of discipline may be different. For example, in rural areas, violence may be state-based, while in urban areas it may be non-state-based. However, in both cases, the violence is often exercised by youth, sexual minorities, or those who transgress moral boundaries.

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Understanding contexts of violence

When aiming to prevent violence and address its implications for risk groups, two of the first questions to ask are what kind of violence we are addressing and how different forms of violence relate to each other. Although our account is not exhaustive, we identify the following forms of violence as relevant to the four different project intervention sites:

1) **Youth violence** including gang violence, criminality, school violence and violence related to drug consumption;
2) **Collective violence** including vigilantism, xenophobic attacks, hate crimes, service delivery related violence, protest against forced evictions and violence against victims of disease (e.g. HIV and Ebola). Collective violence is usually legitimized by referring to some kind of moral community that protects local morals or a moral order;
3) **Intimate and interpersonal violence** including child abuse, domestic violence, and conflicts between neighbours and community members related to alcohol consumption, debts, resources, land or humiliations. In other contexts, these are called ‘social fabric’ crimes;
4) **State violence** involving teachers, police, military, health staff, prison staff, politicians and welfare officials;
5) **Extractive violence** involving maintaining and creating economic resources including strike breakers, mining guards and landlords; and
6) **Revolutionary violence** including regime-toppling activities locally or globally.

These forms of violence exist in different ways and to different degrees in all four countries. It serves no purpose to go through all forms of violence in the four different places, but a few examples might illustrate the point. Collective violence, a term that derives very much from the South African context (Von Hohlt et al, 2013) exists in all four contexts. In South Africa it appears in forms such as violent service delivery protests, vigilante activities, and xenophobic attacks on foreigners. In Liberia, the primary targets of violence were young ex-combatants (often talked about as the motorcycle boys). Furthermore, in the wake of the Ebola crisis, new targets were those that were seen to bring in disease and death. In the intervention sites in the Philippines, collective violence often takes the form of vigilante activities but in other places around the country, collective violence might relate to revolutionary, extractive and state violence. In Danish housing estates young people, or people who are seen as somehow deviant from a social norm of a strong group within the estate, might be disciplined in ways that are often referred to by mainstream Danish media as being from a ‘parallel society’ (Johansen, 2013). Likewise, state violence exists in all four locations. However, there are huge differences in how it is perceived and how it relates to the law. Violence perpetrated by the Danish state is most often legitimized in laws involving incarceration and penetration into families. In the Philippines, violence is often associated with corrupt police practices.

Models for understanding violence

These remarks prompt questions in relation to violence which are central to the psychosocial model for prevention and wellbeing in poor urban neighbourhoods, including the fundamental one of why we should intervene at all to reduce violence. We will briefly consider these questions through anthropological, trauma and public health approaches to violence. Let us begin with the anthropological approach. Firstly, **when is violence considered violent and by whom?** While this question might seem self-evident, it is actually not. Most of the people we work with – especially poor, young people – do not consider the violence they experience as violence because it is what it is – just normal life. In the Philippines, the term ‘Ok lang’ or ‘just ok’ captures the sense of violence that is to be expected and hence not ‘real violence’, even if victims are hurt or humiliated by it (Jensen, Hapal and Modvig, 2013). Torture is a category of violence that is most often associated with specific events or regimes like the apartheid regime in South Africa or the martial law period in the Philippines. Few people are willing talk about the current, everyday violence perpetrated by police as relevant to the Convention Against Torture. In these instances, what defines violence is who the victim is. Violence perpetrated by the police against activists is perceived as real violence, yet the same violence, when perpetrated against young men in trouble with the law is not considered violence. Likewise, the repressive powers of the Danish state are rarely spoken about as violence.

Violence seems to be relevant only in relation to excess, as the French philosopher Etienne Balibar (1998) suggests. His analysis closely follows the legal requirements of jus in bello or just war. Under these requirements, violence can be legitimate only if it is perpetrated in self-defence and if it is proportionate to the threat. This model is implicitly in operation in almost all discourses on violence. Take for instance the war on terror, which is legitimised as pre-emptive strikes against a threat that will materialize in the future. Even attacks like these draw on the idea of self-defence, as do many preventative criminal justice interventions. The discussions on sentencing are an example of how
The third question is: What drives this violence? The public health and trauma approaches assist in answering this question. The public health approach looks at violence as those factors where risk factors over-ride protective factors, an individual can be considered at risk of perpetrating violence or being victimized by violence. Risk factors include: having a low income, a low education level, a history of violence in the family, a history of psychological problems, being a member of a gang, drug use, and alcohol use. These risk factors are also found in the community, as well as on a structural level, such as poverty, unemployment, and structural violence.

