

Original Research Article

Perceived Social Support as Correlates of Posttraumatic Growth among Internally Displaced Persons in Nigeria

ABSTRACT

In recent time, Nigeria is confronted with a lot of humanitarian crisis which has caused a serious setback to people's psychological well-being specifically those living in the area where the crisis is intense. Hence this study aimed to examine social support as a correlate of posttraumatic growth among internally displaced persons in Nigeria. A cross-sectional research design was adopted and 126 IDPs were purposively selected by the researchers. Perceived social support assessment (PSSA) and Post-Traumatic Growth Inventory (PTGI) were administered to one hundred and twenty-six (126) Internally Displaced Persons in Agan internally displaced persons camp, Makurdi Local Government, Area, Benue state. Four hypotheses were formulated and tested using descriptive statistics, Pearson r product moment correlation analysis, and t-test for independent means. The results showed that the majority of the internally displaced persons representing 89.7% experienced low acuity of social support. The results also showed that there was a significant positive relationship between perceived social support and posttraumatic growth among internally displaced persons in Makurdi, Benue State [$r=.313$ df (124), $P<.01$]. This signifies the higher the perceived social support, the higher the IDPs grow out of their posttraumatic stressors or events. The result further revealed that there were no significant differences between the male and female experience of posttraumatic growth [$t= -.628$ df (124); $P>.05$], but there was a significant influence of age on posttraumatic growth [$F= 2.804$, df (6,125), $P<.05$]. Thus, it was concluded that most of the internally displaced persons received little acuity of social support as perceived social support proved to be positively correlated with posttraumatic growth. It was also recommended that the internally displaced persons particularly, those who were diagnosed with posttraumatic stress disorder should be socially supported by the federal, state, and local government, Non-governmental organizations, private organizations, and host communities to help them grow out of their traumatic experiences thereby ensuring their mental health and psychological wellbeing.

Keywords: Perceived Social Support, Posttraumatic Growth, PTSD and Internally Displaced Persons.

1. INTRODUCTION

In recent time, Nigeria is confronted with a lot of humanitarian crisis which has caused a serious setback to people's psychological well-being specifically those living in the area where the crisis is at intense. In 2017, a fight broke out between farmers and herders which led to damage of properties, people sustaining injuries while some people lost their families, neighbours and community leader. The crisis also led to the community dwellers where the crisis happened to forcefully left the town, village or community and home to sojourn in a secured area within the country. These people who were forcefully evicted were faced with a series of psychological problems and their psychological well-being was affected were exposed to a series of psychologically related disorders such as posttraumatic stress disorder [1](Aroyewun and Ojo,

2019) and psychological distress (Ojo, 2019). However, it should be noted that despite the possible effect of PTSD experienced by these IDPs, there is the potentiality to grow out of the posttraumatic stressors or events that is, having positive reactions even when there seems to be negative outcome or events. Tedeschi and Calhoun (2004) in the model, defined posttraumatic growth as progressive growth from traumatic events which signifies that exposure to traumatic stressors or events may lead to positive outcomes. IDPs tend to grow out of the traumatic event if they receive adequate support in their sojourning environment from the government and non-governmental agencies as well as their host communities (Arogundade and Ojo, 2018). Social support is a vital part of human life that most times lead to positive change, especially when responding to a crisis (Schaefer and Moos, 1998). Social support helps people to positively cope with any catastrophic events. Prati and Piertrantoni (2009), found out that social support moderately predicts posttraumatic growth; they further asserted social support promotes effective coping strategies and encourages positive outcomes. Schaefer & Moos (1998) concluded active coping strategies are mostly experienced by an individual who seeks out and receives social support while Tedeschi and Calhoun (2004) explained social support in a different dimension and said that social support directly predicts positive change after the aftermath of a crisis. They further said that self-disclosure and help-seeking behavior plays a vital role in their response to a trauma-related event which they may be unaware of and also help them discover a positive approach to the trauma. (Tedeschi & Calhoun, 2004). An empirical study conducted by Wolchik, Coxe, Tein, Sandler, and Ayers (2008) examine Posttraumatic growth among fifty bereaved adolescents and young adults. They identified social support such as support from adults, peers, parents, and siblings as playing a significant role in posttraumatic growth. However, they found that parental support correlated with some factors of posttraumatic growth which are relating to others, new possibilities, and personal strength, social support from an adult other than the parent was found to correlate with relating to other and new possibilities but a significant association was not found between support received from sibling and peers. They asserted that participants' tendency to seek out support from other older adults other than their parents is due to the suffering they pass through as the death of their parents (Wolchik et al., 2008).

