



INTENSITY OF EVENT, DISTRESS DISCLOSURE AND RESILIENCE IN POST-TRAUMATIC STRESS DISORDER AMONG INTERNALLY DISPLACED PERSONS IN DURUMI CAMP, ABUJA, NIGERIA.

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ABSTRACT

The study investigated the influence Intensity of Event, Distress Disclosure and Resilience in Post-Traumatic Stress Disorder (PTSD) among Internally Displaced Persons (IDPs) in Durumi Camp, Abuja. A survey method was adopted using a convenient sampling technique to randomly select 55 participants (M=23 & F=32) ranging from 17-78 years old (MD=33.44; SD=17.30). The instruments used in the study were the Demographic Data of participants (including age, sex, religion, marital status, and educational qualification), Intensity of Violent Event Scale (IVES), Distress Disclosure Index, Nicholson McBride Resilience Questionnaire (NMRQ) and PTSD Symptoms Scale (PSS-1). To achieve the aim of the study, four hypotheses were tested using T-test, Multiple Regression Analysis and Pearson Correlation. Findings revealed that there was a statistically significant relationship between intensity of violent event and PTSD ($r[53] = 0.430, P < 0.05$) among IDPs. The results also showed that there was no significant relationship between distress disclosure and PTSD ($r[53] = 0.038, P > 0.05$) among IDPs. Results of the study further revealed a significant moderate relationship between Resilience and PTSD ($r[53] = 0.460, P < 0.05$) among IDPs. Lastly, results revealed that distress disclosure and resilience jointly predicted PTSD ($R = .461; F = 7.033, P < .01$) among IDPs in Durumi Camp, Abuja. Independently, resilience indicated a significant difference in the relationship with PTSD ($\beta = .466; t = 3.737, P < .01$) while distress disclosure did not independently predict PTSD ($\beta = -.035; t = -.280, P > .05$) among IDPs in Durumi Camp, Abuja. We concluded that intensity of event and resilience significantly predict PTSD; we also concluded that distress disclosure and resilience jointly and significantly predicted PTSD. Based on the findings from this study, it is recommended that there should be early orientation / proper education of internally displaced persons in terms of resiliency skills, event disclosure to trained practitioners. Furthermore, government should involve the services of psychologists to assess and address the issue of PTSD among IDPs in Nigeria.

Keywords: Intensity of event, Distress disclosure, Resilience, Post-Traumatic Stress Disorder (PTSD), Internally Displaced Persons (IDPs).

INTRODUCTION

Many communities in Africa continue to be affected by long-standing conflicts with mass traumatisation of their populations. Nigeria as a country has a variety of conflicts that result to chronic blood lettings e.g. political crisis over 'indigene' rights and political representation (Krause, 2011).

These recurring conflicts /crises (maiming, killing, burning of houses, motor vehicle and other properties) leads to injuries, emotional trauma, and disabilities, loss of homes and livelihoods as well as death. The intensity of crisis that has led to displacement of humans has become a global problem. It has emerged as one of the great human tragedies of the 21st century.

As reported in May 2019, a record 41.3 million people are displaced inside their own countries because of conflict and violence, (<https://reliefweb.int/report/world/more-people-displaced-inside-their-own-countries-ever-enarfr>). Also, in 2019, 1.8 million Nigerians have fled from their homes and are internally displaced (<https://www.unocha.org/nigeria/about-ocha-nigeria>)

Internally displaced persons (IDPs) are persons who have been forced or obliged to flee or to leave their homes or place of habitual residence in particular as a result of or in order to avoid the effect of armed conflict, situation or generalised violence, violation

of human rights or natural or human made distress, and who have not crossed an internationally recognised state border.

Societal traumas experienced by the victims of conflicts and disasters affect IDPs to the extent that they experience post-traumatic stress disorder (PTSD). Such factors include intensity of event, distress disclosure and resilience. These factors have showed different levels of predictive ability with regards to PTSD in different situations, this study explores their relevance with regards to persons who are internally displaced as a result of violent occurrences in their original communities.

LITERATURE REVIEW

Different studies have showed that the impact of a disaster is felt more in developing countries due to borderline economic status of the vulnerable population, high population density and limited resources (Juvva and Rajendran, 2000). In India, Sharan et al (1996) reported a 59% prevalence of psychiatric disorders in the adults following Marathwada earth-quake (23% had PTSD and 21% had depression). Three months after the Bhopal Gas tragedy a 22.6% prevalence rate for mental disorders were reported (Murthy, 1997).