The trauma approach focuses on the psychological impact of violence. It suggests that violence can cause trauma, which can then lead to psychological problems. This approach is often used to understand the impact of violence on individuals and communities, and to develop interventions to prevent violence.

The fourth question is: How could this violence be prevented? The public health approach suggests that preventive interventions should focus on reducing risk factors and increasing protective factors. This can be done through education, training, and social programs. The trauma approach suggests that preventive interventions should focus on treating the psychological impact of violence, such as through therapy and support groups.

The fifth question is: What is the purpose of violence? The public health approach suggests that violence can serve a purpose, such as to assert power or to gain resources. The trauma approach suggests that violence is often a result of trauma, and that it serves to relieve the pain of that trauma.

The sixth question is: How could we understand and prevent violence? The public health approach suggests that understanding and preventing violence requires a comprehensive approach that addresses the social, economic, and psychological factors that contribute to violence. The trauma approach suggests that understanding and preventing violence requires a focus on treating the psychological impact of violence, and on developing interventions that address the trauma.

The seventh question is: What is the relationship between violence and trauma? The public health approach suggests that violence can cause trauma, which can then lead to psychological problems. The trauma approach suggests that trauma can cause violence, which can then lead to further trauma.

The eighth question is: What are the implications of this for public policy? The public health approach suggests that public policy should focus on reducing risk factors and increasing protective factors, and on developing interventions to prevent violence. The trauma approach suggests that public policy should focus on treating the psychological impact of violence, and on developing interventions that address the trauma.

The ninth question is: What are the challenges of this approach? The public health approach suggests that the challenges of this approach include the need to address the social, economic, and psychological factors that contribute to violence, and the need to develop effective interventions to prevent violence. The trauma approach suggests that the challenges of this approach include the need to address the psychological impact of violence, and the need to develop effective interventions that address the trauma.

The tenth question is: What are the implications of this for public policy? The public health approach suggests that the implications of this approach for public policy include the need to address the social, economic, and psychological factors that contribute to violence, and the need to develop effective interventions to prevent violence. The trauma approach suggests that the implications of this approach for public policy include the need to address the psychological impact of violence, and the need to develop effective interventions that address the trauma.
(Mogapi, 2011). This is also seen in countries with unresolved histories of violent repressive states where state institutions such as the police once used violence to deal with ‘activists’ or people the state considered ‘terrorist’. Even if such countries now have democratic states, the institutions that used violence during the oppression still use similar tactics to address ‘at risk’ groups today. In these countries, traditional human rights approaches such as pro-human rights laws, policies and practices have not been effective in transforming these institutions. We argue that part of the reason for the lack of success of these traditional human rights approaches is that they do not deal with the collective trauma that exists in these institutions. The memories linked with the collective trauma are transferred from one generation of the police to the next, and the narratives used against activists in the past are transposed onto the ‘problematic individuals’ in the present. Psychosocially informed violence prevention thus involves addressing this institutional trauma and not just training on human rights.

In the account above, we introduce three different models for understanding violence. In the public health model violence is akin to a disease that needs to be cured and prevented. In the trauma model, violence is a symptom and there is a need to address both the symptom and the underlying causes. Finally, in the more anthropological approach, implicitly inspired by Benjamin, violence is constitutive and always there. It is not a by-product of unfortunate structures but central to law itself. All three models – violence as destructive, as symptom and as productive – are relevant for interventions we discuss, as we shall see below, and not necessarily contradictory. We can see this if we consider the question: Why should we intervene in different forms of violence?

Why intervene in relation to violence?

If we accept that both modes of explanation are relevant – i.e. that violence is both a disease and constitutive to society – the next question is why we should intervene and try to prevent it at all. Let us briefly go through some of the different forms of violence identified above that seem most relevant for our work in poor urban neighbourhoods: youth violence, interpersonal violence, collective violence and state violence.