Cryder, Kilmer, Tedeschi, and Calhoun (2006) in their study, recognized the sources of support in children and adolescents, evaluated to stem from the ability to pay attention and make available comfort. Their findings contradicted some researchers' hypothesis that shows an insignificant relationship between social support and PTG. Also, a study conducted by Schexnaildre (2011) reveals that social support significantly predicted posttraumatic growth and distinctly accounted for 35% of the variance.

Social support is a contributive factor to the general model of PTG as it is essential in helping the victims of PTSD to be optimistic (Tedeschi & Calhoun, 1996). Furthermore, Milam, Ritt-Olson, and Unger (2004) in their study reported that age significantly predicted PTG which opposed the assertions of Abraido-Lanzo, Guier, and Colon (1998), Polatinsky and Esprey (2000) who found out no significant relationship between age and PTG. Having highlighted some related literature in the study, the problem now lies in understanding the vital role which social support plays in growing out of traumatic events, especially among those who were forcefully evicted from their original place of settlement. Hence, the following research questions were stated:

- What is the acuity of social support among IDPs in Makurdi, Benue State, Nigeria?
- Will there be significant positive relationship between perceived social support and PTG among IDPs in Makurdi, Benue State, Nigeria?
- Will there be significant influence of sex on PTG among IDPs in Makurdi, Benue State, Nigeria?

- Will there be significant influence of age on PTG among IDPs in Makurdi, Benue State, Nigeria?

1.1 Research Hypothesis

- There will be low acuity of perceived social support among IDPs in Makurdi, Benue State, Nigeria.
- Perceived social support will have significant positive correlation with posttraumatic growth among IDPs in Makurdi, Benue State, Nigeria
- There will be significant differences between male and female among IDPs in Makurdi, Benue State, Nigeria.
- There will be a significant influence of age on posttraumatic growth among IDPs in Makurdi, Benue State, Nigeria.

2. METHODOLOGY

A correlational and cross-sectional research design was adopted, and a battery of psychological tests consisting of Perceived Social Support Scale and Posttraumatic Growth Inventory was administered individually to the purposefully selected one hundred and twenty-six (126) Internally Displaced Persons in Agan IDPs camp Makurdi Local Government, Area in Benue state, Nigeria. All activities involved with the study, were carried out within the IDPs camp – a familiar terrain to the participants. The total numbers of IDPs in the camp were over 10,000 including children and adults but inclusion and exclusion criteria were used to select the participants who responded to the questionnaires. The inclusion criteria are Internally displaced persons, children and adult beyond 6 years of age and who meet the diagnostic criteria for DSM-5 while exclusion criteria are children below 6 years and those who did not meet the diagnostic criteria for DSM-5. A local research assistant who could fluently speak their native language was employed to read the questions to the participants with no formal education, for them to answer.

Measures:

Multidimensional Scale of Perceived Social Support developed by Zimet, Dahlem, Zimet & Farley (1988). A 12-item instrument that measures support from family and friends the scale was scored on a 7-point Likert scaling format ranging from 1 = very strongly to 7 = very strongly agree. The scale has total sum 84. Scores between 12-48 is regarded as low acuity, 49-68 is regarded as moderate acuity and 69-84 as high acuity. Zimet et al (1988) reported a reliability coefficient of .88 for the total scale and a test-retest reliability of .85.

