

**STUDENTS' PERCEPTION OF PSYCHOSOCIAL SUPPORT AFTER  
TRAUMATISATION IN A SCHOOL SHOOTING IN FEDERAL COLLEGE OF  
EDUCATION KANO**

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**Abstract**

*The purpose of this study was to determine the type of psychosocial support students of Federal College of Education, Kano received after traumatisation in a shooting that occurred in the school. Population of the study were students from the school of arts and social sciences. A sample of 160 students (83 males and 77 females) were purposely selected for the study. Test-retest reliability co-efficient 0.81 was established for the instrument- using Pearson product moment correlation. A descriptive survey research design was adopted and data collected were analyzed using descriptive statistics of frequencies and simple percentages. Results from the study indicated that majority of the students received psychosocial support from their families and a small proportion received from friends. Additionally, the students are satisfied with the psychosocial support they received from their families and the support they received has been helpful. It was recommended that professional support should be provided as quickly as possible to students after a traumatic events. Governmental and non- governmental organizations should also provide immediate crisis intervention to the students who suffer from posttraumatic stress or trauma-related symptoms.*

**Keywords:** Trauma, Psychosocial Support, School, Posttraumatic stress disorder, shooting.

## Introduction

On 17th September, 2014, an armed group attacked Federal College of Education, Kano. These armed group killed many students and staff of the college. Consequently, several students were exposed to the traumatic event. Kano state has witnessed various forms of armed attack and armed conflict which include terror attacks, suicide attacks, bombing and explosion. According to a recent report by Human Right Watch (2015), armed conflict has resulted in the death of over 2,500 civilians between January and August 2014, and the displacement of over 65,000 residents within Nigeria as well as more than 80,000 as refugees in neighboring countries. Further estimate revealed that over 13,000 people have been killed and 981,416 people most of whom are children and adolescents have been internally displaced during the more than five years conflict (NEMA, 2015).

Nigeria has been affected by armed conflicts and it has been transmitting to other parts of the country. Kano state has had its fair share of armed conflicts coupled with the rise of insurgent activities which has destroyed economic, social and educational development of the state. Many schools were closed for quite a period of time, therefore, making schools inaccessible for students and their teachers. UNICEF (2007) reported that some 1.5 billion children- two thirds of the world's child population- live in the 42 countries affected the violent, high-intensity conflict between 2002 and 2006. Further estimates shows that there are 14.2 million refugees worldwide and there are 24.2

million people who are internally displaced because of conflict. In Nigeria, around 700,000 children have been forced to flee their homes as a result of the conflict in Northeast Nigeria between insurgents, military forces and civilian self-defense group (UNICEF, 2015) This new report from UNICEF revealed that the number of children running for their lives within Nigeria, or crossing over the border to Chad, Niger and Cameroon, has more than doubled in just less than a year. The negative consequences of violent conflicts are not just limited to the physical loss of lives or destruction of property. Survivors of violent conflicts are typically mentally affected by the violence that they experience or witness (Korb, 2013).

Studies have shown that traumatic events like natural disasters, accidents, armed conflict or violence may cause acute stress disorders (ASD) and post-traumatic stress disorder (PTSD) (Yule, Bolton, Udwin, Boyle, O'Ryan and Nurrish, 2000). Stress disorders are caused by an extreme stressor which may involve a threat to life or serious injury (NICE, 2005). Acute stress disorder (ASD) symptoms are psychic numbing, being dazed or less aware of surroundings, derealization, depersonalization, anxiety, increased arousal, re-experiencing and dissociative amnesia (APA, 2000). These symptoms usually occur within one month of the traumatic event. Mash and Wolfe (2002) identified three difficult types of symptoms that characterize PTSD. The first type is re-experiencing symptoms which have to do with having flashback or bad dreams about the trauma. These flashback symptoms are

often elicited by event similar to the traumatic experience. The second is known as hyper-arousal symptoms. These include being having difficulty sleeping, feeling tense, angry outbursts and being easily frightened. The third symptom is avoidance symptoms. This has to do with a person trying to avoid situations or emotions that might cause anxiety or fear. These symptoms also include avoiding places, events or objects that are reminders of the frightening experiences; emotional numbing; feeling of guilt, depression, or worry; losing interest in activities that were hitherto enjoyable; or having difficulty remembering the traumatic event.