Ebulum (2014) has done an extensive review of literature on the *Role of Intensity of Event, Distress Disclosure and Resilience in Posttraumatic Stress Disorder Among Flood Victims in Anambra State*. Studies cited include the one by Besser and Neria (2012) which indicated that intensity of trauma exposure did not affect levels of PTSD symptoms or perceived social support. Structural equation modelling showed that the link between attachment anxiety and PTSD symptoms is mediated by low levels of perceived social support. However, impact of event was identified as one of the factors responsible for PTSD following the devastation caused by a super-cyclone (Kar, Sharma, Murali and Mehrotra, 2004). In the same vein, a strong association has been established between the experiential dimension of war-related trauma exposures and the full symptom of PTSD (Badri, Crutzen and Van den Borne, 2013.) Furthermore, earthquake exposure was found to be positively associated with PTSD in a study by Wu, K., Zhang, Y., Liu, Z., Zhou, P., & Wei, C. (2015).

In terms of distress disclosure, Alana (2011) found that participants who received supportive reactions from others when discussing stressful experiences tended to hold positive assumptions about the self, others, and world. Alana's results showed that individuals who wrote about personally distressing stressors three times over approximately three weeks tended to report significantly better psychological and physical health, when compared to those who wrote about non-stressful activities. A unique finding was that participants who wrote about their stressful life experiences reported fewer physical and psychological symptoms. They also reported improved hardiness and self-efficacy following written expression of their most stressful life experiences. On the other hand, victims of a boating accident who displayed avoidant behaviour and who spent less time attempting to work through their experiences manifested traumatic symptoms, somatic symptoms and fears eight months after the accident - implying that the kind of coping strategy used by those exposed to traumatic events affects the development of the disorder

Resilience is defined as the dynamic ability to adapt successfully in the face of adversity, trauma, or significant threat (Horn and Feder, 2018). As a trait, resilience has been found to be negatively related to post-traumatic distress (Connor and Davidson, 2003; Pietrzak et al., 2010). This relationship indicates that resilience can reduce

pathogenic reactions after suffering from traumatic events, which coincides with the model built by Agaibi and Wilson (2005). This model indicates that resilience related to personalities and coping styles affects thinking and perception, which modulates PTSD symptoms. Furthermore, findings by Heller, Larrieu, D'Imperio and Boris (1999) indicate that social skills relate closely to the development of resilience in children. Specifically, social skills increase the possibility for positive friendship experiences and social support networks, which increases psychological well-being (Demir, Jaafar, Bilyk & Ariff, 2012). Since resilience could be regarded as a psychological capital, increased friendship experiences may in turn reduce the risk for disorders such as PTSD.

STATEMENT OF PROBLEM

The violent activities of the Boko Haram Sect, herdsman-farmers' clashes, ethno-religious conflicts which has resulted to destruction of lives and property is a serious issue that could not be dismissed with a wave of hand. The activities of Boko haram group and Fulani Herdsmen caught the attention of international community following series of violent attacks in Nigeria since July 2009. The attacks lead to massive displacement of persons mostly from the Northern-eastern part of Nigeria. Most of the IDPshad to flee from the danger zones to safer place (Jimoh, 2011). There seems to be lack of comprehensive information on IDPs' psychological status, situation which left many IDPs in a difficult position as they seek to adjust in their host communities by suppressing the painful experiences. This project work therefore, seeks to assess the influence of intensity of event, distress disclosure, resilience and PTSD of the IDPs in Durumi Camp, Abuja, Nigeria.

OBJECTIVES

The following are the objectives of this study:

1. To examine the influence of the intensity of event on PTSD among survivors of violent displacement.
2. To examine the influence of distress disclosure on PTSD among survivors of violent displacement.
3. To examine the relationship between resilience and PSTD among IDPs in Durumi Camp, Abuja.
4. To examine the influence of distress disclosure and resilience on PTSD among IDPs in Durumi Camp, Abuja.

HYPOTHESES

The following hypotheses were tested:

1. There will be a significant relationship between Intensity of violent event and PTSD among IDPs in Durumi Camp Abuja.
2. There will be a significant relationship between distress disclosure and PTSD among IDPs in Durumi Camp Abuja.
3. There will be a significant relationship between resilience and PTSD among IDPs in Durumi Camp Abuja.
4. Distress disclosure and resilience will significantly jointly predict PTSD among IDPs in Durumi Camp Abuja.
5. Intensity of violent event and resilience will jointly predict PTSD among IDPs in Durumi Camp, Abuja, Nigeria

RESEARCH DESIGN

A survey design was adopted for the study.