Posttraumatic Growth Inventory developed by Tedeschi and Calhoun (1996). The inventory comprises 21 items and uses a 6-point Likert scale ranging from 0 (I did not experience this change as a result of my crisis) to 5 (I experienced this change to a very great degree as a result of my crisis). The scale has an internal reliability of .90 and a test-retest consistency of .71.

3. RESULTS

The data were analysed using the Statistical Package for the Social Sciences IBM 20 Version. The stated hypotheses were tested using Simple percentages, Pearson (r) product-moment correlation, t-tests for independent mean and One-way Analysis of Variance. The results obtained are shown below (Table 1):

Table 1. Socio-Demographic Characteristics of the Participants

Variable	Frequency	Percentage
Age group (years)		
6-10 years	2	1.6
11-20years	34	27.0
21-30years	41	32.5
31-40 years	30	23.8
41-50years	10	7.9
51-60years	6	4.8
61years and above	3	2.4
Sex		
Male	51	40.5
Female	75	59.5
Marital Status		
Single	33	26.2
Married	91	72.2
Others	2	1.6
Educational level		
No formal Education	54	42.9
FLSC	29	23.0
SSCE	40	31.7
ND/NCE	3	2.4
HND/B.Sc	0	0
M.Sc	0	0
Others		
Religion		
Christianity	122	96.8
Islamic	3	2.4
Other	1	0.8
Reason for staying in IDPs camp		
Ethnic Crisis	6	4.8
Herdsmen Crisis	119	94.4
Religion Crisis	1	0.8

The data revealed that the percentage of female participants (59.5%) were higher than the male participants (40.5%) signifying that most of the participants were female. The dominant group in the camps that participated was within the age brackets of (21-30 years). Married participants constitute 72.2%, while the majority of the respondents had no formal education, Christians accounted for (96.8%) of the participants. Finally, the herdsmen crisis was the main reason why they stay in IDPs camp.

The first hypothesis, which stated that there would be low acuity of perceived social support among IDPs in Makurdi, Benue State, Nigeria, was tested using frequency and percentage count. The result is presented in the table below:

Table 2. A summary table showing the prevalence of social support among IDPs in Makurdi, Benue State

Variable	Frequency	Percentage
Perceived Social Support		
Low Acuity	113	89.7
Moderate Acuity	13	10.3
High Acuity	0	0

From the result, it can be revealed that the majority of the internally displaced persons received low acuity of social support. The prevalence of low acuity social support was found to be 89.7%. This means that IDPs receive little support from the individual, community, society and government at large. This confirms the stated hypothesis that IDPs would receive low acuity of social support.

The second hypothesis, which stated that there will be a significant positive relationship between perceived social support and posttraumatic growth among IDPs in Makurdi, Benue State, Nigeria, was tested using Pearson Product Moment Correlational Analysis. The result is presented in the table below:

Table 3. Summary table of Pearson r showing the relationship between perceived social support and posttraumatic growth among IDPs

Variable	Mean	Std	Df	r-value	Sig
Perceived Social Support	35.51	10.45	124	.313	<.01
Posttraumatic Growth	63.46	19.75			

The result on the table showed that there is a significant positive relationship between perceived social support and posttraumatic growth among IDPs in Makurdi, Benue State, Nigeria ($r=0.313$; $df(124)$; $P<.01$). It implies that the higher the perceived support received by the internally displaced person, the higher they are likely to grow out their traumatic experience and vis-à-vis. To check the predictability of perceived social support on posttraumatic growth, simple linear regression was conducted. The result is also presented in the table below:

Table 4. Simple linear regression showing the prediction of perceived social support on posttraumatic growth among IDPs

Model	Unstandardized Coefficients	Std. Error	Standardized Coefficients	T	Sig.
(Constant)	42.494	5.96		7.13	.000
Social Support	.590	.16	.313	3.67	.000

R²=.098; R=.313.

Further analysis shows that there is a significant positive influence of social support on posttraumatic growth ($\beta = .590$ $p < .01$). This implies that perceived social support predicted posttraumatic growth among the IDPs in Makurdi, Benue State, Nigeria. The predictor variable accounted for 10% of the outcome variable. The stated hypothesis is thereby accepted.