Youth violence should be prevented because:

1) It harms and it hurts. The territoriality of much youth violence prevents the full life and movement of young people and residents. It prevents the building of relationships, community and the full realization of potential;
2) It has the potential to escalate from interpersonal violence to collective violence, even into regional wars and international criminal networks, as we have seen in many of the wars in West Africa and Liberia where ex-combatants have participated in international migration, mercenary activities and drug trading (Vigh, 2016);
3) Youth violence invites other forms of violence – especially collective and state violence – to counter its effects, for example vigilante activities, wars on gangs and counterinsurgency measures;
4) Preventing youth violence might break the cycle of violence – the culture, the psyche, the history – that sees violence perpetuate itself from one generation to the next;
5) Youth violence adds to and legitimizes the marginalization of youth and reproduces its ‘victimizability’. In that sense, youth violence is a predictor of other forms of violence;
6) Preventing youth violence reduces the potential for police corruption;
7) Preventing youth violence may work to improve relationships between children and parents and between young people and the general neighbourhood; and
8) Youth violence clogs public health and criminal justice systems.

Interpersonal violence (intimate, intergenerational and gender violence) should be prevented because:

1) Addressing it may address the unequal and vertical relations of power in intimate and interpersonal spheres as a central part of cultures that perpetuate violence locally – gender (men above women), intergenerational (old before young) and communal (ethnic, racial, national, etc.);
2) Preventing it may prevent escalations into collective and state violence;
3) Interpersonal violence is a proxy and a predictor for violence in a society as it often feeds and enables other forms of violence, as when a child is punished and carries this violence with him or her into their own practice;
4) Interpersonal violence can be transmitted unconsciously in situations of domestic violence, wherein the violent behaviour of a parent surfaces in domestic situations of the children once they are adults

5) Individual human rights violations can create collective trauma, which can, in turn, fuel additional human rights violations and other forms of violence.

Collective violence should be addressed because:

1) It hurts and harms and destroys the livelihood and social fabric of the most vulnerable groups of society – those who are seen as a threat to a given moral community;

2) Addressing collective violence may address the vertical lines of power of the moral community that perpetuates the violence. This may take the form of xenophobic violence, intergenerational violence, hate crimes and violence against victims of disease; and

3) Collective violence often escalates into state violence and intra-communal struggle.

State violence (carried out by teachers, prison guards, police and other state officials) should be prevented because:

1) It harms and destroys the lives and livelihood of the poor and wrecks individual and communal trust;

2) It undermines the belief in justice and the rule of law;

3) It is intimately connected to violent extortionist and informal state practices;

4) It escalates into collective violence and often propels youth violence, even if they are obliged by law to protect the dignity of people;

5) It prevents meaningful change from occurring as people are frightened to engage in civil action; and

6) It perpetuates mistrust between citizens and state actors, which is crucial for effective violence prevention and strengthening of democracies.

Victims, and risk and target groups

From the lists of violence and reasons for intervening above we may deduce risk groups of authority-based violence, as well as target groups for intervention. In our work we distinguish between five different target groups for our psychosocial approach to addressing authority-based violence. They comprise victims of violence, risk groups of violence, families of victims and risk groups, the communities in which they live and institutions wielding authority (state or non-state) in the given context. In different ways these five groups populate the field in which authority-based violence is a central problem. While they all inhabit the field, the psychosocial approach distinguishes between victims and risk groups on the one side and families, communities and authorities on the other.

Victims and risk groups comprise those groups that in different ways are seen as an affront or threat to a locally endorsed moral community. As we can see from above, these groups might be constituted by young people, migrants, suspected terrorists, sexual minorities, victims of disease, or any other group that is marginalized by the moral community. Who they are must be determined in the specific context. However, for all our four contexts, young people (mostly men but also women) are generally understood as both a risk and at risk. Often authorities – state and non-state – perceive them as inherently criminal or violent and out of control; as members of gangs and drug abusers. These perceptions legitimate intervention and often disciplinary or retributive violence against young people. While these perceptions to some extent have little relation to the reality of young people, young people are objectively at risk and often their own practices invite retribution and disciplinary action. Thus we may usefully refer to young people as victim-perpetrators where it is to some extent their own practices that invite violence. Hence, protection must include working both with the perceptions of society and the practices of young people. These remarks suggest that while we can establish a first distinction between victims and risk groups of authority-based violence, both are central target groups for intervention. Any project must describe in detail both victim and risk groups in relation to the structures of violence. Finally, when it comes to interventions it is crucial to distinguish between victims who have actually experienced violence, ill-treatment and even
disrespected by another during oppressive regimes, and this is mostly in the hands of the state.