Structured questionnaires were used to collect data on the variables under study. Completed questionnaires were subjected to analysis.

PARTICIPANTS

The participants were IDPs and survivors of violent attacks. A total of 55 participants were selected randomly using a convenient sampling technique. The characteristics of the participants are as follows: 23 males and 32 females with age ranged between 17 to 78 years with mean age of 33.44 and standard deviation 17.307. Single were 30(54.5%), married 18(32.7%), divorced 2(3.6%) and widow 5(9.1%). Educational Qualification: FSLC/SSCE 32(58.2%), ND/NCE 18(32.7%) and HND/BSC 5(9.1%). Religion: Christian 36(65.5%), Islam 17(30.9%) and Traditional 2(3.6%).

INSTRUMENTS

The instruments used in this research were all included in one questionnaire for ease of administration. They were however divided into various sections. Section A: Demographic data of participants, including age, sex, religion, marital status, and educational qualification; Section B: Intensity of Violent Event Scale (IVES) which consists of 6 items developed by the researchers to measure Intensity of Violence Event with response options 1 to 5 on a 5-point Likert scale (Very Low= 1, Low= 2, Moderate = 3, High= 4 and Very High= 5); Section C: Distress Disclosure Index developed by Kahn and Hessling (2001) - consisting of 12 items with response options 1 to 5 on a 5-point Likert scale; Section D: Nicholson McBride Resilience Questionnaire (NMRQ) developed by Leersian and Nicholson McBride (2009) - consisting of 9 items with response options 1 to 5 on a 5-point Likert scale designed to one's resilience level; Section E: The Post Traumatic Symptomatic Scale (PSS-1) developed by Foa (1986) to assess PTSD in participants - a 16-item questionnaire with four response options (0, 1, 2 and 3) indicating the levels of severity, with higher scores indicating increasing levels of severity.

PROCEDURE

The researchers obtained a letter from the Department of Psychology, Nasarawa State University to the Head of the Durumi IDP Camp, Abuja introducing the researchers and purpose of the study. Informed consent was obtained from the participants for the study. With the support of two research assistants, the questionnaires were administered to the participants using a convenience random sampling technique. Fifty-five questionnaires were completed and returned for analysis.

DATA ANALYSIS

The study adopted the use of frequency, percentages, means and standard deviations to provide a descriptive explanation for the spread of the variables. To test our hypotheses, Pearson Product-Moment Correlation was used to establish the relationship between study variables and PTSD while regression analysis was used to establish the predictive influence of the joint variables on PTSD.

RESULTS

Table 1: shows the characteristics of 55 participants (Male = 23 and female = 32). Age ranged between 17 to 78 years with mean age of 33.44 and standard deviation 17.307. Single were 30(54.5%), married 18(32.7%), divorced 2(3.6%) and widow 5(9.1%). Educational Qualification: FSLC/SSCE 32(58.2%), ND/NCE 18(32.7%) and HND/BSC 5(9.1%). Religion: Christian 36(65.5%), Islam 17(30.9%) and Traditional 2(3.6%).

Table 1: Demographics or Characteristics of Participants

Variable		Frequency	Percentage
Gender:	Male	23	41.8
	Female	32	58.2
	Total	55	100%
Marital Status:	Single	30	54.5
	Married	18	32.7
	Divorced	2	3.6
	Widow	5	9.1
	Total	55	100%
Education:	FSLC/SSCE	32	58.2
	ND/NCE	18	32.7
	HND/BSC	5	9.1
	Total	55	100%
Religion:	Christian	36	65.5
	Islam	17	30.9
	Traditional	2	3.6
	Total	55	100%

Table 2: shows the means for interpreting intensity of violent event, distress disclosure, resilience and PTSD between male and female IDPs in the study. The results revealed that the index for intensity of event is 23.76, distress disclosure is 36.47, resilience is 29 and PTSD is 26. However, males mean scores are 22.57, 37.87, 28.22 and 23.83 respectively; these indicate that males scored high in distress disclosure but low in intensity of event, resilience and PTSD. Mean scores for females are 24.62, 35.47, 29.56 and 27.56 respectively. These indicate that the female IDPs scored high in intensity of event, resilience and PTSD but low in distress disclosure. These results signify that females are more psychologically affected in an event of displacement.