The third hypothesis, which stated that there would be significant differences between males and females among IDPs in Makurdi, Benue State, Nigeria, was tested using a t-test for the independent mean. The result is presented in the table below:

Table 5. Summary table of Independent t-test showing the influence of sex on Posttraumatic growth among IDPs

	Sex	N	Mean	Std D.	Df	t-value	Sig
Posttraumatic Growth	Male	51	62.12	17.55	124	-0.628	>.05
	Female	75	64.37	21.18			

The result in the table showed that there is no significant influence of sex on posttraumatic growth among IDPs in Makurdi, Benue State, Nigeria ($t = -0.628$; $df (124)$; $P > .05$). Therefore, the stated hypothesis is thereby rejected.

The fourth hypothesis, which stated that there would be a significant influence of age on posttraumatic growth among IDPs in Makurdi, Benue State, Nigeria, was tested using a one-way analysis of variance. The result is presented in the table below:

Table 6. Summary table of one-way ANOVA showing the influence of age on posttraumatic growth

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	6039.662	6	1006.610	2.804	.014
Within Groups	42719.640	119	358.989		
Total	48759.302	125			

From the table, it is revealed that there is a significant influence of age on posttraumatic growth among IDPs in Makurdi, Benue State, Nigeria [$F=2.804$, $df(6,125)$, $P<.05$] This confirms the stated hypothesis.

4. DISCUSSION

The study revealed that internally displaced persons received little social support as findings show that 89.7% of the Internally Displaced Persons received low acuity social support while the remaining 10.3% received moderate acuity social support as none of the IDPs received high acuity social support. This shows that the majority of the IDPs live in the camp constructed and given by the government, individual, or host community with very little social support. Social support has proven a vital and contributing factor for posttraumatic growth (Tedeschi & Calhoun, 1996, Schaefer Moos, 1998). The findings of this study support the assertions of some researchers that social support has a significant positive relationship with posttraumatic growth (Wolchik et al., 2008). Further analysis conducted showed that social support predicted posttraumatic growth accounting for 10% of the variance and this corroborates with the findings of Schexnaildre (2011) who found out that social support significantly predicted posttraumatic growth and the distinctly accounted for 35% of the variance. The study further revealed that sex did not have any significant influence on posttraumatic growth, but age was found to have a significant influence on posttraumatic growth and this agreed with the findings of Milam, Ritt-Olson, and Unger (2004) who reported that age significantly predicted PTG but contradicted the assertions of Abraido-Lanzo, Guier, and Colon, (1998); Polatinsky and Esprey, (2000) who found no significant relationship between age and PTG. This, in essence, means that age goes a long way in determining IDPs' recovery from trauma-related disorders.

5. CONCLUSIONS AND RECOMMENDATIONS

Precisely, the findings recommend that reduced psychological distress leads to the high psychological well-being of IDPs and psychological distress can be reduced through the provision of adequate social support from concerned bodies. Adequate social support will help reduce individuals' psychological distress, thereby, increasing posttraumatic growth among internally displaced persons. It was also recommended, that sufficient support should be provided by the government, agencies, NGOs, and other private organizations to diminish the negative effect of psychological distress faced by the IDPs and improve their mental health/psychological well-being thereby enhancing their posttraumatic growth. Also, the government should strive to restore peace in the affected areas or communities and make an effort to avoid some crises that may give rise to sudden or forceful relocation or displacement of individuals from their areas, communities or homes. Federal, state and local governments should endeavor to establish mental health centers/facilities in all the IDPs camps in Nigeria; adequately equipped with medical and psychological assessments together with the right personnel to handle mental health-related problems of the internally displaced persons.