In this way, our analysis is borne out in the experiences we have from working in poor, urban
neighbourhoods. While the approach and the thinking behind it does emanate out of local
engagements, this will not spell out in detail what should be done. That is subject to
theoretical and methodological concerns. Hence, parents or family members of the
victims/at risk groups are mobilized and organized for prevention and for
engaging in meaningful social activities in relation to the labour market,
towards empowering, organizing and shifting attitudes and cultures; and
towards addressing its outcomes.

A central focus of the psychosocial approach is on relationships – in families, communities
and authorities. If we work with well-thought-out and well-implemented
theories of change, then we will be able to prevent authority-based violence
and tackle its consequences. This theory of change is stated as follows: If we work with well
thought-out and well-implemented theories of change, then we will be able to prevent authority-
based violence and tackle its consequences.

Victims/at risk groups: Facilitate healing, social inclusion and
psychological awareness

While contextually determined, interventions should focus on creating the following
outcomes:

a) Improved self-esteem, ability to deal with trauma, healing, awareness of the psychosocial
impacts of torture among risk groups, and among victims in particular;
b) Improved understanding among victims and risk groups of the issues that put them at
risk and the ability to deal with the risk constructively;
c) Improved skills and other social arenas; and

d) Victims and risk groups, who are mobilized and organized for prevention and for
engaging in meaningful relationships with authorities, communities and families.

A second order of target groups can also be deduced from the above. They comprise families,
both potential perpetrators of violence – either as direct perpetrators or as condoning the
physical and psychological violence to an extent that it falls under the purview of
torture on the one hand and risk groups on the other. While risk groups should be engaged
with as potential future victims, there are health (physical and psychological) issues specific to
the real or perceived threat posed by risk groups. Hence, parents or family members of the
victims/at risk groups are mobilized and organized for prevention and for
engaging in meaningful social activities in relation to the labour market,
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and tackle its consequences. This theory of change is stated as follows: If we work with well
thought-out and well-implemented theories of change, then we will be able to prevent authority-
based violence and tackle its consequences.)
Families: Promoting families as support structures rather than as perpetrators or risk groups

Families can be at risk; they can suffer the collective impact of violent crime against their members, they can be perpetrators of interpersonal and group violence, and they can also be crucial partners in preventing violence and creating an enabling environment. Families in the poor, urban neighborhoods we work in are often subjected to extraradical violence from organized crime, privatization and exploitation. On top of this, they are often exposed to pressure from poverty, marginalization and exploitation. Parents, for instance, are often caught between their own expectations, the expectations of the surrounding community, and other societal factors.

Families in the poor, urban neighborhoods we work in are often subjected to extraradical violence from organized crime, privatization and exploitation. Parents, for instance, are often caught between their own expectations, the expectations of the surrounding community, and other societal factors. Thus, developing social cohesion around activities that promote social values, especially nonviolent social values, is crucial in preventing violence. This approach to promoting social cohesion around activities that precede and support prevention work is being used in many of our partner organizations around the world.

While outcomes are contextually determined, they should include the following considerations:

a) Improved ability to identify possible areas of collaboration and create inclusive interventions.

b) Improved social protection and prevention of violence by supporting families in their relationships with neighbors and state authorities.

c) Improved cohesion and functioning to establish rehabilitative and healthy relationships with state authorities.

Community: Promoting communities as support structures rather than as perpetrators or duty bearers

As our remarks above suggest, it is important that local and national authorities take responsibility for preventing and responding to violence. This is especially true where violence is embedded in the local society and where it is driven by structural inequities, such as poverty, unemployment, and lack of access to education and health care. In many cases, this can mean working with other local authorities, such as schools, hospitals, and community organizations, to create a network of support for families and individuals who are at risk.

While outcomes are contextually determined, they should include the following considerations:

a) Improved ability to identify possible areas of collaboration and create inclusive interventions.

b) Improved social protection and prevention of violence by supporting families in their relationships with neighbors and state authorities.

c) Improved ability to engage productively with both surroundings and their own family members who are involved in conflictual communities.