Table 2: Means and Standard Deviations of intensity of Event, Distress Disclosure, Resilience & PTSD according to Gender

Gender		Intensity of Event	Distress Disclosure	Resilience	PTSD
Male	Mean	22.57	37.87	28.22	23.83
	N	23	23	23	23
	Std. Deviation	5.089	7.270	7.032	6.610
Female	Mean	24.62	35.47	29.56	27.56
	N	32	32	32	32
	Std. Deviation	5.740	11.868	6.715	6.618
Total	Mean	23.76	36.47	29.00	26.00
	N	55	55	55	55
	Std. Deviation	5.524	10.189	6.818	6.812

Test of Hypotheses

Hypothesis 1: There will be a significant relationship between Intensity of violent event and PTSD among IDPs in Durumi Camp, Abuja. The hypothesis was tested with Pearson Product-Moment Correlation in Table 3.

Table 3: Influence of Intensity of Violent Event and PTSD among the IDPs

Variables	M	SD	df	R	Sig.
Intensity of violence	23.76	5.524	53	0.430	0.001
PTSD	26.00	6.812			

$$r(53) = 0.430, P < 0.05$$

Table 3 shows the summary results of the Pearson Product-Moment Correlation between the scores of intensity of herdsmen attacks (M= 23.76; SD= 5.524) and PTSD (M=26; SD= 6.812). Furthermore, the analysis revealed a statistically significant, $r(53) = 0.430$, $P < 0.05$ with an indication of a moderately positive relationship between intensity of violent event and PTSD among IDPs. This implies that the hypothesis was confirmed in this study.

Hypothesis 2: There will be a significant relationship between distress disclosure and PTSD among IDPs in Durumi Camp, Abuja. The hypothesis was tested with Pearson product-Moment Correlation in Table 4.

Table 4: Relationship between Distress Disclosure and PTSD among the IDPs

Variables	M	SD	Df	r.	Sig.
Distress Disclosure	36.47	10.189	53	0.038	0.781
PTSD	26.00	6.812			

$$r(53) = 0.038, P > 0.05NS$$

Table 4 shows the summary results of the Pearson Product-Moment Correlation between the scores of distress disclosure (M= 36.47; SD= 10.189) and PTSD (M=26; SD= 6.812). Furthermore, the analysis revealed a statistically insignificant, $r(53) = 0.038$, $P > 0.05NS$ with an indication of a very weak positive relationship between distress disclosure and PTSD among IDPs. This implies that the hypothesis was not confirmed in this study.

Hypothesis 3: There will be a significant relationship between resilience and PTSD among IDPs in Durumi Camp, Abuja. The hypothesis was tested with Pearson product-Moment Correlation in Table 5.

Table 5: Relationship between Resilience and PTSD among the IDPs

Variables	M	SD	df	r	Sig.
Resilience	29.00	6.818	53	0.460	0.000
PTSD	26.00	6.812			

$r(53) = 0.460, P < 0.05$

Table 5 shows the summary results of the Pearson Product-Moment Correlation between the scores of resilience (M= 29; SD= 6.818) and PTSD (M=26; SD= 6.812). Further analysis revealed a statistically significant, $r(53) = 0.460, P < 0.05$ with an indication of a moderately positive relationship between resilience and PTSD among IDPs. This implies that the hypothesis was confirmed in the study.

Hypothesis 4: Distress disclosure and resilience will significantly jointly predict PTSD among IDPs in Durumi Camp, Abuja. This hypothesis was tested with multiple regression analysis in Table 6.

Table 6: Summary of the Multiple Regression Analysis on PTSD

VARIABLES	B	t.	R	R ²	F
Distress Disclosure	-.035	-.280	.461	.183	7.033**
Resilience	.466	3.737**			

Sig. Level: * $P < .05$, ** $P < .01$ (df=2, 52)

Table 6 shows the summary results of a multiple regression analysis on PTSD among IDPs in Durumi Camp, Abuja. The results show that the combination of the predictor variables (distress disclosure and resilience) jointly predicted PTSD ($R = .461$; $F = 7.033, P < .01$) and accounted for about 18.3% variance for PTSD among IDPs in Durumi Camp, Abuja. Independently, resilience ($\beta = .466$; $t = 3.737, P < .01$) indicated a significant difference in the relationship with PTSD while distress disclosure ($\beta = -.035$; $t = -.280, P > .05NS$) do not establish a significant difference in the relationship with PTSD. Thus, on the basis of the joint influence, the hypothesis was confirmed in the study.