PTSD can be developed after experiencing events that are terrifying such as violent crisis, armed robbery, bombing, rape or severe road traffic accident (Korb, 2013). The most frequent predictors of PTSD are the degree of exposure to the disaster or traumatic event (Rubonis and Bickman, 1991). Children and adolescents experience adult-like PTSD symptoms (Flaherty, Becker, Daley, Green, Hendren, and Gadpaille, 2003). People exposed to severe trauma may develop chronic PTSD and mood disorders. A person can also develop PTSD after witnessing a very frightening situation like seeing another being tortured, raped or killed and after experiencing such traumatic events the individual could experience anxiety and distorted thoughts (Korb, 2013). It is important to monitor regularly trauma symptoms of traumatized people so as to help refer them to where they can get treatment. (Goenjian, Walling, Steinberg, Karayan,

Najarian, and Pynoos, 2005).

Various studies have supported the use of individual and group cognitive behavioral therapy for reducing psychological symptoms among traumatized people (Wellington, Hahn, Fuqua-Whitley, Sipe, Crosby, Johnson, et al, 2008). Hobfoll, Watson, Bell, Bryant, Brymar and Fredman (2007) identified five empirically supported components in crisis management. These include promoting a sense of safety, calming, self and community efficacy, connectedness, and hope. Techniques enhancing psychological sense of safety include those targeted at individual, organizational and community levels, while intervention should include a psychosocial system dimension. Strategies that could help in calming vary from cognitive behavioral therapy and other treatment procedures like breathing training, therapeutic grounding and deep muscle relaxation to indirect approaches such as community level psychoeducation (Hobfoll *et al.*, 2007). Little or no research has been conducted to find out whether traumatized students in Kano state receive any form of psychosocial support. Though the focus of the study is on students perception of psychosocial support the received after traumatization. Further research can be carried out to measure the effectiveness of treatment intervention for traumatized people (Wellington *et al* 2008).

The study aimed at evaluating whether psycho social supports were offered to students exposed to a school shooting and what type of support did they received most.

This study also aimed at providing information to government agencies, healthcare organizations, governmental and nongovernmental organizations to provide adequate trauma support to people affected by armed conflict.

### **Purpose of Study**

The main purpose of this study was to determine students' perception of psychosocial support after traumatization in a school shooting in Federal College of Education Kano. Specifically, the objectives of this study are:

1. To find out the types of psychosocial support received by FCE students after traumatization in the school shooting.
2. To determine whether the psychosocial support received by the students is satisfactory.

### **Research Questions**

In the course of this paper the following research questions will be answered:

1. What are the types of psychosocial support mostly received by FCE students?
2. To what extent does the psychosocial support received by students satisfactory?

### **Method**

The study adopted the survey research design. Population of this study are students of the school of Arts and Social Sciences estimated to be 1526 students. The sample for this study consisted of 160 students purposely selected for this study because they are students who witnessed or experienced

the shooting. The sample consisted of 83 males and 77 females.

The school of Arts & Social Science is in the new site of the college and this is exactly where the shooting took place. The questionnaire was distributed to all the 160 students in a class setting after the day lectures.

### **Instrument**

The psychosocial support scale (PSS) is a self-designed instrument. The instrument had two sections; section A sought the background information of the respondents; section B contained 13 items. The first 11 items measure the types of psychosocial support: emotional, information, and instrumental. The last 2 items are to measure the satisfaction with the received psychosocial support for each source. Generally, these items dealt with the psychosocial support students received from family, friends, governmental or non-governmental organizations. The directions stated that research participants were going to indicate by ticking which among the family, friends and governmental and non-governmental organizations they have received most psychosocial support. The validity of the instrument was established with thorough scrutiny by two experts in psychology and the content validity of the instrument was found to be appropriate in measuring what the instrument purports to measure. The test-retest reliability method was used to establish the reliability coefficient of the instrument and reliability coefficient of 0.81 was obtained using the

Pearson product moment correlation (PPMC).

### Procedures

The questionnaires were distributed to students during the break after their class periods. Students were given directions by the researcher to complete the questionnaire. The students were also assured that their responses would be kept confidential. The researcher was assisted by four research assistance who are also lecturers in the college. The students were given 40 minutes to complete the questionnaire and return

same immediately and they were also told to feel free and ask any question they may wish to ask.