State authorities: Perpetrators or duty bearers

As is evident in our remarks above, many ways, vítims do not assume that communities are inherently peaceful and/or cohesive. In many ways, vítims do not assume that communities are inherently peaceful and/or cohesive. In many ways, vítims do not assume that communities are inherently peaceful and/or cohesive. In many ways, vítims do not assume that communities are inherently peaceful and/or cohesive. In many ways, vítims do not assume that communities are inherently peaceful and/or cohesive. In many ways, vítims do not assume that communities are inherently peaceful and/or cohesive. In many ways, vítims do not assume that communities are inherently peaceful and/or cohesive. In many ways, vítims do not assume that communities are inherently peaceful and/or cohesive. In many ways, vítims do not assume that communities are inherently peaceful and/or cohesive. In many ways, vítims do not assume that communities are inherently peaceful and/or cohesive. 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Authority-based violence in context takes many forms, but it must arguably conform to certain underlying criteria in order for it to be legitimate. It needs to be constructed as self-defense and it must be proportionate to the threat. As much of anti-torture work, torture is considered as a retribution, and in much anti-torture work, torture is considered as a response to much anti-torture work. It is the ability to combine different approaches to violence as productive and as destructive of life and limb. While focusing on legal rights of children, women, migrants, and the right not to be killed or tortured in order to legitimate the wounds of torture. It is not enough to demonstrate the crucial importance of relations between risk groups and authorities, and to reflect on the scope of interventions and the theories of change which may constitute torture and ill-treatment in the context of violence and revolutionary violence. Furthermore, we explored how these relations are produced conditions conducive for authority-based violence. Central to this understanding is the ability to combine different approaches to violence. While focusing on legal rights of children, women, migrants, and the right not to be killed or tortured in order to legitimate the wounds of torture. It is not enough to demonstrate the crucial importance of relations between risk groups and authorities, and to reflect on the scope of interventions and the theories of change which may constitute torture and ill-treatment in the context of violence and revolutionary violence. Furthermore, we explored how these relations are produced conditions conducive for authority-based violence. Central to this understanding is the ability to combine different approaches to violence.
a. Improved self-esteem, ability to deal with trauma, healing, awareness of the psychosocial impact of torture among risk groups in general and among victims in particular;
b. Improved understanding among victims and risk groups of the issues that put them at risk and the ability to deal with the risk constructively;
c. Improved skills to engage in meaningful social activities in relation to the labour market, education and other social arenas; and
d. Victims and at-risk groups who are mobilized and organized for prevention and for engaging in meaningful relationships with authorities, communities and families.

Work with risk groups must be complemented with interventions in relation to families, communities and public officials. In the Global Alliance, not all organizations work equally with all levels. For example, DIGNITY works more with public officials, community members and voluntaries, whereas BALAY works more with families and young people. Depending on the context and the organization, the following elements may be relevant:

**The families:**

a) Improved family cohesion and functioning to establish rehabilitative and healthy relations, including with risk groups and target groups;
b) Improved social protection and prevention of violence by supporting families in their relationships with neighbours and state authorities; and
c) Families mobilized to engage in advocacy for non-violent and healthy relationships with state authorities, and in advocacy for state authorities to assume their role as duty bearers.

**The community:**

a) The relevant community mapped through stakeholder analysis and potential partners should be part of an alliance to prevent violence against risk groups;
b) Improved community efficacy, where there are fewer incidents of violence and conflicts, and where conflicts may be addressed in constructive ways; and
c) Improved ability to identify possible areas of collaboration and create inclusive communal projects (especially those that promote pro-social behaviours), and to seek support for them both inside and outside the community.

**The state and public officials:**

a) State authorities are mapped through stakeholder analysis and potential partners inside the state mobilized;
b) Important state officials should reflect attitudes towards risk groups that are based on sound understanding of the problems of the risk groups;
c) State authorities should assume their responsibilities as duty bearers towards risk groups, families and communities; and
d) State authorities should engage in welfare activities and programmes in partnerships with families and communities and enable them to participate in society as full citizens.
The Global Alliance is a strategic alliance established in 2014 between likeminded civil society organisations working towards building a global alliance of communities against torture and urban violence. We conduct country-based, as well as collaborative intervention and knowledge generating projects across partners, focusing on countering authority-based violence in poor urban neighbourhoods.

The Global Alliance consists of four partner organizations from four different countries:

- **CSVR** - The Centre for the Study of Violence and Reconciliation, South Africa; 
  [www.csvr.org.za](http://www.csvr.org.za)

- **Balay Rehabilitation Center**, the Philippines;  
  [www.balayph.net](http://www.balayph.net)

- **LAPS** – Liberia Association of Psychosocial Services, Liberia;  
  [www.lapsliberia.com](http://www.lapsliberia.com)

- **DIGNITY** – Danish Institute Against Torture, Denmark;  
  [www.dignityinstitute.org](http://www.dignityinstitute.org)