DISCUSSION

The findings of this study showed that intensity of violent event significantly predicted PTSD. Thus, the first hypothesis which stated that intensity of event will

significantly predict PTSD was supported. This supports the findings of previous researchers on intensity of exposure to traumatic events and PTSD. For example: Sabin, Lopez Cardozo, Nackeru and Varese (2003) reported that lack of food, witnessing massacre, being wounded, and experiencing other traumatic events like witnessing the disappearance of family members, being close to death were associated with symptoms of PTSD. Other studies (Cervantes, Salgadode, Snyder & Padilla, 1989; Summerfield & Toser, 1991; Rothe, Lewis, Castillo-Matos, Martinez, Busquets, & Martinez, 2002; Norris, Murphy, Baker & Perilla 2004; Pérez-Olmos, Fernández-Piñeres, & Rodado-Fuentes, 2005) had reported some vulnerability factors whose intensity may predispose victims of violence to PTSD.

Again, the result of this study revealed that distress disclosure was not a significant predictor of PTSD. Thus, the second hypotheses that distress disclosure will significantly predict PTSD was not supported. Although some levels of distress disclosure have been shown to be positively related to individuals' psychological wellbeing (Pennebaker, 1989; Cole, Kemeny, Taylor, & Visscher, 1996; Barry & Mizrahi, 2005; Hook & Andrews, 2005) and individuals who were victims of violence and who had kept this experience silent were significantly more likely to have adverse health effects than those who openly talked with others (Pennebaker and Susman, 1988). Some previous findings (e.g, Solomon, Zerach and Dekel, 2008) revealed that PTSD has no related association with self-disclosure.

Most of the previous studies that have reported a significant prediction of PTSD by distress disclosure had studied severe traumatic experiences like interpersonal violence. It is possible that the general pervasive nature of the violence may entail that the close persons to the individual may have also had the same experience at the same time. Thus, the sharing of one's troubles may be with someone who also passed through the same experience and it may be of little benefit to the person who discloses. Moreover, the disclosure which was assessed in this study was not the disclosure in a therapeutic relationship. It is not just the talking that heals the wounds of trauma; it is the response of the person whose distress is disclosed that has a therapeutic effect. It has also been observed by researchers that the nature of the individual's explanation of a traumatic event will often influence how he or she will respond to the event (Brewin 2003; Tennen and Affleck, 1990) and also that appraisals of a traumatic event as uncontrollable, unpredictable and objectively dangerous help determine subsequent reactions to the traumatic event (Foa, Zinbarg and Rothbaum, 1992).

The results showed that resilience significantly predicted PTSD. Thus, the third hypothesis which was stated that resilience will significantly predict PTSD among IDPs was supported. This finding supports the finding of previous studies (e.g., Masten and Tellegen, 2012; Suarez, 2013), that people who showed more resilience had more adaptive capacity when faced with traumatic events. Connor, Davidson and Lee (2003) had previously found that resilience was associated with more positive outcomes in terms of current physical and mental health status and fewer PTSD symptoms. Other researches show that a higher level of resilience could help to reduce the likelihood of PTSD (Bensimon, 2012; Zerach et al., 2012; Ssenyonga et al., 2013; Streb et al., 2014; Besser et al., 2015). These results suggest that although the relationship between trauma and psychological distress is complex, resilience is strongly associated with positive outcomes in the aftermath of traumatic experiences. Highly resilient individuals are more likely to come out of traumatic events remaining stable and fit.



CONCLUSION

The study investigated role of intensity of event, distress disclosure and resilience on PTSD among IDPs in Durumi Camp, Abuja. Results showed that intensity of event significantly predicted PTSD. It was also found that resilience significantly predicted PTSD while distress disclosure did not significantly predict PTSD. Also, results indicated that distress disclosure and resilience jointly and significantly predicted PTSD.

RECOMMENDATIONS

Based on the findings in this study, it is recommended that Government and other stakeholders should step up efforts to stem the tide of violent acts, which leads to internal displacement of persons and predisposes them to PTSD.

Psychologists and other relevant health practitioners need to increase preventive interventions to enhance resilience in at-risk populations such as IDPs.

In addition, treatment interventions focused on enhancing potentially modifiable protective factors that are consistently linked to psychological resilience should be put in place for individuals with PTSD by local, state and national health authorities. Government should involve the services of psychologists to assess and address issues around PTSD among IDPs in Nigeria.



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