### Findings

Data collected were analyzed using descriptive statistics of frequency and percentage. The results of the study were presented as follows:

**Research question 1:** What is the type of psychosocial support mostly received by FCE students?

**Table 1:** Responses on the type of psychosocial support mostly received by FCE Students.

S/N	Items description	Psychosocial Family	Support Received Friends	Gov/non-Gov Org.
1.	Helped me to feel better	98(61.3%)	62(38.7%)	0 (0%)
2.	Made me feel that I'm really important person	82(51.3%)	78(48.71%)	0(0%)
3.	Expressed to me that they understand my feelings	91(56.91%)	79(43.11%)	0(0%)
4.	Helped me to deal with the traumatic event	83(51.91%)	77(48.11%)	0(0%)
5.	Provided me information about traumatic events	87(54.41%)	53(33.11%)	20(12.5%)
6.	Provided me with a place when I needed it	133(83.11%)	27(16.91%)	0(0%)
7.	Helped to accept the incident as an accident	121(75.61%)	39(24.41%)	0(0%)
8.	Talked with me about the decisions that I made about the incident	111(69.41%)	49(30.61%)	0 (0%)
9.	Said things that helped me to understand the Trauma	136(85%)	24(15%)	0(0%)
10.	Encouraged me to be in touch with others	92(57.5%)	68(42.5%)	0 (0%)
11.	Let me know that they will be around if I Need assistance	141(88.11%)	19(11.9%)	0(0%)
12.	I feel satisfied about the support I have received 13.1 feel that the support that I have received washelped	139(86.91%)	21(13.1%)	0(0%)
13.	I feel that the support that I have received was helped	122(76.31%)	38(23.71%)	0(0%)

The results in table 1 above, provided evidence that more than 50% of the student received most psychosocial support from their family. They also received some from their friends and they got little or none from governmental and non-governmental organizations.

**Research Question 2:** To what extent does the psychosocial support received by students satisfactory? This research question was answered by the high percentage (86.9%) of satisfaction obtained by the students from their family. Also 76.3% of the students feel that the support they got was helpful as shown in Table 2.

**Table 2: Other Psychosocial Support Offered to Victims of School Shooting**

Item description	Satisfied	Perceived helpful
Family	139(86.9%)	122(76.3%)
Friends	21(13.1%)	38(23.7%)
Government/Non Governmental organisation	0(0%)	0(0%)

### Discussion of findings

The purpose of the study was to determine the students' perception of psychosocial support after traumatisation in a school shooting in Federal College of Education Kano. The study revealed that most of the psychosocial support students of FCE Kano received after traumatisation in the school shooting is from their families and some of the students received some support from their friends. For almost one year after the incidence no governmental or non-governmental organization has provided the students with any/form of support that could help them in reducing posttraumatic stress symptoms they might have experienced. The study also revealed that a higher percentage (86.9%) of the students felt satisfied with the support they received from their families and 76.3% of the students felt that the support is quite helpful.

Findings from the study revealed that most students felt that the support they got from their families was important and this is consistent with a study that children exposed to a natural disaster reported support and emotional coping assistance from family to be important (Prinstein, la Greca, Vernberg, and Silverman, 1996).

### Conclusion

In conclusion, this study provided evidence that many students of FCK Kano received psychosocial support mainly from their families. It is important that professional support be provided for students whose exposure to trauma is high or low suffer from PTSD symptoms and have a less supportive network. Clinical assessment and treatment approaches should be considered for students who experienced traumatic grief reactions in addition to depression and PTSD. Therefore,

researchers need to engage in more study to examine the rate of PTSD amongst those affected by armed conflict, as well as evaluating the effectiveness of the crisis interventions.

### Recommendations

Immediate crisis support should be offered to students exposed to trauma. This immediate support can help reduce incidence of posttraumatic stress disorder (PTSD). There is also need to provide professional help and follow-up for those with significant trauma-related symptoms. This can be achieved through the engagement of clinical psychologists and all other professionals in the treatment of PTSD. Whenever possible, families of traumatized persons should be involved in the treatment of trauma-related symptoms. This is because parents and guardians play a central role in supporting their children exposed to traumatic events. Governmental and Non-Governmental Organization should offer immediate support to students affected by crisis particularly in schools. This can be done by applying crisis interventions that are empirically proven to be effective in treatment of PTSD and other trauma-related psychological symptoms.

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