It could be concluded that most of the IDPs received a little acuity of social support as perceived social support proved to be positively correlating with posttraumatic growth which means that perceived social support is a vital factor in predicting posttraumatic growth among IDPs. Social support is a strong factor that reduces psychological distress experienced by the IDPs and increases psychological well-being of internally displaced persons, thereby, helping the IDPs to grow out of the trauma. This study is helpful for government, NGO policy-making bodies,

scholars, researchers as well as practitioners and displaced persons. This study also provides empirical findings with regard to the prevalence of perceived social support as it predicts posttraumatic growth among IDPs in Makurdi, Benue State.

Ethical Approval

All the ethical requirements for conducting research were observed; permission was duly obtained from the camp director.

Consent

Participants willingly and voluntarily participated, and they were not compelled or forced to participate in the study.

REFERENCES

- Arogundade T. Odunayo. and Ojo E. Taiye. (2018). Influence of Psychological Distress and Perceived Social Support on psychological wellbeing of the Internally Displaced Persons (IDPs) in Makurdi, Benue State. *Nigerian Journal of Psychology*, 21(1) 93-99.
- Abraido-Lanzo, A. F., Guier, C., & Colón, R. M. (1998). Psychological thriving among Latinas with chronic illness. *Journal of Social Issues*, 54, 405-424.
1. Aroyewun B. Afolabi and Ojo E. Taiye (2019). *Assessment of Posttraumatic Stress Disorder among Internally Displaced Victims of Fulani Herdsmen Conflict in Benue State*. Psychology in the public interest: Health and well-being; special publication of the Nigerian Psychological Association 2, 190-198
- Cryder, C. H., Kilmer, R. P., Tedeschi, R. G., & Calhoun, L. G. (2006). An exploratory study of posttraumatic growth in children following a natural disaster. *American Journal of Orthopsychiatry*, 76, 65-69.
- Milam, J. E., Ritt-Olson, A., & Unger, J. B. (2004). Posttraumatic growth among adolescents. *Journal of Adolescent Research*, 19, 192-204.
- Ojo T.E (2019). Influence of Posttraumatic Stress Disorder, Psychological Distress and Posttraumatic Growth on Psychological wellbeing among the Internally Displaced Persons in Makurdi, Benue State. *International Journal of Indian Psychology*. 7(4), 34-41. DIP:18.01.007/20190704, DOI:10.25215/0704.007.
- Polatinsky, S., & Esprey, Y. (2000). An assessment of gender differences in perception of benefit resulting from the loss of a child. *Journal of Traumatic Stress*, 13, 709-718.
- Prati, G. & Pietrantonio, L. (2009). Optimism, social support, and coping strategies as factors contributing to posttraumatic growth: A meta-analysis. *Journal of Loss and Trauma*, 14, 364-388.
- Schaefer, J. A. & Moos, R. H. (1998). The context for posttraumatic growth: Life crises, individual and social resources, and coping. In R. G. Tedeschi, C. L. Park, & L. G. Calhoun (Eds.), *Posttraumatic growth: Positive changes in the aftermath of crisis* 99–126. Mahwah, NJ: Lawrence Erlbaum.
- Schexnaildre, M. A (2011). Predicting posttraumatic growth: coping, social support, and posttraumatic stress in children and adolescents after Hurricane Katrina. *LSU Master's Theses*. 3662.
- Tedeschi, R. G., & Calhoun, L. G. (1996). The Posttraumatic Growth Inventory: Measuring the positive legacy of trauma. *Journal of Traumatic Stress*, 9, 455–471.

- Tedeschi, R. G., & Calhoun, L. G. (2004). Posttraumatic growth: Conceptual foundations and empirical evidence. *Psychological Inquiry, 15*, 1–18.
- Wolchik, S. A., Coxe, S., Tein, J. Y., Sandler, I. N., & Ayers, T. S. (2008). Six-year longitudinal predictors of posttraumatic growth in parentally bereaved adolescents and young adults. *Omega: Journal of Death and Dying, 58*, 107-128.
- Zimet, G. D., Dahlem, N. W., Zimet, S. G., & Farley, G. K. (1988). The Multidimensional Scale of Perceived Social Support. *Journal of Personality Assessment, 52*(1),

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